IANZ		
CONDITIONS CLEARED		
INITIALS:	LLC	
DATE:	30 September 2021	



The NZ mark of competence Tohu Matatau Aotearoa

BUILDING CONSENT AUTHORITY ACCREDITATION AMENDED ASSESSMENT REPORT

Christchurch City Council

Amendment date: 8 Sept 2021

Christchurch City Council Building Consent Authority	Amended report (08/09/2021)	16-19, 22-26 March 2021
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INTRODUCTION

This amended report relates to the on-site accreditation assessment of the Christchurch City Council Building Consent Authority (BCA) which took place during 16-19 and 22-26 March 2021 to determine compliance with the requirements of the Building (Accreditation of Building Consent Authorities) Regulations 2006 (the Regulations).

In this amended report

- GNC 3 Finding 1 with respect to RFI 6(b)(c)(d) has been removed.
- GNC 3 Findings 1 and 2 (previously Findings 2 and 3) wording has been revised and implementation is also discussed.
- GNC 9 (Reg 14) changed to resolved during assessment

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 noncompliance/s, 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.

In the **second amendment** of this report, GNC 3 had been reworded as per the outcome of the appeal process and clearance dates have been amended.

Details of the changes made in this second amendment are as follows:

- The wording of the finding in relation to processing building consent applications observations on page 10 has been amended to reflect the outcome of the appeal
- The Records of Non-Compliance on page 25 and 26 are amended with new dates when the BCA should submit its action plan and proposed evidence of implementation for review, and the final clearance date for GNC 3 & 5. The dates are extended from the date the appeal was finalised.
- The summary for GNC 3 on page 30 in the summary table has been amended.
- The clearance dates for GNCs 3 & 5 on page 30 in the summary table have been updated.

In the third amendment of this report, the action plan and proposed evidence of implementation had been amended as the outcome of the subsequent appeal for GNCs 3 and 5. Details of the updated wording can be found on pages 25 and 26.

ASSESSMENT SUMMARY

This accreditation assessment found that the BCA was non-compliant with a number of accreditation requirements as detailed below. The non-compliances identified must be addressed before accreditation is continued.

The assessment identified that the BCA was methodically delivering regulatory requirements according to a comprehensive and mature Quality System, and achieving excellent outcomes. Descriptions of Specified Systems and the recording of relevant/specific Performance Standards on Compliance Schedules were to be improved.

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.

Addressing non-compliances identified during the assessment

Action Plan: Your non-compliances with the Regulations have been summarised and recorded in detail in this report. Please complete the Record of Non-compliance table/s detailing your proposed corrective actions and the evidence that will be provided, and forward a copy to IANZ.

Evidence of addressing non-compliances: Evidence, as described in your action plan, must be supplied to IANZ to demonstrate that you have addressed your non-compliances.

To maintain accreditation you must provide evidence of the actions taken to clear non-compliance to IANZ within the required timeframe. Please allow at least 10 working days for IANZ to respond to any submitted material and allow sufficient time after submission of your evidence in case further evidence is required.

If you do not agree with the non-compliances identified, or if you need further time to address noncompliances, 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.

If you have a complaint about the assessment process, please refer the BCA Accreditation disagreements guidance which can be found here.

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 for March 2023. You will be formally notified of your next assessment six weeks prior to its planned date.

BCA AND ASSESSMENT DETAILS

ORGANISATION DETAILS										
Organisation: Christchurch City Council Building Consent Authority										
Address for service: PO Box 73013 Orchard Road		ad Christchurch 8154 New Zealand								
Client Number: 74	86	Accred	itatio	n N	umber:	82	2			
Chief Executive:		Dawn E	Baxen	dale)					
Chief Executive Contact Deta	ils:	Dawn.b	axen	dale	@ccc.g	ovt.n	<u>z</u>			
BCA Responsible Manager:		Robert	Wrigh	nt						
BCA Responsible Manager C	ontact Details:	Robert.	wrigh	t@c	cc.govt.	nz				
BCA Authorised Representati	ive:	Robert	Wrigh	nt						
BCA Authorised Representati	ive Contact Details:	Robert.	<u>wrigh</u>	t@c	cc.govt.	<u>nz</u>				
BCA Quality Manager:		Andrew	Well	S						
BCA Quality Manager Contac		Andrew	.wells	<u>s@c</u>	cc.govt.	<u>nz</u>				
Number of BCA FTEs Total FTEs should = technical FTEs	Technical	133		Adı	min sup _l	port			13	
+ admin FTEs + vacancies	Vacancies (Technical)	9		Vac	cancies (Admi	n)		0	
				В	uilding	Cons	sents			
		R1	196	7	R2	99	6	R3	863	
BCA Activity during the previ	ous 12 months	C1	329	9	C2	22	6	C3	172	
Box Activity during the previ	ous 12 monuis	CCCs					4034	4		
		New co	mplia	nce	schedu	ıles	134			
		BCA No	tices	to F	Fix		25			
ASSESSMENT TEAM										
Assessment Date:		16 March 2021 to 26 March 2021								
Lead Assessor:		Carolyn Osborne								
Lead Assessor Contact Details:		cosborne@ianz.govt.nz								
Technical Experts:		Colin Pickering, Phil Judge, Luke Hampton (obs) Mike Reedy, Jennifer Clarke								
MBIE observer:		Mike Re	eedy,	Jen	nifer Cla	arke				
ASSESSMENT FINDINGS										
		This assessment:		Last assessment:						
Total # of "serious" non-compliances:		0		0						
Total # of "general" non-compliances:		12			19					
Total # of non-compliances outstanding:		3			4					
Recommendations:		1			10					
Advisory notes:		0 3 24 May 2021								
Date clearance plan required		-								
	Date non-compliances must cleared: 26 July 2021									
NEXT ASSESSMENT	ant times			Dau	tine De		20112			
Recommended next assessment type:				Kou	tine Re Marcl			ent		
Recommended next assessm IANZ REPORT PREPARATION					Marci	1 202	. 3			
Prepared by: Carolyn Osborn		Signatu	re: (() .		=				
Checked by: Adrienne Woollard		Signatu	re:	tw.	M					
IANZ Report Preparation Date:		14 April								
Amended report prepared by: Carolyn Osborne		Signatui Signatui	<u>e:</u> (0.						
Amended report checked by: Adrienne Woollard		Signatu	re: A	Wn	M					
IANZ Amended Report Preparation Date:		23 April	2021							

