



**BUILDING CONSENT AUTHORITY ACCREDITATION
AMENDED ASSESSMENT REPORT**

CHRISTCHURCH CITY COUNCIL

6 TO 7 NOVEMBER 2018 (PROCEDURES)

AND

25 TO 28 MARCH 2019 (IMPLEMENTATION)

AMENDED WITH ACTION PLAN AND GNC CLEARANCE 7/6/19

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INTRODUCTION

This **amended** report relates to the accreditation assessment of the Christchurch City Council Building Consent Authority's (BCA's) documented policies, procedures and systems, which took place during 6 to 7 November 2018 and assessment of the implementation of the procedures, which took place during 25 to 28 March 2019. Both assessments were carried out to determine compliance with the requirements of the *Building (Accreditation of Building Consent Authorities) Regulations 2006* (the Regulations). This report is based on the review of evidence of implementation, and discussions with the BCA's employees undertaken during the accreditation assessment.

This report has been amended to record that GNC 1 has been cleared. The BCA contended that there was insufficient evidence of a systemic failure, as required to raise a GNC. This argument was accepted by IANZ and the GNC cleared.

The action plan to address GNC 2 has been included and accepted by IANZ.

This report only includes non-compliances raised during the 25 to 28 March 2019 assessment, although the attached spreadsheet covers both assessments. The items raised during the November assessment have all been resolved.

A copy of this report, and subsequent information regarding progress towards clearance of non-compliance/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.

ACCREDITATION FEEDBACK AND 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. This report will also highlight examples of good practice and performance.

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.

Summary of the non-compliances identified during the assessment

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 forward a copy to IANZ. This plan of action must be provided to IANZ by 17/05/2019.

All non-compliances must be finally addressed and cleared by 19/07/2019. To maintain accreditation you must provide evidence of the actions taken to clear non-compliance to IANZ within the required timeframe. If you do not agree with the non-compliances identified, please contact the Lead Assessor as soon as possible. If you need further time to address non-compliances, please contact the Lead Assessor as soon as possible.

Where you are seeking an extension to an agreed timeframe to address a non-compliance, your Chief Executive is required to make a formal request for an extension of the timeframe.

If you have a complaint about the assessment process, please follow the procedure set out in the IANZ complaint process which can be found in the MBIE Guidance information.

Summary of the good practice and performance identified during the assessment


This accreditation assessment found the following aspects of the BCA's operations of particular note as good practice and/or performance which should be maintained:

The assessment team noted a huge improvement in the quality of the records maintained for technical peer reviews and observed records of a thorough process used for competence assessment.

NEXT ACCREDITATION ASSESSMENT

Unless your BCA undergoes a significant change, requiring some form of interim assessment, the next assessment of the BCA is planned for March 2021. This will be an assessment of the implementation of your policies, procedures and systems. You will be formally notified of your next assessment six weeks prior to its planned date.

ASSESSMENT SUMMARY

ORGANISATION DETAILS			
Organisation:	Christchurch City Council		
Address for service:	53 Hereford Street Christchurch Central Christchurch 8011 New Zealand		
Client Number:	7486		
Accreditation Number:	82		
Chief Executive:	Karleen Edwards		
Chief Executive contact details:	Karleen.edwards@ccc.govt.nz		
BCA Authorised Representative:	Tracy Quinton-Boundy		
BCA Authorised Representative contact details:	Tracy.quinton-boundy@ccc.govt.nz		
BCA Quality Manager:	Tracy Quinton-Boundy		
Number of BCA FTE's	Technical - 87 Administration – 69 FTE Vacancies - 17		
ASSESSMENT TEAM			
Lead Assessor:	Adrienne Woollard		
Lead Assessor contact details:	awoollard@ianz.govt.nz		
Technical Experts:	John Tait Colin Pickering		
IANZ REPORT PREPARATION			
Prepared by:	Adrienne Woollard		
Signature:			
Checked by:	Carolyn Osborne		
Signature:	Carolyn Osborne		
Date:	12/04/2019		
ASSESSMENT FINDINGS			
	November 2018 Assessment of procedures	March 2019 Assessment of Implementation	Last full assessment:
Total # of "serious" non-compliances:	0	0	0
Total # of "general" non-compliances:	14	5	26
Total # of non-compliances outstanding:	2	2	19
Number of recommendations:	2	8	1
Number of advisory notes:	0	3	0
Date clearance plan required from BCA:	17/05/2019		
Date all non-compliances must be finally cleared:	19/07/2019		
Accreditation to continue with non-compliance clearance?	Yes		
NEXT ASSESSMENT			
Recommended next assessment type:	Full		
Recommended next assessment date:	March 2021		
COMMENTS			

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	
<p>The BCA had amended its documented procedure during the November assessment to include reference to change to authorised representative as a reason for notification to IANZ and MBIE. The procedure was then found to be appropriate.</p> <p>There had been one notification since the last assessment. This appeared to be appropriate.</p>	

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	
<p>The BCA's consumer information, available on its website, was found to include the required information.</p>	

Regulation 7(2)(b)-(c), and 7(2)(d)(i): receiving, checking and recording 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	
The BCA had documented appropriate systems for receiving, checking and lodgement. These had been effectively implemented.	

