



**BUILDING CONSENT AUTHORITY ACCREDITATION
ASSESSMENT REPORT**

Queenstown Lakes District Council
Routine Reassessment

10 to 13 October 2017
All cleared

IANZ	
CONDITIONS CLEARED	
INITIALS:	AW
DATE:	15 March 2018

CONTENTS

ASSESSMENT REPORT	3
ASSESSMENT SUMMARY	4
SUMMARY TABLE OF NON-COMPLIANCE	5
RECORD OF NON-COMPLIANCE	10
RECORD OF NON-COMPLIANCE	12
RECORD OF NON-COMPLIANCE	13
RECORD OF NON-COMPLIANCE	15
RECORD OF NON-COMPLIANCE	17
RECORD OF NON-COMPLIANCE	19
ASSESSMENT OBSERVATIONS	21
REGULATION 6A NOTIFICATION REQUIREMENTS	21
REGULATION 7 PERFORMING BUILDING CONTROL FUNCTIONS	21
REGULATION 8 ENSURING ENOUGH EMPLOYEES AND CONTRACTORS	26
REGULATION 9 ALLOCATING WORK	27
REGULATION 10 ESTABLISHING AND ASSESSING COMPETENCY OF EMPLOYEES	28
REGULATION 11 TRAINING EMPLOYEES DOING A TECHNICAL JOB	29
REGULATION 12 CHOOSING AND USING CONTRACTORS	30
REGULATION 13 ENSURING TECHNICAL LEADERSHIP	30
REGULATION 14 ENSURING NECESSARY (TECHNICAL) RESOURCES	31
REGULATION 15 KEEPING ORGANISATIONAL RECORDS	31
REGULATION 16 FILING APPLICATIONS FOR BUILDING CONSENT	32
REGULATION 17 ASSURING QUALITY	32
REGULATION 18 TECHNICAL QUALIFICATIONS	37
SUMMARY OF RECOMMENDATIONS	38
SUMMARY OF ADVISORY NOTES	39

ASSESSMENT REPORT

Introduction

This report relates to the Routine Reassessment of your Building Consent Authority (BCA) which took place between 10 and 13 October 2017 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.

ACCREDITATION FEEDBACK AND CONTINUING ACCREDITATION

Accreditation is a statement, by IANZ, that your organisation complies with the Regulations and MBIE BCA accreditation scheme guidance documents (as relevant). Where non-compliance with the Regulations has been identified, the Act requires that it must be addressed. This report will also highlight examples of good practice and performance.

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

Summary of the non-compliances identified during the assessment

Your non-compliances with the Regulations have been summarised and recorded in detail in this report. Please complete the Record of Non-compliance tables detailing your proposed corrective actions and forward a copy to IANZ. This plan of action must be provided to IANZ by 24 November 2017.

All non-compliances must be finally addressed and cleared by 26 February 2018. To maintain accreditation you must provide evidence of the actions taken to clear non-compliance to IANZ within the required timeframe.

If you do not agree with the non-compliances identified, please contact the Lead Assessor as soon as possible.

If you need further time to address non-compliances, please contact the Lead Assessor as soon as possible. Where you are seeking an extension to an agreed timeframe to address a non-compliance, your Chief Executive is required to make a formal request for an extension of the timeframe.

If you have a complaint about the assessment process, please follow the procedure set out in the IANZ complaint process which can be found in the IANZ Procedures and Conditions of Building Consent Authority Accreditation.

Summary of the good practice and performance identified during the assessment

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

- The BCA was well prepared for the assessment. They had completed a review against the MBIE Guidance requirements and had actively worked to ensure all outstanding items had been addressed.
- Since the previous assessment the BCA had appointed more staff, including the appointment of a Quality Assurance Manager. This, along with the considerable hard work of the staff within the BCA, has allowed to BCA to now complete the tasks required of it under the BCA Regulations in an appropriate and effective manner.

NEXT ACCREDITATION ASSESSMENT

Unless your BCA undergoes a significant change, requiring some form of interim assessment, the next assessment of the BCA is planned for October 2019. You will be formally notified of your next assessment six weeks prior to its planned date.

ASSESSMENT SUMMARY

Organisation details		
Organisation:	Queenstown Lakes District Council	
Address for service:	10 Gorge Road Queenstown 9300 New Zealand	
Client Number:	7491	
Accreditation Number:	73	
Council Chief Executive:	Mr Mike Theelan	
Council Chief Executive contact details:	Mike.Theelan@qldc.govt.nz	
BCA Authorised Representative:	Mr Bill Nicoll	
BCA Authorised Representative contact details:	Bill.nicoll@qldc.govt.nz	
BCA Quality Manager:	Mr Bill Nicoll	
Assessment Team		
Lead Assessor:	Ms Adrienne Woollard	
Lead Assessor contact details:	awoollard@ianz.govt.nz	
Technical Experts:	Mr John Tait Mr Brent Watkins	
MBIE observer/s:	Mr Mike Reedy Mr Gary Higham	
Report preparation		
Prepared by:	Ms Adrienne Woollard	
Signature:		
Checked by:	Ms Tracy Quinton-Boundy	
Signature:		
Date:	26/10/17	
Assessment findings		
	This assessment:	Last assessment:
Number of "serious" non-compliances:	0	NA
Number of "general" non-compliances:	6	NA
Number of NCs cleared during assessment:	17	NA
Number of recommendations:	2	NA
Number of advisory notes:	3	NA
IANZ level of concern about BCA: HIGH/MED/LOW	Low	Medium
Date clearance plan required from BCA:	26/11/17	
Date all non-compliances must be finally cleared:	26/02/18	
Accreditation to continue with CAR clearance? YES/NO	Yes	
Next assessment		
Recommended next assessment type: FULL/MONITORING	Full	
Recommended next assessment date:	October 2019	

