

The NZ mark of competence Tohu Matatau Aotearoa

# **BUILDING CONSENT AUTHORITY ACCREDITATION** AMENDED ASSESSMENT REPORT

**Christchurch City Council** 

IANZ, Private Bag 28908, Remuera, Auckland 1541; Tel (09) 525 6655

### CONTENTS

INTRODUCTION	3
ASSESSMENT SUMMARY	3
CONTINUING ACCREDITATION	4
NEXT ACCREDITATION ASSESSMENT	5
BCA AND ASSESSMENT DETAILS	6
ASSESSMENT OBSERVATIONS	7
RECORDS OF NON-COMPLIANCE	24
SUMMARY OF RECOMMENDATIONS	29
SUMMARY OF ADVISORY NOTES	30
SUMMARY TABLE OF NON-COMPLIANCE	31

## 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.

### 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 <u>here</u>.

### 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: Chris	stchurch City Council Bu	uilding Co	nsent A	Autho	rity				
Address for service: PO E	Box 73013 Orchard Roa	ad Christo	church a	8154	New Z	Zeala	and		
Client Number: 74	86	Accred	itation	Num	ber:	82	2		
Chief Executive:		Dawn E	Baxenda	ale					
Chief Executive Contact Deta	ails:	Dawn.b	axenda	ale@c	cc.go	vt.nz	2		
BCA Responsible Manager:		Robert		_	0				
BCA Responsible Manager C	ontact Details:	Robert.	<u> </u>	@ccc.	govt.n	Z			
BCA Authorised Representat		Robert			0				
BCA Authorised Representat		Robert.	•	@ccc.	aovt.n	Z			
BCA Quality Manager:		Andrew	-		0				
BCA Quality Manager Contac	t Details:	Andrew	.wells@	Dccc.	aovt.n	z			
Number of BCA FTEs	Technical	133			suppo			13	
Total FTEs should = technical FTEs	Vacancies (Technical)	9			cies (A		n)	0	
+ admin FTEs + vacancies	(1.2011)	-			ding C		-	Ĭ	
		R1	1967	R2		996		₹3	863
		C1	329	C2		226		23	172
BCA Activity during the prev	ious 12 months	CCCs	525	02		220	4034		172
			mnlian	ce sc	hedule	es	134		
		New compliance schedule BCA Notices to Fix			25				
ASSESSMENT TEAM				• • •			20		
Assessment Date: 16 March 2021 to 26 March 2021			21						
Lead Assessor:		Carolyn	Osbor	ne					
Lead Assessor Contact Details: cosborne@ianz.govt.nz									
Technical Experts:       Colin Pickering, Phil Judge, Luke Hampton (observed)			n (obs)						
MBIE observer:		Mike Re	eedy, J	ennife	er Clar	ke.			
ASSESSMENT FINDINGS									
This assessment: Last assessment		nt:							
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				
Date clearance plan required		24 May 2021							
Date non-compliances must cleared: 26 July 2021									
NEXT ASSESSMENT									
Recommended next assessment type:       Full assessment									
Recommended next assessment date: March 2023									
IANZ REPORT PREPARATION	ON								
Prepared by: Carolyn Osborr	10	Signatu	re: ( ()	), (					
Checked by: Adrienne Wooll	ard	Signatu	A	Vul	u				
IANZ Report Preparation Date: 14 April 2021									
Amended report prepared by: Carolyn Osborne Signature:									
Amended report checked by:	Adrienne Woollard	Signatu	re: Ah	Just	u				
IANZ Amended Report Prepa	ration Date:	23 April							
IANZ Amendeu Report i repa		_0, p							

## **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

Yes
GNC 1. To be resolved. GNC 2. Resolved during assessment
No
0
-
0
-

#### 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		

### **Processing Procedures**

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

#### **Consideration of Specified Systems**

**Procedures** did not require the BCA to ensure that they requested Specified System information from the applicant when it was found to be absent or 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**.

#### **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	

**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**

No	
-	
No	
0	
-	
0	
-	
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		
<b>15 (1) Organisational structure.</b> The <b>organisation chart</b> did not indicate that the BCA was part of a parent organisation (TA). <b>GNC 10.</b> <b>Resolved during assessment.</b>		
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

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)(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

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)(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	
Procedures addressed requirements and were implemented.	
It is recommended <b>(R1)</b> 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

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 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	g good practice and performance
Procedures addressed requirements and	were effectively implemented.

