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Tohu Matatau Aotearoa

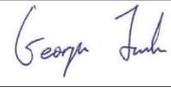
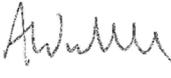
BUILDING CONSENT AUTHORITY ACCREDITATION INITIAL ASSESSMENT REPORT

Christchurch City Council

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BCA AND ASSESSMENT DETAILS

ORGANISATION DETAILS						
Organisation:		Christchurch City Council				
Address for service:		53 Hereford Street, Christchurch Central, Christchurch 8011				
Client Number:	7486	Accreditation Number:	82			
Chief Executive:		Dawn Baxendale				
Chief Executive Contact Details:		dawn.baxendale@ccc.govt.nz				
Responsible Manager:		Robert Wright				
Responsible Manager Contact Details:		robert.wright@ccc.govt.nz				
Authorised Representative:		Mr Robert Wright				
Authorised Representative Contact Details:		robert.wright@ccc.govt.nz				
Quality Manager:		Andrew Wells				
Quality Manager Contact Details:		Andrew.wells@ccc.govt.nz				
Number of FTEs Total FTEs should = technical FTEs + admin FTEs + vacancies	Technical	98	Admin support		52	
	Vacancies (Technical)	22	Vacancies (Admin)		7	
Building Consents						
Activity during the previous 12 months	R1	1950	R2	1188	R3	1085
	C1	379	C2	163	C3	129
	CCCs				3708	
	New compliance schedules				86	
	BCA Notices to Fix				20	
	ASSESSMENT TEAM					
Assessment Date:		27 March 2023 to 6 April 2023				
Lead Assessor:		Georgina Jackson				
Lead Assessor Contact Details:		GJackson@ianz.govt.nz				
Technical Experts:		Phil Judge, Brendan Guyton				
Observers:		Adrienne Woollard, Mike Reedy, Jon King				
ASSESSMENT FINDINGS						
		This assessment (RR):		Last assessment (RR):		
Total # of "serious" non-compliances:		0		0		
Total # of "general" non-compliances:		15		12		
Total # of non-compliances outstanding:		8		3		
Recommendations:		10		1		
Advisory notes – not required by BCA:		0		0		
Date clearance plan required from BCA:		22 May 2023				
Date non-compliances must cleared:		21 July 2023				
NEXT ASSESSMENT						
Recommended next assessment type:		Routine Reassessment				
Recommended next assessment date:		March 2025				
IANZ REPORT PREPARATION						
Prepared by: Georgina Jackson	Date: 14 April 2023	Signature: 				
Checked by: Adrienne Woollard	Date: 16 April 2023	Signature: 				

INTRODUCTION

This report relates to the accreditation assessment of the **Christchurch City Council Building Consent Authority (BCA)** which took place during **March and April 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 and contractors 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

Christchurch City Council had a mature and comprehensive quality system, which was seen to have become well refined as a result of the proactive efforts that had taken place following previous assessments. Employees interviewed during the assessment showed a strong understanding of their policies, procedures and systems and were highly engaged with the assessment process.

There were several notable areas which stood out to the assessment team. The internal audit and continuous improvement systems were examples of well-managed and logical systems, where the audit and continuous improvement systems worked cohesively with each other to identify, improve and resolve issues. The steps during these processes were seen to be logical and straightforward to work through.

The use of automatic notification forms and 'Smartsheets' created efficiencies in the BCAs processes, which was seen in frequent use for the conflict of interest and continuous improvement systems, amongst others. The use of forms to generate a conflict of interest entry or continuous improvement suggestion meant that all users could utilise these systems, regardless of their experience level.

The building inspection equipment register was arranged sensibly and was up to date.

The inspection booking management system was viewed as highly efficient and it was noted during on-site inspection witnessing that customers were providing positive feedback on the waitlist system that had recently been updated.

Previous assessments had identified some issues with compliance schedules. It was noted during this assessment that while there were a few small remaining issues, compliance schedules were largely seen to have been completed to good standard. This showed the ongoing efforts that have been made by the BCA in this area.

This assessment identified a total of fifteen general non-compliances. It was evident that the BCA team were passionate and committed to producing high quality work, resulting in the team resolving seven of the non-compliances during the assessment. Of the outstanding issues remaining, these revolved around management of timeframes for inquiries, complaints and Code Compliance Certificates, as well as issues with contractors with relation to induction, management, documentation and monitoring. These are detailed below.

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 in order for accreditation to continue.

IDENTIFYING AND NUMBERING OF NON-COMPLIANCES

Non-compliance numbers have been issued to each Regulation which was assessed and found to be non-compliant, however, where more than one non-compliance is identified within one Regulation or sub-Regulation, then only one finding number is generated. For the purpose of ease of addressing the identified non-compliances, Regulations 7(2)(d)(v) and 7(2)(f) had been split out into their component parts to enable easy recording of the key issues.

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	<p>Submitting clearance evidence</p> <p>Upon the acceptance of all action plans, the BCA can proceed to provide clearance evidence to IANZ.</p>	Ideally, a separate email to address each GNC containing all listed proposed evidence.
Step 4	<p>Review of clearance evidence</p> <p>Upon receiving clearance evidence, IANZ will review the appropriateness of the clearance evidence.</p>	IANZ has a KPI of 10 working days to review and respond to each piece of clearance evidence provided.
Step 5	<p>Last date for information submission</p> <p>The BCA must provide its final clearance information in sufficient time to allow for review, revision and resubmission of the information before the last date for final information submission provided.</p>	If insufficient or incomplete information is received by the last date for information submission, the BCA must apply for an extension of time (if relevant). Alternatively, an initial notice of possible revocation of accreditation may be issued.
Step 6	<p>Final clearance</p> <p>The BCA must clear all identified non-compliances.</p>	Within 3 months of the issuing of this report (unless an extension is granted or a finding is conditionally cleared waiting for future information).

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 one or more policies, procedures and systems 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:

- There were no serious concerns about the BCA's technical output.
- The BCA had an excellent history of using their continuous improvement and internal audit systems to identify and manage any issues.
- The BCA had cleared about half of the non-compliances during the assessment and had actively discussed solutions for addressing others.
- The BCA team was engaged with creating benefit from the accreditation process.