SUMMARY TABLE OF NON-COMPLIANCE

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

Regulatory requirement	Non-compliance (Serious / General)	Breach of regulation 5/6?						Clearance Date (DD/MM/YYYY)	Repeat? (Yes/No)	Number of		Brief comment (one sentence/line only to get to the heart of the issue)
		5(a)	5(b)	5(c)	6(b)	6(c)	6(d)			Recs	Advisory notes	
Regulation 6												
6(A)(1)												
6(A)(2)												
Regulation 7												
7(1)												
7(2)(a)	General							13/10/2017		1	2	One item in the Guidance was not in the consumer information.
7(2)(b)	General		Yes					1/3/18				GNC 1 - The BCA was not starting the clock on the day that a complete application was received.
7(2)(c)												
7(2)(d)(i)												
7(2)(d)(ii)	General		Yes					13/10/2017				The procedure didn't include identifying tech leadership requirements
7(2)(d)(iii)												
7(2)(d)(iv)	General		Yes					13/10/2017				No procedure for national-multi use consents
7(2)(d)(v)	General		Yes					13/10/2017				Conditions unclear on consents
7(2)(e)	General		Yes					1/3/18				GNC 2 - Requirements if no plans/specs on site not clear
7(2)(f)	General		Yes					1/3/18		1	1	GNC 3 - Procedures didn't include managing applications where BC issued by another BCA.

7(2)(g)												
7(2)(h)	General		Yes					13/10/2017				Procedure not publically available.
Regulation 8												
8(1)	General		Yes					1/3/18				GNC 4 - Annual planning exercise not as per Guidance
8(2)												
Regulation 9												
9												
Regulation 10												
10(1)												
10(2)												
10(3)(a)	General		Yes					13/10/2017				Procedure didn't include detail of what was assessed
10(3)(b)	General		Yes					13/10/2017				Procedure didn't include detail of what was assessed
10(3)(c)	General		Yes					13/10/2017				Procedure didn't include detail of what was assessed
10(3)(d)	General		Yes					13/10/2017				Procedure didn't include detail of what was assessed
10(3)(e)	General		Yes					13/10/2017				Procedure didn't include detail of what was assessed
10(3)(f)	General		Yes					13/10/2017				Procedure didn't include detail of what was assessed
Regulation 11												
11(1)												
11(2)(a)												
11(2)(b)												
11(2)(c)												
11(2)(d)	General		Yes			Yes		15/3/18				GNC 5 - procedure does include monitoring and review of training
11(2)(e)												
11(2)(f)												

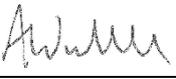
11(2)(g)											
Regulation 12											
12(1)											
12(2)(a)											
12(2)(b)											
12(2)(c)											
12(2)(d)											
12(2)(e)											
12(2)(f)	General				Yes		13/10/2017				Failure to require annual competence assessment
Regulation 13											
13(a)	General		Yes		Yes		15/3/18				GNC 6 - Tech leaders not recorded on skills matrix. Tech leadership not supported by appropriate evidence.
13(b)											
Regulation 14											
14											
Regulation 15											
15(1)(a)											
15(1)(b)											
15(2)											
Regulation 16											
16(1)											
16(2)(a)											
16(2)(b)											
16(2)(c)											
Regulation 17											
17(1)											
17(2)(a)											
17(2)(b)											

17(2)(c)												
17(2)(d)	General		Yes					13/10/2017				Management review didn't include review of conflicts of interest
17(2)(e)												
17(2)(f)												
17(2)(g)												
17(2)(h)	General					Yes		13/10/2017				Audit procedure didn't cover sampling. Not all BC functions covered. Typo error in audits.
17(2)(i)	General		Yes					13/10/2017				Procedure didn't include pressure on staff
17(2)(j)	General		Yes					13/10/2017				Procedure didn't include how agreed communications would be made
17(2)(k)												
17(2)(l)												
17(2)(m)												
17(3)												
17(3A)	General		Yes					13/10/2017				Procedure didn't include gathering info & deciding whether to make a complaint
17(3A)(a)												
17(3A)(b)												
17(3A)(c)												
17(4)(a)												
17(4)(b)												
17(5)(a)												
17(5)(b)												
Regulation 18												
18(1)(a)												
18(1)(b)												

