



The NZ mark of competence
Tohu Matatau Aotearoa

BUILDING CONSENT AUTHORITY ACCREDITATION ASSESSMENT REPORT

Final Report with all GNCs cleared

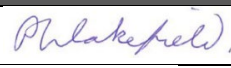

Rangitikei District Council

IANZ	
CONDITIONS CLEARED	
INITIALS:	PW
DATE:	19 May 2023

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BCA AND ASSESSMENT DETAILS

ORGANISATION DETAILS											
Organisation:		Rangitikei District Council									
Address for service:		46 High Street, Marton 4710									
Client Number:	7466	Accreditation Number:	39								
Chief Executive:		Peter Beggs									
Chief Executive Contact Details:		Peter.beggs@rangitikei.govt.nz									
Responsible Manager:		John Cullis									
Responsible Manager Contact Details:		johan.cullis@rangitikei.govt.nz									
Authorised Representative:		Johan Cullis									
Authorised Representative Contact Details:		johan.cullis@rangitikei.govt.nz									
Quality Manager:		Johan Cullis									
Quality Manager Contact Details:		johan.cullis@rangitikei.govt.nz									
Number of FTEs Total FTEs should = technical FTEs + admin FTEs + vacancies	Technical	4	Admin support	1							
	Vacancies (Technical)	0	Vacancies (Admin)	0							
Building Consents											
Activity during the previous 12 months											
						R1	260	R2	15	R3	3
						C1	26	C2	5	C3	2
						CCCs				223	
						New compliance schedules				1	
						BCA Notices to Fix				0	
ASSESSMENT TEAM											
Assessment Date:		28 February 2023 to 3 March 2023									
Lead Assessor:		Peter Wakefield									
Lead Assessor Contact Details:		pwakefield@ianz.govt.nz									
Technical Expert:		Brendan Guyton									
Observer:		None									
ASSESSMENT FINDINGS											
		This assessment (RR):	Last assessment (RR):								
Total # of "serious" non-compliances:		0	0								
Total # of "general" non-compliances:		10	10								
Total # of non-compliances outstanding:		10	10								
Recommendations:		4	3								
Advisory notes:		5	6								
Date clearance plan required from BCA:		14 April 2023									
Date non-compliances must cleared:		9 June 2023									
NEXT ASSESSMENT											
Recommended next assessment type:		Routine Reassessment									
Recommended next assessment date:		February 2025									
IANZ REPORT PREPARATION											
Prepared by: Peter Wakefield		Date: 10 March 2023	Signature: 								
Checked by: Adrienne Woollard		Date: 13 March 2023	Signature: 								

INTRODUCTION

This report relates to the accreditation assessment of the **Rangitikei District Council Building Consent Authority (BCA)** which took place during 28 February to 3 March 2023 to determine compliance with the requirements of the *Building (Accreditation of Building Consent Authorities) Regulations 2006* (the Regulations).

This report is based on the document review, witnessing of activities and interviews with the BCA's employees undertaken during the accreditation assessment.

A copy of this report, and subsequent information regarding progress towards clearance of non-compliances, will be provided to the Ministry of Business, Innovation and Employment (MBIE) in accordance with International Accreditation New Zealand's (IANZ) contractual obligations. This report may also be made publicly available by the BCA as long as this is not done in a way that misrepresents the content within. It may also be released under the Local Government Meetings and Official Information Act 1987 consistent with any ground for withholding that might be applicable. IANZ may also be required to release this report and assessment documentation if requested under the Official Information Act 1987.

ASSESSMENT SUMMARY

The assessment identified the BCA had well established systems that were being implemented to a generally appropriate standard. A small number of GNCs were raised which supported this.

BCA staff were receptive to feedback and suggestions for improvement, with the BCA seen to have implemented its continuous improvement system and records in a positive and well managed manner. The majority of processing records contained good reasons for decisions made.

There were however, some outstanding issues which were raised as General Non-compliances. These are detailed below. The outstanding non-compliances must be addressed in order for accreditation to continue.

CONTINUING ACCREDITATION

Accreditation is a statement, by IANZ, that your organisation complies with the Regulations and MBIE BCA accreditation scheme guidance documents (as relevant). Where non-compliance with the Regulations has been identified, the Act requires that it must be addressed.

IDENTIFYING AND NUMBERING OF NON-COMPLIANCES

Non-compliance identifiers are issued to each given regulation which was assessed and found to be non-complaint, however, for the purpose of ease to address the identified non-compliances, Regulations 7(2)(d)(v) and 7(2)(f) had been split out to enable easy recording of the key issues. The total number of non-compliant Regulations and sub-regulations is referred to on the BCA and Assessment Details table on page 4, rather than the number of findings of non-compliance.

STEPS TO ADDRESSING NON-COMPLIANCES IDENTIFIED

Step 1	<p>Action plans</p> <p>Non-compliances raised during the assessment have been summarised and recorded in detail in this report. Analyse the cause of the finding within the finding tables nested under the relevant regulation, and then develop and implement an action plan to address each finding.</p>	Due within 20 working days of the receipt of this report.
Step 2	<p>IANZ Reviews the action plans provided</p> <p>IANZ will analyse the submitted action plans with the proposed evidence of implementation indicated, and will respond to the BCA accordingly of improvements and/or acceptance.</p>	IANZ has a KPI of 10 working days to review and respond.

Step 3	Submitting clearance evidence Upon the acceptance of all action plans, the BCA can proceed to provide clearance evidence to IANZ.	Ideally, a separate email to address each GNC containing all listed proposed evidence.
Step 4	Review of clearance evidence Upon receiving clearance evidence, IANZ will review the appropriateness of the clearance evidence.	IANZ has a KPI of 10 working days to review and respond to clearance evidence provided.
Step 5	Final clearance The BCA must clear all identified non-compliances.	Within 3 months of the issuing of this report (unless an extension is granted).

If you do not agree with the non-compliances identified, or if you need further time to address non-compliances, please contact the Lead Assessor as soon as possible. Where you are seeking an extension to an agreed timeframe to address a non-compliance, your Chief Executive is required to make a formal request for an extension of the timeframe. These will only be granted for unpredictable and unmanageable reasons.

Please note that failure to provide timely objective evidence that identified non-compliances have been effectively and sustainably resolved may result in a recommendation to revoke accreditation.

If you have a complaint about the assessment process, please refer to the BCA Accreditation disagreements guidance which can be found [here](#), or contact the IANZ Lead Assessor, IANZ Programme Manager – Building, or IANZ Operations Manager - Inspection and BCA sectors, for further information about the IANZ appeals and complaints process.

RISK ASSESSMENT

The BCA's risk, both to the Territorial Authority, as a BCA and also as an organisation accredited by IANZ was assessed. The BCA was considered to pose a **Low Risk**. The Risk Decision table is displayed below for reference.

High risk	A non-functioning BCA - depending on extent and type of risk and agreed management method. E.g. there is a pattern of failure to follow a policy, procedure or system (PPS) by a single or multiple employees, and/or that the PPS had not been consistently and effectively implemented.	Some form of monitoring within 6 months
Medium risk	The BCA is not currently compliant and is unlikely to demonstrate substantial compliance at the next assessment, or there was a failure to implement PPS over two or more assessment cycles.	1 year
Low risk	"Normal" risk (the BCA is likely to remain substantially compliant over the next two years).	2 years
Extra Low risk	The BCA is almost fully compliant and likely to remain that way.	Reduced monitoring at next 2 yearly assessment

The main reasons for considering this risk category were:

- The BCA had generally well implemented systems, with appropriate technical decisions being made.
- A low number of GNCs were raised with no repeat issues occurring.
- Staff were well trained and competent.
- Senior management were supportive of the BCA's activities.

NEXT ACCREDITATION ASSESSMENT

Unless your BCA undergoes a significant change, requiring some form of interim assessment, or the BCA is unable to clear the identified non-compliances within the agreed timeframe, the next assessment of the BCA is planned as a **Routine Reassessment** for **February 2025**.


