



The NZ mark of competence Tohu Matatau Aotearoa

BUILDING CONSENT AUTHORITY ACCREDITATION FINAL ASSESSMENT REPORT

WHANGANUI DISTRICT COUNCIL

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INTRODUCTION

This report relates to the on-site accreditation assessment of the Whanganui District Council Building Consent Authority (BCA) which took place during **January 2022** to determine compliance with the requirements of the *Building (Accreditation of Building Consent Authorities) Regulations 2006* (the Regulations).

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

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

ASSESSMENT SUMMARY

The assessment identified the BCA's performance had been consistent within the last 24 months, where its statutory performance for granting and issuing Building Consents and Code Compliance Certificates was substantially or fully compliant. Since the last assessment the BCA had recruited cadets to join the experienced team and were still actively recruiting for an additional Building Control Officer as construction activities increased in the area.

There were however, some outstanding issues including the management of internal quality functions, such as records of supervision, internal technical audits and the 24 month CCC decisions, where the clock did not automatically (or manually) start on the required date. These are detailed below. The outstanding non-compliances must be addressed in order for accreditation to continue.

CONTINUING ACCREDITATION

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

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 non-compliances, please contact the Lead Assessor as soon as possible. Where you are seeking an extension to an agreed timeframe to address a non-compliance, your Chief Executive is required to make a formal request for an extension of the timeframe. These will only be granted for unpredictable and unmanageable reasons.

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

RISK ASSESSMENT

The BCA's risk, both to the Territorial Authority, as a BCA and also as an organisation accredited by IANZ was assessed. The BCA was considered to pose a **Low Risk**. The main reasons for considering this risk category were:

- There were 12 General non-compliances raised during the assessment, and none were serious.
- The assessment team did not have any serious concerns in regards to the BCA's technical output.
- There were no significant non-compliances repeated from the last assessment.
- The non-compliances raised during the assessment included some procedural changes, which would be addressed by updating/amending the BCA's procedure. The BCA had already indicated its plan to do so.
- The BCA appeared to have a plan and sufficient resources to address the findings. Although there were some upcoming changes in the BCA's management structure, where the Responsible Manager and CEO for the Council was yet to be permanently appointed, the BCA's Authorised Representative (who was also the Quality Manager) would be able to ensure the BCA's ongoing performance would not be affected.

NEXT ACCREDITATION ASSESSMENT

Unless your BCA undergoes a significant change, requiring some form of interim assessment, or the BCA is unable to clear the identified non-compliances within the agreed timeframe, the next assessment of the BCA is planned as a **Routine Reassessment** for **January 2024**.

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



BCA AND ASSESSMENT DETAILS

ORGANISATION DETAILS							
Organisation: Whanganui District Council							
Address for service: 101 Guyton Street, Whangar		anui 4500					
Client Number: 7443		Accreditation Number: 55					
Acting Chief Executive:		Lance K	enne	dy			
Acting Chief Executive Contact	t Details:	Lance.K	enne	dy@whan	ganui.g	jovt.nz	
Acting BCA Responsible Mana	ager:	Jason S	haileı	ſ			
Acting BCA Responsible Mana	ager Contact Details:	Jason.S	haileı	r@whanga	nui.go	vt.nz	
BCA Authorised Representative	/e:	Mr Greg	Hool	bin		_	
BCA Authorised Representative	ve Contact Details:	Greg.Ho	obin(@whangai	nui.gov	t.nz	
BCA Quality Manager:		Mr Greg	Hool	bin			
BCA Quality Manager Contact	Details:	Greg.Ho	obin(@whangai	nui.gov	t.nz	
Number of BCA FTEs	Technical	8		Admin sup	port		4
Total FTEs should = technical FTEs + admin FTEs + vacancies	Vacancies (Technical)	1		Vacancies	(Admin	1)	0
			L.	Building (Conse	nts	
		R1	624	R2	32	R3	37
	40 (1	C1	74	C2	12	C3	3
BCA Activity during the previo	us 12 months	CCCs				6	674
		New compliance sched		ules		5	
		BCA Not	tices	to Fix			0
ASSESSMENT TEAM							
Assessment Date:		18 Janua	ary 20	022 to 21 J	anuary	2022	
Lead Assessor:							
Lead Assessor Contact Details	s:						
Technical Expert(s):							
Observer(s):							
ASSESSMENT FINDINGS							
	5	This as	sses	sment:	Last	t asses	sment:
Total # of "serious" non-comp	liances:	0		0			
Total # of "general" non-comp	liances:	12		11			
Total # of non-compliances ou	tstanding:	12		10			
Recommendations:		5			1		
Advisory notes:		3 1					
Date clearance plan required from BCA:		25 February 2022					
Date non-compliances must cleared:				22 Apr	il 2022		
NEXT ASSESSMENT							
Recommended next assessment type:		Routine Reassessment					
Recommended next assessment date:				Januar	y 2024		
IANZ REPORT PREPARATION							
Prepared by:	Date: 24 Janu			Signatur	e		
Checked by: Date: 24 Janu		ıary 2022		Signatur	е		

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

The BCA had appropriately documented and effectively implemented its procedure for notification requirements in accordance with Regulation 6A.

The BCA had submitted two notifications within the last 6 months, both were within the 20 working day timeframe.

The first notification was in relation to the loss of 25% or more of its competent staff. This was adequately addressed at the time with the BCA providing information demonstrating that their ongoing performance would not be affected by the change.

The second notification was provided during the accreditation assessment, in relation to the departure of the BCA's Responsible Manager, and the appointment of an Acting Responsible Manager. This notification will be addressed once the BCA provides the required information.

REGULATION 7 PERFORMING BUILDING CONTROL FUNCTIONS

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

Non-compliance? Y/N	Yes - See Record of Non-compliance for details
Non-compliance number/s:	GNC 1
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 provided consumer information regarding how to apply for a consent, and how an application was processed, inspected and certified, however, the following topics required review:

- The consumer information guidance document, Guide 005: Accepting & Processing Building Consents, indicated that Sections 36 (Development Contribution) and 37 (Resource Consents) were conditions that could be put on the Building Consent. These sections were not included in the sections of the Building Act 2004 identified as building consent conditions.
- Section 67 (Waivers & Modifications) was not included in the list of conditions within the guidance document.

GNC 1 to be resolved.

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

Non-compliance? Y/N	Yes - See Record of Non-compliance for details
Non-compliance number/s:	GNC 2
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 its procedure for receiving in accordance with Regulation 7(2)(b), however, the application for building consent form was not identified as Form 2 as required by the Building (Forms) Regulations 2004 and section 45 of the Building Act 2004 (BA04).

GNC 2 to be resolved.

The BCA had adequately documented and effectively implemented its procedure for checking and recording applications in accordance with Regulation 7(2)(c) and 7(2)(d)(i).

Regulations 7(2)(d)(ii): assessing 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:	1
Observations and comments including	a good practice and performance

Observations and comments, including good practice and performance

The BCA had an appropriately documented procedure for assessing applications, which was effectively implemented in accordance with Regulation 7(2)(d)(ii).

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

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

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
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 adequately documented its procedure for processing building consent applications in accordance with Regulation 7(2)(d)(iv).

Implementation of its procedure was not always adequate, where not all of the relevant code clauses were considered or documented during processing to ensure compliance with the building code had been achieved. A number of applications were reviewed where relevant code clauses had been indicated as N/A.

GNC 3 to be resolved.

It was worth noting that in general, the documented reasons for decisions on the processing records were found to be of substantially good quality.