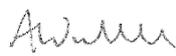
18(2)(a)												
18(2)(b)												
18(2)(c)												
18(3)(a)												
18(3)(b)												

RECORD OF NON-COMPLIANCE

Non-compliance number:	GNC 1		
Breach of regulatory requirement:	Regulation 7(2)(b): receiving applications		
Findings:	<p>General non-compliance</p> <p>The BCA's system of receiving applications electronically meant that at times incomplete applications were received. The BCA's system for managing the clock did not allow for the clock to be started on the day that a complete application was received where the application was originally put on hold waiting for further information.</p>		
Actions required:	The BCA worked to address this issue during the assessment and the BCA is requested to provide a copy of its revised procedure and evidence of its implementation.		
Corrective action plan due by:	24/11/17		
Plan of action: <i>To be provided by BCA</i>	<p>The proposed resolution plan for this GNC1 is as follows:</p> <ul style="list-style-type: none"> • Update the Techone system to create a new "App Check" event for checking of BC applications. This will allow the clock to be started on the day the application was received. If the application is found to be incomplete then the new event will allow the clock to be paused while the additional information is requested. • Update TS-04 BC Application Receiving procedure to align with changes to the Techone events and to replace the phrase "vetting" with "checking" • Update CS4.1 and CS4.1R forms to align with new procedure • Approve and release new QMS documents • Send out QMS change notification for updated procedure and undertake required training • Prepare IANZ response submission that includes: <ul style="list-style-type: none"> ○ Updated TS-04 Procedure ○ Updated CS4.1 and CS4.1R forms ○ QMS Change Notification Training record to support implementation of new procedure ○ IT Project implementation evidence that verifies that the system changes to TechOne have been fully implemented 		
Non-compliance to be addressed by:	26/02/18		
Reporting requirements:	Requirement:	Date required:	Date accepted:
	Action plan	24/11/17	24/11/17

	Evidence of implementation	7/02/18	
Evidence: <i>To be provided by BCA</i>	Evidence of implementation of plan provided.		
Non-compliance cleared? Y/N	Yes		
Signed:			
Date:	1/3/18		

RECORD OF NON-COMPLIANCE

Non-compliance number:	GNC 2		
Breach of regulatory requirement:	Regulation 7(2)(e): planning, performing and managing inspections		
Findings:	<p>General non-compliance</p> <p>The BCA's procedures stated that an inspection would be failed if the approved plans and specifications were not available on site. During a number of witnessed inspections it was noted that the approved plans and specifications were not on site (or not complete). Inspectors were unclear whether they should undertake the inspection and then fail it (even though the building work observed met the requirements of the plans and specifications) or whether they should not undertake the inspection.</p>		
Actions required:	The BCA is asked to clarify its requirements to have the complete approved plans and specifications on site and to ensure that all inspectors are clear about how to handle the situation where the complete approved plans and specifications are not available.		
Corrective action plan due by:	24/11/17		
Plan of action: <i>To be provided by BCA</i>	<p>The proposed resolution plan for GNC2 is as follows:</p> <ul style="list-style-type: none"> • Prepare updated draft for TS30 Inspections procedure (rev 11) which provides clear instruction for Inspectors in the action to take if approved plans and specifications are not made available on site • Review new draft document with key inspections stakeholders • Approve and release new TS 30 rev 11 into QMS • Send out QMS change notification for updated procedure and undertake all required training • Prepare IANZ response submission that includes: <ul style="list-style-type: none"> ○ Updated TS-30 Procedure ○ QMS Change Notification Training record to support implementation of new procedure 		
Non-compliance to be addressed by:	26/02/18		
Reporting requirements:	Requirement:	Date required:	Date accepted:
	Action plan	24/11/17	24/11/17
	Evidence of implementation	7/02/18	
Evidence: <i>To be provided by BCA</i>	Evidence of implementation of plan provided.		
Non-compliance cleared? Y/N	Yes		
Signed:			
Date:	1/3/18		

RECORD OF NON-COMPLIANCE

Non-compliance number:	GNC 3		
Breach of regulatory requirement:	Regulation 7(2)(f): code compliance certificates		
Findings:	<p>General non-compliance</p> <p>The BCA's procedures for preparing and issuing code compliance certificates did not include how the BCA would manage applications where the building consent was granted by another BCA.</p> <p>Applications for CCC were not always marked with the date they were received.</p>		
Actions required:	Please develop and implement an action plan to address the above findings.		
Corrective action plan due by:	24/11/17		
Plan of action: <i>To be provided by BCA</i>	<p>The proposed resolution plan for GNC3 is as follows:</p> <p>TS33 Procedure</p> <ul style="list-style-type: none"> • Prepare updated draft for TS33 Code Compliance Certificate procedure (rev 10) that specifies how CCC's will be managed for building consents granted by another BCA • Review new draft document with key inspections stakeholders • Approve and release new TS 33 rev 10 into QMS • Send out QMS change notification for updated procedure and undertake all required training <p>CCC Date Stamping</p> <ul style="list-style-type: none"> • Complete training activity to reinforce the required practice to ensure that CCC's are correctly marked with date they are received • Prepare IANZ response submission that includes: <ul style="list-style-type: none"> ○ Updated TS-33 Procedure ○ QMS Change Notification Training record to support implementation of new procedure and CCC date stamping reinforcement 		
Non-compliance to be addressed by:	26/02/18		
Reporting requirements:	Requirement:	Date required:	Date accepted:
	Action plan	24/11/17	24/11/17
	Evidence of implementation	7/02/18	