Amended by: Lesley Chen Amended GNCs as a result of appeal	Date: 25 June 2021	Signature:	
Checked by: Adrienne Woollard	Date: 27 June 2021	Signature: Awww	
Amended by: Lesley Chen Amended action plans as a result of appeal response	Date: 8 September 2021	Signature:	
Checked by: Adrienne Woollard	Date: 11 September 2021	Signature:	

ASSESSMENT OBSERVATIONS

REGULATION 6A NOTIFICATION REQUIREMENTS

Non-compliance? Y/N	No	
Non-compliance number/s:	-	
Opportunities for improvement? Y/N	No	
Number of recommendations:	0	
Recommendation number/s:	-	
Number of advisory notes:	0	
Advisory note number/s:	-	
Observations and comments, including good practice and performance		
Procedures addressed requirements and were effectively implemented.		

REGULATION 7 PERFORMING BUILDING CONTROL FUNCTIONS

Regulation 7(2)(a): providing consumer information

Non-compliance? Y/N	No	
Non-compliance number/s:	-	
Opportunities for improvement? Y/N	No	
Number of recommendations:	0	
Recommendation number/s:	-	
Number of advisory notes:	0	
Advisory note number/s:	-	
Observations and comments, including good practice and performance		
Public information addressed requirements.		

Regulation 7(2)(b)-(c), and 7(2)(d)(i): receiving, checking and recording applications

Non-compliance? Y/N	Yes
Non-compliance number/s:	GNC 1. To be resolved. GNC 2. Resolved during assessment
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-

Observations and comments, including good practice and performance

7(2)(b) Receiving.

Procedures (Form) for making application for Solid Fuel Heaters did not meet the requirements of the Forms Regulations. GNC 1. To be resolved.

7(2)(c) Checking applications for completeness

Procedures were inconsistent when discussing the initiation of the statutory clock. GNC 2. Resolved during assessment. Despite the previous finding implementation was effective.

7(2)(d)(ii) Recording applications in system

Procedures addressed requirements and were effectively implemented.

Regulations 7(2)(d)(ii): assessing (categorising)

Non-compliance? Y/N	No	
Non-compliance number/s:	-	
Opportunities for improvement? Y/N	No	
Number of recommendations:	0	
Recommendation number/s:	-	
Number of advisory notes:	0	
Advisory note number/s:	-	
Observations and comments, including good practice and performance		
Procedures addressed requirements and were effectively implemented.		

Regulations 7(2)(d)(iii): allocating applications

Non-compliance? Y/N	No	
Non-compliance number/s:	-	
Opportunities for improvement? Y/N	No	
Number of recommendations:	0	
Recommendation number/s:	-	
Number of advisory notes:	0	
Advisory note number/s:	-	
Observations and comments, including good practice and performance		
Procedures addressed requirements and were effectively implemented.		

Regulation 7(2)(d)(iv): processing building consent applications and Regulation 7(2)(e): planning inspections

Non-compliance? Y/N	Yes - See Record of Non-compliance for details	
Non-compliance number/s:	GNC 3. To be resolved	
Opportunities for improvement? Y/N	No	
Number of recommendations:	0	
Recommendation number/s:	-	
Number of advisory notes:	0	
Advisory note number/s:	-	
Observations and comments, including good practice and performance		

Observations and comments, including good practice and performance

Processing Procedures

Procedures addressed most requirements and implementation was appropriate in many instances.

Consideration of Specified Systems

Procedures did not explicitly require the BCA to request additional information on Specified Systems when the information provided was found to be absent, inaccurate or insufficiently detailed and project specific during processing, and therefore insufficient to make a decision on reasonable grounds. GNC 3 to be resolved.

Implementation was not effective where in several samples reviewed there was no evidence of recorded reasons of assessing the appropriateness of the performance standards for some of the specified systems, or of recording reasons for including performance standards that had not been provided by the applicant / designer. **GNC 3. To be resolved**.