Regulations 7(2)(d)(ii)-(iii): assessing and 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	
The BCA had documented appropriate procedures for assessing and allocating applications. These had been effectively implemented.	

Regulation 7(2)(d)(iv)-(v): processing, granting and issuing consents

Non-compliance? Y/N	Yes
Non-compliance number/s:	GNC 1 – cleared due to insufficient evidence being available to determine that a systemic failure has occurred.
Opportunities for improvement? Y/N	Yes
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	1
Advisory note number/s:	A1
Observations and comments, including good practice and performance	
<p>7(2)(d)(iv) Processing</p> <p>The BCA's procedures for processing were seen to be appropriate after minor alteration made during the November assessment.</p> <p>Processing was generally carried out competently with good reasons for decisions recorded. In some cases it was unclear whether processing officers had checked the scope and limitations on product appraisals and CodeMark certificates for relevance to the project as part of processing.</p> <p>7(2)(d)(v) Granting and issuing consents</p> <p>The BCA's procedures for granting and issuing building consents were found to be appropriate. Issued building consents sampled were seen to meet the requirements of the Forms Regulations.</p> <p>It was noted that the BCA had a policy allowing for adding an encumbrance to adjoining allotments (e.g. where a waiver had been approved). This was discussed in depth during the assessment between BCA staff, MBIE representatives and IANZ technical experts. MBIE and the assessment team considered that this process may not be allowed under the Building Act 2004. The BCA provided evidence to the contrary which was then submitted to MBIE for their consideration. The evidence provided has been accepted.</p> <p>There was some evidence observed (and some anecdotal evidence) that the BCA was suspending applications for building consent for issues associated with waivers or modifications, encumbrances, conditions relating to natural hazards, and building over 2 or more allotments where this was not appropriate. It is noted that the requirement to impose a condition on the consent should not impede the granting of the consent. GNC 1 requires the BCA to ensure that building consents are only suspended for appropriate Building Act or Code requirements.</p> <p>Note that the BCA has disputed that there was evidence of issue of building consent being delayed for other than BCA requirements. Rather than undergoing a further assessment to determine whether this is a systemic issue the assessment team have chosen to clear this GNC. This topic will be reviewed in depth during the next assessment.</p> <p>The practice of issuing one building consent for multiple dwellings on multiple allotments was identified during the assessment. It is suggested (A1) that this practice is reviewed as it may impact on the clarity of consent files and the subsequent issue of CCC.</p>	

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

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	
<p>The BCAs procedures for planning, managing and performing inspections were found to be appropriate. Management of non-standard inspections was added during the November assessment.</p> <p>Inspections were planned as part of processing. Once case was noted where the inspection requirements were not clearly communicated (this may have been a misunderstanding by the builder). It is recommended (R1) that the BCA ensures that inspection requirements (including when the inspection should take place) are clearly communicated.</p> <p>A number of inspections were observed by the technical expert. These were seen to be carried out competently, with appropriate records maintained.</p>	

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 2
Opportunities for improvement? Y/N	Yes
Number of recommendations:	1
Recommendation number/s:	R2
Number of advisory notes:	1
Advisory note number/s:	A2
Observations and comments, including good practice and performance	
<p>Application for CCC</p> <p>The procedure for acceptance of application for CCC was seen to be appropriate.</p> <p>Where a paper application had been received the first page of the CCC application form was not included in the electronic record. In other examples the applicant had not added the date the work was completed or LBP details (where relevant). In addition in examples with specified systems some application forms did not have the section regarding specified systems completed. GNC 2.</p> <p>Issue of CCC</p> <p>The BCAs procedures for issuing Code Compliance Certificates were found to be appropriate.</p> <p>Issued CCCs were seen to meet the requirements of the Forms Regulations. In some cases the statement that "the specified systems in the building are capable of performing to the performance standards set out in the building consent" was not accurate as the specified systems had been altered from those described in the building consent yet no record of consideration of the change or change to the consent documents had been recorded. GNC 2</p>	

It was observed that the BCA placed a heavy reliance on the provision of producer statements, even where it would appear that the scope was within the competence of a competent building officer and/or when the relevant standard required specific items. For example, in one instance a Building Control Officer required a fire engineer to provide a PS4 for a fire alarm whereas the standard required that an accredited fire alarm inspector provide a certificate. In other instances PS3s were required by the BCA before issue of CCC where these did not provide inspection results or give the BCA reasonable grounds to make a compliance decision. It is suggested **(A2)** that the BCA carefully consider their use/reliance on PS4s.