# **RECORDS OF NON-COMPLIANCE**

RECORD OF NON COMPLIANCE #:	GNC 1												
Breach of requirement:													
Finding:	General Non-co	ompliance											
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 a address the finding.													
Please provide the action plan to IANZ for accepta	ance in the space	provided in this report.											
Please provide details of the records of the ev compliance in the space provided.	idence that will t	be supplied to address the non-											
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 <u>no later</u> than the "Date final evidence of implementation is required from BCA" indicated below.													
IMPORTANT DATES													
IMPORTANT DATES	•												
IMPORTANT DATES Plan of action from BCA due by:		24/05/2021											
Plan of action from BCA due by:	ed from BCA:	24/05/2021											
Plan of action from BCA due by: All action plans accepted by IANZ:	ed from BCA:	24/05/2021 Click here to enter a date.											
Plan of action from BCA due by: All action plans accepted by IANZ: Date final evidence of implementation is require	ed from BCA:	24/05/2021 Click here to enter a date. 9/07/2021											
Plan of action from BCA due by: All action plans accepted by IANZ: Date final evidence of implementation is requir Final date non-compliance to be cleared by:	ed from BCA:	24/05/2021 Click here to enter a date. 9/07/2021											
Plan of action from BCA due by:All action plans accepted by IANZ:Date final evidence of implementation is requirFinal date non-compliance to be cleared by:EVIDENCE		24/05/2021 Click here to enter a date. 9/07/2021											
Plan of action from BCA due by:All action plans accepted by IANZ:Date final evidence of implementation is requirFinal date non-compliance to be cleared by:EVIDENCEPlan of action (To be provided by BCA):		24/05/2021 Click here to enter a date. 9/07/2021											
Plan of action from BCA due by:       All action plans accepted by IANZ:       Date final evidence of implementation is require       Final date non-compliance to be cleared by:       EVIDENCE       Plan of action (To be provided by BCA):       Proposed evidence of implementation (To be provided by BCA):		24/05/2021 Click here to enter a date. 9/07/2021											
Plan of action from BCA due by:       All action plans accepted by IANZ:       Date final evidence of implementation is require       Final date non-compliance to be cleared by:       EVIDENCE       Plan of action (To be provided by BCA):       Proposed evidence of implementation (To be provided by BCA):		24/05/2021 Click here to enter a date. 9/07/2021											
Plan of action from BCA due by:       All action plans accepted by IANZ:       Date final evidence of implementation is require       Final date non-compliance to be cleared by:       EVIDENCE       Plan of action (To be provided by BCA):       Proposed evidence of implementation (To be p       Evidence of implementation and discussion:		24/05/2021 Click here to enter a date. 9/07/2021											
Plan of action from BCA due by:       All action plans accepted by IANZ:       Date final evidence of implementation is required       Final date non-compliance to be cleared by:       EVIDENCE       Plan of action (To be provided by BCA):       Proposed evidence of implementation (To be provided by BCA):	rovided by BCA):	24/05/2021 Click here to enter a date. 9/07/2021											

# **RECORDS OF NON-COMPLIANCE**

<b>RECORD OF NON COMPLIANCE #:</b>	GNC 3												
Breach of requirement:	Regulation 7(2)(d)(iv)												
Finding:	General Non-compliance												
FINDING DETAILS													
<b>1 Procedures</b> did not require the BCA to ensure that they requested Specified System information from the applicant when it was found to be absent or inaccurate during processing. <b>Implementation</b> 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.													
including Inspection, Maintenance and Reporting i inaccurate during processing. <b>Implementation</b> wa there was no evidence of recorded reasons of a	e that they required Performance Standard detail information from the applicant when it was absent o ras not effective where in several samples reviewe assessing the appropriateness of the performanc or of recording reasons for including performanc icant / design.												
BCA ACTIONS REQUIRED													
Please analyse the cause of the above finding a address the finding.	and then develop and implement an action plan t												
Please provide the action plan to IANZ for accepta	ance in the space provided in this report.												
Please provide details of the records of the ev compliance in the space provided.	vidence that will be supplied to address the nor												
	s been accepted by IANZ, and implemented by th strate that the findings have been addressed no late required from BCA" indicated below.												
IMPORTANT DATES													
Plan of action from BCA due by:	24/05/2021												
All action plans accepted by IANZ:	Click here to enter a date.												
Date final evidence of implementation is requir	red from BCA: 9/07/2021												
Final date non-compliance to be cleared by:	26/075/2021												
EVIDENCE													
Plan of action (To be provided by BCA):													
Proposed evidence of implementation (To be pl	provided by BCA):												
Evidence of implementation and discussion:													
NON COMPLIANCE CLEARED													
	Deter Click have to enter a data												
Signed:	Date: Click here to enter a date.												