Evidence: <i>To be provided by BCA</i>	Evidence of implementation of plan provided.
Non-compliance cleared? Y/N	Yes
Signed:	
Date:	1/3/18

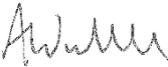
RECORD OF NON-COMPLIANCE

Non-compliance number:	GNC 4
Breach of regulatory requirement:	Regulation 8(1): forecasting workflow
Findings:	<p>General non-compliance</p> <p>The BCA's regular assessment of its workload and annual review of trends in the work that it processed, inspected and certified did not meet the requirements of the MBIE Guidance to undertake an annual planning exercise as specified in the guidance document.</p>
Actions required:	Please develop and implement a procedure to complete annual workflow forecasting that meets the requirements of Regulation 8(1).
Corrective action plan due by:	24/11/17
Plan of action: <i>To be provided by BCA</i>	<p>The proposed resolution plan for GNC4 is as follows:</p> <ul style="list-style-type: none"> • Prepare updated draft for QM-08 Ensuring Adequate Staffing Resources procedure that provides improved description and instruction around how QLDC undertakes the annual planning exercise. This will ensure that the QLDC Regulation 8 activity is in full compliance with the MBIE Guidance requirements • Review new draft document with key stakeholders • Approve and release new QM-08 procedure • Send out QMS change notification for updated procedure and undertake required training • Prepare IANZ response submission that includes: <ul style="list-style-type: none"> ○ Updated QM-08 Procedure ○ The agenda and minutes from an extraordinary Annual Plan meeting which provides implementation evidence that the following forecasting, capacity modelling and trending analysis information has been reviewed: <ul style="list-style-type: none"> ▪ The volume and value of building control work it has processed, inspected and approved over the past two years ▪ The consenting, inspection and compliance work it forecasts it will undertake using the BCAs nominated competency assessment system assessment levels ▪ Known pressures impacting the performance of its building control functions such as limited access to technical leadership or specialist technical resources ▪ Any known internal or external factors that might influence the volume of building control work

IANZ comments:	Note – meeting minutes reflect review of 12 months of data not 24 months as in procedure but rest is ok.		
Non-compliance to be addressed by:	26/02/18		
Reporting requirements:	Requirement:	Date required:	Date accepted:
	Action plan	24/11/17	-
	Revised action plan	1/12/17	24/11/17
	Evidence of implementation	7/02/18	
Evidence: <i>To be provided by BCA</i>	Evidence of implementation of plan provided.		
Non-compliance cleared? Y/N	Yes		
Signed:			
Date:	1/3/18		

RECORD OF NON-COMPLIANCE

Non-compliance number:	GNC 5		
Breach of regulatory requirement:	Regulation 11(2)(d): the training system		
Findings:	<p>General non-compliance</p> <p>Training plans did not record the date of completion of the training, how the application of the training would be reviewed (for each training item identified), and the monitoring and review of the training as agreed in the training plan to determine whether the desired training outcomes were met.</p>		
Actions required:	Please develop and implement a procedure to address the above items.		
Corrective action plan due by:	24/11/17		
Plan of action: <i>To be provided by BCA</i>	<p>The proposed resolution plan for GNC5 is as follows:</p> <ul style="list-style-type: none"> • Develop updated training forms that fully satisfy the Regulation 11 - MBIE guidance requirements regarding the completion of a training needs assessment and monitoring of training outcomes. The two proposed forms are: <ul style="list-style-type: none"> ○ TS11.1 Training Needs Analysis ○ TS11.2 Individual Training Plan • Review new draft documents with key stakeholders to ensure these will be fit for purpose • Update QM-11 Training procedure to include new training forms • Approve and release new QMS documents • Send out QMS change notification for updated procedure and undertake required training • Prepare IANZ response submission that includes: <ul style="list-style-type: none"> ○ Updated QM-11 Training Procedure ○ Copies of the new TS11.1 and TS11.2 forms ○ Samples of fully completed TS11.1 Training Needs Assessments ○ Samples of fully completed TS11.2 Training Plans, which include reviewed and approved training application outcomes, as evidence of implementation 		
Non-compliance to be addressed by:	26/02/18		
Reporting requirements:	Requirement:	Date required:	Date accepted:
	Action plan	24/11/17	-
	Revised action plan	1/12/17	24/11/17

	Evidence of implementation	7/02/18	
Evidence: <i>To be provided by BCA</i>	Evidence of implementation of plan provided.		
Non-compliance cleared? Y/N	Yes		
Signed:			
Date:	15/3/18		