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 **March 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(1) A system for notification

Observations and comments, including good practice and performance

The BCA had appropriately documented its system for notifying the building consent accreditation body and the Ministry of any of the matters listed within Regulation 6A(1) within 20 working days of the matter taking place.

No new notifications had been made since the last assessment. The sighted template outlined relevant details that would be completed such as why a change was being made, how this would be implemented, if the event would impact the BCA's compliance with accreditation requirements and any mitigations necessary to address potential impacts. When the notification letter was generated, this would automatically be filed in TRIM and a copy was sent to the QA analyst when it was relevant to continuous improvement records.

Regulation 7(2)(a) Providing consumer information

Observations and comments, including good practice and performance

The BCA provided adequate consumer information regarding how to apply for a consent, and how an application was processed, inspected and certified in accordance with Regulation 7(2)(a).

Regulation 7(2)(b) Receiving building consent applications

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for receiving applications in accordance with Regulation 7(2)(b).

Building consent applications were received by front counter, post and digitally. Digital applications were made through a web-based system referred to as 'Online Services' which also allowed for documentation to be submitted to the Council.

Regulation 7(2)(c) Checking building consent applications

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for checking applications in accordance with Regulation 7(2)(c).

The decision and reasons for accepting or not accepting an application were recorded on relevant processing sheets. Building consents and their relevant plans, specifications and supporting documents were extracted, organised and re-saved into TRIM. Technical acceptance checks were completed in Connect and acceptance letters were saved into TRIM.

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 in the BCA's Connect system, where a BCN number was generated. Application documents were filed into TRIM.

During review of lodging of Building Consent applications it was noted that the statutory clock had been started correctly for the majority of the sighted applications. Two examples were observed where residential applications were lodged and the statutory clock had been started on the day the vetting was completed, rather than the date that the complete application had been received. It is recommended that the BCA ensures that the clock is started on the date the complete application is received.

See Recommendation R1.

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 reviewed during the assessment were seen to have been correctly categorised, 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).

The BCA's procedure indicated that the contractor's competency would be recorded on the B-660 Skills Matrix document and used for the appropriate allocation of work.

The BCA had not always followed its documented procedure, where the contractors were not listed on the B-660 Skills Matrix document for allocations.

GNC 1 - Resolved during the assessment. The BCA updated its quality manual and skills matrix appropriately.

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).

Within the review of category R1 processing records, some isolated issues relating to the insufficient recording of reasons for decision and the measuring of building element compliance were identified. The BCA is recommended to ensure that the records are appropriate to the scope of the application.
See Recommendation R2.

Regulation 7(2)(d)(v) Granting and issuing building consents and Compliance with Form 5

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for granting and issuing consents, in accordance with Regulation 7(2)(d)(v).

Within the review of completion of the B100R (Res Processing Sheet - Summary Sheet) it was identified that the BCA was not consistently completing/recording the required prompt for the statutory clock management. The BCA is recommended to ensure that this is consistently completed for ease of visibility of the job status.

See Recommendation R3.

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).

Several examples were sighted where the BCA had appropriately documented reasons for decisions to extend the timeframe in which a consent remains valid (i.e. extending the lapsing date). It is recommended that the BCA outlines the location that reasons for decisions regarding lapsing date extensions are recorded, as this was not specified within the documented procedure.

See Recommendation R4.

Upon reviewing multiple samples, it was identified that the generated 11 month reminder and 12 month lapsing letters for building consents were quoting from the 'granted date' extracted from the Connect system rather than 'issue date' as required by the legislation. Recent examples showed that letters were being generated and sent on the correct date but the content of the reminder letter was incorrectly displaying the granted date.

GNC 2 - Resolved during the assessment. The BCA provided examples of generated letters, which displayed the correct lapse dates.

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 ongoing compliance with the statutory timeframe for issuing building consents within 20 days was measured. When historical applications were excluded from the statistics, the BCA's compliance with the statutory timeframe for granting and issuing building consents within 20 working days was seen to be averaging 95.1% for January to March 2023.

Historical applications were defined to be applications where the statutory clock had been suspended in the past but RFI information was not received within the expected timeframes and so the applications

had remained on hold. These include building consents which had already run over 20 working days before further information was requested. When the statutory clock was restarted for these applications, the calculated working day timeframes were necessarily over 20 days. Where these applications were included within the monthly statistics for the BCA's overall compliance with the statutory timeframe, these skewed the results regardless of how quickly the BCA is able to grant and issue these consent once the further information was received.

Overall, the BCA's compliance with the statutory timeframe for granting and issuing building consents within 20 working days was seen to be averaging around 52% for the last two years. While this could be considered to be a non-compliance, a finding is not raised against this part of the legislation as the evidence indicates that the historical applications are skewing the BCA's current demonstrated ability to comply with this statutory timeframe.

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).

The BCA is recommended to carry out on-site technical and procedural audits on their contracted inspectors to ensure that an appropriate and consistent technical outcome is achieved and the BCA's procedures are being consistently implemented.

See Recommendation R5.

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

Observations and comments, including good practice and performance

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

The BCA had not always implemented its procedure for checking CCC applications for completeness. Some of the Form 6's reviewed were not adequately completed with all required information but had been accepted and recorded on the B-203 form as complete. Three sighted examples were not complete as the date the works had been completed was not indicated. Of those three examples, two also did not list the LBPs or other contractors involved in the project.

GNC 3A – To be resolved.

General Non-compliance No. 3A

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 implemented its procedure for checking CCC application for completeness. Some of the Form 6's reviewed were not adequately completed with all required information (e.g. date the works had been completed, and/or details of the LBPs or other contractors involved in the project) but had been accepted and recorded on the B-203 form as complete.</p>							

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:	7 July 2023
EVIDENCE	
Plan of action <i>(To be provided by BCA):</i>	
Proposed evidence of implementation <i>(To be provided by BCA):</i>	
Evidence of implementation and discussion:	
NON COMPLIANCE CLEARED	
Signed:	Date: Click or tap to enter a date.