Compiling Compliance Schedule Details

Procedures did not require the BCA to ensure that they required Performance Standard details including Inspection, Maintenance and Reporting information from the applicant when it was absent or found to be inaccurate during processing. GNC 3. To be resolved. Implementation was not effective where in several samples reviewed there was no evidence of recorded reasons of assessing the appropriateness of the performance standards for some of the specified systems, or of recording reasons for including performance standards that had not been provided by the applicant / designer. GNC 3. To be resolved.

Regulation 7(2)(d)(v): granting and issuing consents

Non-compliance? Y/N	Yes
Non-compliance number/s:	GNC 4. Resolved during assessment
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-

Observations and comments, including good practice and performance

Compliance with Form 5

Procedures did not discuss sending TA documents or other information to an applicant if/when they were received. s51(1)(3)(4). GNC 4. Resolved during assessment. Despite the previous finding implementation was effective.

Lapsing

Procedures addressed requirements and were effectively implemented

Compliance with statutory timeframes

Procedures addressed requirements and were effectively implemented.

Regulation 7(2)(e): planning, performing and managing inspections

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	

Inspections were effectively planned as part of processing.

Procedures addressed requirements and were effectively implemented.

Regulation 7(2)(f): code compliance certificates, compliance schedules and notices to fix

Non-compliance? Y/N	Yes - See Record of Non-compliance for details
Non-compliance number/s:	GNC 5. To be resolved
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-

Observations and comments, including good practice and performance

Application for a code compliance certificate

Procedures addressed requirements and were effectively implemented.

Consideration of information and issue of Code compliance certificates

Procedures and Implementation were not effective where the BCA was not seeking Technical Advice to make a technical decision to issue CCCs when appropriate. GNC 5 Procedure resolved. GNC 5. Implementation to be resolved.

Compliance schedules

Procedures addressed requirements.

Implementation was not effective where the BCA had inaccurately described Specified Systems in the following ways:

- Including numerous items in a description that were not accurate.
- Using examples instead of a description.
- Referencing numerous items when one was required.

GNC 5. To be resolved.

Implementation was not effective where the BCA was recording Performance Standards for Specified Systems that were not appropriate in the following ways:

- The BCA had referenced Code Clauses as Performance Standards that were not sufficiently specific to the Specified Systems e.g. referencing Code Clauses F8 3.1, F8 3.2 and F8 3.3 when the Specified Systems for Signs, Fire Alarm Call Points, Automatic Gates and Access Controlled Doors all have a relevant specific Performance Standard in SS1-13.
- The BCA had not recorded a "Version" number (year of issue) for a quoted standard.
- The BCA had often referenced a Performance Standard that contained many sections however they had not referenced the specific "Part" of the standard.

GNC 5. To be resolved.

24 month CCC decision

Procedures addressed requirements and were effectively implemented.

Compliance with statutory timeframes

Procedures for issuing a CCC within 20 working days did not discuss including Consents that had reached 24 months and the BCA now had to made a decision to issue/not issue a CCC as there had been no application for CCC. **GNC 5. Resolved during assessment.** Current procedures were effectively implemented however, going forward data would include Consents that had reached 24 months and there had been no decision to issue/not issue CCC as there had been no application by the Consent holder.

The procedures were not clear with respect to initiating the statutory clock. **GNC 5. Resolved during assessment.** Despite the previous finding implementation was effective.

Notices to fix

Procedures for issuing NTF required the BCA to record (on the B200 check-sheet) whether inspections can continue but there was no place on that check sheet to record that decision. **GNC 5. To be resolved.** Current procedures were effectively implemented.

Regulation 7(2)(g): customer inquiries

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	

Procedures addressed requirements and were effectively implemented.

Regulation 7(2)(h): customer complaints

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	

Procedures addressed requirements and were effectively implemented.

REGULATION 8 ENSURING ENOUGH EMPLOYEES AND CONTRACTORS

Regulation 8(1): forecasting workflow

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
Procedures addressed requirements and were effectively implemented.	

Regulation 8(2): identifying and addressing capacity and capability needs

Non-compliance? Y/N	Yes
Non-compliance number/s:	GNC 6. Resolved during assessment.
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	

Observations and comments, including good practice and performance

Procedures addressed requirements except the following:

Procedures did not address the requirement to record technical leadership or specialist experts the BCA would reasonably expect to need. GNC 6. Resolved during assessment.

Procedures did not address the requirement to record where there were any capacity and capability gaps. GNC 6. Resolved during assessment.

Implementation was effective.

REGULATION 9 ALLOCATING WORK

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
Procedures addressed requirements and were effectively implemented.	

REGULATION 10 ESTABLISHING AND ASSESSING COMPETENCY OF EMPLOYEES

Regulation 10(1): assessing prospective employees

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
Procedures addressed requirements and were effectively implemented.	

Regulation 10(2) and (3)(a)to (f): assessing employees performing building control functions

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
Procedures addressed requirements and were effectively implemented.	

REGULATION 11 TRAINING EMPLOYEES DOING A TECHNICAL JOB

Regulation 11(1) and (2)(a)-(d),(f) and (g): the training system

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
Procedures addressed requirements and were effectively implemented.	

ion 11(2)(e): supervising employees doing a technical job under training

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
Procedures addressed requirements and were effectively implemented.	