Compliance Schedules

The procedures for issue of Compliance Schedules were reviewed in November and found to be appropriate.

During this assessment it was noted that the procedures did not clearly document the process for managing the preparation of Compliance Schedules where the information provided did not match the building consent. Several applications were noted where the performance, inspection, maintenance and reporting details on the Compliance Schedule were not consistent with those listed in the Building Consent/Draft Compliance Schedule (and no application for variation/amendment had been recorded). Some listed performance standards were not considered to be appropriate (e.g. F8/AS1 for SS15.4, SS 14.2). **GNC 2**

24 Month CCC Decision

The BCA was managing applications that had reached 24 months from when the consent had been granted but where no application for CCC had been received.

The 23 month letter template indicated that the BCA would refuse to issue a CCC where it had all required information except the CCC application. Although the BCA provided assurance that this did not occur it is recommended **(R2)** that the BCA clarify in its procedures and templates that it will not refuse to issue a CCC if the only reason for refusal would be that an application for CCC had not been received.

Notices to Fix

The procedure for issue of Notices to Fix was appropriate except that it did not refer to the responsible authority. This was added during the November assessment.

A small number of Notices to Fix had been issued. These were reviewed during the March assessment. The procedures appeared to have been appropriately implemented and Form 13 completed appropriately.

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	
<p>The BCAs procedures for receiving and managing customer inquiries were found to be appropriate.</p> <p>There was little evidence of implementation available for easy retrieval as enquiries relating to a building consent were recorded directly on to a consent, with no overarching register kept. There were no concerns raised regarding customer inquiries.</p>	

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	
<p>The BCAs procedures for receiving and managing customer complaints were found to be appropriate but incomplete during the November assessment. Further details regarding ensuring objectivity, fairness and providing proportional remedies was added during the November assessment.</p> <p>The March assessment found that implementation of the procedure was appropriate, with complaints addressed within the documented timeframes and good records maintained.</p>	

REGULATION 8 ENSURING ENOUGH EMPLOYEES AND CONTRACTORS

Regulation 8(1): forecasting workflow

Non-compliance? Y/N	Yes
Non-compliance number/s:	GNC 3 – resolved on site
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	
<p>The BCAs procedures for forecasting workflow were found to be appropriate.</p> <p>Records of implementation of the procedure did not include identifying and recording known pressures impacting the performance of its building control functions such as limited access to technical leadership. This was appended to the forecasting records during the assessment. GNC 3 – resolved on site.</p>	

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

Non-compliance? Y/N	Yes
Non-compliance number/s:	GNC 4– resolved on site
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	
<p>The BCAs procedures for identifying and addressing capacity and capability needs were found to be appropriate.</p> <p>The most recent record of the annual planning exercise did not include the required number of FTEs it anticipated it needed (capacity), the required number of FTEs it anticipated it needed at each level of competence (capability), and the technical leadership or specialist expertise that it reasonable expected to need. This was appended to the forecasting records during the assessment. GNC 4 – resolved on site.</p>	

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	
<p>The BCAs procedures for allocating work to appropriate staff and contractors were found to be appropriate.</p> <p>Implementation was also seen to be appropriate.</p>	

REGULATION 10 ESTABLISHING AND ASSESSING COMPETENCY OF EMPLOYEES**Regulation 10(1) and (3): 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	
<p>The BCAs procedures for assessing prospective employees were found to be appropriate.</p> <p>There had not been any recently employed staff members.</p>	

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

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	Yes
Number of recommendations:	1
Recommendation number/s:	R3
Number of advisory notes:	1
Advisory note number/s:	A3
Observations and comments, including good practice and performance	
<p>The BCAs procedures for assessing the competence of employees performing building control functions were found to be appropriate.</p> <p>Implementation of the procedures was assessed by review of a number of competence assessments and the skills matrix. These were found to be appropriate.</p> <p>It was noted that the peer review information that was relied on to collate competence assessment records did not include clear reference between the Regulations 10(3)(a-f) and the NCAS performance indicators which were being addressed. It is suggested (A3) that these be included for easy collation of competence assessments.</p> <p>The Skills Matrix section “Certifying” only referred to competence to issue CCC.</p> <p>Competence for issue of Building Consents had not been recorded as an outcome on the Competence Assessments (acknowledging that competence to issue building consents had been included in the body of the competence assessments). It is recommended (R3) that the outcome (Certified to Issue Building Consents) is clearly recorded for issue of building consents.</p>	