Regulation 7(2)(f) Preparing and issuing code compliance certificates
Observations and comments, including good practice and performance
<p>The BCA had appropriately documented its procedure for the preparation and issuing Code Compliance Certificates (CCCs) in accordance with Regulation 7(2)(f).</p> <p>The BCA has not adequately implemented its documented procedure for managing the Code Compliance Certificate statutory clock, where the clock was remaining suspended when a complete response to a request for further information (RFI) had been provided and was only restarted once all of the RFIs were signed off.</p> <p>GNC 3B – To be resolved.</p> <p>It was advised that the system would allow for the statutory clock to be suspended if no final inspection had been carried out. As a final inspection is not considered to be building work it is not appropriate to stop the clock while waiting for a final inspection. While no incidents of stopping the clock while waiting for a final inspection were observed, it is recommended that the BCA provides training to staff to clarify that a requirement for a final inspection is not deemed to be “further reasonable information” under Section 93(4) and therefore the CCC clock cannot be stopped while waiting for a final inspection.</p> <p>See Recommendation R6.</p> <p>The BCA is recommended to ensure the CCC assessor is selecting the correct action on the CC Findings B-203 form when accepting a technical document which is required to be reviewed and accepted by a person with a Regulation 18 qualification.</p> <p>See Recommendation R7.</p>

General Non-compliance No. 3B

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 has not adequately implemented its documented procedure for managing the Code Compliance Certificate statutory clock, where the clock was remaining suspended when a complete response to a request for further information (RFI) had been provided and only restarted once all RFIs were signed off.</p>							

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:	7 July 2023
EVIDENCE	
Plan of action <i>(To be provided by BCA):</i>	
Proposed evidence of implementation <i>(To be provided by BCA):</i>	
Evidence of implementation and discussion:	
NON COMPLIANCE CLEARED	
Signed:	Date: Click or tap to enter a date.

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 had not always provided appropriate reasons for decisions for refusing to issue a CCC, where no application had been made two years after the date on which the building consent was granted. For example “building work is continuing” was recorded as a reason for refusal of CCC. Other examples of drop down reasons were also observed to be inappropriate reasons for refusal to issue a CCC including relating to “waiting for amendment”.</p> <p>GNC 3C - Resolved during the assessment. The BCA provided altered letter templates which displayed appropriate reasons for decisions.</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 95.8%, 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>	

Minor issues were identified within the review of the compliance schedules provided.

In one example, the BCA had not effectively implemented its procedure (Generate Compliance Schedule and Compliance Schedule Statement to be issued with Code Compliance Certificate) for use where the performance standards differed to those stated on the Building Consent (or draft Compliance Schedule if issued before May 2020). In this same example, the performance standard for SS15/2 & SS15/3 was referencing two different versions of C/AS2 (2019 & 2020).

In another example, the daily inspection requirements were not included in the frequency of inspections for SS3/1, even though it was included in the wording for the inspection/maintenance procedure.

In another example, for SS1 the inspection, maintenance procedure only discussed the associated backflow device. There was no reference to the sprinkler system itself.

The BCA is recommended to ensure that a final check is carried out on compliance schedules before issuing, to ensure that its procedures have been fully and effectively implemented. **See Recommendation R8.**

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).

Indicated dates for when a notice to fix is to be complied by were considered to be reasonable, with appropriate further particulars provided.

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).

General inquiries could be made at the front desk, by phone, letter, email or fax. Voicemails would be returned within one working day. Letters, emails and faxes would be acknowledged within 5 working days and responded to in full within 10 working days, where appropriate.

Inquiries were recorded in a separate category within the complaints register and included details such as the description of the inquiry, customer details, days taken to respond and reasons for not meeting the turnaround KPIs, when applicable.

The BCA had not always met the required timeframes for receiving and managing enquiries (listed within the customer services standards and principles), as per the documented procedure.

GNC 4 – To be resolved.

General Non-compliance No. 4

Breach of requirement:	Regulation 7(2)(g)						
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 always met the required timeframes for receiving and managing enquiries (listed within the customer services standards and principles), as per the documented procedure.							
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:					7 July 2023		
EVIDENCE							
Plan of action <i>(To be provided by BCA):</i>							
Proposed evidence of implementation <i>(To be provided by BCA):</i>							
Evidence of implementation and discussion:							
NON COMPLIANCE CLEARED							
Signed:				Date: Click or tap to enter a date.			

Regulation 7(2)(h)	Customer complaints
Observations and comments, including good practice and performance	
<p>The BCA had appropriately documented its procedure for receiving and managing customer complaints about building control functions in accordance with Regulation 7(2)(h).</p> <p>The documented procedure indicated that complaints would be acknowledged by the BCA within two working days of being received and a full response sent within 10 working days.</p> <p>The BCA had not always met the required timeframes for receiving and managing complaints as per the documented procedure.</p> <p>Where it had been identified that the response to a complaint would not be completed within the set timeframe, the “over timeframe complaints letter” was not always sent as per the documented procedure.</p> <p>GNC 5 – To be resolved.</p>	

General Non-compliance No. 5

Breach of requirement:	Regulation 7(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							
<ul style="list-style-type: none"> The BCA had not always met the required timeframes for receiving and managing complaints as per the documented procedure. Where it had been identified that the response to a complaint would not be completed within the set timeframe, the “over timeframe complaints letter” was not always sent as per the documented procedure. 							
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:					7 July 2023		
EVIDENCE							
Plan of action <i>(To be provided by BCA):</i>							
Proposed evidence of implementation <i>(To be provided by BCA):</i>							
Evidence of implementation and discussion:							
NON COMPLIANCE CLEARED							
Signed:				Date: Click or tap to enter a date.			

Regulation 8(1)	Forecasting workflow
Observations and comments, including good practice and performance	
<p>The BCA had appropriately documented its procedure to forecast its workflow in accordance with Regulation 8(1).</p> <p>The BCA’s daily monitoring reports for processing and weekly monitoring reports for inspections were sighted. The daily monitoring of processing considered the workload coming in per building category with relation to availability across staff. Where timeframes were not met, reasons were outlined for why this had occurred and these events were considered during the monthly leadership meetings.</p> <p>The weekly data produced for inspections displayed inspector’s competencies and locations being utilised when making bookings, with relation to the complexity of work and the breakdown of the location areas. The waitlist system for inspections was also sighted, which allowed for any cancellations to be filled in with jobs that had a longer than ideal wait time for a booking.</p> <p>The BCA’s documented procedure had not clearly outlined the methodology used to conduct the annual planning exercise and associated forecasting, including the specified locations of the associated forms and templates used to ensure all parts of the documented procedure had been undertaken.</p> <p>This led to difficulty confirming if all relevant points had been addressed, including the volume of building control work that the BCA had agreed to undertake on behalf of another BCA and the BCA</p>	

addressing the known pressures impacting the performance of its building control functions. While the described discussions were able to be identified, implementation was not always appropriate, where the BCA had not identified any obvious peaks and/or fluctuations, and any seasonal or other patterns with regards to inspections or approved (CCCs) work over the past two years.