You will be formally notified of your next assessment six weeks prior to its planned date.

ASSESSMENT OBSERVATIONS AND RECORDS OF NON-COMPLIANCE

Regulation 6A	Notification requirements
Observations and comments, including good practice and performance	
<p>The BCA had appropriately documented its procedure to comply with the notification requirements in accordance with Regulation 6A.</p> <p>Implementation was seen to be appropriate, whereby the BCA had provided 6A notification for a change to its application for Building Consent process via the Simpli Portal function. This was sent into IANZ on the 6 Dec 2022, within required timeframes.</p>	

Regulation 7(2)(a)	Providing consumer information
Observations and comments, including good practice and performance	
<p>The BCA provided consumer information regarding how to apply for a consent, and how an application was processed, inspected and certified, however, the following topics required review:</p> <p>Consumer information had not been appropriately provided, as per the following:</p> <ul style="list-style-type: none"> • Within the Consumer Information under the heading “Consent Process” item 6 incorrectly indicated that a final inspection needed to be passed before an application for a Code Compliance certificate (CCC) could be made, • “Code of Compliance” was incorrectly referred to rather than the correct “Code Compliance Certificate”. • Under the heading “Code Compliance Certificate” the Consumer Information incorrectly indicated that a CCC application must be made before the final inspection, • Consumer Information indicated that documentation was required above the requirements of section 92a. • Consumer Information did not adequately cover situations where Building Consent applications were being placed on hold while the BCA requested specialist input for the consideration of compliance of the NZ Building Code. E.g. Waste water systems and Horizon (Regional Council). <p>See GNC 1.</p>	


General Non-compliance No. 1

Breach of requirement:	Regulation 7(2)(a)						
Breach of requirement:	Regulation(s)	<input checked="" type="checkbox"/> 5(a)	<input checked="" type="checkbox"/> 5(b)	<input type="checkbox"/> 5(c)	<input type="checkbox"/> 6(b)	<input type="checkbox"/> 6(c)	<input type="checkbox"/> 6(d)
FINDING DETAILS							
<p>Consumer information had not been appropriately provided, as per the following:</p> <ul style="list-style-type: none"> • Within the Consumer Information under the heading “Consent Process” item 6 incorrectly indicated that a final inspection needed to be passed before an application for a Code Compliance certificate (CCC) could be made, • “Code of Compliance” was incorrectly referred to rather than the correct “Code Compliance Certificate”. • Under the heading “Code Compliance Certificate” the Consumer Information incorrectly indicated that a CCC application must be made before the final inspection, • Consumer Information indicated that documentation was required above the requirements of section 92a. • Consumer Information did not adequately cover situations where Building Consent applications were being placed on hold while the BCA requested specialist input for the consideration of compliance of the NZ Building Code. E.g. Waste water systems and Horizon (Regional Council). 							
IMPORTANT DATES							
Date this action plan was accepted by IANZ:						31 March 2023	
Final date evidence of implementation can be accepted from BCA:						26 May 2023	
EVIDENCE							
Plan of action <i>(To be provided by BCA):</i> Review public/consumer information update/correct information on website.							
Proposed evidence of implementation <i>(To be provided by BCA):</i> Provide website link to updated information once live on website.							
<p>Evidence of implementation and discussion: Proposed action plan accepted (31/03/2023.PW)</p> <p>TE – the BCA has responded via email and provided a link to the newly revised consumer information which I have checked in relation to the items raised within the GNC and satisfied that this GNC has been resolved – RESOLVED BG 26-4-2023</p>							
NON COMPLIANCE CLEARED							
Signed: 						Date: 28 April 2023	

Regulation 7(2)(b)	Receiving building consent applications
Observations and comments, including good practice and performance	
<p>The BCA had appropriately documented its procedure for receiving applications in accordance with Regulation 7(2)(b).</p> <p>Applications were being received and logged within the BCA’s procedure using the BCA’s Simpli Portal system.</p>	

Regulation 7(2)(c) Checking building consent applications
Observations and comments, including good practice and performance
The BCA had not adequately documented or implemented its procedure for checking applications in accordance with Regulation 7(2)(c), in relation to recording who had performed the vetting of each Building Consent application. See GNC 2.

General Non-compliance No. 2

Breach of requirement:	Regulation 7(2)(c)						
Breach of requirement:	Regulation(s)	<input checked="" type="checkbox"/> 5(a)	<input checked="" type="checkbox"/> 5(b)	<input checked="" type="checkbox"/> 5(c)	<input type="checkbox"/> 6(b)	<input type="checkbox"/> 6(c)	<input type="checkbox"/> 6(d)
FINDING DETAILS							
The BCA had not adequately documented or implemented its procedure for checking applications in accordance with Regulation 7(2)(c), in relation to recording who had performed the vetting of each Building Consent application.							
IMPORTANT DATES							
Date this action plan was accepted by IANZ:					31 March 2023		
Final date evidence of implementation can be accepted from BCA:					26 May 2023		
EVIDENCE							
Plan of action <i>(To be provided by BCA):</i> Review procedure and ensure name of vetting officer added to form.							
Proposed evidence of implementation <i>(To be provided by BCA):</i> Provide example of vetting undertaken .							
Evidence of implementation and discussion: Proposed action plan accepted (31/03/2023.PW) TE – the BCA has provided examples of vetting checklists whereby they are now implementing the procedure by recording the relevant officer who has undertaking the function and this is now indicated via placing the name within the submission reference number section of the checklist – RESOLVED BG 26-4-2023							
NON COMPLIANCE CLEARED							
Signed: 				Date: 28 April 2023			

Regulation 7(2)(d)(i) Recording building consent applications
Observations and comments, including good practice and performance
The BCA had appropriately documented its procedure for recording applications in accordance with Regulation 7(2)(d)(i). Applications were recorded appropriately within the BCA's GoGet system.

Regulation 7(2)(d)(ii) Assessing building consent applications

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for assessing applications in accordance with Regulation 7(2)(d)(ii).

Applications had been assessed and classified appropriately using the NCAS system.

Regulation 7(2)(d)(iii) Allocating building consent applications

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for allocating applications in accordance with Regulation 7(2)(d)(iii).

Allocations had been carried out appropriately using the BCA's skills matrix.

Regulation 7(2)(d)(iv) Processing building consent applications

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for processing building consent applications to establish whether the applications complied with the requirements of the Act, the Building Code, and any other applicable regulations under the Act specified for buildings, in accordance with Regulation 7(2)(d)(iv).

The BCA had not always implemented its procedure for processing of Building Consent applications appropriately as per the following:

- The BCA had sometimes indicated within the processing record that section 71 (Building on land subject to natural hazards) was not applicable when it was apparent that it was applicable (with no record of the reasoning why).
- Management of the processing clock was not always appropriate in that the BCA's MagiQ system did not align with the clock in GoGet. This meant that reporting on timeframes was not always correct.
- The BCA had been stopping the clock awaiting specialist input for measuring compliance of the NZ Building Code, this was not considered to be a RFI under section 48 of the Building Act 2004 so it was not appropriate to stop the clock.

See GNC 3.