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

Non-compliance? Y/N	Yes - See Record of Non-compliance for details
Non-compliance number/s:	GNC 4
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

The BCA had documented its procedure for granting and issuing consents, in accordance with Regulation 7(2)(d)(v), however, the BCA's procedure T-25 Granting, issuing and lapsing of BC v.14 was indicating Section 37 as a condition on the Building Consent. This is not one of the five applicable conditions under the BA04.

GNC 4 to be resolved.

Implementation was not always adequate, as the BCA was issuing Building Consents which listed Section 37 as a condition on the Form 5.

GNC 4 to be resolved.

Lapsing

The BCA had adequately documented and effectively implemented its procedure for lapsing of Building Consents, in accordance with Regulation 7(2)(d)(v). Reminder letters were sent on time as per their documented procedure, and some older samples were sighted for lapsed applications as the BCA had not lapsed any applications within the last 12 months.

Compliance with statutory timeframes

The BCA's statutory timeframe for granting and issuing Building Consents within 20 working days was seen to be substantially compliant for the last 12 months, averaging around 97%.

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 adequately planned as part of processing.

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

The inspection timeframe were around 3-4 days at the time of the assessment, and good reasons for decisions were seen on inspection records.

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
Opportunities for improvement? Y/N	Yes
Number of recommendations:	2
Recommendation number/s:	R1, R2
Number of advisory notes:	0
Advisory note number/s:	-

Observations and comments, including good practice and performance

Application for a code compliance certificate

The BCA had a documented procedure for Application for a Code Compliance Certification, however, the application for CCC on file was not identified as a Form 6, did not reference the relevant section of the Act (Section 92 of the Act), and it also did not include the minimum fields as required by the Building (Forms) Regulations 2004.

GNC 5A to be resolved.

Implementation of its procedures were adequate and effective.

Code compliance certificates

The BCA had appropriately documented and effectively implemented its procedure for preparation and issue of Code Compliance Certificates.

24 month CCC decision

The BCA had appropriately documented its procedure for making a 24-month decision on whether to issue a Code Compliance Certificate where no application for Code Compliance Certificate had been received.

Implementation of its procedures were not always adequate, where:

- The BCA had not started its CCC clock on the 24th month date.
- The BCA had recorded in its system for CCC 24 month decisions as "Suspended CCC on hold" instead of "Refused".

GNC 5B to be resolved.

The BCA is recommended to capture in their daily report the applications which had an extension granted to complete building work as it was entirely reliant on the Certification Officer to manually revisit the sent letters to see when the extensions would expire.

See Recommendation R1.

Compliance with statutory timeframes

The BCA's statutory timeframe for issuing Code Compliance Certificates within 20 working days was seen to be fully compliant for the last 12 months at 100%.

Compliance schedules

The BCA had appropriately documented and effectively implemented its procedure for preparation and issue of Compliance Schedules.

The BCA is recommended to consider the following:

- Ensure that the version of the referenced Performance Standard is always indicated.
- Remove the reference of NZBC when using an Acceptable Solution as the Performance Standard, because an Acceptable Solutions is not the Building Code.

See Recommendation R2.

Notices to fix

The BCA had an appropriately documented procedure in accordance with Regulation 7(2)(f) for preparation and issue of Notices to Fix.

The BCA had not issued any BCA Notices to Fix in the last 24 months, therefore no example of implementation could be sighted.

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:	-
Nuber of advisory notes:	0
Advisory note number/s:	-

Observations and comments, including good practice and performance

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

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

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

The BCA recorded its complaints within the CRM system as a council wide initiative, but also maintained copies of relevant complaints within its quality system where they were related to the building unit.

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	Yes
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	
Advisory note number/s:	A1

Observations and comments, including good practice and performance

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

The BCA is advised to provide better statistical comparison of the BCOs' competency levels indicating current capabilities, against the existing and forecasted workflow of each building category, as this would provide a more up-front and clearer analysis of available resources.

See Advisory Note A1.

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

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

REGULATION 9 ALLOCATING WORK

Yes - See Record of Non-compliance for details
GNC 6
Yes
1
R3
0
-

Observations and comments, including good practice and performance

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

Implementation of its procedures was not always effective, notably:

- The BCA's skills matrix, which was used for allocation, did not include Certification for Granting of Building Consents. This is a requirement as it forms part of the NCAS System.
- The Technical outcomes noted in the competency assessments were not always accurately reflected/transferred onto the BCA's skills matrix.
 - One BCO was indicated as competent for Certification, but there was no considered or recorded evidence in the competency assessment.
 - The limitations indicated within a BCO's competency assessment was not reflected on the skills matrix.
- Building Consents were being granted by staff whom did not have the required recorded competency.

GNC 6 to be resolved.

The BCA is recommended to ensure the entire building is being considered as a whole when categorising applications as one application was reviewed where the application was categorised as C1 due to the scope of the work, but was located within a building that was at least a C2 category. No documented reason for decision were provided to support the decision to reduce the category.

See Recommendation R3.

REGULATION 10 ESTABLISHING AND ASSESSING COMPETENCY OF EMPLOYEES

Regulation 10(1): assessing prospective employees

Non-compliance? Y/N	No
Non compliance: 1714	110
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 someonts including	

Observations and comments, including good practice and performance

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

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	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 an appropriately documented procedure which was effectively implemented in accordance with Regulation 10(2) for assessing annually (or more frequently) the competence of its employees performing building control functions.

The BCA had an appropriately documented procedure which was effectively implemented in accordance with Regulation 10(3)(a) to (f), which specified the technical requirements for a competence assessment system. All competence assessments were found to be appropriate and to record an appropriate level of detail, as per the National Building Consent Authority Competency Assessment System (NCAS).

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:	1
Advisory note number/s:	A2

Observations and comments, including good practice and performance

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

The BCA had appropriately documented and effectively implemented its training procedure in accordance with Regulation 11(2)(a) to (d), (f) and (g) for making annual (or more frequent) training needs assessments, preparing training plans that specified the training outcomes required, ensuring that employees received the training agreed for them, monitoring and reviewing its employees' application of the training they received, recording employees' qualifications, experience and training, and recording continuing training information.

The BCA is recommended to elaborate within its procedure how individual learning records should be completed and where they should be located.

See Recommendation R4.

The BCA is advised to consider recording learning outcomes (i.e. what was learnt) within its CPD learning records, instead of simply listing the magazine/article name.

See Advisory Note A2.

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

Non-compliance? Y/N	Yes - See Record of Non-compliance for details
Non-compliance number/s:	GNC 7
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 its procedure to supervise its employees doing a technical job under training, however, the BCA's procedure did not describe how supervision was completed and where it was being recorded.

GNC 7 to be resolved.

Implementation of its procedures was not always effective, where the BCA had not actively supervised its employee(s) whom did not have any confirmed competencies for the building control technical decisions they were making.

GNC 7 to be resolved.

REGULATION 12(1) AND (2)(A) TO (F) CHOOSING AND USING CONTRACTORS

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

The BCA had appropriately documented and effectively implemented its procedures for having a system that covered the requirements listed in Regulations 12(2)(a) to (f).

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

The BCA had an appropriately documented procedure for having a system identifying employees and contractors who were competent to provide technical leadership in accordance with Regulation 13(a) and (b). The BCA assessed their technical leaders under the NCAS, and had given them the appropriate powers and authorities to perform building control functions.

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

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

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

 S	Yes - See Record of Non-compliance for details	Non-compliance? Y/N
	GNC 8, GNC 9	Non-compliance number/s:
	Yes	Opportunities for improvement? Y/N
	0	Number of recommendations:
	-	Recommendation number/s:
	1	Number of advisory notes:
	A3	Advisory note number/s:
_	1 A3	

Observations and comments, including good practice and performance

The BCA had documented its organisational structure in accordance with Regulation 15(1)(a) and (b), however, the BCA had not adequately identified where the current vacancies were located within its organisational structure.