The BCA's documented procedure also did not reflect how the review of the inspection booking timeframe was being conducted. Despite this, the BCA had an appropriate process for monitoring inspection timeframes and evidence to support this.

GNC 6 – All points resolved during the assessment. The BCA provided revised documented procedures, as well as a revised forecasting model, which were both considered appropriate.

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).

Daily monitoring reports, weekly monitoring reports, fortnightly technical meetings and monthly leadership meetings were conducted. Where gaps had been identified in capacity requirements, these were recorded on the appropriate daily/weekly reports and these were presented during monthly leadership meetings. Sighted monthly leadership meetings demonstrated consideration as to contractor requirements, human resourcing needs, new staff training and requests to other BCAs to assist with workloads.

Regulation 9 Allocating work

Observations and comments, including good practice and performance

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

The BCA had not always followed its procedure, where the contractors were not listed on the B-660 Skills Matrix document for allocations. The BCA's procedure 'Choosing and using contractors - Regulation 12', indicated that contractor's competency would be recorded on the B-660 Skills Matrix document.

GNC 7 - Resolved during the assessment. The BCA updated its quality manual and skills matrix to include the above information.

Regulation 10(1) Assessing prospective employees

Observations and comments, including good practice and performance

The BCA had appropriately documented 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 appropriately documented its procedure for assessing annually (or more frequently) the competence of its employees performing building control functions in accordance with Regulation 10(2).

Regulation 10(3)(a) to (f) Competence assessment system

Observations and comments, including good practice and performance

The BCA had appropriately documented 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).

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).

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).

The BCA was maintaining an organisational training needs schedule which displayed items such as the identified need, who will conduct the training, when the training was scheduled for, the training content and evidence of attendance. Once an organisational training need was identified, this was presented to the BCA leadership team for consideration and approval to go onto the organisational training needs schedule. One example of a recent training record included H1 Building code clause changes, with separate training sessions for inspectors, residential processors, commercial processors and the exemptions/advice team. Another example included writing skills for building consent officers, which showed examples discussed during the meeting. The BCA also maintained individual training plans within the B-660 form.

Training needs were identified through capacity requirements and customer queries or complaints, as well as more direct methods such as by employee request, supervision or witnessing records, competency assessments, inductions, changes in processes or legislation and personal development plans.

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 outlined items such as the training to be undertaken, outcomes desired, timeframes in which training will be undertaken, and who would conduct the training, as well as the evidence of the effectiveness of training. Sighted training plans included a variety of training needs to be addressed, such as relevant courses to take, competencies to work towards, changes in processes and legislative alterations.

A review of multiple individual training plans indicated that how the application of training would be monitored and reviewed was not consistently stated.

GNC 8 - Resolved during the assessment. The BCA revised individual training plans to consistently state how the application of training would be monitored and reviewed.

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).

When training was not completed within the agreed timeframe, reasons for why the training had been missed were recorded and new timeframes to complete the training were recorded.

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).

Examples of evidence used to demonstrate effectiveness included completed induction checklists, learning modules, passed assessment activities within courses, records of supervision of the application of training, technical peer reviews and competency assessments.

In multiple examples reviewed, the evidence of the effectiveness of training was not always relevant to the outlined monitoring method. Eg. Where monitoring is stated to be "utilised in role" and either no evidence was provided or the evidence did not demonstrate the application of the training according to the plan.

GNC 9 - Resolved during the assessment. The BCA revised the training plans to ensure that the evidence of effectiveness of training was relevant to the outlined monitoring method.

Regulation 11(2)(e) Supervising employees doing a technical job under training

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure to supervise its employees doing a technical job under training in accordance with Regulation 11(2)(e).

Supervision records were sighted within TRIM under the individual's supervision folder and the relevant monitoring spreadsheet updated in TRIM as well. The monitoring spreadsheets were split into several categories including vetting and allocation, processing, engineering, inspections and code compliance. Categories such as inspections were always conducted under direct supervision in the first instance.

Supervision records sighted included details relating to reasons for decisions, recorded reasons for why any aspect of the work was not included and any training recommendations. These recommendations were sighted as being included on individual training plans.

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).

Sighted qualifications, relevant training and experience for employees of varying lengths of employment were seen to be recorded within individual training folders in TRIM. Relevant qualifications or certifications were also listed under the Regulation 18 spreadsheet of the B-660 document, which linked back to the individuals training folder in TRIM.

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).

Professional development entries were filed within individual employees' competency folders in TRIM using the B-622 'BCA Professional Development Log' form. These outlined relevant continuous improvement records, newsletters read with topics covered, issue numbers of readings, the content of internal trainings attended, specifics of meetings attended (eg. questions raised) and also professional organisations that the employee was a part of.

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 was observed to have contractual agreements with about six processing contractors, of which two of these contractors also conducted inspections for the BCA. The BCA also had a specialist review panel agreement for

engineering services with about seven contractors for specialised areas such as acoustics, geotechnical, civil, mechanical and specialist fire protection.

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).

Relevant managers or delegated team leaders assessed contractor's suitability by considering factors such as relevant experience, competencies, past performance, professional affiliations, accreditation status, provided references and also certifications. This was completed on the 'Contractor Evaluation' Form and evidence was saved into the contractor's folder in TRIM. Reasons for choosing or not choosing a contractor were recorded on the Contractor Evaluation Form.

Regulation 12(2)(b) Engaging contractors

Observations and comments, including good practice and performance

The BCA had a procedure for engaging contractors in accordance with Regulation 12(2)(b) but this had not been appropriately documented as the BCA had not clearly outlined the methodology used when engaging contractors, such as the specified locations of related templates or forms used and how this would be recorded to ensure that all parts of the documented procedure had been undertaken.
GNC 10 – To be resolved.