General Non-compliance No. 3

Breach of requirement:	Regulation 7(2)(d)(iv)						
Breach of requirement:	Regulation(s)	<input type="checkbox"/> 5(a)	<input type="checkbox"/> 5(b)	<input checked="" type="checkbox"/> 5(c)	<input checked="" type="checkbox"/> 6(b)	<input checked="" type="checkbox"/> 6(c)	<input type="checkbox"/> 6(d)
FINDING DETAILS							
<p>The BCA had not always implemented its procedure for processing of Building Consent applications appropriately as per the following:</p> <ul style="list-style-type: none"> The BCA had sometimes indicated within the processing record that section 71 (Building on land subject to natural hazards) was not applicable when it was apparent that it was applicable (with no record of the reasoning why). Management of the processing clock was not always appropriate. In that the BCA's MagiQ system did not align with the clock in GoGet meaning that the reporting on timeframes was not always correct. The BCA had been stopping the clock while waiting for specialist input for measuring compliance of the NZBC. This was not considered to be a RFI under section 48 of the Building Act 2004 so it was not appropriate to stop the clock. 							
IMPORTANT DATES							
Date this action plan was accepted by IANZ:					Click or tap to enter a date.		
Final date evidence of implementation can be accepted from BCA:					26 May 2023		
EVIDENCE							
Plan of action <i>(To be provided by BCA):</i> Under take internal training, review clock difference between MagiQ and GOGET, review procedure for stopping clock.							
Proposed evidence of implementation <i>(To be provided by BCA):</i> Submit relevant BC process records post training re S71, provide record of clocks synchronised, provide updated procedure.							
Evidence of implementation and discussion:							
<p>The BCA's action plan is generally acceptable, however the scope and detail of the training to be undertaken, together with who attended and how the training's application and effectiveness would be monitored needs to be addressed.</p> <p>TE – The GNC finding has three different parts to it, so I have assessed the clearance material as per the parts.</p> <p>Part 1: Consideration of section 71 The BCA has provided 2 x examples from GoGet in relation to evidence of correctly considering and recording the relevant Natural Hazard to the allotment.</p> <p>BUT BC230050</p> <ul style="list-style-type: none"> Under the decision section of S71 it is indicated that a waiver or modification has been granted but within the S67-68 prompt it is indicated to be N/A? It is indicated that the processor has not completed the processing checklist for section 72-73? Have they not followed the required procedure? Has the training not been effectively implemented? Is it clear that this will be a condition to the BC? <p>BC230036</p> <ul style="list-style-type: none"> Under the decision section of S71 it is indicated that a waiver or modification has been granted but within the S67-68 prompt it is indicated to be N/A? Is it clear that this will be a condition to the BC? <p>NOT RESOLVED BG 16-5-2023</p>							

TE – the BCA has provided clarification that they had forwarded the incorrect processing checklists as clearance, they have now provided the relevant records which I have reviewed and are OK to establish effective implementation – **RESOLVED BG 18-5-2023.**

Part 2: Clock management between the two systems (MagiQ and GoGet)

The BCA has provided the email instruction to the planning team in relation to notifying the BCA on the sending of a planning RFI so the clock is not stopped in MagiQ as this is where the BCA manage the4 clock, The BCA has provided copies from the planning team in relation to the RFI being sent

BUT

No evidence (snapshot of MagiQ) provided to demonstrate that the clock is not being affected – **NOT RESOLVED BG 16-5-2023.**

TE – the BCA has now provided the relevant snap shots from the systems to demonstrate effective implementation – **RESOLVED BG 18-5-2023.**

Part 3: Stopping the clock awaiting specialist input.


This part of the GNC has been cleared with GNC1 as the website has been updated to indicate that the WW report will need to be provided with the BC application as per the requirement of BA04 section 45(1)(b)(ii) – **RESOLVED BG 16-5-2023.**

Note: No training records provided as part of the clearance, and it appears that this was indicated as required. – BG 17-5-2023, discussed this with Peter and he indicated that he would contact the BCA and explain that as part of the clearance material they were to provide the relevant training records as he had highlighted in blue above, to date the BCA has not provided this documentation – **NOT RESOLVED BG 18-5-2023**

TE – The BCA has now provided a copy of the training record in relation to this GNC and the staff that was present and undertook the training – satisfied that the GNC can now be cleared – **RESOLVED BG 19-5-2023**

The actions taken by the BCA have satisfactorily addressed the issues raised. This GNC is therefore now closed.


NON COMPLIANCE CLEARED

<p>Signed: </p>	<p>Date: 19 May 2023</p>
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Regulation 7(2)(d)(v) Granting and issuing building consents and Compliance with Form 5
Observations and comments, including good practice and performance
<p>The BCA had appropriately documented its procedure for granting and issuing consents, in accordance with Regulation 7(2)(d)(v).</p> <p>The BCA had not always implemented its procedures for granting and issuing building consents as per the following:</p> <ul style="list-style-type: none"> • Conditions were not always appropriately recorded on Form 5s where a section 73 condition should have been listed within the document but was not listed • Documentation was documented as being required to be provided before a final inspection, which was in contradiction of the Quality Manual procedure as well as the Consumer Information • An LBP Form from the designer was inappropriately listed as required documentation for the consideration of a CCC application and issue of CCC • An example was observed where a Specified System was listed that was not relevant to the Building Consent. • Specified Systems and Performance Standards listed did not always align with the issued Compliance Schedule, however no amendment or minor variation had been recorded within the BCA's system. <p>See GNC 4.</p>

General Non-compliance No. 4

Breach of requirement:	Regulation 7(2)(d)(v)						
Breach of requirement:	Regulation(s)	<input type="checkbox"/> 5(a)	<input type="checkbox"/> 5(b)	<input checked="" type="checkbox"/> 5(c)	<input type="checkbox"/> 6(b)	<input type="checkbox"/> 6(c)	<input type="checkbox"/> 6(d)
FINDING DETAILS							
<p>The BCA had not always implemented its procedures for granting and issuing building consents as per the following:</p> <ul style="list-style-type: none"> • Conditions were not always appropriately recorded on Form 5s where a section 73 condition should have been listed within the document but was not listed • Documentation was documented as being required to be provided before a final inspection which was in was contradiction of the Quality Manual procedure as well as the Consumer Information. • An LBP Form from the designer was inappropriately listed as required documentation for the consideration of a CCC application and issue of CCC • Aa Specified System was listed that was not relevant to the Building Consent • Specified Systems and Performance Standards were listed that did not always align with the issued Compliance Schedule however, no amendment or minor variation had been recorded within the BCA's system. 							
IMPORTANT DATES							
Date this action plan was accepted by IANZ:					Click or tap to enter a date.		
Final date evidence of implementation can be accepted from BCA:					26 May 2023		
EVIDENCE							
<p>Plan of action (To be provided by BCA): Undertake internal training (Link to 71 training GNC 3), review information re final inspection, review LBP design request at CCC, review issued compliance schedule and undertake internal training.</p>							

<p>Proposed evidence of implementation <i>(To be provided by BCA):</i> Provide copies of form 5 for S 73, provide updated copy of consumer information, remove LBP design requirement from CCC list and provide copies, reissue and submit compliance schedule to address relevant specified systems, standards, amendments and minor variations.</p>	
<p>Evidence of implementation and discussion: The BCA's action plan is generally acceptable, however the scope and detail of the training to be undertaken, together with who attended and how the training's application and effectiveness would be monitored needs to be addressed.</p> <p>16/05/2023.TE – The GNC finding has five different parts to it, so I have assessed the clearance material as per the parts.</p> <p>Part 1: Section 73 condition The BCA has provided evidence of a new prompt added to the PIM checklist to identify the requirement for a section 73 condition. BUT No evidence provided in relation to the condition being listed within the form 5 – NOT RESOLVED BG 16-5-2023. TE – the BCA has now provided the relevant form 5s which now indicate section 73 as a condition to the Building Consent – satisfied that this part of the GNC can now be cleared – RESOLVED BG 18-5-2023</p> <p>Part 2: Documentation before a final inspection Evidence also provided for the clearance of this part – RESOLVED BG 16-5-2023.</p> <p>Part 3: LBP document from designer requested as part of the CCC consideration. The BCA has provided 3 x examples of whereby they have correctly been revising the form 5 for the removal of the requirement to provide ROW documentation from the designer for the consideration of the acceptance of the CCC application – RESOLVED BG 16-5-2023.</p> <p>Part 4: SSs listed but not relevant to the BC. Refer to the comment below – RESOLVED BG 16-5-2023.</p> <p>Part 5: Form 5 not aligning with the CS. The BCA has provided a copy of the revised prompt checklist which now includes the consideration for an amendment or minor variation, and a copy of evidence out of GoGet to record a removal of a SS, form the example and training provided SORTed that the BCA can now effectively implement the requirements – RESOLVED BG 16-5-2023. Note: Training records provided as part of the clearance, and it appears that what has been provided is what was agreed within the action plan accepted by IANZ. – BG 17-5-2023, discussed this with Peter and he indicated that he would contact the BCA and explain that as part of the clearance material they were to provide the relevant training records as he had highlighted in blue above, to date the BCA has not provided this documentation – NOT RESOLVED BG 18-5-2023 TE – The BCA has now provided a copy of the training record in relation to this GNC and the staff that was present and undertook the training – satisfied that the GNC can now be cleared – RESOLVED BG 19-5-2023</p> <p>The actions taken by the BCA have satisfactorily addressed the issues raised. This GNC is therefore now closed.</p>	
NON COMPLIANCE CLEARED	
<p>Signed: </p>	<p>Date: 19 May 2023</p>

Regulation 7(2)(d)(v) Lapsing building consents

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for lapsing of Building Consents, in accordance with Regulation 7(2)(d)(v).