GNC 8 to be resolved.

The BCA had an appropriate procedure for recording the roles, responsibilities, powers, authorities and any limitation on powers and authorities for its employees and contractors performing building control functions in accordance with Regulation 15(2).

Implementation of its procedures were not always adequate, where the BCA's delegations manual did not include sections 45(A)(3), 165 and 166 as the defined building control functions under Section 3 of the Building (Accreditation of Building Consent Authorities) Regulations 2006.

GNC 9 to be resolved.

It is suggested that the BCA removes other types of certifications and qualifications which are not part of Regulation 18 from the "Essentials" column in the position descriptions. Also to include wording which identifies to the potential applicant that if they do not hold the relevant required qualification, they would be required to be willing to work towards one.

See Advisory Note A3.

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

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

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

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 had developed a Quality Assurance System that covered its Management and Operations. Where omissions were detected they were addressed under their relevant Regulation 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 an appropriate Quality Policy which included quality objectives, and quality performance indicators for its building control functions at a high level. It was adequately implemented in accordance with Regulation 17(2)(b).

The BCA had appointed a Quality Manager, named as Greg Hoobin in its Quality Assurance System, in accordance with Regulation 17(3).

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:	4
Number of advisory notes:	0
Advisory note number/s:	
Observations and comments, including	good practice and performance
Not applicable to this BCA, that is also a T	-A.

Regulation 17(2)(d): Regular 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

The BCA had an appropriate documented and effectively implemented procedure for reviewing its management system annually (or more frequently) against the expected standards for performance and high level performance indicators from its Quality Policy.

Regulation 17(2)(e) Supporting continuous improvement

Non-compliance? Y/N	Yes - See Record of Non-compliance for details
Non-compliance number/s:	GNC 10
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 an appropriate procedure for supporting continuous improvement in accordance with Regulation 17(2)(e).

Implementation of its procedure was not always adequate, where the BCA had not always:

- assessed the seriousness of an issue raised for continuous improvement
- recorded actions to be undertaken to address or improve a policy, procedure or system
- recorded how they plan and/or implement the agreed action(s)
- recorded how they would monitor and evaluate the actions implemented

GNC 10 to be resolved.

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

Non-compliance? Y/N	Yes - See Record of Non-compliance for details
Non-compliance number/s:	GNC 11
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 its procedure for undertaking annual audits, however, the BCA had not identified the difference in sample sizes when conducting technical audits versus quality/system audits..

GNC 11 to be resolved.

Implementation of its procedures was not always adequate, where the BCA had:

- Not conducted adequate technical audits for two consecutive years.
- Not always documented the proposed action taken to address adverse audit findings.
- Not always recorded the outcome of actions undertaken.

GNC 11 to be resolved.

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

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	Yes
Number of recommendations:	1
Recommendation number/s:	R6
Number of advisory notes:	0
Advisory note number/s:	-

Observations and comments, including good practice and performance

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

The BCA is recommended to record more appropriate conflict of interest types as per the options listed in the register to provide clarity, rather than providing the person's name.

See Recommendation R6.

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 had an appropriate documented and effectively implemented its procedure in its quality assurance system, for communicating with internal and external persons in accordance with 17(2)(i).



Regulation 17(3A): Complaints about building practitioners

Non-compliance? Y/N	Yes - See Record of Non-compliance for details
Non-compliance number/s:	GNC 12
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 its procedure to ensure that the BCA considered whether to make, and made complaints to relevant occupational or professional authorities about practitioners whenever they appeared to it necessary or desirable, however, the BCA had not discussed within its procedure that they would report concerns, record concerns with their supporting evidence, and evaluate the seriousness of concerns.

GNC 12 to be resolved.

Implementation of its procedures was appropriate and effective, where the BCA actively discussed practitioners of concern during their management and team meetings, and as a result, the LBP Complaints Register would be updated to record evidence and details.

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:	
Recommendation number/s:)
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments including	a good practice and performance

Observations and comments, including good practice and performance

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

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

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

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

The BCA had an appropriate procedure, which was adequately implemented for requiring technical qualifications, and establishing circumstances of employees and contractors that would make it unreasonable and impractical for requiring technical qualifications in accordance with Regulation 18(1) to (3).

RECORDS OF NON-COMPLIANCE

RECORD OF NON COMPLIANCE #:	GNC 1
Breach of requirement:	Regulation 7(2)(a)
Finding:	General Non-compliance
FINDING DETAILS	

The following topics within the BCA's consumer information were required to be review:

- The guidance document, Guide 005: Accepting & Processing Building Consents, indicated that Sections 36 (Development Contribution) and 37 (Resource Consents) were conditions that could be put on the Building Consent. These sections were not identified in the Building Act 2004 as possible conditions.
- Section 67 (Waivers & Modifications) was not included in the list of conditions within the guidance document.

BCA ACTIONS REQUIRED

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

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

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

IMPORTANT DATES

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Plan of action from BCA due by:	25 February 2022
All action plans accepted by IANZ:	23 February 2022
Date final evidence of implementation is required from BCA:	8 April 2022
Final date non-compliance to be cleared by:	22 April 2022

EVIDENCE

Plan of action (To be provided by BCA):

The BCA proposes to:

- Revise BCA Guide 005 to remove information that indicated that Sections 36 (Development Contribution) and 37 (Resource Consents) were conditions that could be put on the Building Consent (page 4).
- Revise BCA Guide 005 to include wording in relation to section 67 of the Building Act 2004 to offer more detailed information for Waivers and Modifications and how they are applied (page 8).
- Update the council website with the revised version of G005.

Proposed evidence of implementation (To be provided by BCA): **APPENDIX 1**:

BCA Guide G005 – Building Consent Process

Evidence of implementation and discussion:

23/02/2022 IANZ – BCA submitted clearance material at the same time as the action plan. Clearance material forwarded to TE for review upon acceptance of Action Plan above.

24/02/2022 TE - GNC 1 can be cleared with the evidence provided.

NON COMPLIANCE CLEARED

Signed:	Date: 24 February 2022
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RECORD OF NON COMPLIANCE #:	GNC 2
Breach of requirement:	Regulation 7(2)(b)
Finding:	General Non-compliance
FINDING DETAILS	

The application for building consent was not identified as Form 2 as required by the Building (Forms) Regulations 2004 and section 45 of the Building Act 2004.

BCA ACTIONS REQUIRED

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

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

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

IMPORTANT DATES	
Plan of action from BCA due by:	25 February 2022
All action plans accepted by IANZ:	23 February 2022
Date final evidence of implementation is required from BCA:	8 April 2022
Final date non-compliance to be cleared by:	22 April 2022

EVIDENCE

Plan of action (To be provided by BCA):

The BCA proposes to:

Update the template format that is populated from an online Datacom application to include the reference to Form 2 of the Building (Forms) Regulations 2004 and section 45 of the Building Act 2004.

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

APPENDIX 2:

- 1. Revised Form 2 example.
- 2. Email to ITHELP to revise online building consent application form to include Form 2.

Evidence of implementation and discussion:

23/02/2022 IANZ – BCA submitted clearance material at the same time as the action plan. Clearance material forwarded to TE for review upon acceptance of Action Plan above.

24/02/2022 TE – GNC 2 is NOT cleared with the evidence provided. The proposed changes indicated on the word document are not transferred to the PDF Form 2 evidence provided. Maybe the wrong version was sent [application dated 18/10/2021?

24/02/2022 IANZ - Responded to BCA to request for clarification.

24/02/2022 IANZ – BCA submitted missing evidence. Forwarded to TE for review.