An example was sighted which included the use of the BCA's 'Engaging Contractors' procedure in combination with the 'Request for Procurement for Engaging Contractors' procedure. The relevant records were observed and seen to be appropriate, such as the completion of the 'New Supplier Request Form', completed 'Due Diligence' forms, the completed online 'Contract Set Up' form, email correspondence demonstrating relevant approvals, sign-off stages and appropriate filing of documents into folders set up in TRIM.

General Non-compliance No. 10

Breach of requirement:	Regulation 12(2)(b)						
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's documented procedure did not clearly outline the methodology used when engaging contractors, such as the specified locations of related templates or forms used and how information would be recorded to ensure all parts of the documented procedure had been undertaken.							
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:						7 July 2023	
EVIDENCE							
Plan of action <i>(To be provided by BCA):</i>							

Proposed evidence of implementation <i>(To be provided by BCA):</i>	
Evidence of implementation and discussion:	
NON COMPLIANCE CLEARED	
Signed:	Date: Click or tap to enter a date.

Regulation 12(2)(c) Making written or electronic agreements with contractors
Observations and comments, including good practice and performance
<p>The BCA had appropriately documented its procedure for making written or electronic agreements with contractors in accordance with Regulation 12(2)(c).</p> <p>Two of the BCA's contractors (Solutions and ComplyNZ) were found to be working under both the authorities' quality assurance system and their own quality assurance system, depending on the type of work being conducted (i.e. Inspections and processing). The BCA had not made it clear within the contracts what the requirements were with relation to their expectations for contractors working under the BCA's system vs AOB's system.</p> <p>For contractors working within the BCA system, the BCA had not appropriately defined within their contracts (eg. DNA Building Compliance, ComplyNZ for inspections) their requirements for competence assessments and supporting information so the BCA is able to assess the competence of contractors working within its system e.g. specifying a competency assessment was to be provided by a contractor, accompanied by an appendix 2 for the competence assessor. After induction, the BCA would then need to assess the competence of the person working within their system, in part by using a competence assessment generated while the contractor was working under another system and in part by assessing them working within their system).</p> <p>For contractors working within the BCAs system, contractual agreements were not clear as to the delegations that applied to the contractors.</p> <p>GNC 11 – To be resolved.</p>

General Non-compliance No. 11

Breach of requirement:	Regulation 12(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							
<ul style="list-style-type: none"> Two of the BCA's contractors (Solutions and ComplyNZ) were found to be working under both the authorities' quality assurance system and their own quality assurance system, depending on the type of work being conducted (i.e. Inspections and processing). The BCA had not made it clear what the requirements were with relation to their expectations for contractors working under the BCA's system vs AOB's system. For contractors working within the BCA system, the BCA had not appropriately defined within their contracts or elsewhere the requirements for contractor induction, the provision of competence assessments and supporting information by the contractor and the assessment of competence by the BCA. For contractors working within the BCAs system, contractual agreements were not clear as to the delegations that applied to the contractors. 							

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:	7 July 2023
EVIDENCE	
Plan of action <i>(To be provided by BCA):</i>	
Proposed evidence of implementation <i>(To be provided by BCA):</i>	
Evidence of implementation and discussion:	
NON COMPLIANCE CLEARED	
Signed:	Date: Click or tap to enter a date.

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 appropriately filed contractor qualifications within the contractor folders in TRIM. Regulation 18 qualifications for contractors were also outlined on the B-660 document, which linked back to the corresponding qualification or certificate in the contractor's folder.

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 delegated team leader was responsible for undertaking monitoring using the 'Review of Contractors Performance' Form and assessing against the KPIs and criteria outlined on the 'Contractor Assessment Grade' form. The frequency of this assessment was appropriate to the nature, scope and volumes of work performed.

Examples were sighted of monitoring and reviews conducted quarterly and filed appropriately within the contractors TRIM folder. Reviews included responses from the contractors for any issues identified, as well as the BCA's response back to the contractor. The monitoring spreadsheet was sighted, which listed out items such as the frequency of contractor monitoring reviews, when reviews had been conducted, when future reviews would be conducted or a comment if no work had been allocated to the contractor for the quarter.

The BCA had not undertaken performance reviews using the B-619 section 6 'Review of Contractor's Performance' form, for inspections contractors as per their documented procedure for contractors.

GNC 12 – To be resolved.

As per Recommendation R5, the BCA is recommended to carryout on-site technical and procedural audits on the contracted inspectors to ensure a consistent technical outcome is achieved and the

BCA's procedures are consistently implemented.

General Non-compliance No. 12

Breach of requirement:	Regulation 12(2)(e)						
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 undertaken performance reviews for inspections contractors using the B-619 section 6 'Review of Contractor's Performance' form, as per their documented procedure for contractors.							
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:						7 July 2023	
EVIDENCE							
Plan of action <i>(To be provided by BCA):</i>							
Proposed evidence of implementation <i>(To be provided by BCA):</i>							
Evidence of implementation and discussion:							
NON COMPLIANCE CLEARED							
Signed:				Date: Click or tap to enter a date.			

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 for contractor technical staff working within their own system had been completed and were filed under the contractor's folder in TRIM. The competency assessments were also listed out for each contractor in the B-660 form, which linked back to the file in TRIM.	
Refer to Regulation 12(2)(c) where competence for technical staff working within the BCA's system had not been appropriately considered or assessed.	

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 a documented procedure for identifying employees and contractors who are competent to provide technical leadership in accordance with Regulation 13(a), however the procedure for technical leadership did not provide for how or when technical leadership may be sought by BCA staff.	

The documented procedure did not clarify how the technical leadership that was provided to the staff would be recorded. It is recommended that the BCA includes these considerations within the procedure to help the BCA staff understand the process and to achieve consistency in recording when obtaining technical advice.

See Recommendation R9.

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 its employees and contractors the powers and authorities to enable them to provide technical leadership in accordance with Regulation 13(b).

Regulation 14

Ensuring necessary (technical) resources

Observations and comments, including good practice and performance

The BCA had 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.

The Building Inspection Equipment Register had been set out logically with links to records filed appropriately in TRIM. Reasons were recorded where actions had been taken outside of the standard procedure. The Building Inspection Equipment Register included items such as equipment identifiers, test due dates, links to records for audits/tests completed and appropriate certificates, re-test results and dates and appropriate comments regarding the steps that had occurred.