The BCA were using a weekly report to indicate the building consents coming up for review at 10 months and then send reminder letters when appropriate. Extensions of time were recorded and processed when applied for. Review of files indicated that these processes were being implemented appropriately.

Whilst records of lapsing and extensions of time were being maintained, the BCA is advised to consider recording communication such as phone calls and email correspondence regarding 12 month lapsing decision making processes. **See Advisory Note A1.**

Regulation 7(2)(d)(v) Compliance with statutory timeframes for granting and issuing building consents

Observations and comments, including good practice and performance

The BCA's compliance with the statutory timeframe for granting and issuing building consents within 20 working days was seen to be averaging around 97%, which was considered to be substantially compliant.

Regulation 7(2)(e) Planning, performing and managing inspections

Observations and comments, including good practice and performance

Inspections were adequately planned as part of processing.

The BCA had appropriately documented its procedure for planning, performing and managing inspections in accordance with Regulation 7(2)(e).

Inspection procedures and processes appeared to have been followed and implemented appropriately. Inspection records and documented reasons for decisions were seen to be adequate.

Regulation 7(2)(f) Application for code compliance certificates

Observations and comments, including good practice and performance

The BCA had appropriately documented and effectively implemented its procedure for receiving and considering applications for a Code Compliance Certificate in accordance with Regulation 7(2)(f).

Regulation 7(2)(f) Preparing and issuing code compliance certificates**Observations and comments, including good practice and performance**


The BCA had appropriately documented its procedure for the preparation and issuing Code Compliance Certificates in accordance with Regulation 7(2)(f).

The BCA had not always appropriately implemented its procedures for issuing of CCCs as per the following:

- The BCA was not identifying relevant amendment/s on the form 7
- The total clock day count within MagiQ was not always correct in relation to the dates recorded for the starting and the stopping of the clock during the process of considering the issuing of the CCC

See GNC 5A

General Non-compliance No. 5A


Breach of requirement:	Regulation 7(2)(f)						
Breach of requirement:	Regulation(s)	<input type="checkbox"/> 5(a)	<input type="checkbox"/> 5(b)	<input checked="" type="checkbox"/> 5(c)	<input type="checkbox"/> 6(b)	<input type="checkbox"/> 6(c)	<input type="checkbox"/> 6(d)
FINDING DETAILS							
<p>The BCA had not always appropriately implemented its procedures for issuing of CCCs as per the following:</p> <ul style="list-style-type: none"> • The BCA was not identifying relevant amendment/s on the form 7 • The total clock day count within MagiQ was not always correct in relation to the dates recorded for the starting and the stopping of the clock during the process of considering the issuing of the CCC 							
IMPORTANT DATES							
Date this action plan was accepted by IANZ:					Click or tap to enter a date.		
Final date evidence of implementation can be accepted from BCA:					26 May 2023		
EVIDENCE							
Plan of action <i>(To be provided by BCA):</i> Under take internal training re amendments and , review procedure for stopping clock.							
Proposed evidence of implementation <i>(To be provided by BCA):</i> Submit completed form 7 and evidence of day count within MagiQ.							
Evidence of implementation and discussion:							
<p>The BCA's action plan is generally acceptable, however the scope and detail of the training to be undertaken, together with who attended and how the training's application and effectiveness would be monitored needs to be addressed.</p> <p>TE – the BCA has provided the relevant training record in relation to this GNC and the staff that was present and undertook the training – The BCA has also provided 5 examples of Form 7 whereby they are now identifying the amendment/s – The BCA has also provided relevant information from the MagiQ system to demonstrate implementation of the CCC clock management – satisfied that this GNC can be cleared – RESOLVED BG 19-5-2023</p> <p>The actions taken by the BCA have satisfactorily addressed the issues raised. This GNC is therefore now closed.</p>							
NON COMPLIANCE CLEARED							
Signed: 					Date: 19 May 2023		

Regulation 7(2)(f)	24-month CCC decisions
Observations and comments, including good practice and performance	
<p>The BCA had appropriately documented its procedure for making a 24-month decision on whether to issue a Code Compliance Certificate where no application for Code Compliance Certificate had been received, in accordance with Regulation 7(2)(f).</p> <p>The BCA's process for 24 month decision making included use of a weekly report to indicate the building consents by dates granted and due for consideration of building consent file status Reminder letters were prepared and sent when appropriate. Implementation and records appeared to be appropriate.</p>	

Regulation 7(2)(f)	Compliance with statutory timeframes for code compliance certificates
Observations and comments, including good practice and performance	
<p>The BCA's compliance with the statutory timeframe for issuing Code Compliance Certificates within 20 working days was seen to be averaging around 95% which was considered to be substantially compliant.</p>	

Regulation 7(2)(f)	Compliance schedules
Observations and comments, including good practice and performance	
<p>The BCA had appropriately documented its procedure for preparation and issuing of Compliance Schedules.</p> <p>The BCA had not always appropriately implemented its procedures for issuing of Compliance Schedules as per the following:</p> <ul style="list-style-type: none"> • Incorrect technical referencing of performance standards to some specified systems • Incorrect performance standard listed • Multiple performance standards listed when it was not appropriate to list multiple performance standards • Some of the technical referencing within the inspection/maintenance process was also incorrect <p>See GNC 5B.</p> <p>The BCA is advised to consider adding the following to the Compliance Schedule:</p> <ul style="list-style-type: none"> • Under the heading of "The Building": Activity/use group(s)' from Schedule 2 of the Building (Specified Systems, Change the Use, & Earthquake-prone Buildings) Regs 2005 had not been listed, • Summary of Specified Systems <p>See Advisory Note A2.</p>	

General Non-compliance No. 5B

Breach of requirement:	Regulation 7(2)(f)						
Breach of requirement:	Regulation(s)	<input type="checkbox"/> 5(a)	<input type="checkbox"/> 5(b)	<input checked="" type="checkbox"/> 5(c)	<input type="checkbox"/> 6(b)	<input type="checkbox"/> 6(c)	<input type="checkbox"/> 6(d)
FINDING DETAILS							
<p>The BCA had not always appropriately implemented its procedures for the preparation and issuing of Compliance Schedules as per the following:</p> <ul style="list-style-type: none"> • Incorrect technical referencing of performance standards to some specified systems • Incorrect performance standard listed • Multiple performance standards listed when it was not appropriate to list multiple performance standards • Some of the technical referencing within the inspection/maintenance process was also incorrect. 							
IMPORTANT DATES							
Date this action plan was accepted by IANZ:					Click or tap to enter a date.		
Final date evidence of implementation can be accepted from BCA:					26 May 2023		
EVIDENCE							
Plan of action <i>(To be provided by BCA):</i> As per GNC 4 under take compliance schedule training, review issued compliance schedule.							
Proposed evidence of implementation <i>(To be provided by BCA):</i> Submit reissued and reviewed compliance schedule to so implementation of training.							
Evidence of implementation and discussion:							
<p>The BCA's action plan is generally acceptable, however the scope and detail of the training to be undertaken, together with who attended and how the training's application and effectiveness would be monitored needs to be addressed.</p> <p>TE – the BCA has provided a copy of the training that has been provided to relevant staff and also revised the CS that was reviewed as part of the accreditation assessment after the training was completed. I have reviewed this new CS (note: have also reviewed the amending the form 5 within a different GNC):</p> <p>CS0330 SS2 – OK SS4 – OK but still indicating AS1 as NZBC – recommendation to ensure this is reviewed. SS7 – OK SS9 – OK SS14/2 – The performance standard does not make sense “NZBC F8 (amendment 4:2017)” this should read F8/AS1 (amendment 4:2017) SS15/2 – OK SS15/4 – OK SS15/5 – OK</p> <p>As the only issue identified is minor, I would request the IANZ assessor to make a recommendation to the BCA to have this resolved. RESOLVED BG 17-5-2023. The actions taken are deemed to satisfactorily address the issues raised. This GNC is therefore closed.</p>							
NON COMPLIANCE CLEARED							
Signed: 					Date: 17 May 2023		

Regulation 7(2)(f) Notices to fix

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for issuing Notices to fix in accordance with Regulation 7(2)(f).