# **RECORDS OF NON-COMPLIANCE**

RECORD OF NON COMPLIANCE #:	GNC 5
Breach of requirement:	Regulation 7(2)(f)
Finding:	General Non-compliance
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 the following ways:

- Including numerous 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 often 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 noncompliance 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:	Click here to enter a date.

Date final evidence of implementation is require	ed 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):												
Proposed evidence of implementation (To be provided by BCA):												
Evidence of implementation and discussion:												
NON COMPLIANCE CLEARED												
Signed:	Date: Click here to enter a date.											

### 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** 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.

(one senten	ber of	Num	Date Non- compliance	Date Non- compliance to	Resolved On-site?		n 5/6? cable	gulation here appl	ch of reg "Yes" wh	Bread Enter		Non- compliance	Non- compliance	Regulatory
	Adv. notes	Recs.	cleared (DD/MM/YYYY)	be cleared by (DD/MM/YYYY)	Yes/No	6(d)	6(c)	6(b)	5(c)	5(b)	5(a)	identification number	(Serious / General)	requirement
													Choose item.	6(A)(1)
													Choose item.	6(A)(1) 6(A)(2)
													Choose item.	Regulation 7
													Choose item.	7(1)
											<b>├</b> ──┤		Choose item.	7(2)(a)
The Application Form Regulations.				26/07/2021	No					Yes	Yes	GNC 1	General	7(2)(b)
Procedures were inc statutory clock					Yes					Yes	Yes	GNC 2	General	7(2)(c)
i													Choose item.	7(2)(d)(i)
													Choose item.	7(2)(d)(ii)
													Choose item.	7(2)(d)(iii)
Specified Systems Procedures did not Specified System info be absent or inaccura effective where in sev recorded reasons performance standar recording reasons fo been provided by the				26/07/2021	No				Yes	Yes	Yes	GNC 3	General	7(2)(d)(iv)
<b>Compiling Complian</b> <b>Procedures</b> did not Performance Standar Reporting informatio inaccurate during pr where in several samp reasons of assessing standards for some of for including performant applicant / design.														
Procedures did not c information to an app					Yes					Yes	Yes	GNC 4	General	7(2)(d)(v)
													Choose item.	7(2)(e)
Consideration of in certificates Procedures and Imp was not seeking Teo issue CCCs when ap Compliance schedu Implementation was				26/07/2021	No				Yes	Yes	Yes	GNC 5	General	7(2)(f)

#### **Brief comment**

tence/line only to get to the heart of the issue)

rm for Solid Fuel Heaters did not meet the Forms

nconsistent when discussing the initiation of the

require the BCA to ensure that they requested formation from the applicant when it was found to urate during processing. Implementation was not everal samples reviewed there was no evidence of of assessing the appropriateness of the lards for some of the specified systems, or of for including performance standards that had not ne applicant / design.

### ance Schedule Details

ot require the BCA to ensure that they required lard details including Inspection, Maintenance and tion from the applicant when it was absent or processing. Implementation was not effective mples reviewed there was no evidence of recorded sing the appropriateness of the performance of the specified systems, or of recording reasons nance standards that had not been provided by the

discuss sending TA documents or other plicant if/when they were received. s51(1)(3)(4).

information and issue of Code compliance

mplementation were not effective where the BCA echnical Advice to make a technical decision to appropriate.