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	Yes
Number of recommendations:	1
Recommendation number/s:	R4
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA had documented its training procedures. It had not specifically included that training plans would be developed annually. This was added during the November assessment. The procedures were then found to be appropriate.</p> <p>11(2)(a)</p> <p>The BCA assessed individual training needs on an annual basis using their competence assessment process and had carried out organisational training needs assessment as documented in its procedures (“The Vault”).</p>	

11(2)(b)

While most training requirements identified as part of competence assessment had been transferred to training plans there were some examples noted where the identified training requirements had not been recorded in the training plan. Some training requirements identified as part of peer reviews were also not transferred to training plans as the BCA had made a decision not to offer that training at the current time. It is recommended **(R4)** that where training needs have been identified but not planned to be provided that a record of those decisions is maintained.

Regulation 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	
The BCAs procedures for supervising employees under training were found to be appropriate. This was also seen to be effectively implemented.	

REGULATION 12 CHOOSING AND USING CONTRACTORS

Non-compliance? Y/N	Yes - See Record of Non-compliance for details
Non-compliance number/s:	GNC 5 – resolved during the 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	
<p>The BCA had documented its procedures for choosing and using contractors. The Council had also documented Council-wide procurement procedures. The combination of these documents met the requirements of the MBIE Guidance and the Regulations. A link to the Council procurement procedure was added to the BCA manual during the November assessment to make the information more accessible.</p> <p>There were incomplete records available of the process undertaken when engaging contractors however the Direct Appointment File Note was seen to generally cover the described requirements.</p>	

The BCA had contracted two people to process work using the BCA's quality systems. These people were in effect acting as employees and were seen to be managed within the BCAs systems for assessment of competence and qualifications. One of these two contracts did not include a requirement for annual competence assessment or to comply with the Building Act 2004. This was appended during the assessment and this **GNC 5** was cleared.

REGULATION 13 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	
<p>The BCAs procedures for ensuring technical leadership were found to be appropriate.</p> <p>There were 13 technical leaders named for specific items and code clauses. Authorisation for technical leaders was seen to be appropriate. The ability to provide technical leadership was recorded in competence assessments or alternatively in technical reviews. Good records were maintained.</p>	

REGULATION 14 ENSURING NECESSARY (TECHNICAL) RESOURCES

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	
<p>The BCA had documented its procedures for ensuring sufficient and appropriate technical resources. Information regarding the criticality of equipment was amended during the November assessment.</p> <p>The BCA made available appropriate technical resources to employees.</p> <p>Moisture meters and thermometers were regularly calibrated. While the occasional item had been calibrated past the planned date, recent records showed excellent management of calibration of equipment.</p>	

REGULATION 15 KEEPING ORGANISATIONAL RECORDS

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	
<p>The BCA had documented its organisational structure. It maintained a spreadsheet in TRIM that recorded the number of employees performing building control and administrative functions and any vacancies.</p> <p>The BCA used job descriptions to record roles and responsibilities and maintained a delegations register to record the delegation of powers and authorities.</p> <p>Procedures relating to these functions were found to be appropriate. The procedures had been appropriately implemented.</p>	

REGULATION 16 FILING APPLICATIONS FOR BUILDING CONSENT

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	Yes
Number of recommendations:	2
Recommendation number/s:	R5, R6
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA had documented its procedure for recording a unique number for each application. This did not provide detail of the way that amendments were provided with a unique number linked to the parent building consent number. It is recommended (R5) that the procedure includes details regarding this process.</p> <p>All applications were seen to have been given a unique number.</p> <p>The BCA had performed work for another BCA. Good records of this work had been maintained however the BCA had not documented its procedures for how records of the work performed for another BCA will be managed. As the BCA reported that it was currently not performing work for another BCA no GNC was raised however, it is recommended that the BCA documents in its procedures how records of the work performed for another BCA will be managed. R6</p> <p>Records were seen to be readily accessible and retrievable. Records were mostly managed using the TRIM document management system. Server management, including backup, had been outsourced to a private provider. The requirements of the provider included backup and an ability to retrieve files within certain timeframes depending on the "value" of the data. The organisation had demonstrated that it was able to restore lost data.</p>	

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	
The BCA's documented policies, procedure and systems appropriately covered its management and operations, except as detailed elsewhere in this report.	

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	
The BCA had appointed a quality manager. The policy on quality was found to be at a very high level. It was amended during the November assessment to include reference to the Council's Long Term Plan and details regarding the quality objectives of the BCA. Once amended it was found to be appropriate.	

