



TO THE MAYOR AND COUNCILLORS OF THE MACKENZIE DISTRICT COUNCIL

Membership of the Planning and Regulation Committee:

Cr Murray Cox (Chairman)
Claire Barlow (Mayor)
Cr Noel Jackson
Cr Evan Williams
Cr Russell Armstrong
Cr James Leslie
Cr Graham Smith

Notice is given of the Meeting of the Planning and Regulation Committee to be held on Tuesday 19 July 2016, following the conclusion of the Finance Committee meeting.

VENUE: Council Chambers, Fairlie.

BUSINESS: As per agenda attached

WAYNE BARNETT
CHIEF EXECUTIVE OFFICER



PLANNING AND REGULATION COMMITTEE

Agenda for Tuesday 19 July 2016

APOLOGIES

DECLARATIONS OF INTEREST

CONFIRM MINUTES:

That the minutes of the Planning and Regulation Committee meeting held on 7 June 2016, be adopted and confirmed as the correct record of the meeting, including such parts as were taken in public excluded.

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REPORTS:

- | | |
|---|----|
| 1. Mid-South Canterbury Rural Fire Committee Statement of Intent and Business Plan (attached) | 8 |
| 2. District Licencing Committee change of Commissioner (attached) | 34 |
| 3. Building Accreditation Assessment Report (attached) | 37 |
| 4. Plan Change 13 Timeframe Report (attached) | 62 |

PUBLIC EXCLUDED RESOLUTION:

Resolve that the public be excluded from the following part of the proceedings of this meeting namely:

1. Previous Minutes of the Planning and Regulation Meeting held on 7 June 2016.

General subject of each matter to be considered	Reason for passing this resolution in relation to each matter	Ground(s) under section 48(1) for the passing of this resolution
Previous Minutes 7 June 2016	Maintain Legal Privilege	48(1)(a)(i)

This resolution is made in reliance on Section 48(1)(a)(i) of the Local Government Official Information and Meetings Act 1987 and the particular interest or interests protected by Section 6 or Section 7 of that Act, which would be prejudiced by the holding of the whole or the relevant part of the proceedings of the meeting in public are as follows: *Previous Minutes 7 June 2016 under section 7(2)(g).*

ADJOURNMENTS: 12:30pm - Lunch

**MACKENZIE DISTRICT COUNCIL
MINUTES OF A MEETING OF THE PLANNING AND REGULATION
COMMITTEE HELD IN THE COUNCIL CHAMBERS, FAIRLIE, ON
TUESDAY 7 JUNE 2016, AT 1:45PM**

PRESENT:

Cr Murray Cox (Chair)
Mayor Claire Barlow
Cr Graham Smith
Cr James Leslie
Cr Russell Armstrong
Cr Noel Jackson

IN ATTENDANCE:

Wayne Barnett, Chief Executive Officer
Toni Morrison, Projects and Administration Manager
Keri-Ann Little, Committee Clerk

APOLOGIES:

Resolved: that an apology be received from Cr Evan Williams and the Planning and Regulations Manager.

Cr Smith/ Cr Armstrong

DECLARATIONS OF INTEREST:

There were no declarations of interest.

CONFIRM MINUTES:

Resolved that the minutes of the Planning and Regulation Committee meeting held on 2 February 2016, including those parts taken in public excluded, be confirmed and adopted as a correct record of the meeting.

Cr Smith/ Cr Armstrong

REPORTS:

HERITAGE PROTECTION FUND APPLICATION – ST PATRICKS CATHOLIC CHURCH:

This report from Mr Hole was spoken to by Ms Morrison and was for the Committee to consider an application from St Patricks Parish for the proposed painting of the St Patricks Church windows and the previously undertaken plastering and painting of the exterior walls completed 30 November 2015.

Resolved:

1. That the report be received.

Mayor/ Cr Leslie

2. That the Committee approves a grant to St Patrick's Parish for \$1,242.00 for the painting of the Church windows; and
3. That the Committee approves a grant to St Patrick's Parish for \$464.50 to contribute to the plastering work undertaken in November 2015.

Cr Smith/ Cr Jackson

HERITAGE PROTECTION FUND APPLICATION- BURKES PASS HERITAGE TRUST:

The purpose of this report was for the Committee to consider an application from The Burkes Pass Heritage Trust for funding to remove trees that pose a threat to St Patrick's Church.