RECORD OF NON-COMPLIANCE

Non-compliance number:	GNC 6
Breach of regulatory requirement:	Regulation 13: ensuring technical leadership
Findings:	<p>General non-compliance</p> <p>The BCA had documented its procedure for nominating technical leaders. This described two tiers of technical leadership (Senior Building Control Officials and Team Leader Processing and Team Leader Inspection). The procedure stated that technical leaders would be recorded on the skills matrix and organisational chart. Technical leaders were seen to be recorded on the organisational chart however the skills matrix did not record the technical leaders.</p> <p>Competence assessments were used to define the code clauses for which a person could provide technical leadership. When these were reviewed it was noted that some employees nominated as technical leaders did not have supporting reasons for decisions in their competence assessment. Also, competence assessments nominated only specific code clauses for technical leaders but this information was not translated to the organisational chart (or skills matrix). There was no "senior level" technical leader identified for Code clauses B1 and B2.</p>
Actions required:	Please develop and implement procedures to address the above shortfalls.
Corrective action plan due by:	24/11/17
Plan of action: <i>To be provided by BCA</i>	<p>The proposed resolution plan for GNC6 is as follows:</p> <ul style="list-style-type: none"> • Prepare updated draft for QM-13 Technical Leadership procedure. The new revision procedure will provide clearer description around the technical leadership structure within QLDC and how this is assessed • Create a new Technical Leadership register that clearly specifies who within the QLDC team has been assessed for technical leadership across the individual clauses of the NZ Building Code. This register will be added to the TS17 Skills Matrix • Update MS-13.1 Building Services Organisational Chart to identify those Technical leaders who have been formally assessed • Approve and release updated QMS documents • Send out QMS change notification for updated procedure and undertake required training • Review the 2018 Competency Schedule program to ensure that any gaps in the Technical Leadership register are addressed during the 2018 assessment program (e.g. Tech Leaders for F9 need to be assessed). Any new individuals who are identified as having Technical Leadership competency will then be updated onto the register • Prepare IANZ response submission that details:

	<ul style="list-style-type: none"> ○ Updated QM-13 Technical Leadership procedure ○ Updated TS-17 Skills Matrix, which includes the new code clause Technical Leadership register ○ Updated MS-13 Organisation Chart ○ Supporting Competency Assessment evidence to provide implementation evidence that the staff listed on the register are appropriately qualified as Technical Leaders 		
Non-compliance to be addressed by:	26/02/18		
Reporting requirements:	Requirement:	Date required:	Date accepted:
	Action plan	24/11/17	-
	Revised action plan	1/12/17	24/11/17
	Evidence of implementation	7/02/18	
Evidence: <i>To be provided by BCA</i>	Evidence of implementation of plan provided.		
Non-compliance cleared? Y/N	Yes		
Signed:			
Date:	15/3/18		

ASSESSMENT OBSERVATIONS

REGULATION 6A NOTIFICATION REQUIREMENTS

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA had an appropriate procedure for notifying IANZ and MBIE regarding significant changes within the BCA. A recent record of implementation of the procedure was reviewed and found to be appropriate.</p>	

REGULATION 7 PERFORMING BUILDING CONTROL FUNCTIONS

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

Non-compliance? Y/N	Yes
Non-compliance number/s:	-
Opportunities for improvement? Y/N	Yes
Number of recommendations:	1
Recommendation number/s:	R1
Number of advisory notes:	2
Advisory note number/s:	A1, A2
Observations and comments, including good practice and performance	
<p>The BCA provided information to consumers regarding how to apply for a building consent, and how an application is processed, inspected and certified. One item was requested to be added during the assessment. Once added, the information was seen to meet the requirements as detailed in the guidance document.</p> <p>A number of suggestions for improvement to the consumer information were also made during the assessment. These included a number of changes where the information was incorrect or misleading. It is recommended that the information is amended to take into account the suggested changes. (R1)</p> <p>The consumer information was presented in two ways; a reference document (available in hard copy or online) and information available on the Council's website. In some cases the two sources of information did not correlate. It is suggested that the BCA should consider combining the two sources of information so that just one source of information is available. (A1) In various places the information referred customers to the MBIE website. It is suggested that direct links are added to the MBIE website information to allow the customer easy reference to the information. (A2)</p>	

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

Non-compliance? Y/N	Yes
Non-compliance number/s:	GNC 1
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA's system of receiving applications electronically meant that at times incomplete applications were received. The BCA's system for managing the clock in these instances did not allow for the clock to be started on the day that a complete application was received where the application was originally put on hold waiting for further information. The BCA worked to address this issue during the assessment and the BCA is requested to provide evidence of implementation of its revised procedure. (GNC 1)</p>	

Regulations 7(2)(d)(ii)-(iii): assessing and allocating applications

Non-compliance? Y/N	Yes
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA had documented appropriate procedures for assessing and allocating applications. They did not address the requirements to identify the technical leadership or specialist requirements. This is addressed under Regulation 13.</p> <p>The procedures had been effectively implemented.</p>	