REGULATION 12(1) and (2)(a) to (f) CHOOSING AND USING CONTRACTORS

Non-compliance? Y/N	Yes
Non-compliance number/s:	GNC 7. Resolved during assessment GNC 8. Resolved during assessment.
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-

Observations and comments, including good practice and performance

12(2)(b) Engaging Contractors

Procedures did not prompt the BCA to consider the scope of services and deliverables required from a new contractor. **GNC 7. Resolved during assessment.** Despite the previous finding implementation was effective as the BCA was considering scope of services and deliverables during their process of engaging a new contractor.

12(2)(c) Contracts

Contracts did not include the contractors obligations with respect to internal and external communications including engagement with the media. **GNC 8. Resolved during assessment.** Going forward contracts would include this requirement.

REGULATION 13(a) and (b) ENSURING TECHNICAL LEADERSHIP

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
Procedures addressed requirements and were effectively implemented.	

REGULATION 14 ENSURING NECESSARY (TECHNICAL) RESOURCES

Non-compliance? Y/N	Yes - See Record of Non-compliance for details
Non-compliance number/s:	GNC 9. Resolved during assessment.
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-

Observations and comments, including good practice and performance

Procedures did not ensure calibration results would be accurately recorded (for Thermometers and Moisture Meters) in the record sheets. GNC 9. Resolved during assessment. The BCA developed appropriate new procedures during the assessment and reviewed their calibration records to ensure they were accurate.

REGULATION 15(1)(a) and (b) and (2): KEEPING ORGANISATIONAL RECORDS

Non-compliance? Y/N	Yes
Non-compliance number/s:	GNC 10. Resolved during assessment
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-

Observations and comments, including good practice and performance

15 (1) Organisational structure.

The organisation chart did not indicate that the BCA was part of a parent organisation (TA). GNC 10. Resolved during assessment.

Other than the previous find implementation of these requirements was effective.

REGULATION 16(1) and (2)(a) to (c): FILING APPLICATIONS FOR BUILDING CONSENT

Non-compliance? Y/N	Yes
Non-compliance number/s:	GNC 11. Resolved during assessment.
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-

Observations and comments, including good practice and performance

16(2)(a) Filed Records

Procedures did not describe where the BCA recorded the name and address of third parties performing building control functions on their behalf. GNC 11. Resolved during assessment. Despite the previous finding implementation was effective.

Procedures did not describe where the BCA recorded work it performed for others using its own policies procedures and systems. GNC 11. Resolved during assessment. Despite the previous finding implementation was effective.

REGULATION 17 ASSURING QUALITY

Regulations 17(1) and (2)(a): A quality assurance system that covers management and operations

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-

Observations and comments, including good practice and performance

Procedures addressed requirements and were effectively implemented. Where omissions were found they are addressed under their relevant regulation.

Regulation 17(2)(b) and (3): A policy on quality and a quality manager

No	
-	
No	
0	
-	
0	
-	
Observations and comments, including good practice and performance	
Procedures addressed requirements and were effectively implemented.	

Regulation 17(2)(c): Ensuring operation within any scope of accreditation

Non-compliance? Y/N	NA
Non-compliance number/s:	
Opportunities for improvement? Y/N	
Number of recommendations:	
Recommendation number/s:	
Number of advisory notes:	
Advisory note number/s:	
Observations and comments, including good practice and performance	
Not applicable	

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

Non-compliance? Y/N	Yes
Non-compliance number/s:	GNC 12. Resolved during assessment.
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-

Observations and comments, including good practice and performance

Procedures did not specify that the BCA would review performance against the Quality Policy (objectives). GNC 12. Resolved during assessment. Current procedures were effectively implemented.

Procedures did not specify the frequency of the BCA review of performance against the Quality Policy (objectives). GNC 12. Resolved during assessment. Current procedures were effectively implemented.

Regulation 17(2)(e) Supporting continuous improvement

Observations and comments, including good practice and performance	
Procedures addressed requirements and were effectively implemented.	

Regulation 17(2)(h): Undertaking annual audits

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
Procedures addressed requirements and were effectively implemented.	

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

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
Procedures addressed requirements and were effectively implemented.	

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

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
Procedures addressed requirements and were effectively implemented.	

Regulation 17(3A): Complaints about building practitioners

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	Yes
Number of recommendations:	1
Recommendation number/s:	R1
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments including good practice and performance	

Observations and comments, including good practice and performance

Procedures addressed requirements and were implemented.

It is recommended (R1) that the BCA ensures their staff raise/record concerns about practitioners not just full complaints.

Regulation 17(4): Compliance with a quality assurance system

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
Procedures addressed requirements and were effectively implemented.	

Regulation 17(5): Strategic management reporting and review

No	
-	
No	
0	
-	
0	
-	
Observations and comments, including good practice and performance	
Procedures addressed requirements and were effectively implemented.	

REGULATION 18 TECHNICAL QUALIFICATIONS

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
Procedures addressed requirements and were effectively implemented.	

RECORDS OF NON-COMPLIANCE

RECORD OF NON COMPLIANCE #:	GNC 1
Breach of requirement:	Regulation 7(2)(b)
Finding:	General Non-compliance
FINIDING DETAIL C	<u> </u>

FINDING DETAILS

The BCA's Application Form for Solid Fuel Heaters did not meet the requirements of the Forms Regulations.