The BCA had documented the locations of technical documents and superseded documents were archived as appropriate.

Sighted contracts, as well as the documented procedure indicated that the BCA would provide contractors with the necessary technical equipment to enable them to perform building control functions effectively. However, the information provided indicated that contractors were providing their own equipment when conducting inspections and there was no documented methodology for the BCA to ensure that the equipment was considered appropriate.

GNC 13 – To be resolved.

General Non-compliance No. 13

Breach of requirement:	Regulation 14						
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							
Sighted contracts, as well as the documented procedure indicated that the BCA would provide contractors with the necessary technical equipment to enable them to perform building control functions effectively. However, in many cases, contractors were providing their own equipment when conducting inspections and there was no documented methodology for the BCA to ensure that the equipment was considered appropriate.							

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:	7 July 2023
EVIDENCE	
Plan of action <i>(To be provided by BCA):</i>	
Proposed evidence of implementation <i>(To be provided by BCA):</i>	
Evidence of implementation and discussion:	
NON COMPLIANCE CLEARED	
Signed:	Date: Click or tap to enter a date.

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	
<p>The BCA had appropriately documented in the structure, the reporting lines and accountabilities, and, any relationships the authority had with external organisations in accordance with Regulation 15(1)(b).</p> <p>The BCA's organisational structure had clearly outlined internal and external relationships, including current vacancies.</p>	

Regulation 15(2)	A building consent authority must record in the structure
Observations and comments, including good practice and performance	
<p>The BCA had not appropriately documented the roles, responsibilities, powers, authorities and any limitation on powers and authorities for its employees and contractors performing building control functions organisational structure in accordance with Regulation 15(2), where the documented procedure did not refer to delegations recorded under the document named 'Christchurch City Council Infrastructure, Planning & Regulatory Services Group – Building Act 2004: Sub delegations', which is specific to the BCA roles.</p> <p>GNC 14 - Resolved during the assessment. The revised documented procedure was provided and the changes addressed the issue raised.</p> <p>The implemented sub delegations register (referred to above) had not delegated assigned powers and authorities relating to section 95A. This error was identified in an audit in December 2022 and a</p>	

continuous improvement entry had been raised.

GNC 14 - Resolved during the assessment. The revised sub delegations register had appropriately delegated powers and authorities relating to section 95A.

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 its procedure for allocating every application for building consent, and building consent amendment its own unique identification in accordance with Regulation 16(1).

Applications were named as per the 'Naming Conventions' document, which outlined that building consents have an overall format of [BCN#][subject](modifier)(detail). All building consents were allocated a unique number using the Connect system. Staged building work was given a unique BCN number for each stage. Building consents with amendments were named as an amendment and included the amendment number.

Regulation 16(2)(a)

System for ensuring that all information relevant to an application for a building consent is put on the application's file

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for ensuring that all information relevant to an application for a building consent is put on the application's file in accordance with Regulation 16(2)(a).

All relevant documentation on an application's file was stored under the building consents corresponding TRIM folder.

Regulation 16(2)(b)

System for ensuring that all information relevant to an application for a building consent is kept in a way that makes it readily accessible and retrievable

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure for ensuring that all information relevant to an application for a building consent is kept in a way that makes it readily accessible and retrievable in accordance with Regulation 16(2)(b).

When an application was received, this was entered into the Connect system with a unique identifier also set up in TRIM, where all relevant documents are filed.

Regulation 16(2)(c)**System for ensuring that all information relevant to an application for a building consent is stored securely****Observations and comments, including good practice and performance**

The BCA had appropriately documented its procedure for ensuring that all information relevant to an application for a building consent was stored securely in accordance with Regulation 16(2)(c).

The BCA outsourced management of their data to an external database organisation, where daily backups were conducted. In a disaster recovery scenario, the BCA had prepared laptops for remote use to allow staff to quickly adjust to working from home.

Files were able to be soft deleted but this required recorded reasons for any deletions. These files would then go through a second check by another person to validate the reasons for deleting, before permanently removing a file from the system. For example, deleting a file due to unintentionally being uploaded twice. Through a contracted external database organisation, all changes made were tracked and audits on data recovery were conducted.

Security measures included multifactor authentication, not being able to use the network outside of New Zealand, training on phishing at induction, test phishing emails being sent out to staff periodically, training for those who fail phishing tests and relevant patching of systems where gaps were identified.

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. 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 sighted quality policy included objectives such as having an appropriately documented and effectively implemented quality assurance system, ensuring sufficient skills and resources to undertake statutory functions and having employees and contractors with appropriate building control competencies and qualifications.

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).

Monthly BCA Leadership Team Meeting minutes were filed appropriately. Meeting minutes covered action items, outcomes of previous actions, notable continuous improvement entries, complaints, compliments, internal updates, training needs and audit or peer review actions required considerations towards individual regulations and the quality policy. These meetings also provided consideration of the data analysis conducted as part of the monthly 'Quality Assurance Monitoring and TA Report', which considered the monthly statistics relating to compliance KPIs.

The building consent unit also conducted and recorded outcomes from monthly meetings for the review of team management and operational performance, where considerations such as hiring, health and safety, training, significant consents, complaints/compliments and notable continuous improvement records were considered.

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).

The BCA was observed to make frequent use of their continuous improvement log. Continuous improvement entries were raised through the submission of the online 'Continuous Improvement Request' form which was made readily available to staff. The completion of this form automatically generated an entry into the Continuous Improvement Log and a notification was sent to the QA analyst, who would allocate responsibility for the entry as appropriate and monitor the timeframes for completion.

The Continuous Improvement Log was seen to outline logical steps in the process towards reaching a resolution and the following monitoring of the effectiveness for actions taken. Where an audit was specified as a monitoring method, the continuous improvement entry would link to the assigned audit and any resulting new continuous improvement entries.

Relevant documents were filed appropriately in TRIM. Appropriate reasons for delays were recorded. Final comments on continuous improvement entries provided a concise summary of the stages of progress, as well as the overall result.

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).

The BCA had a schedule of system and technical audits which covered all building control functions. Audits were evenly spread throughout the year and audit spreadsheets linked to the associated filed

audit records. Where an audit had been missed, reasons for this occurring were recorded and the new timeframe to complete the audit was set.