Regulation 17(2)(d) and 17(5): Management reporting and review, including of the quality 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	
<p>The BCA's procedures detailed that management review against its quality policy would occur monthly and annually.</p> <p>The procedure for annual strategic management review (including the report template) didn't specifically reference assessing employee and contractor engagement with the quality system and continuous improvement system, or review of the effectiveness of any communications related to the quality assurance system. These items were added to the template during the November assessment and had been included in the most recent Management Review.</p>	

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	
<p>The BCA's procedures documented that it communicated about its quality assurance system to all employees and contractors in a number of ways to ensure compliance. These were considered to be appropriate.</p>	

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

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	
Not applicable to a BCA that is also a territorial authority as they are required to have full scope.	

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	
<p>The BCA had documented an appropriate procedure for supporting continuous improvement.</p> <p>Records were seen to be comprehensive and well managed. The procedure was found to be fully implemented.</p>	

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

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	Yes
Number of recommendations:	1
Recommendation number/s:	R7
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA had documented its procedure regarding undertaking annual system and technical audits. Further detail regarding audit sample size and the submission of the audit report to the quality manager and responsible manager was added to the procedure during the November assessment. The procedure was then considered to be appropriate.</p> <p>Evidence of implementation of the audit procedure was reviewed. There was some evidence of inconsistent implementation of the audit procedure, however more recent audits were found to fully meet requirements. It is recommended (R7) that the BCA works to ensure that all audits clearly record the audit process followed, the evidence reviewed, and the audit outcome, along with any findings.</p>	

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	
<p>The BCAs procedure was amended during the November assessment to include more detail regarding the types of conflicts of interest that should be recorded and managed. The procedure was then considered to be appropriate.</p> <p>The procedure was changed to an on-line process in February 2019. Recent records were reviewed and found to be appropriate.</p>	

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	
The BCA's procedures for communicating with internal and external persons were considered to be appropriate and 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:	R8
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA had documented its procedures for considering and making complaints about practitioners. It had not documented its process for considering the seriousness of its concerns. This was added during the November assessment. The procedure was then considered to be appropriate.</p> <p>The BCA had maintained good records of the concerns they held about practitioners up to February 2017. While it seemed unlikely that there had been no concerns about any building practitioners for the last two years, there had been no concerns recorded after February 2017. It is recommended (R8) that the BCA work to ensure that it captures any concerns that it may have about building practitioners, even if those concerns do not result in an immediate complaint.</p>	

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	
<p>The BCA had documented its procedures for requiring employees and contractors to hold or be working towards a technical qualification unless exempt. The BCA amended one of the exemptions during the November assessment to bring it in line with MBIE expectations.</p> <p>Records of qualifications of staff were examined. All staff records reviewed were seen to record that the staff member held an appropriate qualification, were working towards an appropriate qualification or had been exempt by the BCA from its requirements to hold a qualification.</p>	

RECORD OF NON-COMPLIANCE

Non-compliance number:	GNC 2
Breach of regulatory requirement:	Regulation 7(2)(f): code compliance certificates, compliance schedules and notices to fix
Finding:	General Non-compliance
Finding details:	<p>Application for CCC</p> <p>1. Where a paper application had been received the first page of the CCC application form was not included in the electronic record.</p> <p>2. Some examples were noted where application for CCC had been accepted even though the applicant had not added the date the work was completed, details or the owner, or LBP details (where relevant).</p> <p>3. In examples with specified systems some application forms did not have the section regarding specified systems completed.</p> <p>Issue of CCC</p> <p>4. In some cases the statement that “the specified systems in the building are capable of performing to the performance standards set out in the building consent” was not accurate as the specified systems had been altered from those described in the building consent yet no record of consideration of the change or change to the consent documents had been recorded.</p> <p>Compliance Schedules</p> <p>5. The procedures did not clearly document the process for managing the preparation of Compliance Schedules where the information provided did not match the building consent.</p> <p>6. Several applications were noted where the performance, inspection, maintenance and reporting details on the Compliance Schedule were not consistent with those listed in the Building Consent/Draft Compliance Schedule (and no application for variation/amendment had been recorded).</p> <p>7. Some performance standards listed on Compliance Schedules were not considered to be appropriate (e.g. F8/AS1 for SS15.4, SS 14.2).</p>
BCA Actions required:	<p>Please develop and implement an action plan to address the above finding.</p> <p>Please provide evidence to demonstrate that the finding has been addressed.</p>