28/02/2022 TE - GNC 2 can be cleared with the evidence provided

NON COMPLIANCE CLEARED	
Signed:	Date: 28 February 2022

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

Not all of the relevant code clauses were considered or documented during processing to ensure compliance with the building code had been achieved. A number of applications reviewed included relevant code clauses that had been indicated as N/A.

BCA ACTIONS REQUIRED

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

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

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

IMPORTANT DATES	
Plan of action from BCA due by:	25 February 2022
All action plans accepted by IANZ:	27 February 2022
Date final evidence of implementation is required from BCA:	8 April 2022
Final date non-compliance to be cleared by:	22 April 2022

EVIDENCE

Plan of action (To be provided by BCA):

The BCA proposes to:

- Revise BCA Technical Review CheckSheet (Processing BCA T-19M) to include a comments section next to a Task and include Building Code clauses as action points.
- Undertake six full technical audits (including two from external contractor) utilising the BCA's amended technical review check sheet (BCA T-19M) paying particular attention to any N/A decisions.
- Continue with technical audit sampling as per GNC 11.

Proposed evidence of implementation (To be provided by BCA): **APPENDIX 3:**

- Revised BCA Technical Review Checksheet (Processing T-19M)
- Samples of internal audits which include processing checklists and plans/specifications for each project.

Evidence of implementation and discussion:

23/02/2022 IANZ – Please include in the proposed evidence of implementation, samples of internal audits conducted with the associated processing checklists and plans for the building consents.

27/02/2022 IANZ – BCA submitted updated action plan on 25th Feb with additional evidence of implementation as requested. Action plan for GNC 3 accepted.

11/04/2022 IANZ – BCA submitted clearance evidence on Friday 9 April 2022. Forwarded to TE today for review.

13/04/2022 TE – GNC can be confirmed cleared with the evidence provided.

NON COMPLIANCE CLEARED





RECORD OF NON COMPLIANCE #:	GNC 4
Breach of requirement:	Regulation 7(2)(d)(v)
Finding:	General Non-compliance
FINDING DETAILS	

Compliance with Form 5

The BCA's procedure *T-25 Granting, issuing and lapsing of BC v.14* indicated Section 37 as a possible condition on a Building Consent. This was not one of the five applicable conditions under the BA04. **GNC 4 to be resolved.**

The BCA was inappropriately issuing Building Consents which listed Section 37 as a condition on the Form 5.

GNC 4 to be resolved.

BCA ACTIONS REQUIRED

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

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

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

IMPORTANT DATES	
Plan of action from BCA due by:	25 February 2022
All action plans accepted by IANZ:	23 February 2022
Date final evidence of implementation is required from BCA:	8 April 2022
Final date non-compliance to be cleared by:	22 April 2022

EVIDENCE

Plan of action (To be provided by BCA):

(a) The BCA proposes to:

- Remove the wording from BCA process T-25 Granting, issuing and lapsing of BC v.14 that identifies that section 37 BA04 is a condition that can be added to the approved building consent documents.
- Revise wording in BCA process T-25 Granting, issuing and lapsing of BC v.14 that differentiates between Building Act conditions and Informative Notes in context of inclusion in approved building consent documents.

(b) The BCA proposes to:

- Communicate (by email) with officers that the section 37 BA04 information is recorded via inclusion in the Attachments section of the BCA's completed Form 5.
- The BCA will supply completed approved building consent applications where the section 37 requirement has been identified in the Attachments section of approved plans only.

Proposed evidence of implementation (To be provided by BCA): **APPENDIX 4:**

- 1. Revised BCA T-25 Granting, Issuing and Lapsing of Building Consent (changes highlighted).
- 2. Email to staff re Section 37 placement in building consent documentation.
- 3. Example of a revised application where section 37 was applied.

Evidence of implementation and discussion:

23/02/2022 IANZ – BCA submitted clearance material at the same time as the action plan. Clearance material forwarded to TE for review upon acceptance of Action Plan above.

24/02/2022 TE – GNC 4 is considered cleared with the information provided.		
NON COMPLIANCE CLEARED		
Signed:	Date: 24 February 2022	



GNC 5A
Regulation 7(2)(f)
General Non-compliance

FINDING DETAILS

The application for CCC on file was not identified as Form 6, it did not reference the relevant section of the Act (Section 92 of the Act), and it also did not include the minimum fields as required by the Building (Forms) Regulations 2004.

BCA ACTIONS REQUIRED

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

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

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

IMPORTANT DATES	
Plan of action from BCA due by:	25 February 2022
All action plans accepted by IANZ:	23 February 2022
Date final evidence of implementation is required from BCA:	8 April 2022
Final date non-compliance to be cleared by:	22 April 2022

EVIDENCE

Plan of action (To be provided by BCA):

The BCA proposes to:

- Update the template format that is populated from an online Datacom application to include the reference to Form 6 of the Building (Forms) Regulations 2004 on the populated CCC application.
- Update the template format that is populated from an online Datacom CCC application to include the reference to the wording "I request that you issue a code compliance certificate for this work under section 95 of the Building Act 2004".

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

APPENDIX 5A:

- 1. Draft version of completed CCC application from online portal.
- 2. Email to ITHELP to request changes to be made to the CCC template.

Evidence of implementation and discussion:

23/02/2022 IANZ – BCA submitted clearance material at the same time as the action plan. Clearance material forwarded to TE for review upon acceptance of Action Plan above.

24/02/2022 TE – GNC 4 is considered cleared with the information provided.

NON COMPLIANCE CLEARED Date: 24 February 2022 Signed:

RECORD OF NON COMPLIANCE #:	GNC 5B
Breach of requirement:	Regulation 7(2)(f)
Finding:	General Non-compliance
FINDING DETAILS	

Implementation of the BCA's 24 month CCC decisions procedure was not always adequate, where:

- The BCA had not started its CCC clock on the 24th month date.
- The BCA had recorded in its system for CCC 24 month decisions as "Suspended CCC on hold" instead of "Refused".

BCA ACTIONS REQUIRED

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

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

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

IMPORTANT DATES	
Plan of action from BCA due by:	25 February 2022
All action plans accepted by IANZ:	23 February 2022
Date final evidence of implementation is required from BCA:	8 April 2022
Final date non-compliance to be cleared by:	22 April 2022

EVIDENCE

Plan of action (To be provided by BCA):

The BCA proposes to:

- Start the CCC statutory clock on the 24 month anniversary of the application. [This will require an ITHELP request to action].
- Advise staff, via email and recorded, that the decision that is triggered at the 24 month anniversary
 is to be CCC Refusal and not Suspended CCC On hold. This is on the proviso that a CCC
 application has not been made (and statutory clock already running) or an extension of time has
 been applied for and granted.
- Update BCA Job Procedure BCA T-33 Code Compliance Certificate (section 2.2 2.5) to reflect the actions required when an application reaches its two year anniversary.
- Utilise the Construction Action event in P&R that allows a new CCC application to be applied for (including a specific statutory clock) if a CCC Refusal action has taken place previously.
- Update P&R Construction Action Event 'CCC24Month' to 'CCC Refusal'.
- Update all applicable applications identified in the P&R Report: 'Consents Subject to 24 Month Review Procedures' to CCC Refusal.

Proposed evidence of implementation (To be provided by BCA): **APPENDIX 5B:**

- 1. Email: ITHELP job request to ensure CCC statutory clock starts on an approved building consents two year anniversary.
- 2. Email: Communication to advise staff that the decision made on the two year anniversary (if there has not been a CCC application or extension of time) to advise of the correct status to be applied to the application.
- 3. Revised BCA procedure T-33 Code Compliance Certificate.
- 4. Email: ITHELP job request to change the P&R event from CCC24month to CCCRefusal in Construction Action.
- 5. Example of status change to CCCRefusal in 'Consents Subject to 24 Month Review Procedures'

report.