The BCA had not issued any Notices to Fix in the last 12 months, therefore no evidence of implementation was sighted.

Regulation 7(2)(g) Customer inquiries

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for receiving and managing customer inquiries about building control functions in accordance with Regulation 7(2)(g).

Inquiries were received either in person, by phone or by email. Inquiries about Building Consents, included do I need one?, how do I apply? inquiries on fees, etc.

Inquiries of a technical nature were forwarded to BCA staff by the frontline staff when appropriate. The procedure was being implemented appropriately.

Regulation 7(2)(h) Customer complaints

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for receiving and managing customer complaints about building control functions in accordance with Regulation 7(2)(h).

The responsible person for the investigation and management of complaints was nominated as the Group Manager Regulatory Services. A BCA and TA Compliment and Complaints Register was in place and being maintained well.

The BCA's procedure indicated a turnaround timeframe for complaint response. Examples reviewed confirmed that complaints had been managed and recorded appropriately and within the stated timeframe.

Regulation 8(1) Forecasting workflow

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure to forecast its workflow in accordance with Regulation 8(1).

The BCA completed an annual review of work requirements. These reviews included identifying and recording trends in the volume of building control work it processed, inspected and certified, as well as consideration of internal and external factors that might influence upcoming work volumes.

Regulation 8(2) Identifying and addressing capacity and capability needs

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure to identify and address capacity and capability needs in accordance with Regulation 8(2).

The BCA carried out an annual workflow analysis and identification of capacity needs. This was last done in July 2022 and a report raised giving details of workloads by Building Category (NCAS). It included a breakdown of hours required by category and hence Full Time Equivalent staff requirements. No vacancies existed for either technical or administration staff at the time of the assessment.

Regulation 9 Allocating work

Observations and comments, including good practice and performance

The BCA had appropriately documented and implemented its procedure to allocate work in accordance with Regulation 9.

Regulation 10(1) Assessing prospective employees

Observations and comments, including good practice and performance

The BCA had appropriately documented and effectively implemented its procedure for establishing the competence of a person who applied to it for employment as an employee performing building control functions in accordance with Regulation 10(1).


Regulation 10(2) Assessing employees performing building control functions

Observations and comments, including good practice and performance

The BCA had documented its procedure for assessing annually (or more frequently) the competence of its employees performing building control functions, however, the BCA had not ensured that it had measured and recorded how it was assured that the competence assessor had the appropriate assessment skills. This requirement could be met by the BCA holding a NCAS Appendix 2 on file within the BCA's system. **See GNC 6.**

Competency assessments had been completed for all BCA technical staff, which had been maintained on file appropriately.

General Non-compliance No. 6

Breach of requirement:	Regulation 10(2)						
Breach of requirement:	Regulation(s)	<input checked="" type="checkbox"/> 5(a)	<input checked="" type="checkbox"/> 5(b)	<input type="checkbox"/> 5(c)	<input type="checkbox"/> 6(b)	<input type="checkbox"/> 6(c)	<input type="checkbox"/> 6(d)
FINDING DETAILS							
The BCA had not ensured that it had measured and recorded the requirement for the current competency assessor to have an NCAS Appendix 2 on file within the BCA's system.							
IMPORTANT DATES							
Date this action plan was accepted by IANZ:					Click or tap to enter a date.		
Final date evidence of implementation can be accepted from BCA:					26 May 2023		
EVIDENCE							
Plan of action (To be provided by BCA): Review procedure							
Proposed evidence of implementation (To be provided by BCA): Submit procedure and evidence of assessor meeting procedure.							
Evidence of implementation and discussion: Proposed action plan accepted (31/03/2023.PW)							
TE – within the clearance material the BCA has provided a revised procedure whereby it now indicates that the assessor must have a measure of the 10 criteria questions of NCAs and be reviewed and approved by the Group Manager Regulatory Services – this document has also been provided and is dated 23 April 2023 – RESOLVED BG 9-5-2023							
The actions taken are deemed to satisfactorily address the issues raised. This GNC is therefore closed.							
NON COMPLIANCE CLEARED							
Signed: 					Date: 9 May 2023		

Regulation 10(3)(a) to (f)	Competence assessment system
Observations and comments, including good practice and performance	
<p>The BCA had appropriately documented and effectively implemented its procedure which specified the technical requirements for a competence assessment system. All competence assessments were found to be appropriate and to record an appropriate level of detail, as per the National Building Consent Authority Competency Assessment System (NCAS) in accordance with Regulation 10(3).</p> <p>BCA Competency records had been appropriately maintained and were current.</p>	

Regulation 11(1) The training system

Observations and comments, including good practice and performance

The BCA had developed a training system in accordance with Regulation 11(1). Where omissions were detected they were addressed under their relevant Regulation in this report.

Regulation 11(2)(a) Making annual (or more frequent) training needs assessments

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for making annual (or more frequent) training needs assessments in accordance with Regulation 11(2)(a).

Individual training plans had been prepared on an annual basis for all BCA staff. Records of these had been appropriately maintained.

Regulation 11(2)(b) Preparing training plans that specify the training outcomes required

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for preparing training plans that specify the training outcomes required in accordance with Regulation 11(2)(b).

Individual training plans had been prepared for each staff member. These included any training identified as part of competency assessments. The training plans included the timeframes in which the identified training was expected to be completed.

Regulation 11(2)(c) Ensuring that employees receive the training agreed for them

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for ensuring that employees receive the training agreed for them in accordance with Regulation 11(2)(c).

Training identified and undertaken by staff against training identified and recorded on staff individual training plans was monitored and reviewed by both individual staff and their managers. Any training that had been missed was identified and rescheduled where appropriate.

Regulation 11(2)(d) Monitoring and reviewing employees' application of the training they have received, including by observing relevant activities**Observations and comments, including good practice and performance**

The BCA had appropriately documented its procedure for monitoring and reviewing employees' application of the training they have received, including by observing relevant activities in accordance with Regulation 11(2)(d).

Monitoring the effectiveness and application of training was being implemented and recorded appropriately. Competence assessments and peer reviews, together with supervision activities, were the main methods being used by the BCA.


Regulation 11(2)(e) Supervising employees doing a technical job under training**Observations and comments, including good practice and performance**

The BCA had documented its procedure to supervise its employees doing a technical job under training, however, the BCA had not adequately documented how or where supervision was to be recorded. **See GNC 7.**

Supervision was being carried out as required and when appropriate. Records sighted indicated that implementation of supervision was appropriate.