IMPORTANT DATES		
Non-compliance to be cleared by:	19/07/2019	
	Due by:	Accepted by IANZ:
Plan of action from BCA:	17/05/2019	7/6/19 (see note below)
Final date for evidence of implementation from BCA:	5/07/2019	Click here to enter a date.
EVIDENCE		
Plan of action:		
<i>To be provided by BCA</i>		
<p>To address the three parts of this GNC, the following is proposed. Evidence will be forwarded once the changes have been made, training undertaken and audits completed.</p> <ul style="list-style-type: none"> • A training session to be held with commercial building consent officers, fire safety specialist reviewers, senior commercial inspectors, commercial code compliance assessors and building officers (WOF) all together. The training session will cover building consent authority responsibilities found in sections 45A, 51, 94, 102 and 103. The training will also include whether further reasonable information is required from the applicant regarding the specified systems that the applicant for building consent considers will be required to be included in a compliance schedule required • A training session for commercial vetting & allocation officers. The training session will cover building consent authority responsibilities found in sections 45 and 92, assessing commercial building consent applications if reasonable information has been provided on the specified systems that the applicant for building consent considers will be required to be included in a compliance schedule and the proposed inspection, maintenance, and reporting procedures for the purposes of the compliance schedule for those specified systems. And assessing applications for code compliance certificates to ensure all relevant fields have been completed and the complete application form placed on the consent file. • Minor additions are needed to the Commercial: Process Code Compliance Certificate application (procedure) and related Generate Compliance Schedule and Compliance Schedule Statement to be issued with Code Compliance Certificate (procedure) to address what action needs to happen when changes are identified to the specified systems in the building consent. There is sufficient scope in the current format of the B-203 Code Compliance Summary to record actions taken when specified systems details change. • Minor changes to B-461 Section 2: List of Specified Systems - Autotext Entries, B-462 Section 2: List of Specified Systems - Autotext Entries that are used for preparing the draft compliance schedule and compliance schedule. Changes to include adding highlighting to text that is likely to require editing, adding further details for some of the performance standards identified by the assessment team as not being adequate. • These changes will also be made to the corresponding B-069 Specified Systems Specific Design Information and B-068 Section 2: Listed Specified Systems that are available for the applicant for building consent to present details of the specified systems that they consider will be required to be included in a compliance schedule required and the proposed inspection, maintenance, and reporting procedures for the purposes of the compliance schedule for those specified systems. 		

<p>Evidence of implementation: <i>To be provided by BCA</i></p>	<p>Training presentation, attendance records to be provided to IANZ.</p> <p>Changes to Vault procedures and CS/SS templates to be provided to IANZ.</p> <p>System audit records and findings to be provided to IANZ. Supported by evidence of BCN and CS records for the end to end process of CS, addressing the findings above.</p> <p>IANZ - Accepted provided that the audit records demonstrate a positive outcome. Where audits demonstrate that more work is required they must be accompanied by evidence of corrective action and further action and audit until the identified issues are satisfactorily addressed.</p>
<p>Non-compliance cleared? Y/N</p>	<p>Choose an item.</p>
<p>Signed:</p>	
<p>Date:</p>	<p>Click here to enter a date.</p>

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.

From the March 2019 assessment it is recommended that:

- R1 The BCA ensures that inspection requirements (including when the inspection should take place) are clearly communicated in its building consent documentation
- R2 The BCA clarify in its procedures and templates that it will not refuse to issue a CCC if the only reason for refusal would be that an application for CCC had not been received.
- R3 The outcome of assessments of competence to grant and issue building consents is more clearly recorded as an outcome of competence assessments.
- R4 Where training needs have been identified but not planned to be provided that a record of those decisions is maintained.
- R5 The procedure for recording a unique number for each building consent application includes details regarding the way that amendments were provided with a unique number that is also linked to the parent building consent number.
- R6 The BCA documents in its procedures how records of the work performed for another BCA will be managed.
- R7 The BCA works to ensure that audit records are consistent across auditors, including that all audits clearly record the audit process followed, the evidence reviewed, and the audit outcome, along with any findings.
- R8 The BCA works to ensure that it captures all concerns that it may have about building practitioners, even if those concerns do not result in an immediate complaint.

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:

- A1. It is suggested that the practice of issuing one building consent for multiple dwellings on multiple allotments is reviewed as it may impact on the clarity of consent files and the subsequent issue of CCC.

- A2. It was observed that the BCA placed a heavy reliance on the provision of producer statements, even where it would appear that the scope was within the competence of a competent building officer or when those requirements were not supported by the standard to which the items were being installed e.g. a requirement for a fire engineer to provide a PS4 for a fire alarm whereas the standard required that an accredited fire alarm inspector provided a certificate as described in the standard. It is suggested that the BCA carefully considers its reliance on the applicant providing PS4s.