Evidence of implementation and discussion:

24/02/2022 IANZ – BCA submitted clearance material at the same time as the action plan on 23/02/2022. Adequate progress update, and recent CCC decisions made sighted. GNC will be closed once the clock changes had been made and considered appropriate, with data indicating that the clock is initiated upon the required date. Responded to BCA.

23/03/2022 IANZ – BCA submitted updated report indicating the BCA's progress with its CCC decisions, which showed the BCA is up to date with their CCC 24 month decisions. Screenshots showed the CCC clock was started adequately and the decision was made within 20 working days. Evidence considered appropriate.

NON COMPLIANCE CLEARED	
Signed:	Date: 23 March 2022

RECORD OF NON COMPLIANCE #:	GNC 6
Breach of requirement:	Regulation 9
Finding:	General Non-compliance
FINDING DETAILS	

Implementation of the BCA's allocations procedure was not always effective, notably:

- The BCA's skills matrix, which was used for allocation, did not include Certification for Granting of Building Consents.
- The Technical outcomes noted in the competency assessments were not always accurately reflected/transferred onto the BCA's skills matrix.
 - One BCO was indicated as competent for Certification, but there was no consideration or evidence recorded in the competency assessment.
 - The limitations indicated within a BCO's competency assessment were not reflected on the skills matrix.
- Building Consents were being granted by staff whom did not have the required recorded competency

BCA ACTIONS REQUIRED

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

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

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

IMPORTANT DATES	
Plan of action from BCA due by:	25 February 2022
All action plans accepted by IANZ:	23 February 2022
Date final evidence of implementation is required from BCA:	8 April 2022
Final date non-compliance to be cleared by:	22 April 2022

EVIDENCE

Plan of action (To be provided by BCA):

The BCA proposes to:

- Amend the BCA Organisational Skills Matrix (QS-16D) to a format that aligns with the annual competency assessments provided.
- Include Granting & Certifying outcomes in the BCA's skills matrix.
- Revise BCA T-25 Granting, Issuing and Lapsing of Building Consent to include wording in how an application is granted when it has been assessed by a contractor.

Proposed evidence of implementation (To be provided by BCA): **APPENDIX 6:**

- 1. BCA T-25 Granting, Issuing and Lapsing of Building Consent
- 2. QS-16D Organisational Skills Matrix

Evidence of implementation and discussion:

23/02/2022 IANZ – BCA submitted clearance material at the same time as the action plan. Clearance material forwarded to TE for review upon acceptance of Action Plan above.

28/02/2022 TE – GNC can be cleared with the evidence provided.

NON COMPLIANCE CLEARED		
Signed:		Date: 28 February 2022



GNC 7
Regulation 11(2)(e)
General Non-compliance

FINDING DETAILS

The BCA's procedure had not described how supervision was completed and where it was recorded. **GNC 7 to be resolved.**

The BCA had not actively supervised its employee(s) who did not have confirmed competencies for the building control technical decisions they were making.

GNC 7 to be resolved.

BCA ACTIONS REQUIRED

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

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

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

IMPORTANT DATES

Plan of action from BCA due by:	25 February 2022
All action plans accepted by IANZ:	27 February 2022
Date final evidence of implementation is required from BCA:	8 April 2022
Final date non-compliance to be cleared by:	22 April 2022

EVIDENCE

Plan of action (To be provided by BCA):

The BCA proposes to;

- Revise BCA Desktop Guide Training (g) to include descriptions of what supervision is required and how this carried out and recorded.
- Revise BCA Training program template to identify areas of direct and indirect supervision based on annual competency assessment outcomes and limitations, if any.
- Undertake three monthly audits of staff under supervision to ensure the appropriate reviews have been completed and recoded appropriately.

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

APPENDIX 7:

- 1. Revised Desktop Guide Training (g)
- 2. Revised BCA Training Plan template
- 3. Evidence of implementation will be provided via any supervision records completed throughout the clearance period.

Evidence of implementation and discussion:

23/02/2022 IANZ – Please provide evidence of implementation, supervision records (if any) within the duration of the clearance process.

27/02/2022 IANZ – BCA submitted updated action plan on 25th Feb with additional evidence of implementation as requested. Action plan for GNC 7 accepted.

07/04/2022 IANZ – BCA submitted clearance evidence yesterday.

08/04/2022 IANZ – Requested BCA for an updated skills matrix, as well as a processing report for the last 3 months, so I can match the jobs that required supervision against the supervision notes, and to ensure that no applications had been missed.

11/04/2022 IANZ – BCA submitted further information on Friday afternoon, including up to date skills matrix, and GoGet report of consents processed from 1 Jan 2022 to 31 March 2022. Unsatisfactory. Officers that required full/distant supervision had not had every application assessed supervised... Responded to BCA for clarification.

13/04/2022 IANZ – BCA submitted a cadet's training programme providing an explanation of how the programme works, however, the programme itself does not cover the requirement of Reg 11 where if an employee had not been competently assessed, all work he does must be adequately supervised. The clearance evidence sent through therefore is not satisfactory. Responded to BCA.

14/04/2022 IANZ – discussed further with the BCA regarding the requirement to supervise employees who does not hold a current competency.

21/04/2022 BCA – Please find attached supporting evidence in relation to compliance with regulation 11(2)(e) and the supervision of employees for GNC 7 (four GoGet indirect supervision reviews and the revised BCA QMS procedure Training Employees v16.0). Taking into account that WDC has been training cadets for a number of years, which have included IANZ assessments through this time, there was a belief that the formal cadet training program was capturing sufficient evidence including the recording of this evidence to satisfy the requirements.

The BCA's latest accreditation audit (January 2022) has highlighted deficiencies in the area of supervision, particularly in regards to recording indirect supervision. The BCA has revised its QMS (Simpli manual: Train Employees v16.0) to clearly define supervision requirements, both direct and indirect, and have identified the necessary recording instruments within this procedure.

It is the BCA's understanding that until a level of competence has been formally acknowledged then the use of direct and/or indirect supervision is mandatory and is required to be recorded accordingly. BCA technical staff are currently undergoing their annual competency assessments utilising an external contractor (T&R Johnson Development LTD) and the results of these assessments should see the amount of direct and indirect supervision reduced substantially for staff.

As part of the procedural changes, especially in relation to indirect supervision, the BCA has included four examples of indirect supervision of a cadet through the GoGet system. The reviewer is identified as the "signing officer" in the GoGet checklist under the Reviews heading.

As the BCA is currently undertaking annual competency assessments it is the BCA's intent to backtrack to 1 April 2022 and add indirect supervision reviews to staff in training and record these accordingly. This process will be implemented forward until competency assessment reviews are received and recorded in the BCA's Skills matrix. This ultimately will then see any supervision requirements revised and recorded. The BCA's annual internal audit system will also ensure that this process is being followed accordingly.

The BCA will also be implementing a change in how cadet/officers in training will have their competency assessed. The BCA will be engaging with its external competency assessor to provide competency assessment reviews when it is feasible that an officer can provide substantiated evidence of a rise in competence and therefore remove indirect supervision requirements. These competency reviews could be undertaken several times throughout an annual cycle.

21/04/2022 IANZ – BCA submitted further evidence for GNC 7. Considered appropriate.

NON COMPLIANCE CLEARED		
Signed:	Date: 21 April 2022	

RECORD OF NON COMPLIANCE #:	GNC 8
Breach of requirement:	Regulation 15(1)(b)
Finding:	General Non-compliance
FINDING DETAILS	

The BCA had not adequately identified where the current vacancies were located within its organisational structure.