BCA ACTIONS REQUIRED

Please analyse the cause of the above finding and then develop and implement an action plan to address the finding.

Please provide the action plan to IANZ for acceptance in the space provided in this report. Please provide details of the records of the evidence that will be supplied to address the non-compliance in the space provided.

Once the action plan and proposed evidence has been accepted by IANZ, and implemented by the BCA, please provide complete evidence to demonstrate that the findings have been addressed no later than the "Date final evidence of implementation is required from BCA" indicated below.

IMPORTANT DATES	
Plan of action from BCA due by:	24/05/2021
All action plans accepted by IANZ:	27/04/2021
Date final evidence of implementation is required from BCA:	9/07/2021
Final date non-compliance to be cleared by:	26/07/2021

EVIDENCE

Plan of action (To be provided by BCA):

The online application form summary for Solid Fuel Heaters to be updated to ensure the requirements of the Forms Regulations are included

Proposed evidence of implementation (To be provided by BCA):

A copy of a submitted application form summary is supplied.

Evidence of implementation and discussion:

01/07/2021 - BCA submitted updated form 2. Forwarded to TE for review as TE notes did not indicate what was incorrect about the form itself.

01/07/2021 - TE Reviewed, and responded with - Application summary Streamline Solid fuel heater B-002he LU 290621 LR 290621 v2. I assume that this now replacing the stream line application B-064. The application summary Streamline Solid fuel heater B-002he LU 290621 LR 290621 v2. Appropriately now includes the following Form 2 deficiencies of the stream line application B-064.

- Now references Form 2
- Now references Act section 45

However the application summary Streamline Solid fuel heater B-002he LU 290621 LR 290621 v2. Still does not provide for recording Compliance schedule information such as specified systems and performance standards as required by s 45 (1) (g) and prescribed form 2, that could be required if the installation was in a commercial building.

This could not be cleared.

IANZ forwarded response to BCA to revise.

02/07/2021 - BCA submitted response questioning that the above was not discussed during the assessment. Forwarded to TE to review.

05/07/2021 - TE Reviewed and responded that it was still not appropriate. IANZ responded back to BCA to request for further information.

06/07/2021 – BCA submitted further information including screenshots from the application portal online. Deemed appropriate to clear the forms reviewed during the assessment in relation to the noncompliance raised.

NON COMPLIANCE CLEARED	
Signed:	Date: 6/07/2021

RECORD OF NON COMPLIANCE #:	GNC 3
Breach of requirement:	Regulation 7(2)(d)(iv)
Finding:	General Non-compliance
FINDING DETAILS	

1 Procedures did not explicitly require the BCA to request additional information on Specified Systems when the information provided was found to be absent, inaccurate or insufficiently detailed and project specific during processing, and therefore insufficient to make a decision on reasonable grounds.

Implementation was not effective where in several samples reviewed there was no evidence of recorded reasons of assessing the appropriateness of the performance standards for some of the specified systems, or of recording reasons for including performance standards that had not been provided by the applicant / design.

2 Procedures did not require the BCA to ensure that they required Inspection, Maintenance and Reporting information from the applicant when it was absent or inaccurate during processing.

Implementation was not effective where in several samples reviewed there was no evidence of recorded reasons of assessing the appropriateness of the proposed Inspection, Maintenance and Reporting information for some of the specified systems.

BCA ACTIONS REQUIRED

Please analyse the cause of the above finding and then develop and implement an action plan to address the finding.

Please provide the action plan to IANZ for acceptance in the space provided in this report. Please provide details of the records of the evidence that will be supplied to address the non-compliance in the space provided.

Once the action plan and proposed evidence has been accepted by IANZ, and implemented by the BCA, please provide complete evidence to demonstrate that the findings have been addressed no later than the "Date final evidence of implementation is required from BCA" indicated below.

IMPORTANT DATES	
Plan of action from BCA due by:	19/07/2021
All action plans accepted by IANZ:	<mark>6/09/2021</mark>
Date final evidence of implementation is required from BCA:	<mark>30/08/2021</mark>
Final date non-compliance to be cleared by:	13/09/2021

EVIDENCE

Plan of action (To be provided by BCA):

BCA response - disagree - please see separate letter

06/09/2021 - BCA agreed to submit evidence that demonstrates it has appropriate procedures in place and evidence of effective implementation.

Proposed evidence of implementation (To be provided by BCA):

06/09/2021 – BCA agreed to submit evidence that demonstrates it has appropriate procedures in place and evidence of effective implementation.

Evidence of implementation and discussion:

25/06/2021 - Report amended, this section of the non-compliance had been amended with new dates. The BCA is required to provide a plan of action, and proposed evidence of implementation for review.

08/09/2021 - Report amended to insert proposed plan and proposed evidence of implementation.

30/09/2021 TE -

Point 1:

Procedure - This is considered <u>cleared</u> with the amended procedure provided.

Implementation - This is considered <u>cleared</u> with the evidence provided to show the consideration of the specified systems and their performance standards by the BCO during the processing of the applications which include specified system.

Point 2:

Procedure - This is now considered cleared with the amended procedure provided.