- A3. It was noted that the peer review information that was relied on to collate competence assessment records did not include clear identification of which clause within Regulation 10 (3)(a) to (f) / NCAS performance indicators were being addressed. It is suggested that this information is included in peer reviews for easy collation of information to support competence assessments.

SUMMARY TABLE OF NON-COMPLIANCE

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

Regulatory requirement	Non-compliance (Serious / General)	Non-compliance identification number	Breach of regulation 5/6? (Enter Yes where applicable)						Resolved On-site? Yes/No	Date Non-compliance to be cleared by (DD/MM/YYYY) N/A where NC is resolved on-site	Date Non-compliance cleared (DD/MM/YYYY)	Number of		Brief comment (to get to the heart of the issue)
			5(a)	5(b)	5(c)	6(b)	6(c)	6(d)				Recommendations	Advisory notes	
6(A)(1)	General	Nov 18 GNC 1	Yes	Yes					Yes					Procedures missing reference to change to authorised representative as a reason for notification to IANZ and MBIE.
6(A)(2)	Choose an item.													
Regulation 7														
7(1)	Choose an item.													
7(2)(a)	Choose an item.										1			
7(2)(b)	Choose an item.													
7(2)(c)	Choose an item.													
7(2)(d)(i)	General	Nov 18 GNC 2	Yes	Yes					No	11/3/19				The BCA was not requiring the lodgement date to be recorded as the date the complete application was received.
7(2)(d)(ii)	Choose an item.													
7(2)(d)(iii)	Choose an item.													
7(2)(d)(iv)	General	Nov 18 GNC 3	Yes	Yes					Yes					The BCA's procedures for processing did not detail how the BCA would handle work completed without a consent.
7(2)(d)(v)	General	March 19 GNC 1		Yes					Yes			1		The BCA was suspending applications for building consent for issues associated with waivers or modifications, encumbrances, conditions relating to natural hazards, and building over 2 or more allotments where this was not appropriate. Note that there was insufficient evidence that this was a systemic issue so this GNC is cleared without further information being required.
7(2)(e)	General	Nov 18 GNC 4	Yes	Yes					Yes			1		The BCAs procedures did not include the management of non-standard inspections.
7(2)(f)	General	Nov 18 GNC 5 March 19 GNC 2	Yes	Yes	Yes				No	11/3/19		1	1	The procedure for making a decision at 24 months if no application for CCC was received was found to require amendment as it stated that the building consent "remained active" once the CCC was issued. The procedure for issue of Notices to Fix did not refer to the responsible authority. Where a paper application had been received the first page of the CCC application form was not included in the electronic record. Incomplete applications for CCC had been accepted In examples with specified systems some application forms did not have the section regarding specified systems completed. In some cases the statement that "the specified

Regulatory requirement	Non-compliance (Serious / General)	Non-compliance identification number	Breach of regulation 5/6? (Enter Yes where applicable)						Resolved On-site? Yes/No	Date Non-compliance to be cleared by (DD/MM/YYYY) N/A where NC is resolved on-site	Date Non-compliance cleared (DD/MM/YYYY)	Number of		Brief comment (to get to the heart of the issue)
			5(a)	5(b)	5(c)	6(b)	6(c)	6(d)				Recommendations	Advisory notes	
														<p>systems in the building are capable of performing to the performance standards set out in the building consent" was not accurate as the specified systems had been altered from those described in the building consent.</p> <p>The procedures did not clearly document the process for managing the preparation of Compliance Schedules where the information provided did not match the building consent.</p> <p>6. Several applications were noted where the performance, inspection, maintenance and reporting details on the Compliance Schedule were not consistent with those listed in the Building Consent/Draft Compliance Schedule (and no application for variation/amendment had been recorded).</p> <p>Some performance standards listed on Compliance Schedules were not considered to be appropriate (e.g. F8/AS1 for SS15.4, SS 14.2).</p>
7(2)(g)	Choose an item.													
7(2)(h)	General	Nov 18 GNC 6	Yes	Yes				Yes						The BCAs procedures for receiving and managing customer complaints required more details regarding ensuring objectivity, fairness and providing proportional remedies.
Regulation 8														
8(1)	General	March 19 GNC 3			Yes			Yes						Records of implementation did not include identifying and recording known pressures impacting the performance of its building control functions such as limited access to technical leadership..
8(2)	General	March 19 GNC 4			Yes			Yes						Records of the annual planning exercise did not include the required number of FTEs the BCA anticipated it needed (capacity), the required number of FTEs it anticipated it needed at each level of competence (capability), and the technical leadership or specialist expertise that it expected to need.
Regulation 9														
9	Choose an item.													
Regulation 10														
10(1)	Choose an item.										1	1		
10(2)	Choose an item.													
10(3)(a)	Choose an item.													
10(3)(b)	Choose an item.													
10(3)(c)	Choose an item.													
10(3)(d)	Choose an item.													
10(3)(e)	Choose an item.													
10(3)(f)	Choose an item.													
Regulation 11														