System audits worked through each procedure with consideration as to each relevant section of the Regulations, using several examples where applicable. Audits that resulted in recommendations and non-compliances then had these raised in the Continuous Improvement Log.

Technical audit samples included a range of competencies and technical categories. Reasons for decisions, questions raised, specific case details, outcomes and any follow up actions were all recorded to a high level of detail. Technical audits also connected to individual training plans and continuous improvement records where relevant.

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).

Conflicts of interest were generated using an online form which would create a notification for the relevant manager, allowing these to be assessed and have an appropriate strategy implemented. Once this was submitted by the manager (the head of building consenting for the BCA), the form would be submitted for entry into the Conflict of Interest Register and a notification sent to the QA team.

Sighted examples showed appropriate plans and reasons for decisions, as well as timely follow ups as per the documented procedure. Links to relevant filed documents were included within conflict of interest entries. Where a conflict of interest entry had changed, detailed explanations were provided to describe this.

While, no relevant examples were noted of building consent applications for council owned buildings, the procedure was not specific regarding how building consents for council buildings would be managed and if the BCA considered these to be a conflict of interest (as suggested by the MBIE guidance). It is recommended that the BCA more clearly outlines in its procedure how the BCA would manage organisational and management conflicts of interest, including governance pressures and building consent applications for council buildings.

See Recommendation R10.

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

Observations and comments, including good practice and performance

The BCA had appropriately documented its procedure in its quality assurance system, for communicating with internal and external persons in accordance with 17(2)(j).

Communication methods and relevant parties were clearly outlined within the documented procedure. The BCA communicated by a number of processes such as consumer information online, inquiries, complaints, compliments, fortnightly and monthly meetings, continuous improvement entries and audit records.

Regulation 17(3) A quality manager

Observations and comments, including good practice and performance

The BCA had appointed a Quality Manager, named as Andrew Wells in its quality assurance system in accordance with Regulation 17(3).

Regulation 17(3A)(a) Complaints about building practitioners – who are practitioners of or within an occupation or profession

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 makes whenever they appear to it necessary or desirable, complaints to relevant occupational or professional authorities about practitioners, who are practitioners of or within an occupation or profession in accordance with Regulation 17(3A)(a).

No examples of complaints regarding building practitioners had been raised since the last assessment but several examples of concerns raised had been appropriately recorded with links to the associated files or correspondence in TRIM.

Regulation 17(3A)(b) Complaints about building practitioners – who are not its employees or contractors

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 makes whenever they appear to it necessary or desirable, complaints to relevant occupational or professional authorities about practitioners, who are not its employees or contractors in accordance with Regulation 17(3A)(b).

The procedures outlined examples of building practitioners, the process around managing the complaints register and allocation of complaints for review, as well as the method for liaising with appropriate professional bodies.

Regulation 17(3A)(c) Complaints about building practitioners – whose work it scrutinises, or otherwise becomes aware of, in performing its building control functions

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 makes whenever they appear to it necessary or desirable, complaints to relevant occupational or professional authorities about practitioners, whose work it scrutinised, or otherwise became aware of, in performing its building control functions in accordance with Regulation 17(3A)(c).

No examples of complaints regarding building practitioners had been raised since the last assessment but the procedure outlined steps such as how to record the complaint or concern depending on the way this information was received, what kinds of evidence was appropriate, how to evaluate the evidence and seriousness, what professional bodies may be considered and how to determine whether to make a complaint.

Regulation 17(4)(a) A system for ensuring that its employees comply with the authority's quality assurance system
Observations and comments, including good practice and performance
<p>The BCA had appropriately documented its procedure for ensuring that its employees comply with the authority's quality assurance system in accordance with Regulation 17(4)(a).</p> <p>Sighted inductions, meeting minutes, strategic management reviews, conflict of interest entries, audit records, peer reviews and continuous improvement entries demonstrated variable ways in which the BCA ensured its employees complied with the BCA's quality assurance system.</p>

Regulation 17(4)(b) A system for ensuring that its contractors comply with a nominated quality assurance system
Observations and comments, including good practice and performance
<p>The BCA had appropriately documented its procedure for ensuring that its contractors complied with either, the authority's quality assurance system, or, the contractor's quality assurance system in accordance with Regulation 17(4)(b).</p> <p>The BCA had not ensured that contractors were either working within the BCAs system or their own.</p> <p>The BCA had not recorded communications with contractors using the BCAs policies, procedures and systems regarding the BCA's quality assurance system made as part of inductions.</p> <p>GNC 15 – To be resolved.</p>

General Non-compliance No. 15

Breach of requirement:	Regulation 17(4)(b)						
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 ensured that contractors were either working within the BCAs system or their own.</p> <p>The BCA had not recorded communications with contractors using the BCAs policies, procedures and systems regarding the BCA's quality assurance system made as part of inductions.</p>							
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:					7 July 2023		
EVIDENCE							
Plan of action <i>(To be provided by BCA):</i>							
Proposed evidence of implementation <i>(To be provided by BCA):</i>							
Evidence of implementation and discussion:							

NON COMPLIANCE CLEARED	
Signed:	Date: Click or tap to enter a date.

Regulation 17(5)(a) Strategic management reporting and review

Observations and comments, including good practice and performance

The BCA had appropriately documented its system for annually (or more frequently) reviewing its quality assurance system in accordance with Regulation 17(5)(a).

The BCA had held an Annual Strategic Management Review, which was conducted in August 2022. A 6 monthly interim meeting had also been conducted.

The review of the quality assurance system considered several areas such as the appropriateness and effectiveness of areas such as quality processes, internal audits and continuous improvement, as well as some further analysis such as the breakdown of particular audit or continuous improvement findings.

Some other areas considered within the review included considerations towards the appropriateness and effectiveness of the management of conflicts of interest and communications regarding quality assurance system matters. Overall council goals with regards to the BCA's KPI results were also considered.

Regulation 17(5)(b) Strategic management reporting and review

Observations and comments, including good practice and performance

The BCA had appropriately documented its system for annually (or more frequently) making appropriate changes in the quality assurance system in accordance with Regulation 17(5)(b).

The Annual Strategic Management Review conducted by the BCA considered how the quality assurance system was being applied with regards to the appropriateness and effectiveness of its process to review and make changes. Examples provided included the process of actions being raised to make changes to the quality assurance system, such as through the continuous improvement system, audit system and through meetings, as well as how these alterations were implemented.