BCA ACTIONS REQUIRED

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

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

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

IMPORTANT DATES	
Plan of action from BCA due by:	25 February 2022
All action plans accepted by IANZ:	23 February 2022
Date final evidence of implementation is required from BCA:	8 April 2022
Final date non-compliance to be cleared by:	22 April 2022

EVIDENCE

Plan of action (To be provided by BCA):

The BCA proposes to:

- Amend Organisation Chart QS-3A to reflect where actual vacancies are i.e. within Building Control Officers.
- Amend BCA procedure 'Desktop Guide Organisation Structure (ki)' to include the wording that any BCA vacancies will be recorded in the appropriate position/roles.

Proposed evidence of implementation (To be provided by BCA): APPENDIX 8:

- 1. Revised Organisation Chart QS-3A.
- 2. Revised BCA Desktop Guide_Organisation Structure (ki)

Evidence of implementation and discussion:

24/02/2022 IANZ – BCA submitted clearance material at the same time as the action plan on 23/02/2022. Revised procedure and organisational structure is considered adequate.

NON COMPLIANCE CLEARED Date: 24 February 2022 Signed:

RECORD OF NON COMPLIANCE #:	GNC 9
Breach of requirement:	Regulation 15(2)
Finding:	General Non-compliance
FINDING DETAILS	

The BCA's delegations manual did not include sections 45(A)(3), 165 and 166 as the defined building control functions under Section 3 of the Building (Accreditation of Building Consent Authorities) Regulations 2006.

BCA ACTIONS REQUIRED

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

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

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

IMPORTANT DATES	
Plan of action from BCA due by:	25 February 2022
All action plans accepted by IANZ:	23 February 2022
Date final evidence of implementation is required from BCA:	8 April 2022
Final date non-compliance to be cleared by:	22 April 2022

EVIDENCE

Plan of action (To be provided by BCA):

The BCA proposes to;

Amend the organisations Delegations Register by including sections 45, 165 and 166 of the Building Act 2004 where appropriate (pages 99-100).

Proposed evidence of implementation (To be provided by BCA): **APPENDIX 9:**

- 1. Revised WDC Delegations register (draft).
- 2. Email to Legal Department requesting the highlighted changes are made to the Delegations Register.

Evidence of implementation and discussion:

24/02/2022 IANZ – BCA submitted clearance material at the same time as the action plan on 23/02/2022. Draft delegations register is considered appropriate including the missing sections of the Act. GNC can be cleared upon the publication of the updated register.

03/03/2022 BCA - General Counsel responded wanting to understand requirement.

03/03/2022 IANZ - Replied confirming requirements and MBIE's expectations, sent links to the guidance documents and website.

30/03/2022 BCA – General Counsel wrote back contesting the requirement to have the required building control functions delegated.

31/03/2022 IANZ – Responded to General Counsel again, outlining the recent conversation with MBIE, confirming that the required sections to be delegated, and also provided the link to the appeal process should they wish to proceed down that path.

11/04/2022 IANZ – BCA submitted links to internal procedures, however these could not be accessed off site. Requested BCA to submit exports or PDFs for review.

13/04/2022 IANZ – updated Promapp procedures provided. GNC can be cleared as the procedures nominated the roles and functions as to who prepares and issues minor variations and notices to fix.

NON COMPLIANCE CLEARED		
Signed:	Date: 13 April 2022	



RECORD OF NON COMPLIANCE #:	GNC 10
Breach of requirement:	Regulation 17(2)(e)
Finding:	General Non-compliance

FINDING DETAILS

Implementation of the BCA's Continuous Improvements procedure was not always adequate, where the BCA had not always:

- assessed the seriousness of an issue raised for continuous improvement
- recorded actions to be undertaken to address or improve a policy, procedure or system
- recorded how they plan and/or implement the agreed action(s)
- recorded how they would monitor and evaluate the actions implemented

BCA ACTIONS REQUIRED

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

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

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

IMPORTANT DATES		
Plan of action from BCA due by:	25 February 2022	
All action plans accepted by IANZ:	23 February 2022	
Date final evidence of implementation is required from BCA:	8 April 2022	
Final date non-compliance to be cleared by:	22 April 2022	
·		

EVIDENCE

Plan of action (To be provided by BCA):

The BCA acknowledges that its implementation of the Continuous Improvement system was lacking and that there were a number of Cl's yet to be finalised appropriately as per the BCA procedures.

As there are a number of improvements identified in applying remedies to the highlighted GNC's, where applicable, Cl's will be raised and actioned accordingly.

These actions, coupled with updating the current CI Register will see the BCA maintain a fully functioning Continuous Improvement system.

Therefore; the BCA proposes to:

- Revise QS-9A Continuous Improvement Form template to include a 'Severity' acknowledgment based on the criteria included in QS-9A.
- Complete a Continuous Improvement for a process change identified within the GNC report (Form 2 change)
- Complete update of CI Register to show finished processes, where applicable, including recording how CI's were monitored, evaluated and the outcomes of the Continuous Improvement.
- Supply IANZ with a copy of the BCA's updated Continuous Improvement Register by 8 April 2022.

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

APPENDIX 10:

- 1. Continuous Improvement (Form 2 inclusion) utilising a revised QS-9A Continuous Improvement form.
- 2. Email to staff advising of CI changes.

Evidence of implementation and discussion:

24/02/2022 IANZ – BCA submitted clearance material at the same time as the action plan on 23/02/2022. 1 sample submitted, requested a few more samples to be sent through as they're submitted. Updated CI register to be provided by 8 April 2022.

07/04/2022 IANZ – BCA submitted clearance material yesterday. Reviewed 6 samples, CI forms have adequate reasons for decisions documented. Considered appropriate.

	NCE CLEARED		
Date: 7 April 2022	Date: 7 April 2022		<u>.</u>

RECORD OF NON COMPLIANCE #:	GNC 11
Breach of requirement:	Regulation 17(2)(h)
Finding:	General Non-compliance
FINDING DETAILS	

The BCA had not identified within their procedure how the sample sizes for Technical Audits were selected.

GNC 11 to be resolved.

Implementation of the BCA's internal audit procedure was not always adequate, where the BCA had:

- Not conduct adequate technical audits for two consecutive years.
- Not always documented the proposed action taken to address adverse findings
- Not always recorded the outcome of actions undertaken

GNC 11 to be resolved.

BCA ACTIONS REQUIRED

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

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

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

IMPORTANT DATES

Plan of action from BCA due by:	25 February 2022
All action plans accepted by IANZ:	27 February 2022
Date final evidence of implementation is required from BCA:	8 April 2022
Final date non-compliance to be cleared by:	22 April 2022

EVIDENCE

Plan of action (To be provided by BCA):

The BCA proposes to;

- Revise BCA Procedures Desktop Guide Quality Audits (mvi) to include sample choice and sizes.
- Revise BCA Procedures Desktop Guide Quality Audits (mvi) to include a link to the BCA's Technical Review Recommendations folder in its document management system (Hubble).
- Revise the BCA's 2022 audit schedule (to include Technical Audit timeframes in Other Review/Audit Needs).

Proposed evidence of implementation (To be provided by BCA): **APPENDIX 11:**

- 1. BCA Procedures Desktop Guide Quality Audits (mvi).
- 2. BCA 2022 audit schedule
- 3. Internal audits undertaken through the clearance process

Evidence of implementation and discussion:

23/02/2022 IANZ – Please provide internal audits that are nominated to be completed within the duration of the clearance process.

27/02/2022 IANZ – BCA submitted updated action plan on 25th Feb with additional evidence of implementation as requested. Action plan for GNC 11 accepted.