#### dules

as not effective where the BCA had inaccurately

Regulatory	Non- compliance	Non- compliance		Bread	ch of re "Yes" wi	gulatior	n 5/6? icable		Resolved On-site?	Date Non- compliance to	Date Non- compliance	Num	ber of	
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)	Recs.	Recs. Adv. notes	(one senten
														described Specified S
														Including num
														accurate.
														<ul><li>Using example</li><li>Referencing n</li></ul>
														Implementation was
														Performance Standa appropriate in the follo
														The BCA had
														Standards tha
														Systems e.g. i 3.3 when the
														Points, Autom a relevant spe
														The BCA had for a quoted size
														The BCA had   approximately a set of the set of
														contained mar specific "Part"
														Compliance with sta
														Procedures for issuir
														including Consents the to made a decision to
														application for CCC.
														The procedures were clock.
														CIOCK.
														Notices to fix
														<b>Procedures</b> for issuin
														check-sheet) whether on that check sheet to
														Code compliance ce
														Procedures and Imp was not seeking Tec
														issue of CCC when ap
7(2)(g)	Choose item. Choose item.													
7(2)(h) Regulation 8														
8(1)	Choose item.													
8(2)	General	GNC 6	Yes	Yes					Yes					Procedures did not leadership or specialis
														Procedures did not a

#### Brief comment

ence/line only to get to the heart of the issue)

Systems in the following ways:

umerous items in a description that were not

ples instead of a description. numerous items when one was required.

as not effective where the BCA was recording dards for Specified Systems that were not illowing ways:

had referenced Code Clauses as Performance hat were not sufficiently specific to the Specified J. referencing Code Clauses F8 3.1, F8 3.2 and F8 he Specified Systems for Signs, Fire Alarm Call matic Gates and Access Controlled Doors all have becific Performance Standard in SS1-13.

d not recorded a "Version" number (year of issue) standard.

ad often referenced a Performance Standard that any sections however they had not referenced the rt" of the standard.

#### tatutory timeframes

ting a CCC within 20 working days did not discuss that had reached 24 months and the BCA now had to issue/not issue a CCC as there had been no

ere not clear with respect to initiating the statutory

uing NTF required the BCA to record (on the B200 er inspections can continue but there was no place to record that decision.

#### certificates

**nplementation** was not effective where the BCA echnical Advice to make a technical decision to appropriate.

ot address the requirement to record technical ilist experts it reasonably expects to need.

**Procedures** did not address the requirement to record where there

Regulatory	Non- compliance	Non- compliance		Brea Enter	ch of re "Yes" w	gulatior	n 5/6? icable		Resolved On-site?	Date Non- compliance to	Date Non- compliance	Num	ber of	
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)	Recs.	Adv. notes	(one sentend
														were any capacity and
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.													
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 prant and deliverables require
12(2)(c)	General	GNC 8	Yes	Yes					Yes					Contracts did not incluinternal and external c media
12(2)(d)	Choose item.													
12(2)(e)	Choose item.													
12(2)(f)	Choose item.													
<b>Regulation 13</b>														
13(a)	Choose item.													
13(b)	Choose item.													
Regulation 14														
14	General	GNC 9	Yes	Yes					Yes					<b>Procedures</b> did not er calibration (Thermome sheets.
Regulation 15														
15(1)(a)	General	GNC 10	Yes	Yes					Yes					The <b>organisation cha</b> parent organisation (T
15(1)(b)	Choose item.													
15(2)	Choose item.													
<b>Regulation 16</b>														
16(1)	Choose item.													

Brief comment
ence/line only to get to the heart of the issue)
, , , , , , , , , , , , , , , , , , ,
nd capability gaps.
prompt the BCA to consider the scope of services
uired from a new contractor
uired from a new contractor clude the contractors obligations with respect to
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Regulatory	Non- compliance	Non- compliance		Brea Enter	ch of re r "Yes" w	gulation here appl	n <b>5/6?</b> icable		Resolved On-site?	Date Non- compliance to be cleared by (DD/MM/YYYY)	Date Non- compliance cleared (DD/MM/YYYY)	Num	ber of	(one senter
requirement	(Serious / General)	identification number	5(a)	5(b)	5(c)	6(b)	6(c)	6(d)	Yes/No			Recs.	Adv. notes	
16(2)(a)	General	GNC 11	Yes	Yes					Yes					<b>Procedures</b> did not of address of third participle behalf.
40(0)(b)	Obecce item													Procedures did not performed for others
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 a against the Quality Po
17(2)(e)	Choose item.													performance against
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.													