Whilst supervision records covered the application of the Building Code it is recommended that the BCA also considers recording the implementation of the quality assurance system as part of the supervision records. **See Recommendation R1.**

General Non-compliance No. 7

Breach of requirement:	Regulation 11(2)(e)						
Breach of requirement:	Regulation(s)	<input checked="" type="checkbox"/> 5(a)	<input checked="" type="checkbox"/> 5(b)	<input type="checkbox"/> 5(c)	<input type="checkbox"/> 6(b)	<input type="checkbox"/> 6(c)	<input type="checkbox"/> 6(d)
FINDING DETAILS							
The BCA had not adequately documented how or where supervision was to be recorded.							
IMPORTANT DATES							
Date this action plan was accepted by IANZ:					31 March 2023		
Final date evidence of implementation can be accepted from BCA:					26 May 2023		
EVIDENCE							
Plan of action <i>(To be provided by BCA):</i> review procedure							
Proposed evidence of implementation <i>(To be provided by BCA):</i> Submit procedure identifying how and where supervision is recorded submit evidence of supervision records.							
Evidence of implementation and discussion: Proposed action plan accepted (31/03/2023.PW) PW (8 May 2023) – The BCA has provided an updated procedure which now covers the BCA's processes for how and where supervision was to be recorded. This action satisfactorily addresses the issue raised. This GNC is now closed.							
NON COMPLIANCE CLEARED							
Signed: 					Date: 8 May 2023		

Regulation 11(2)(f) Recording employees' qualifications, experience and training

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for recording employees' qualifications, experience, and training in accordance with Regulation 11(2)(f).

Individual Training Logs recorded training undertaken and included timeframes for training and when training done. The method for monitoring the effectiveness of training was also being recorded. Qualifications held by technical staff together with staff experience had been recorded within Competency Assessments.

Regulation 11(2)(g) Recording continuing training information

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for recording continuing training information in accordance with Regulation 11(2)(f).

The BCA had ensured that individual training plans were in place for each staff member. Individual Training Logs recorded training undertaken and included timeframes for training and when training had been undertaken. The training records (Individual Training Logs) recorded continuing professional development appropriately.

Regulation 12(1) A system for choosing and using contractors to perform its building control functions

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for choosing and using contractors to perform its building control functions in accordance with Regulation 12(1).

The BCA had used its procurement process to engage the sole contractor in use, which was overseen by the Group Manager Regulatory Services (BCA Manager). The contractor was sought through a direct approach.

Regulation 12(2)(a) Establishing contractors' competence

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure to establish contractors' competence in accordance with Regulation 12(2)(a).

Contractor competency had been established as part of the engagement process. The contract agreement included appropriate details of competency expectations which had been followed up with copies of current competency assessments for each of the contractor staff engaged on BCA work.

Regulation 12(2)(b) Engaging contractors**Observations and comments, including good practice and performance**

The BCA had appropriately documented its procedure for engaging contractors in accordance with Regulation 12(2)(b).

The contract agreement had been reviewed and signed off by the appropriate management within the BCA.

Regulation 12(2)(c) Making written or electronic agreements with contractors**Observations and comments, including good practice and performance**

The BCA had appropriately documented its procedure for making written or electronic agreements with contractors in accordance with Regulation 12(2)(c).

An appropriate contract agreement was held for the contractor engaged for processing activities.

Regulation 12(2)(d) Recording contractors' qualifications**Observations and comments, including good practice and performance**

The BCA had appropriately documented its procedure for recording contractors' qualifications in accordance with Regulation 12(2)(d).

The BCA had maintained records of Qualifications of contractor staff. These were part of contractor staff competency assessments, which had been held on file at the BCA.

Regulation 12(2)(e) Monitoring and reviewing contractors' performance**Observations and comments, including good practice and performance**

The BCA had appropriately documented its procedure for monitoring and reviewing contractors' performance in accordance with Regulation 12(2)(e).

The BCA had appropriately carried out contractor performance reviews carried out and recorded these as part of the BCA's Strategic Management Review.

Regulation 12(2)(f) Annually (or more frequently) assessing contractors' competence**Observations and comments, including good practice and performance**


The BCA had appropriately documented its procedure for annually (or more frequently) assessing contractors' competence in accordance with Regulation 12(2)(f).

Competency assessments had been completed and were current for all contractor technical staff. Copies of these competency assessments were held on file by the BCA.

Regulation 13(a) Identifying employees and contractors who are competent to provide technical leadership**Observations and comments, including good practice and performance**

The BCA had documented its procedure (for identifying employees and contractors who were competent to provide technical leadership, however, the BCA had not adequately defined and documented how technical leadership was to be performed in order to meet the requirements of Regulation 13, in particular at Commercial 3 building category level. **See GNC 8.**

General Non-compliance No. 8

Breach of requirement:	Regulation 13(a)						
Breach of requirement:	Regulation(s)	<input checked="" type="checkbox"/> 5(a)	<input checked="" type="checkbox"/> 5(b)	<input checked="" type="checkbox"/> 5(c)	<input type="checkbox"/> 6(b)	<input type="checkbox"/> 6(c)	<input type="checkbox"/> 6(d)
FINDING DETAILS							
<p>The BCA had not adequately defined and documented how technical leadership was to be performed in order to meet the requirements of Regulation 13, in particular at Commercial 3 building category level.</p>							
IMPORTANT DATES							
Date this action plan was accepted by IANZ:					31 March 2023		
Final date evidence of implementation can be accepted from BCA:					26 May 2023		
EVIDENCE							
<p>Plan of action <i>(To be provided by BCA):</i> Review procedure and skill matrix</p>							
<p>Proposed evidence of implementation <i>(To be provided by BCA):</i> Provide reviewed procedure and skills matrix</p>							
<p>Evidence of implementation and discussion: Proposed action plan accepted (31/03/2023.PW)</p> <p>TE – the BCA has provided a revised procedure which indicates that Com 3 Technical leadership within the Skill Matrix is to be completed via: For processing it is an external contractor – who is this and how has the BCA measured that they are appropriate? For Inspections it is a BCA under a MOU – who is it? This information is required in order to clear the finding – NOT RESOLVED BG 9-5-2023</p> <p>TE – the BCA has now provided the relevant material to clarify the above questioning and now satisfied that this GNC can be cleared – RESOLVED BG 12-5-2023. The actions taken are deemed to satisfactorily address the issues raised. This GNC is therefore closed.</p>							
NON COMPLIANCE CLEARED							
Signed: 					Date: 12 May 2023		

Regulation 13(b) Giving the employees and contractors the powers and authorities to enable them to provide the leadership

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for giving the employees and contractors the powers and authorities to enable them to provide the leadership in accordance with Regulation 13(b).

Technical leaders had been given appropriate powers and authorities.

Regulation 14 Ensuring necessary (technical) resources

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for ensuring it had a system for providing, and for ensuring the continuing availability of and continuing appropriateness of the technical information, facilities, and equipment that its employees and contractors needed to perform building control functions.

All BCA staff had access to standards online. Calibrations had been conducted on thermometers in use, however the calibrations had not been done at exactly the temperatures as specified in the documented procedure, namely 45, 55, 60 and 65 degrees Celsius. The calibrations had been done at 45, 50, 60 and 65.

It is suggested that the BCA carries out thermometer calibration checks at 45 and 55 degrees Celsius as these are the temperatures required by Regulation. It is also suggested that the BCA reviews and revises its procedure to only include the required set temperatures of 45 and 55°C. **See Advisory Note A3.**

Other measuring instruments such as moisture meters had been calibrated appropriately.

Regulation 15(1)(a) A building consent authority must record its organisational structure

Observations and comments, including good practice and performance

The BCA had appropriately documented its organisational structure in accordance with Regulation 15(1)(a).


Regulation 15(1)(b) A building consent must record in the structure

Observations and comments, including good practice and performance

The BCA had appropriately documented in its organisational structure, the reporting lines and accountabilities, and relationships the authority had with external organisations in accordance with Regulation 15(1)(b).

Regulation 15(2) A building consent authority must record in the structure
Observations and comments, including good practice and performance
The BCA had documented the roles, responsibilities, powers, authorities and any limitation on powers and authorities for its employees and contractors performing building control functions, however, the BCA had not ensured that all delegated powers and authorities had been defined. E.g. Sections 51, 52, and 91. See GNC 9.