Regulatory requirement	Non-compliance (Serious / General)	Non-compliance identification number	Breach of regulation 5/6? (Enter Yes where applicable)						Resolved On-site? Yes/No	Date Non-compliance to be cleared by (DD/MM/YYYY) N/A where NC is resolved on-site	Date Non-compliance cleared (DD/MM/YYYY)	Number of		Brief comment (to get to the heart of the issue)
			5(a)	5(b)	5(c)	6(b)	6(c)	6(d)				Recommendations	Advisory notes	
11(1)	Choose an item.													
11(2)(a)	General	Nov 18 GNC 7	Yes	Yes				Yes						The training procedures didn't specifically include that training plans would be developed annually.
11(2)(b)	Choose an item.										1			
11(2)(c)	Choose an item.													
11(2)(d)	Choose an item.													
11(2)(e)	Choose an item.													
11(2)(f)	Choose an item.													
11(2)(g)	Choose an item.													
Regulation 12														
12(1)	Choose an item.													
12(2)(a)	Choose an item.													
12(2)(b)	Choose an item.													
12(2)(c)	General	Mar 19 GNC 5	Yes	Yes	Yes			Yes						One contract did not include a requirement for annual competence assessment or to comply with the Building Act 2004.
12(2)(d)	Choose an item.													
12(2)(e)	Choose an item.													
12(2)(f)	Choose an item.													
Regulation 13														
13(a)	Choose an item.													
13(b)	Choose an item.													
Regulation 14														
14	General	Nov 18 GNC 8	Yes	Yes				Yes						Inappropriate information regarding the criticality of equipment was amended during the assessment.
Regulation 15														
15(1)(a)	Choose an item.													
15(1)(b)	Choose an item.													
15(2)	Choose an item.													
Regulation 16														
16(1)	Choose an item.													
16(2)(a)	Choose an item.										2			
16(2)(b)	Choose an item.													
16(2)(c)	Choose an item.													
Regulation 17														
17(1)	Choose an item.													
17(2)(a)	Choose an item.													
17(2)(b)	General	Nov 18 GNC 9	Yes	Yes				Yes						The policy on quality was found to be at a very high level with no detail regarding the quality objectives of the BCA.
17(2)(c)	Choose an item.													
17(2)(d)	Choose an item.													
17(2)(e)	Choose an item.													

Regulatory requirement	Non-compliance (Serious / General)	Non-compliance identification number	Breach of regulation 5/6? (Enter Yes where applicable)						Resolved On-site? Yes/No	Date Non-compliance to be cleared by (DD/MM/YYYY) N/A where NC is resolved on-site	Date Non-compliance cleared (DD/MM/YYYY)	Number of		Brief comment (to get to the heart of the issue)
			5(a)	5(b)	5(c)	6(b)	6(c)	6(d)				Recommendations	Advisory notes	
17(2)(h)	General	Nov 18 GNC 11	Yes	Yes					Yes			1		Detail regarding audit sample size and the submission of the audit report to the quality manager and responsible manager was added to the procedure during the assessment.
17(2)(i)	General	Nov 18 GNC 12	Yes	Yes					Yes					The BCAs procedure required more detail regarding the types of conflicts of interest that should be recorded and managed.
17(2)(j)	Choose an item.													
17(3)	Choose an item.													
17(3A)(a)	General	Nov 18 GNC 13	Yes	Yes					Yes			1		The BCA had not documented its process for considering the seriousness of its concerns about practitioners.
17(3A)(b)	Choose an item.													
17(3A)(c)	Choose an item.													
17(4)(a)	Choose an item.													
17(4)(b)	Choose an item.													
17(5)(a)	General	Nov 18 GNC 10	Yes	Yes					Yes					The procedure for annual strategic management review (including the report template) didn't specifically reference assessing employee and contractor engagement with the quality system and continuous improvement system, or review of the effectiveness of any communications related to the quality assurance system.
17(5)(b)	Choose an item.													
Regulation 18														
18(1)(a)	Choose an item.													
18(1)(b)	Choose an item.													
18(1)(c)	Choose an item.													
18(3)(a)	General	Nov 18 GNC 14	Yes	Yes					Yes					The BCA amended one of its exemptions from holding a qualification during the assessment to bring it in line with MBIE expectations.
18(3)(b)	Choose an item.													