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

Non-compliance? Y/N	Yes x 2
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>Processing:</p> <p>There was no procedure available for processing of national multi-use applications. This was added during the assessment. Other procedures were appropriate and effectively implemented.</p> <p>Granting and issuing:</p> <p>The BCA had documented an appropriate procedure for granting and issuing building consents. It was unclear whether the list of inspections formed part of the building consents. Issued building consents were not page numbered. During the assessment the BCA added the inspection list as an attachment to the consent and ensured that each page of the issued building consents were numbered.</p> <p>The BCA included a list of conditions and advice notes on issued consents. It was unclear which of the items were "Advice Notes" and which were applied as "Conditions" of the consent. This was amended during the assessment and was demonstrated to be appropriately addressed.</p>	

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

Non-compliance? Y/N	Yes
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	
<p>The BCA planned inspections as part of processing and identified planned inspections on issued building consents.</p> <p>The BCA's processes for performing and managing inspections were detailed in their technical procedures. The processes for booking, allocating and completing inspections appeared to be appropriate.</p> <p>A number of inspections were witnessed by the technical expert. These were found to be completed appropriately, with good recording of technical outcomes.</p> <p>The BCA's procedures stated that an inspection would be failed if the approved plans and specifications were not available on site. During a number of witnessed inspections it was noted that the approved plans and specifications were not on site (or not complete). Inspectors were unclear whether they should undertake the inspection and then fail it (even though the building work observed met the requirements of the plans and specifications) or whether they should not undertake the inspection. The BCA is asked to clarify its requirements and ensure that all inspectors are clear about how to handle the situation where the complete approved plans and specifications are not available on site. (GNC 2)</p>	

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

Non-compliance? Y/N	Yes
Non-compliance number/s:	GNC 3
Opportunities for improvement? Y/N	Yes
Number of recommendations:	1
Recommendation number/s:	R2
Number of advisory notes:	1
Advisory note number/s:	A3
Observations and comments, including good practice and performance	
<p>The BCA had documented procedures for preparing and issuing code compliance certificates, compliance schedules and notices to fix. These did not include how the BCA would manage applications where the building consent was granted by another BCA. (GNC 3)</p> <p>Code Compliance Certificates (CCCs):</p> <p>The BCA received applications forms for CCC when applicants considered the work to be complete. These were not consistently marked with the date they were received so the assessment team were unable to determine whether the date of receipt of the CCC application entered into the TechOne system was correct. (GNC3)</p> <p>Issued code compliance certificates were seen to be appropriate. Minor amendments were made to the CCC procedure during the assessment to clarify the portion of the procedure to apply when no application for CCC had been received. The BCA had good systems in place regarding making a decision whether to issue or refuse CCCs where no application had been received.</p> <p>The BCA issued a disclaimer with its code compliance certificates. The BCA is advised that it is not able to contract out of its legal obligations and therefore the disclaimer has little value but could be confusing for the BCA's clients. It does however remind owners that buildings require appropriate maintenance, which could be an appropriate reminder to send with a CCC. (A3)</p> <p>Compliance Schedules:</p> <p>A number of compliance schedules were reviewed. It was noted that one example had three specified systems missing from the compliance schedule while other examples appeared to appropriately list the specified systems. Suggested improvements to compliance schedules were discussed during the assessment to ensure that each compliance schedule was site specific and did not offer a choice of compliance and the Compliance Schedule Handbook is not referred to as a standard for compliance. It is recommended that the suggested improvements are implemented. (R2)</p> <p>Notices to Fix:</p> <p>Issued notices to fix we found to be appropriate.</p>	

Regulation 7(2)(g) and (h): customer inquiries and complaints

Non-compliance? Y/N	Yes
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA had documented an appropriate procedure for receiving and managing inquiries.</p> <p>It has also documented its procedure for receiving and managing complaints. This procedure was found to only be in part compliant with the requirements of this regulation as the requirement to make the complaints policy publically available had not been met. Also, the procedures did not include ensuring that the BCA maintained appropriate levels of objectivity and fairness to all parties and provided remedies proportionate to the issues raised. These issues were resolved during the assessment.</p> <p>Implementation of the procedure for managing complaints was reviewed for two examples. In each case compliance with the BCA's procedures was demonstrated, with good records of communications maintained. Although some older complaints were seen to have not been closed out within the timeframe stated in the procedure this was not considered to be an issue as the timelines in the new procedure were introduced after the complaints were received.</p>	

REGULATION 8 ENSURING ENOUGH EMPLOYEES AND CONTRACTORS**Regulation 8(1): forecasting workflow**

Non-compliance? Y/N	Yes
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	
<p>The BCA undertook regular assessment of its workload and annually reviewed trends in the work that it processed, inspected and certified. It did not meet the requirements of the MBIE Guidance to undertake an annual planning exercise as specified in the guidance document. These requirements include a review of the volume of building work processed, inspected and certified over the past two years, including any work for other BCAs, known pressures on performance, internal and external factors that might influence the workload and using that information to forecast the consenting, inspection and compliance work that it expects to undertake. (GNC 4)</p>	

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's procedure for identifying and addressing capacity and capability needs included a monthly review of KPI trends and a general operational analysis. The BCA used its capacity model to determine whether it had appropriate capacity and capability and took active steps to address any shortfall.	