11/04/2022 IANZ - Procedure part of the GNC can be resolved.

Implementation was still not satisfactory. No consent documents were submitted to be reviewed. The register did not indicate whether the audit was against Processing, Inspections or CCCs. Emailed BCA to clarify as the links provided in the audit could not be accessed off site.

13/04/2022 IANZ – It was noted that there were only technical audits for Processing? Have you done any inspections and CCC audits as well? As the finding was indicating that there were no technical audits done, for all the technical functions, not just processing. Responded to BCA to clarify.

13/04/2022 BCA – I have included some examples (Pdf's) of inspection audits/reviews that have been completed and is basically what we use to audit inspections.

As you can imagine these have been difficult to complete as we move from lockdowns to officers isolating and working in individual bubbles.

What I take from this is that we will need to ensure we add specific audit types to our BCA audit schedule i.e. processing, inspection and CCC and not just rely on a basic technical audit prompt in the schedule.

We do not have a specific audit form for CCC decisions only the checklist that officers use when undertaking this function. We audit CCC timeframes etc. but it seems we do not necessarily audited the technical decisions made to grant the CCC although we have been through several IANZ audits and I'm not sure why this specific area has not been addressed before.

I can populate a specific CCC audit checklist based on the BCA T-33B and our other audit templates to record decisions, outcomes etc.

I envisage that once I have created a new CCC audit template we could have four completed audits to you by the end of next week if that works?

13/04/2022 IANZ – As the intention of this exercise is for us to ensure that moving forward, that these technical audits are adequately completed. Suspecting that we would need to also provide another revision of the procedure, documenting this process for inspections and CCCs, perhaps referencing your new templates?

14/04/2022 TE – BCA only submitted 1 technical audit for inspections, an altered CCC checklist and a procedure. A range of inspection audits would be expected to ensure that this function is adequately carried out moving forward?

14/04/2022 IANZ - Responded to BCA to request for clarification.

14/04/2022 BCA – We have completed quite a few Inspection reviews(audits) using BCA T-19N. I believe I may also have supplied you with a review which utilised QS-4A (the blue one). This checklist (QS-4A) was essentially one that I would use to satisfy the non-technical part of an inspection to align with our procedures around booking and undertaking an inspection.

BCA T-19N is what Bill would normally use to review an inspection, not the QS-4A, he has picked up the wrong one in that particular case. I will go back into our system and access the inspection audits/reviews which we have on record and I can send some more examples.

Just to confirm what I will supply;

- Examples of completed inspection reviews/audits (BCA-T-19N)
- Revised QMS procedure which nominates that technical audits including processing, inspections and CCC's are required
- Revised 2022 BCA audit schedule including technical audit types and numbers required
- CCC technical audit form (new, with four CCC applications audited)
- All information to be supplied to IANZ before 22/04/2022

I will work on this over the next few days and book Bill out on Tuesday to complete the CCC audits so we can get them to you ASAP.

14/04/2022 IANZ - Responded to BCA accepting the above proposed list of further evidence to be

supplied.

19/04/2022 BCA – I have attached the required evidence as per below for the action plan requirements for GNC 11.

I'm comfortable that we have now identified the audit requirements, including technical audits, and have included these within our schedule and the QMS (I will also add to my whiteboard so we stay on top of these).

As we progress through these audits, I'm sure we will find improvements along the way that will also assist outcomes and keep our CI Register moving along.

- Examples of completed inspection reviews/audits (BCA-T-19N)
- Revised QMS procedure which nominates that technical audits including processing, inspections and CCC's are required (I have only included the relevant highlighted pages)
- Revised 2022 BCA audit schedule including technical audit types and numbers required
- CCC technical audit form (new, with four CCC applications audited)

20/04/2022 IANZ – BCA had provided an adequate updated procedure to ensure all technical building control functions would be audited annually. Audits provided were considered appropriate.

NON COMPLIANCE CLEARED	
Signed:	Date: 20 April 2022

RECORD OF NON COMPLIANCE #:	GNC 12
Breach of requirement:	Regulation 17(3A)(1)
Finding:	General Non-compliance
FINDING DETAILS	

The BCA had not discussed within its procedure that they would report concerns, record concerns with their supporting evidence, and evaluate the seriousness of concerns.

BCA ACTIONS REQUIRED

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

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

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

IMPORTANT DATES	
Plan of action from BCA due by:	25 February 2022
All action plans accepted by IANZ:	23 February 2022
Date final evidence of implementation is required from BCA:	8 April 2022
Final date non-compliance to be cleared by:	22 April 2022

EVIDENCE

Plan of action (To be provided by BCA):

The BCA proposes to:

- Revise BCA procedure T-49 Compliant Against Licenced or Registered Practioner to include wording to ensure the BCA would report concerns, record concerns with supporting evidence and evaluate the seriousness of concerns accordingly.
- All information will be recorded in the BCA T-49Regsiter [Licenced Building Practioners & Professional Bodies Complaints Register].

Proposed evidence of implementation (To be provided by BCA): **APPENDIX 12:**

Revised BCA T-49 BCA Complaint Against Licenced or Registered Practioner.

Evidence of implementation and discussion:

24/02/2022 IANZ – BCA submitted clearance material at the same time as the action plan on 23/02/2022. Updated procedure considered appropriate.

NON COMPLIANCE CLEARED		
Signed		Date: 24 February 2022

SUMMARY OF RECOMMENDATIONS

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

It is recommended that:

- **R1 Regulation 7(2)(f) 24 month decisions –** The BCA is recommended to capture in their daily report, the applications which have had an extension granted to complete building work, as the BCA currently is entirely reliant on the Certification Officer to manually revisit the sent letters to see when the extensions will expire.
- R2 Regulation 7(2)(f) Compliance Schedules The BCA is recommended the following:
 - Ensure that the version number/identity of the Performance Standard referenced on Compliance Schedules is always documented.
 - Remove the reference to NZBC when using an Acceptable Solution as the Performance Standard, because an Acceptable Solution is not the Building Code.
- **R3 Regulation 9 –** The BCA is recommended to ensure the entire building is being considered as a whole when categorising applications.
- **R4 Regulation 11(2)(g) –** The BCA is recommended to elaborate within its procedure how individual learning records are to be completed and where they would be located.
- **R5 Regulation 17(2)(i)** To provide clarity the BCA is recommended to record more appropriate conflict of interest types as per the options listed in the register, rather than providing the person's name.



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 Regulation 8(1) –** The BCA is advised to provide a better statistical analysis of the BCOs' competency levels, indicating current capabilities against the existing and forecasted workflow of each building category, as this would provide a more up-front and clearer analysis.
- **A2 Regulation 11(2)(g) –** The BCA is advised to consider recording learning outcomes within its learning records, instead of simply listing the magazine/article name.
- A3 Regulation 15(2) The BCA is recommended to remove other types of certifications and qualifications which are not part of Regulation 18 from their "Essentials" column in their position descriptions. Also to include the wording which identifies to the potential applicant that if they do not hold the relevant required qualification that they would be willing to work towards one.