Implementation - This is considered <u>cleared</u> with the evidence provided to show the consideration of the specified systems and their inspection, maintenance and reporting information by the BCO during the processing of the applications which include specified system.

NON COMPLIANCE CLEARED	
Signed:	Date: 30/09/2021

RECORD OF NON COMPLIANCE #:	GNC 5
Breach of requirement:	Regulation 7(2)(f)
Finding:	General Non-compliance
EINDING DETAIL O	

FINDING DETAILS

Code compliance certificates

1 Procedures and Implementation was not effective where the BCA was not seeking Technical Advice to make a technical decision to issue CCC when appropriate.

Compliance schedules

- 2 Implementation was not effective where the BCA had inaccurately described Specified Systems in Compliance schedules in the following ways:
 - Including items in a description that were not accurate.
 - Using examples instead of a description.
 - Referencing numerous items instead of one
- 3 Implementation was not effective where the BCA was recording Performance Standards for Specified Systems that were not appropriate in the following ways:
 - The BCA had often referenced Code Clauses as Performance Standards that were not sufficiently specific to Specified Systems when there was a specific Performance Standard in the relevant SS1-13. I.E referencing Code Clauses F8 3.1, F8 3.2 and F8 3.3 when the Specified Systems for Signs, Fire Alarm Call Points, Automatic Gates and Access Controlled Doors all have a relevant specific Performance Standard in SS1-13.
 - The BCA had not recorded a "Version" number for a quoted standard.
 - The BCA had referenced a Performance Standard that contained many sections however they had not referenced the specific "Part" of the standard.

Notices to fix

4 Procedures for issuing NTF required the BCA to record (on the B200 check-sheet) whether inspections could continue but there was no place on that check sheet to record that decision.

BCA ACTIONS REQUIRED

Please analyse the cause of the above finding and then develop and implement an action plan to address the finding.

Please provide the action plan to IANZ for acceptance in the space provided in this report. Please provide details of the records of the evidence that will be supplied to address the non-compliance in the space provided.

Once the action plan and proposed evidence has been accepted by IANZ, and implemented by the BCA, please provide complete evidence to demonstrate that the findings have been addressed no later than the "Date final evidence of implementation is required from BCA" indicated below.

IMPORTANT DATES	
Plan of action from BCA due by:	19/07/2021
All action plans accepted by IANZ:	Click here to enter a date.
Date final evidence of implementation is required from BCA:	30/08/2021
Final date non-compliance to be cleared by:	13/09/2021
EVIDENCE	
Plan of action (To be provided by BCA):	

Consideration of information and issue of Code compliance certificates

Notify the code compliance assessors of the change to the acceptance of producer statements – (PS3 and PS4) by a person with Regulation 18 in a team meeting.

Identify the persons with a regulation 18 qualification who will undertake the review and verification of the construction documentation and provide instruction in a scheduled meeting of the change to the acceptance of producer statements - (PS3 and PS4)

Compliance schedules

BCA response – disagree – please see separate letter

06/09/2021 - BCA agreed to undertake an internal audit of six recently issued compliance schedules and submit audit findings for review. Any non-compliances or recommendations resulting from the audit will lodged as a continuous improvement request in the BCA's continuous improvement system.

Notices to fix

Procedure to be updated with the correct process as it should be whether building work is to cease or continue. The B-200 template will be updated to make it clear where to record this decision

Proposed evidence of implementation (To be provided by BCA):

Consideration of information and issue of Code compliance certificates

6 weeks after implementation, an audit will be undertaken to ensure there is compliance with this change to the procedure.

Compliance schedules

06/09/2021 - BCA agreed to undertake an internal audit of six recently issued compliance schedules and submit audit findings for review. Any non-compliances or recommendations resulting from the audit will lodged as a continuous improvement request in the BCA's continuous improvement system.

Notices to fix

Copy of the updated procedure and B-200 template

Evidence of implementation and discussion:

18/06/2021 – Received clearance material for item 4 relating to NTFs. Forwarded to TE for review.

21/06/2021 - TE responded and deemed clearance materials appropriate. Item 4 is now cleared.

25/06/2021 - Report amended, this section of the non-compliance had been amended with new dates. The BCA is required to provide a plan of action, and proposed evidence of implementation for review.

30/06/2021 - BCA submitted evidence for GNC raised for item 1 - Code Compliance Certificates. Internal audit reviewed, deemed appropriate.

08/09/2021 - Report amended to insert proposed plan and proposed evidence of implementation.

30/09/2021 TE -

Point 2 & 3 - Internal audit report for the review of 6 random selected to focus on the issues outlined in GNC 5 points 2 & 3. Notes below as follows:

I have reviewed the audit report against the compliance schedules provided and the only issue identified is: SS14/2 & SS15/4 - The performance standards listed on the compliance schedule are at the building code level [F8.3.1, F8.3.2 & F8.3.3]. Within the internal audit report it is indicating the applicant proposed an acceptable solution to establish compliance. Guidance from MBIE [that is still out for consultation] is that it would be inappropriate to state a less specific performance standard to that indicated within the application.