General Non-compliance No. 9

Breach of requirement:	Regulation 15(2)						
Breach of requirement:	Regulation(s)	<input type="checkbox"/> 5(a)	<input type="checkbox"/> 5(b)	<input checked="" type="checkbox"/> 5(c)	<input type="checkbox"/> 6(b)	<input type="checkbox"/> 6(c)	<input type="checkbox"/> 6(d)
FINDING DETAILS							
The BCA had not ensured that all delegated powers and authorities had been defined. E.g. Sections 51, 52, and 91 of the Building Act 2004.							
IMPORTANT DATES							
Date this action plan was accepted by IANZ:					31 March 2023		
Final date evidence of implementation can be accepted from BCA:					26 May 2023		
EVIDENCE							
Plan of action <i>(To be provided by BCA):</i> Update delegations and warrants. review procedure to ensure S 91 is clear.							
Proposed evidence of implementation <i>(To be provided by BCA):</i> Provide copies of delegations, warrants.							
Evidence of implementation and discussion: Proposed action plan accepted (31/03/2023.PW) 14-04-2023.PW – The BCA has provided a copy of its delegated authorities which now include the Sections 51, 52, and 91 of the Building Act 2004. The actions taken by the BCA have satisfactorily addressed the issues raised. This GNC is now closed.							
NON COMPLIANCE CLEARED							
Signed: 				Date: 14 April 2023			

Regulation 16(1) A system for giving every application for a building consent its own uniquely identified file
Observations and comments, including good practice and performance
The BCA had appropriately documented and implemented its procedure for allocating every application for building consent, and building consent amendment its own unique identification in accordance with Regulation 16(1).

Regulation 16(2)(a) to (c) Storage of all relevant information for a building consent

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for putting information on an application's file and storing it securely and in a way that made it accessible and retrievable in accordance with Regulation 16(2)(a) to (c).

Whilst file records had been stored and were available, the BCA is recommended to review its processes for the storing of file records within GoGet to ensure a more consistent approach. E.g. Within the review of CCCs and relevant supporting documentation (Form 6 and certification documents) it was identified that the BCA had a record of the required documents but they were not consistency stored within the GoGet system in the relevant locations **See Recommendation R2.**

The BCA stored files on local and remote servers with back-ups maintained. These were regularly checked to ensure the integrity of the back-up system.

Regulation 17(1) A quality assurance system that covers management and operations and covers the policies, procedures and systems described in regulations 5 to 16 and 18

Observations and comments, including good practice and performance

The BCA had developed a quality assurance system that covered its management and operations, and the quality assurance system covered the policies, procedures, and systems described in regulations 5 to 16 and 18.

Where omissions were detected they were addressed under their relevant Regulation in this report.

Regulation 17(2)(b) The policy on quality

Observations and comments, including good practice and performance

The BCA had appropriately documented its quality policy which included quality objectives, and quality performance indicators for its building control functions at a high level in accordance with Regulation 17(2)(b).

The BCA is advised to consider reviewing its current Quality Policy as it was dated June 2019 and did not appear to be signed and committed to, by the current CEO. **See Advisory Note A4.**

Regulation 17(2)(d) Regular management reporting and review, including of the quality system

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for reviewing its management system annually (or more frequently) against the expected standards for performance and high level performance indicators from its quality policy in accordance with Regulation 17(2)(d).

The BCA had prepared a report for the annual strategic management review. This had last been undertaken in August 2022. Appropriate records were observed.

Regulation 17(2)(e) Supporting continuous improvement

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for supporting continuous improvement in accordance with Regulation 17(2)(e).

Continuous improvements had been entered onto the BCA's CI Register. Records showed date raised, proposed improvement, investigation, action taken, due date, and CI status. The CI system was seen to have been well managed and implemented.

Regulation 17(2)(h) Undertaking annual audits


Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for ensuring that an internal audit of every building control function occurred annually (or more frequently) in accordance with Regulation 17(2)(h).

Implementation was not always adequate, where the BCA had not ensured that technical internal audits were being conducted on technical processes such as Building Consent processing and inspection activity. **See GNC 10.**

The BCA is recommended to ensure that internal audit reports always record the examples reviewed during the internal audit. One example was sighted which did not contain reference to the examples reviewed for the audit (Processing Consents). **See Recommendation R3.**

General Non-compliance No. 10

Breach of requirement:	Regulation 17(2)(h)						
Breach of requirement:	Regulation(s)	<input type="checkbox"/> 5(a)	<input type="checkbox"/> 5(b)	<input checked="" type="checkbox"/> 5(c)	<input type="checkbox"/> 6(b)	<input type="checkbox"/> 6(c)	<input type="checkbox"/> 6(d)
FINDING DETAILS							
Implementation was not always adequate, where the BCA had not ensured that technical internal audits were being conducted on technical processes such as Building Consent processing and inspection activity.							
IMPORTANT DATES							
Date this action plan was accepted by IANZ:					31 March 2023		
Final date evidence of implementation can be accepted from BCA:					26 May 2023		
EVIDENCE							
Plan of action <i>(To be provided by BCA):</i> Use competency assessments to look at technical processing and inspections.							
Proposed evidence of implementation <i>(To be provided by BCA):</i> Provide audit report with BC numbers that have been reviewed to show technical processes have been audited.							
Evidence of implementation and discussion: Proposed action plan accepted (31/03/2023.PW) 28/04/2023.PW – The BCA has indicated that technical audits were conducted as part of its annual competency assessments. A review of competency assessments has confirmed that these have been conducted and appropriate records maintained. Technical audits of Building Consent processing (BC200111, BC210314, BC210224, BC210305) together with inspection activities (BC200103, BC200328, BC210218, BC210012) were reviewed. The actions taken are deemed to satisfactorily address the issues raised. This GNC is therefore closed.							
NON COMPLIANCE CLEARED							
Signed: 					Date: 28 April 2023		

Regulation 17(2)(i) Identifying and managing conflicts of interest

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure in its quality assurance system for identifying and managing conflicts of interest in accordance with 17(2)(i).

Records of Conflicts of Interest (COI) were held and maintained by the BCA. COIs recorded were being signed off as reviewed and appropriately handled by Group Manager Regulatory Services.

Whilst records of COIs were being maintained, the BCA is advised to consider expanding the Conflict of Interest Register so that it includes more detail such as who raised the Conflict of Interest, what the conflict is about, how the conflict was to be managed and who reviewed and authorised the conflict of interest management plan. **See Advisory Note 5.**

Regulation 17(2)(j) Communicating with internal and external persons

Observations and comments, including good practice and performance

The BCA had documented its procedure for communicating with internal and external persons, however, the BCA is recommended to review its documented procedure in relation to references to role titles. One example was sighted where a reference was made to an old role title (the Environmental and Regulatory Services Team Leader ERSTL) which was no longer valid.

See Recommendation R4.

Implementation was appropriate, whereby communications taking place had been recorded, such as Strategic Management Reviews, Team Meetings, building work inquiries, public information, complaints and contractor communications.

Regulation 17(3) A quality manager

Observations and comments, including good practice and performance

The BCA had appointed a Quality Manager, named as Johan Cullis (Group Manager Regulatory Services) in its quality assurance system in accordance with Regulation 17(3).

Regulation 17(3A) Complaints about building practitioners

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure to ensure that the BCA considered whether to make, and made complaints to relevant occupational or professional authorities about practitioners whenever they appeared to it necessary or desirable in accordance with Regulation 17(3A)(a) to (c).

No complaints about practitioners had been raised within the past 24-month period, as none were required. No concerns were raised about any practitioners. The BCA was aware that records of any concerns would be required should they be raised. The BCA was able to use weekly team meetings to raise and record any issues should they arise.

Regulation 17(4) Compliance with a quality assurance system

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for ensuring that its employees and contractors complied with its quality assurance system in accordance with Regulation 17(4).

Compliance with the BCA's Quality System was measured on an ongoing basis such as peer review and internal audit. The BCA had an induction checklist which included induction into the use of the BCA's Quality Management System. Records and implementation were seen to be appropriate.