REGULATION 9 ALLOCATING WORK

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
The BCA had appropriate procedures for allocation of work. Work allocated to processors and inspectors were seen to be allocated to employees and contractors with the appropriate competencies.	

REGULATION 10 ESTABLISHING AND ASSESSING COMPETENCY OF EMPLOYEES**Regulation 10(1) and (3): assessing prospective employees**

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
The BCA had documented an appropriate procedure for establishing the competence of people applying to join the BCA.	

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

Non-compliance? Y/N	Yes x 6
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA had documented procedures for completing competence assessment. These contained insufficient detail regarding the requirements for the competence assessment system to cover the employee's ability to communicate with internal and external persons, ability to comply with the BCA's policies, procedures and systems, understanding of the philosophy and principles of building design and construction, knowledge and understanding of building products and methods, and skill in applying the Act, Building Code and other applicable regulations. This detail was added to the procedures during the assessment and was then found to meet the requirements of the regulations.</p> <p>The competence assessments were found to have been completed annually, as required, and contain good records that met the requirements of Regulation 10.</p>	

REGULATION 11 TRAINING EMPLOYEES DOING A TECHNICAL JOB**Regulation 11(1) and (2)(a)-(d),(f) and (g): the training system**

Non-compliance? Y/N	Yes
Non-compliance number/s:	GNC 5
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA had documented an appropriate procedure for training employees. A training plan was prepared as part of an annual performance review for each employee.</p> <p>Training plans were seen to include some of the requirements of the regulation but did not record the date of completion of the training, how the application of the training would be reviewed (for each training item identified), and a record of the monitoring and review of the training as agreed in the training plan to determine whether the desired training outcomes were met. (GNC 5)</p>	

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

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA had documented a procedure for supervision in the quality manual. Further, more detailed information, was provided in the processing and inspection procedures. The BCA had a robust system for recording supervision, including procedures and forms detailing how supervision would be recorded. Good records were maintained.</p>	

REGULATION 12 CHOOSING AND USING CONTRACTORS

Non-compliance? Y/N	Yes
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA had documented procedures for choosing and using contractors. This included procedures for establishing a prospective contractor's competency and qualifications, engaging contractors, monitoring and reviewing their performance and annually assessing their competence.</p> <p>Three contracts and associated documents were reviewed to establish whether the procedures had been effectively implemented. All three contracts met the requirements of the procedure however, for one contractor, the BCA had failed to require the contractor to provide evidence of annual assessment of their competence yet the BCA had continued to use that contractor. This had been resolved before the assessment and was discussed during the assessment and it was decided that no further action was necessary.</p>	

REGULATION 13 ENSURING TECHNICAL LEADERSHIP

Non-compliance? Y/N	Yes
Non-compliance number/s:	GNC 6
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA had documented its procedure for nominating technical leaders. This described two tiers of technical leadership (Senior Building Control Officials and Team Leader Processing and Team Leader Inspection). The procedure stated that technical leaders would be recorded on the skills matrix and organisational chart. Technical leaders were seen to be recorded on the organisational chart however the skills matrix did not record the technical leaders.</p> <p>Competence assessments were used to define the code clauses for which a person could provide technical leadership. When these were reviewed it was noted that some employees nominated as technical leaders did not have supporting reasons for decisions in their competence assessment. Also, competence assessments nominated only specific code clauses for technical leaders but this information was not translated to the organisational chart (or skills matrix). There was no "senior level" technical leader identified for Code clauses B1 and B2. (GNC 6)</p>	

REGULATION 14 ENSURING NECESSARY (TECHNICAL) RESOURCES

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA had documented appropriate procedures for ensuring that it made necessary technical resources available to employees and contractors as required.</p> <p>Calibration records for thermometers and moisture meters were reviewed and found to be appropriate. Records of regular vehicle checks were also reviewed where it was noted that items went missing on a regular basis but were replaced as soon as they were identified as missing.</p> <p>Technical information was made available electronically. This ensured that the latest versions were made available to employees and contractor, although earlier versions (e.g. of fire alarm standards) were also available as required.</p>	

REGULATION 15 KEEPING ORGANISATIONAL RECORDS

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA maintained up to date organisational charts, job descriptions and delegations to appropriate employees and contractors.</p>	

REGULATION 16 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	
<p>The BCA allocated a unique number to each building consent. Any amendments to a building consent received the same number with an "AM" prefix and a .01, 02. etc. suffix for consecutive amendments.</p> <p>The BCA collected all required information and stored it on the applications file.</p> <p>The BCA recorded the contact details of the third parties performing building control functions (processing and inspections) on its behalf.</p> <p>The BCA's records were found to be easily accessible and retrievable. The BCA had installed a new backup server at the Queenstown Events Centre. This was reported to be fire, flood and earthquake proof, hence supplying a level of confidence regarding the security of the BCA's information.</p> <p>BCA records are required to meet the requirements of the Records Management Standard. The BCA held a service level agreement with the IT department and was assured that the required levels of service were met.</p>	