Refer to the following from the audit report which discusses the above issue and their justification:

Outcome

The 6 compliance schedules reviewed by this audit show evidence that:

- The BCA is accurately describing specified systems. There were no instances of 'numerous items in a description that were not accurate', 'examples instead of a description' or 'referencing numerous items instead of one'. It is noted the BCA has developed a practice appending building consent documents to the compliance schedule to assist with locating various features of some of the specified systems. This become a means of enhancing the accuracy for describing these specified systems.
- The BCA is recording performance standards that are appropriate in regards to the identified matters of 'recording a version number for a quoted standard' and referencing 'the specific part of the standard' when a performance standard may contain 'many sections'. But it is noted that the BCA is referencing 'code clauses as performance standards' in regard to the signs specified systems; ss14/2 and ss15/4.

Note: The practice of referencing 'code clauses as performance standards' for sign systems originated from changes made following the previous BCA assessment in 2019. In 2019 the BCA received a GNC in their assessment that stated 'Some performance standards listed on Compliance Schedules were not considered to be appropriate (e.g. F8/AS1 for SS15.4, SS 14.2)' After a suggestion by the TE, the format for stating the performance standard of signs was changed to reference the building code performances and this change cleared the GNC.

The BCA acknowledges, and in support of using building code performances as performance standards for some specified systems, that some building code performances express more specifically what is required to be met by building work than is the case with other building code performances. The performances for signs in F8 are an example of these in that these performances are sufficiently clear to what signs as a relatively simple specified system are required to achieve. Also, for signs installed to the acceptable solution it should also be appropriate to reference the acceptable solution for F8; F8/AS1, as there are no other options for compliance within that acceptable solution for the performance of a sign as a specified system.

Recommendations:

Section 103, Building Act variously uses the terms 'state' and 'describe' for the components that must be contained in a compliance schedule. There is no regulated guidance on what this means but it is reasonable that the compliance schedule has a definite and clear account of the specified systems and their performance standards. The BCA has developed the practice of using a set format to state and describe specified systems and - where a specified system has been installed in a building using an acceptable solution compliance pathway - the performance standard(s) to ensure consistency in the accuracy of compliance schedule content.

With the finding details presented for GNC 5, a relatively simple specified system of signs is being used as an example for needing to achieve an objective of having 'the performance standard contain the right level of detail'. The Act requires in section 103: 'A compliance schedule must— state the performance standards for the specified systems.' It is currently acknowledged by the BCA, IANZ and MBIE that what is the 'right level of detail' for stating a performance standard can be subjective and may vary based on the complexity of the specified system being considered and as such MBIE are in the process of producing guidance on compliance schedule content. It is recommended that when this guidance is published, the BCA considers this guidance. If after considering this guidance the BCA identifies a need for changes to its procedures it uses its procedure for continuous improvement to make the changes.

NON COMPLIANCE CLEARED	
Signed:	Date: 30/09/2021

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.

Amended report (08/09/2021)

It is recommended that:

R1 It is recommended that the BCA ensures their staff raise/record concerns about practitioners not just full complaints.

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.

IANZ advises that:

None made.

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	Non- compliance (Serious / General)	Non- compliance identification number		Breac Enter	ch of re	gulatior nere appli	n 5/6? cable		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
requirement			5(a)	5(b)	5(c)	6(b)	6(c)	6(d)				Recs.	Adv. notes	(one sentence/line only to get to the heart of the issue)
6(A)(1)	Choose item.													
6(A)(2)	Choose item.													
Regulation 7														
7(1)	Choose item.													
7(2)(a)	Choose item.													
7(2)(b)	General	GNC 1	Yes	Yes					No	26/07/2021	06/07/2021			The Application Form for Solid Fuel Heaters did not meet the Forms Regulations.
7(2)(c)	General	GNC 2	Yes	Yes					Yes					Procedures were inconsistent when discussing the initiation of the statutory clock
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	Yes	Yes	Yes				Yes	13/09/2021	30/09/2021			Procedures did not explicitly require the BCA to request additional information on Specified Systems when the information provided was found to be absent, inaccurate or insufficiently detailed and project specific during processing, and therefore insufficient to make a decision on reasonable grounds. Implementation was not effective where in several samples reviewed there was no evidence of recorded reasons of assessing the appropriateness of the performance standards for some of the specified systems, or of recording reasons for including performance standards that had not been provided by the applicant / design. Compiling Compliance Schedule Details Procedures did not require the BCA to ensure that they required details including Inspection, Maintenance and Reporting information from the applicant when it was found to be absent or inaccurate during processing. Implementation was not effective where in several samples reviewed there was no evidence of recorded reasons of assessing the appropriateness of Inspection, Maintenance and Reporting information the for some of the specified systems, or of recording reasons for including performance standards that had not been provided by the applicant / design. Procedures did not discuss sending TA documents or other
7 (2)(d)(V)	General	0110 4	100	100					100					information to an applicant if/when they were received. s51(1)(3)(4).
7(2)(e)	Choose item.													
7(2)(f)	General	GNC 5	Yes	Yes	Yes				No	<u>13/09/2021</u>	30/09/2021			Consideration of information and issue of Code compliance certificates Procedures and Implementation were not effective where the BCA was not seeking Technical Advice to make a technical decision to issue CCCs when appropriate. Compliance schedules Implementation was not effective where the BCA had inaccurately described Specified Systems in the following ways: • Including numerous items in a description that were not accurate.