Regulation 17(5) Strategic management reporting and review

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for annual (or more frequent) review of its quality assurance system, and for making appropriate changes in the quality assurance system in accordance with Regulation 17(5).

The BCA had conducted a Strategic Management Review in August 2022) which covered the period 1 July 2021 to 30 June 2022. The review covered required items appropriately such as continuous improvement, work volumes, service levels, staff and contractor engagement with the BCA's systems, compliments and complaints, conflicts of interest, staff recruitment, training, and retention, contractor performance, and changes to the BCA's Quality System. External factors were also included.

Regulation 18 Technical qualifications

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for requiring technical qualifications, and establishing circumstances of employees and contractors that would make it unreasonable and impractical for requiring technical qualifications in accordance with Regulation 18(1) to (3).

All BCA staff engaged in a technical role held or were working towards a recognised qualification.

No staff were exempt from holding an appropriate qualification.

SUMMARY OF RECOMMENDATIONS

Recommendations are intended to assist your BCA to maintain compliance with the Regulations. They are **not** conditions for accreditation but a failure to make changes may result in non-compliance with the Regulations in the future.

It is recommended that:

- R1 Regulation 11(2)(e)** - Whilst supervision records covered the application of the Building Code it is recommended that the BCA also consider recording the implementation of the quality assurance system, and not just building code issues.
- R2 Regulation 16(2)(a)** - The BCA is recommended to review its processes for the storing of file records within GoGet to ensure a more consistent approach.
- R3 Regulation 17(2)(h)** - The BCA is recommended to ensure that internal audit reports always record the examples reviewed during the internal audit.
- R4 Regulation 17(2)(j)** - The BCA is recommended to review its documented procedure in relation to references to role titles to remove any out of date role titles.

SUMMARY OF ADVISORY NOTES

Advisory notes are intended to assist your BCA to improve compliance with accreditation requirements based on IANZ's experience. They are **not** conditions for accreditation and do not have to be implemented to maintain accreditation.

- A1 Regulation (7)(2)(d)(v)** – In order to retain a complete record the BCA is advised to consider recording all communication such as phone calls and email correspondence regarding 12 month lapsing decision making processes.
- A2 Regulation 7(2)(f)** - The BCA is advised to consider adding the following to the Compliance Schedule:
- Under the heading of “The Building”: add the Activity/use group(s) from Schedule 2 of the Building (Specified Systems, Change the Use, & Earthquake-prone Buildings) Regs 2005”
 - Add a summary of Specified Systems
- A3 Regulation 14** - Calibrations had not been done at exactly the temperatures as specified in the documented procedure, namely 45, 55, 60 and 65 degrees Celsius. It is suggested that the BCA carries out calibration checks at 45 and 55 degrees Celsius as these are the temperatures required by Regulation. It is also suggested that the BCA reviews and revises its procedure to only include the required set temperatures of 45 and 55°C
- A4 Regulation 17(2)(b)** - The BCA is advised to consider reviewing and updating its current Quality Policy and getting it committed to and signed by the current CEO.
- A5 Regulation 17(2)(i)** - The BCA is advised to consider expanding the Conflict of Interest Register so that it includes more detail such as who raised the Conflict of Interest, what the conflict was about, how the conflict was to be managed and who reviewed and authorised the conflict of interest management plan.

SUMMARY TABLE OF NON-COMPLIANCE

The following table summarises the non-compliance identified with the accreditation requirements in your BCA's accreditation assessment. Where a non-compliance has been identified, a Record of Non-compliance template has been prepared detailing the issue, and to enable you to detail your proposed corrective actions to IANZ. You must update and return a template for each non-compliance identified.

Regulatory requirement	Non-compliance (Serious / General)	Non-compliance identification number	Breach of Regulation 5/6? Enter "Y" where applicable						Resolved On-site? Yes/No	Date Non-compliance to be cleared by (DD/MM/YYYY)	Date Non-compliance cleared (DD/MM/YYYY)	Number of		Brief comment
			5(a)	5(b)	5(c)	6(b)	6(c)	6(d)				Recommendation	Advisory Note	
6(A)(1)	Choose item.													
6(A)(2)	Choose item.													
Regulation 7														
7(1)	Choose item.													
7(2)(a)	General	GNC 1	Y	Y				No	9/06/2023	28/04/2023				
7(2)(b)	Choose item.													
7(2)(c)	General	GNC 2	Y	Y	Y			No	9/06/2023	28/04/2023				
7(2)(d)(i)	Choose item.													
7(2)(d)(ii)	Choose item.													
7(2)(d)(iii)	Choose item.													
7(2)(d)(iv)	General	GNC 3			Y	Y	Y	No	9/06/2023	19/05/2023				
7(2)(d)(v)	General	GNC 4			Y			No	9/06/2023	19/05/2023		1		
7(2)(e)	Choose item.													
7(2)(f)	General	GNC 5			Y			No	9/06/2023	19/05/2023		1	This GNC is in two parts 5A and 5B. Part 5A closed 19/05/2023, Part 5B closed – 17/05/2023	
7(2)(g)	Choose item.													
7(2)(h)	Choose item.													
Regulation 8														
8(1)	Choose item.													
8(2)	Choose item.													
Regulation 9														
9	Choose item.													
Regulation 10														
10(1)	Choose item.													
10(2)	General	GNC 6	Y	Y				No	9/06/2023	9/05/2023				
10(3)(a)	Choose item.													Regulations 10(3)(a) to (f) is considered as ONE GNC only regardless of which sub regulation(s) the GNC(s) are applied to.
10(3)(b)														
10(3)(c)														
10(3)(d)														
10(3)(e)														
10(3)(f)														
Regulation 11														
11(1)	Choose item.													
11(2)(a)	Choose item.													
11(2)(b)	Choose item.													
11(2)(c)	Choose item.													
11(2)(d)	Choose item.													
11(2)(e)	General	GNC 7	Y	Y				No	9/06/2023	8/05/2023	1			
11(2)(f)	Choose item.													
11(2)(g)	Choose item.													
Regulation 12														

Regulatory requirement	Non-compliance (Serious / General)	Non-compliance identification number	Breach of Regulation 5/6? Enter "Y" where applicable						Resolved On-site? Yes/No	Date Non-compliance to be cleared by (DD/MM/YYYY)	Date Non-compliance cleared (DD/MM/YYYY)	Number of		Brief comment
			5(a)	5(b)	5(c)	6(b)	6(c)	6(d)				Recommendation	Advisory Note	
12(1)	Choose item.													
12(2)(a)	Choose item.													
12(2)(b)	Choose item.													
12(2)(c)	Choose item.													
12(2)(d)	Choose item.													
12(2)(e)	Choose item.													
12(2)(f)	Choose item.													
Regulation 13														
13(a)	General	GNC 8	Y	Y	Y			No	9/06/2023	12/05/2023				
13(b)	Choose item.													
Regulation 14														
14	Choose item.											1		
Regulation 15														
15(1)(a)	Choose item.													
15(1)(b)	Choose item.													
15(2)	General	GNC 9			Y			No	9/06/2023	14/04/2023				
Regulation 16														
16(1)	Choose item.													
16(2)(a)	Choose item.										1			
16(2)(b)	Choose item.													
16(2)(c)	Choose item.													
Regulation 17														
17(1)	Choose item.													
17(2)(a)	Choose item.													
17(2)(b)	Choose item.											1		
17(2)(c)	Choose item.													
17(2)(d)	Choose item.													
17(2)(e)	Choose item.													
17(2)(h)	General	GNC 10			Y			No	9/06/2023	28/04/2023	1			
17(2)(i)	Choose item.											1		
17(2)(j)	Choose item.										1			
17(3)	Choose item.													
17(3A)(a)	Choose item.													
17(3A)(b)	Choose item.													
17(3A)(c)	Choose item.													
17(4)(a)	Choose item.													
17(4)(b)	Choose item.													
17(5)(a)	Choose item.													
17(5)(b)	Choose item.													
Regulation 18														
18(1)	Choose item.													
18(3)(a)	Choose item.													
18(3)(b)	Choose item.													