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SUMMARY TABLE OF NON-COMPLIANCE

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

Regulatory	Non- compliance (Serious / General)	Non- compliance identification number				gulation here appli			Resolved On-site? Yes/No	Date Non- compliance to be cleared by (DD/MM/YYYY)	Date Non- compliance cleared (DD/MM/YYYY)	Number of		Brief comment
requirement			5(a)	5(b)	5(c)	6(b)	6(c)	6(d)				Recs.	Adv. notes	(one sentence/line only to get to the heart of the issue)
6(A)(1)	Choose item.													
6(A)(2)	Choose item.													
Regulation 7														
7(1)	Choose item.													V
7(2)(a)	General	GNC 1			Yes				No	22/04/2022	24/02/2022		C	 The following topics within the BCA's consumer information were required to be review: The guidance document, Guide 005: Accepting & Processing Building Consents, indicated that Sections 36 (Development Contribution) and 37 (Resource Consents) were conditions that could be put on the Building Consent. These sections were not identified in the Building Act 2004 as possible conditions. Section 67 (Waivers & Modifications) was not included in the list of conditions within the guidance document.
7(2)(b)	General	GNC 2			Yes				No	22/04/2022	28/02/2022	0		The application for building consent was not identified as Form 2 as required by the Building (Forms) Regulations 2004 and section 45 of the Building Act 2004.
7(2)(c)	Choose item.													
7(2)(d)(i)	Choose item.													
7(2)(d)(ii)	Choose item.													
7(2)(d)(iii)	Choose item.													
7(2)(d)(iv)	General	GNC 3			Yes		Yes		No	22/04/2022	13/04/2022			Not all of the relevant code clauses were considered or documented during processing to ensure compliance with the building code had been achieved. A number of applications reviewed included relevant code clauses that had been indicated as N/A.
7(2)(d)(v)	General	GNC 4	Yes	Yes	Yes				No	22/04/2022	24/02/2022			Compliance with Form 5 The BCA's procedure T-25 Granting, issuing and lapsing of BC v.14 indicated Section 37 as a possible condition on a Building Consent. This was not one of the five applicable conditions under the BA04. The BCA was inappropriately issuing Building Consents which listed Section 37 as a condition on the Form 5.
7(2)(e)	Choose item.								50					
7(2)(f)	General	GNC 5			Yes	Yes	2		No	22/04/2022	23/03/2022	2		Application for Code Compliance Certificate The application for CCC on file was not identified as Form 6, it did not reference the relevant section of the Act (Section 92 of the Act), and it also did not include the minimum fields as required by the Building (Forms) Regulations 2004. 24 Month CCC Decisions Implementation of the BCA's 24 month CCC decisions procedure was not always adequate, where: • The BCA had not started its CCC clock on the 24th month date. • The BCA had recorded in its system for CCC 24 month decisions as "Suspended – CCC on hold" instead of "Refused".
7(2)(g)	Choose item.													
7(2)(h)	Choose item.													
Regulation 8														
8(1)	Choose item.												1	
8(2)	Choose item.													
Regulation 9	Canaral	GNC 6			Voc				Na	22/04/2022	20/02/2022	1		Implementation of the PCA's allocations proceedure was not always affective, not always
9	General	GINC 6			Yes				No	22/04/2022	28/02/2022	ı		 Implementation of the BCA's allocations procedure was not always effective, notably: The BCA's skills matrix, which was used for allocation, did not include Certification for Granting of Building Consents. The Technical outcomes noted in the competency assessments were not always accurately reflected/transferred onto the BCA's skills matrix.

Regulatory	Non- compliance (Serious / General)	Non- compliance identification number		Breac Enter	ch of re	gulatior	1 5/6? icable		Resolved On-site? Yes/No	Date Non- compliance to be cleared by (DD/MM/YYYY)	Date Non- compliance cleared (DD/MM/YYYY)	Number of		Brief comment
requirement			5(a)	5(b)	5(c)	6(b)	6(c)	6(d)				Recs.	Adv. notes	(one sentence/line only to get to the heart of the issue)
														 One BCO was indicated as competent for Certification, but there was no consideration or evidence recorded in the competency assessment. The limitations indicated within a BCO's competency assessment were not reflected on the skills matrix. Building Consents were being granted by staff whom did not have the required recorded competency
Regulation 10														
10(1)	Choose item.													
10(2)	Choose item.													
10(3)	Choose item.													
Regulation 11														
11(1)	Choose item.													
11(2)(a)	Choose item.													
11(2)(b)	Choose item.													r .
11(2)(c)	Choose item.											4		
11(2)(d)	Choose item.													
11(2)(e)	General	GNC 7	Yes	Yes	Yes		Yes		No	22/04/2022	21/04/2022			The BCA's procedure did not describe how supervision was completed and where it was
(=)(=)	Jones a.	0.10 /	. 55	1.00						22/01/2022				recorded. The BCA had not actively supervised its employee(s) who did not have confirmed competencies for the building control technical decisions they were making.
11(2)(f)	Choose item.													competencies for the building control technical decisions they were making.
11(2)(g)	Choose item.											1	1	
Regulation 12	One de la manna												•	
12(1)	Choose item.													
12(2)(a)	Choose item.													
12(2)(b)	Choose item.													
12(2)(c)	Choose item.									(/)				
12(2)(d)	Choose item.								C					
12(2)(e)	Choose item.									,				
12(2)(f)	Choose item.													
Regulation 13	One de la manna													
13(a)	Choose item.													
13(b)	Choose item.													
Regulation 14	One de la marin.													
14	Choose item.					<								
Regulation 15														
15(1)(a)	Choose item.						-							
15(1)(b)	General	GNC 8			Yes				No	22/04/2022	24/02/2022			The BCA had not adequately identified where the current vacancies were located within its organisational structure.
15(2)	General	GNC 9			Yes				No	22/04/2022	13/04/2022		1	The BCA's delegations manual did not include sections 45(A)(3), 165 and 166 as the defined building control functions under Section 3 of the Building (Accreditation of Building Consent Authorities) Regulations 2006.
Regulation 16														
16(1)	Choose item.													
16(2)(a)	Choose item.													
16(2)(b)	Choose item.													
16(2)(c)	Choose item.													
Regulation 17														
17(1)	Choose item.													

Regulatory	Non- compliance (Serious / General)	Non- compliance identification number		Brea Enter	ch of re	gulatior here appli	n 5/6? icable		Resolved On-site? Yes/No	Date Non- compliance to be cleared by (DD/MM/YYYY)	Date Non- compliance cleared (DD/MM/YYYY)	Number of		Brief comment
requirement			5(a)	5(b)	5(c)	6(b)	6(c)	6(d)				Recs.	Adv. notes	(one sentence/line only to get to the heart of the issue)
17(2)(a)	Choose item.													
17(2)(b)	Choose item.													
17(2)(c)	Choose item.													
17(2)(d)	Choose item.													
17(2)(e)	General	GNC 10			Yes	Yes	Yes	Yes	No	22/04/2022	07/04/2022			Implementation of the BCA's Continuous Improvements procedure was not always adequate, where the BCA had not always: • assessed the seriousness of an issue raised for continuous improvement • recorded actions to be undertaken to address or improve a policy, procedure or system • recorded how they plan and/or implement the agreed action(s) • recorded how they would monitor and evaluate the actions implemented
17(2)(h)	General	GNC 11			Yes	Yes	Yes	Yes	No	22/04/2022	20/04/2022			The BCA had not identified within their procedure how the sample sizes for Technical Audits were selected. Implementation of the BCA's internal audit procedure was not always adequate, where the BCA had: Not conduct adequate technical audits for two consecutive years. Not always documented the proposed action taken to address adverse findings Not always recorded the outcome of actions undertaken
17(2)(i)	Choose item.													
17(2)(j)	Choose item.													
17(3)	Choose item.													
17(3A)(a)	Choose item.													
17(3A)(b)	Choose item.									•				
17(3A)(c)	General	GNC 12	Yes	Yes					No	22/04/2022	24/02/2022			The BCA had not discussed within its procedure that they would report concerns, record concerns with their supporting evidence, and evaluate the seriousness of concerns.
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.								SU					
18(3)(b)	Choose item.							1	/)					