Regulatory	Non- compliance	Non- compliance		Brea Enter	ch of re r "Yes" w	gulatior here appli	1 5/6? icable		Resolved On-site?	Date Non- compliance to be cleared by (DD/MM/YYYY)	Date Non- compliance cleared (DD/MM/YYYY)	Number of		Brief comment
requirement	(Serious / General)	identification number	5(a)	5(b)	5(c)	6(b)	6(c)	6(d)				Recs.	Adv. notes	(one sentence/line only to get to the heart of the issue)
														 Using examples instead of a description. Referencing numerous items when one was required. Implementation was not effective where the BCA was recording Performance Standards for Specified Systems that were not appropriate in the following ways: The BCA had referenced Code Clauses as Performance Standards that were not sufficiently specific to the Specified Systems e.g. referencing Code Clauses F8 3.1, F8 3.2 and F8 3.3 when the Specified Systems for Signs, Fire Alarm Call Points, Automatic Gates and Access Controlled Doors all have a relevant specific Performance Standard in SS1-13. The BCA had not recorded a "Version" number (year of issue) for a quoted standard. The BCA had often referenced a Performance Standard that contained many sections however they had not referenced the specific "Part" of the standard. Compliance with statutory timeframes Procedures for issuing a CCC within 20 working days did not discuss including Consents that had reached 24 months and the BCA now had to made a decision to issue/not issue a CCC as there had been no application for CCC. The procedures were not clear with respect to initiating the statutory clock. Notices to fix Procedures for issuing NTF required the BCA to record (on the B200 check-sheet) whether inspections can continue but there was no place on that check sheet to record that decision. Code compliance certificates Procedures and Implementation was not effective where the BCA was not seeking Technical Advice to make a technical decision to issue of CCC when appropriate.
7(2)(g) 7(2)(h)	Choose item. Choose item.													
Regulation 8	Oncode item.													
8(1)	Choose item.													
8(2)	General	GNC 6	Yes	Yes					Yes					Procedures did not address the requirement to record technical leadership or specialist experts it reasonably expects to need. Procedures did not address the requirement to record where there were any capacity and capability gaps.
Regulation 9														
9	Choose item.													
Regulation 10														
10(1)	Choose item.													
10(2)	Choose item.													
10(3)(a)	Choose item.													
10(3)(b)	Choose item.													
10(3)(c)	Choose item.													
10(3)(d)	Choose item.													
10(3)(e)	Choose item.													
10(3)(f)	Choose item.													

Regulatory	Non- compliance	Non- compliance		Brea Enter	ch of re	gulatior here appli	າ 5/6? icable		Resolved Date Non- On-site? compliance to be cleared by (DD/MM/YYYY)		Date Non- compliance cleared (DD/MM/YYYY)	Number of		Brief comment
requirement	(Serious / General)	identification number	5(a)	5(b)	5(c)	6(b)	6(c)	6(d)		be cleared by (DD/MM/YYYY)		Recs.	Adv. notes	(one sentence/line only to get to the heart of the issue)
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)	Choose item.													
11(2)(f)	Choose item.													
11(2)(g)	Choose item.													
Regulation 12														
12(1)	Choose item.													
12(2)(a)	Choose item.													
12(2)(b)	General	GNC 7	Yes	Yes					Yes					Procedures did not prompt the BCA to consider the scope of services and deliverables required from a new contractor
12(2)(c)	General	GNC 8	Yes	Yes					Yes					Contracts did not include the contractors obligations with respect to internal and external communications including engagement with the media
12(2)(d)	Choose item.													
12(2)(e)	Choose item.													
12(2)(f)	Choose item.													
Regulation 13														
13(a)	Choose item.													
13(b)	Choose item.													
Regulation 14														
14	General	GNC 9	Yes	Yes					Yes					Procedures did not ensure the BCA would accurately record calibration (Thermometers and Moisture Meters) results in the record sheets.
Regulation 15														
15(1)(a)	General	GNC 10	Yes	Yes					Yes					The organisation chart did not indicate that the BCA was part of a parent organisation (TA)
15(1)(b)	Choose item.													
15(2)	Choose item.													
Regulation 16														
16(1)	Choose item.													
16(2)(a)	General	GNC 11	Yes	Yes					Yes					Procedures did not describe where the BCA recorded the name and address of third parties performing building control functions on their behalf. Procedures did not describe where the BCA recorded work it performed for others using its own policies procedures and systems
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)	General	GNC 12	Yes	Yes					Yes					Procedures did not specify that the BCA would review performance

Regulatory	Non- compliance	Non- compliance		Brea Ente	ch of re	gulation	n 5/6? icable			Date Non- compliance to	Date Non- compliance	Num	ber of	Brief comment
requirement	(Serious / General)	identification number	5(a)	5(b)	5(c)	6(b)	6(c)	6(d)	Yes/No	be cleared by (DD/MM/YYYY)	cleared (DD/MM/YYYY)		Adv. notes	(one sentence/line only to get to the heart of the issue)
														against the Quality Policy (objectives). Procedures did not specify the frequency of the BCA review of performance against the Quality Objectives.
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.											1		
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.													