Regulation 18(1) Technical qualifications

Observations and comments, including good practice and performance

The BCA had appropriately documented its system for ensuring that each employee and contractor who performs the authority's building control functions by doing a technical job.

All BCA staff engaged in a technical role either held or were working towards a technical qualification in accordance with Regulation 18. Qualifications being worked towards or already achieved were listed in the B-660 document with links to the appropriate qualification or evidence of any ongoing training.

Regulation 18(3) 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).

One recent example of an exemption approval was sighted. Relevant correspondence with appropriate reasons for the exemption had been filed and the exemption was listed on the B-660 Form as per the documented procedure.

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 7(2)(d)(i)** - Examples were observed where residential applications were lodged and the statutory clock had been started on the day the vetting was completed, rather than the date that the complete application had been received. It is recommended that the BCA ensures that the clock is started on the date the complete application is received.
- R2 Regulation 7(2)(d)(iv)** - Within the review of category R1 processing records, some isolated issues relating to insufficient recording of reasons for decision and the measuring of building element compliance were identified. The BCA is recommended to ensure that processing records are appropriate to the scope of the application.
- R3 Regulation 7(2)(d)(v)** - Within the review of completion of the B100R (Res Processing Sheet - Summary Sheet) it was identified that the BCA was not consistently completing/recording the required prompt for the statutory clock management. The BCA is recommended to ensure that this is consistently completed for ease of visibility of the job status.
- R4 Regulation 7(2)(d)(v)** - It is recommended that the BCA outlines the location that reasons for decisions regarding lapsing date extensions are recorded, as this was not specified within the documented procedure.
- R5 Regulation 7(2)(e) & Regulation 12(2)(e)** - The BCA is recommended to carry out on-site technical and procedural audits on their contracted inspectors to ensure that an appropriate and consistent technical outcome is achieved and the BCA's procedures are consistently implemented.
- R6 Regulation 7(2)(f)** - It was advised that the system would allow for the statutory clock to be suspended if no final inspection had been carried out. It is recommended that the BCA provides training to staff to clarify that a requirement for a final inspection is not deemed to be "further reasonable information" under Section 93(4) and therefore the CCC clock cannot be stopped while waiting for a final inspection.
- R7 Regulation 7(2)(f)** - The BCA is recommended to ensure the CCC assessor is selecting the correct drop down reason for decision box on the CC Findings B-203 form when accepting a technical document which is required to be reviewed and accepted by a person with a Regulation 18 qualification.
- R8 Regulation 7(2)(f)** - The BCA is recommended to ensure that a final check is carried out on compliance schedules before issuing to ensure that its procedures have been fully and effectively implemented.
- R9 Regulation 13(a)** - The documented procedure did not clarify how the technical leadership that was provided to the staff would be recorded. It is recommended that the BCA includes these considerations into the procedure to help the BCA staff understand the process and to achieve consistency in recording when obtaining technical advice.
- R10 Regulation 17(2)(i)** - The procedure was not specific regarding how building consents for council buildings would be managed and if the BCA considered these as a conflict of interest (as suggested by the MBIE guidance). It is recommended that the BCA more clearly outlines how the BCA would manage organisational and management conflicts of interest including governance pressures and building consents for council buildings.

SUMMARY OF ADVISORY NOTES

A number of advisory notes were discussed during the assessment. These have not been included in this report at the request of the BCA.

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)	Choose item.													
7(2)(b)	Choose item.													
7(2)(c)	Choose item.													
7(2)(d)(i)	Choose item.										1			
7(2)(d)(ii)	Choose item.													
7(2)(d)(iii)	General	1			Y			Y						
7(2)(d)(iv)	Choose item.										1			
7(2)(d)(v)	General	2			Y			Y			2			
7(2)(e)	Choose item.										1			
7(2)(f)	General	3			Y		Y	N	21 July 2023		3			Parts A and B remain unresolved but part C was resolved on site.
7(2)(g)	General	4			Y			N	21 July 2023					
7(2)(h)	General	5			Y			N	21 July 2023					
Regulation 8														
8(1)	General	6		Y	Y	Y		Y						
8(2)	Choose item.													
Regulation 9														
9	General	7			Y			Y						
Regulation 10														
10(1)	Choose item.													
10(2)	Choose item.													
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)	General	8			Y			Y						
11(2)(c)	Choose item.													
11(2)(d)	General	9			Y			Y						
11(2)(e)	Choose item.													
11(2)(f)	Choose item.													
11(2)(g)	Choose item.													
Regulation 12														
12(1)	Choose item.													

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(2)(a)	Choose item.													
12(2)(b)	General	10	Y	Y				N	21 July 2023					
12(2)(c)	General	11	Y	Y	Y			N	21 July 2023					
12(2)(d)	Choose item.													
12(2)(e)	General	12			Y			N	21 July 2023		1		This recommendation is the same as that which is listed under Regulation 7(2)(e)	
12(2)(f)	Choose item.													
Regulation 13														
13(a)	Choose item.										1			
13(b)	Choose item.													
Regulation 14														
14	General	13			Y			N	21 July 2023					
Regulation 15														
15(1)(a)	Choose item.													
15(1)(b)	Choose item.													
15(2)	General	14	Y	Y	Y			Y						
Regulation 16														
16(1)	Choose item.													
16(2)(a)	Choose item.													
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.													
17(2)(c)	Choose item.													
17(2)(d)	Choose item.													
17(2)(e)	Choose item.													
17(2)(h)	Choose item.													
17(2)(i)	Choose item.													
17(2)(j)	Choose item.													
17(3)	Choose item.													
17(3A)(a)	Choose item.												Regulations 17(3A)(a) to (c) is considered as ONE GNC only regardless of which sub regulation(s) the GNC(s) are applied to.	
17(3A)(b)														
17(3A)(c)														
17(4)(a)	Choose item.													
17(4)(b)	General	15			Y			N	21 July 2023					
17(5)(a)	Choose item.													
17(5)(b)	Choose item.													
Regulation 18														
18(1)	Choose item.													
18(3)(a)	Choose item.												Regulations 18(3)(a) and (b) is considered as ONE GNC only regardless of which sub regulation(s) the GNC(s) are applied to.	
18(3)(b)														