REGULATION 17 ASSURING QUALITY

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

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA's quality assurance system covered its management and operations, including the performance of its building control functions.</p>	

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	
<p>The BCA had named its quality manager.</p> <p>A policy on quality had been documented. This included a number of measurable objectives which were found to be appropriate.</p>	

Regulation 17(2)(d) and 17(5): Management reporting and review, including of the quality system

Non-compliance? Y/N	Yes
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>Regulation 17(2)(d) and 17(5) require the BCA to at least annually review the BCA's quality assurance system and the BCA's performance, and to make appropriate changes.</p> <p>The review is required to cover the BCA's performance and the effectiveness of the quality policy (and objectives), and quality processes including internal audits, continuous improvement system, conflicts of interest, and communications related to quality assurance matters, including employee and contractor engagement with the quality system requirements.</p> <p>The BCA undertook twice yearly reporting against its quality system, with the most recent meeting being held in August 2017. Minutes of the meeting were reviewed. All items had been appropriately considered except the management of conflicts of interest, which was not included as an agenda item. This was added during the assessment.</p>	

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

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The Guidance for this sub regulation requires the BCA to communicate about its quality system to all employees and contractors using its quality system. This could occur at induction, as part of training related to the use of a particular procedure, and as a result of any items identified in internal audits, management reviews or continuous improvement items.</p> <p>The requirements and implementation of this sub regulation are covered under management review, training, internal audit and continuous improvement.</p> <p>Contractors performing building control functions using their own policies, procedures and systems have been reviewed under regulation 12.</p>	

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

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
Not applicable to a BCA that is also a Territorial Authority.	

Regulation 17(2)(e) Supporting continuous improvement

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA had documented an appropriate procedure for identifying and managing continuous improvements within its organisation.</p> <p>Good records of recording and managing suggestions for continuous improvement were observed.</p>	

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

Non-compliance? Y/N	Yes
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA had documented its procedure for completing internal audits. The procedure did not include guidance on sampling sizes. The audit plan did not specifically cover all building control functions. These issues were resolved during the assessment.</p> <p>Examples of internal audits were reviewed. A typographical error was noted where audit findings were recorded under the heading "Previous Audit Findings". This meant that there appeared to be no record of the findings of the audit. Once the error was clarified the audit records were found to demonstrate that appropriate records had been maintained and that non-compliances identified during audits had (mostly) been recorded and managed appropriately through use of the continuous improvement system.</p>	

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

Non-compliance? Y/N	Yes
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA had documented its procedure for identifying and managing conflicts of interest. This also referred to the council-wide procedure. The BCA's procedure did not specifically include incidents of undue pressure in its definition of conflicts of interest. This was resolved during the assessment.</p> <p>Records of two recent conflicts of interest were reviewed and found to appropriately record the required information and consideration of management of the conflict.</p>	

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

Non-compliance? Y/N	Yes
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA's procedure for communicating with internal and external persons covered all requirements documented in the Guidance document except for documenting how agreed communications are made. This was addressed during the assessment.</p>	

Regulation 17(3A): Complaints about building practitioners

Non-compliance? Y/N	Yes
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA's procedures for making complaints about practitioners did not cover the BCA's process for gathering information and determining whether a complaint should be made. This was added during the assessment.</p> <p>There had not been any recent complaints made about building practitioners.</p>	

REGULATION 18 TECHNICAL QUALIFICATIONS

Non-compliance? Y/N	No
Non-compliance number/s:	-
Opportunities for improvement? Y/N	No
Number of recommendations:	0
Recommendation number/s:	-
Number of advisory notes:	0
Advisory note number/s:	-
Observations and comments, including good practice and performance	
<p>The BCA had documented an appropriate procedure for ensuring that employees and contractors performing building control functions by doing a technical job held appropriate qualifications. This was appropriately implemented.</p>	

SUMMARY OF RECOMMENDATIONS

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

It is recommended that:

- R1 The BCA changes the consumer information where it is incorrect or misleading, as per the list of suggested alterations provided during the assessment.
- R2 Compliance schedules are reviewed to ensure that each compliance schedule is site specific and does not offer a choice of compliance. It is also recommended that the Compliance Schedule Handbook is not referred to as a standard for compliance.

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 The consumer information was presented in two ways; a reference document (available in hard copy or online) and information available on the Council's website. In some cases the two sources of information did not correlate. It is suggested that the BCA considers combining the two sources of information so that just one consistent source of information is available.
- A2 In various places the consumer information referred customers to the MBIE website. It is suggested that direct links to the MBIE website information are added to allow the customer easy access to the referenced information.
- A3 The BCA issued a disclaimer with its code compliance certificates. It is suggested that the BCA consider what value the disclaimer adds to the process and whether it can discontinue its issue.