Resolved:

1. That the report be received.

Cr Jackson/ Cr Armstrong

2. That the Committee approves a grant of \$793.50 from Council's Heritage Protection Fund to the Burkes Pass Heritage Trust for the removal of trees and branches endangering the church building.

Cr Armstrong/ Mayor

RESOURCE CONSENT OBJECTION:

The purpose of this report spoken to by Ms Morrison was to provide information for the Committee to consider an objection to resource consent RM160029 to subdivide a property on Nixons Road, Fairlie.

The Chair said that he believes by not supplying power to the boundary for lot 2 you are causing a problem for someone else at a later date when essentially those services could be put on up front.

The Mayor reminded the Committee that the policy is not a rule. She said that the purchase may wish to subdivide and sell further down the track.

Cr Smith said he believes the policy should be applied moving forward so there is no hang ups for land owners.

Ms Morrison concluded by adding that at the time of application it would have been outlined to the applicant that amalgamation would have been an easier option. She said it is believed the applicant is applying as a separate title because the new section will be used a dairy grazing.

Resolved: that the Planning and Regulation Committee dismisses the objection and uphold condition 4.

Cr Smith/ Cr Armstrong

The Chair took this opportunity to congratulate Council Planner Ashlee Dolamore on her new job with Ecan and thanked her for all her hard work.

PUBLIC EXCLUDED RESOLUTION:

Resolve that the public be excluded from the following part of the proceedings of this meeting namely:

1. Dog Incident.

General subject of each matter to be considered	Reason for passing this resolution in relation to each matter	Ground(s) under section 48(1) for the passing of this resolution
Dog Incident	Maintain Legal Privilege	48(1)(a)(i)

This resolution is made in reliance on Section 48(1)(a)(i) of the Local Government Official Information and Meetings Act 1987 and the particular interest or interests protected by Section 6 or Section 7 of that Act, which would be prejudiced by the holding of the whole or the relevant part of the proceedings of the meeting in public are as follows: *Dog Incident under section 7(2)(g)*.

Cr Smith/ Cr Armstrong

The Planning and Regulation Committee continued in open meeting.

THERE BEING NO FURTHER BUSINESS THE CHAIRMAN DECLARED THE MEETING CLOSED AT 2.07PM

CHAIRMAN: _____

DATE: _____

MACKENZIE DISTRICT COUNCIL

REPORT TO: PLANNING & REGULATION COMMITTEE

SUBJECT: MID-SOUTH CANTERBURY RURAL FIRE COMMITTEE
STATEMENT OF INTENT AND BUSINESS PLAN

MEETING DATE: 19 JULY 2016

FROM: NATHAN HOLE, PLANNING & REGULATIONS MANAGER

PURPOSE OF REPORT:

For the Committee to support adoption of the Mid-South Canterbury Rural Fire Committee (MSCRFC) draft statement of intent for 2016/17.

STAFF RECOMMENDATIONS:

1. That the report be received; and
2. That the Committee agrees to adopt the MSCRFC's 2016/17 draft statement of intent and business plan.

WAYNE BARNETT
CHIEF EXECUTIVE OFFICER

ATTACHMENTS:

The draft 2016/17 draft statement of intent and business plan.

BACKGROUND:

The MSCRFC is not a council controlled organisation (CCO) in terms of the Local Government Act, but is a Council organisation. Even though MSCRFC is not a CCO, the Committee resolved to abide by recommended local government practice and continue to produce an annual Statement of Intent and business plan. Doing so maintains transparency and describes reporting procedures and timelines.

POLICY STATUS:

N/A

SIGNIFICANCE OF DECISION:

This decision is not significant in terms of the Council's Significance and Engagement Policy.

ISSUES & OPTIONS:

N/A

CONSIDERATIONS:

N/A

ASSESSMENT OF OPTIONS:

N/A

CONCLUSION:

The recommendation provides for the Committee to adopt the draft Statement of Intent and Business Plan, while providing for further discussion and approval of expenditure.

MID SOUTH CANTERBURY
RURAL FIRE



STATEMENT OF INTENT
AND
BUSINESS PLAN

2016/2017

March 2016

PURPOSE

Partnering with communities to protect what they value

MID - SOUTH CANTERBURY RURAL FIRE AUTHORITY GOALS AND OBJECTIVES

GOAL 1

The communities of Mid Canterbury and South Canterbury are engaged on the subject of rural fire.

Objectives

1. Communities recognise the Mid-South Canterbury Rural Fire Authority brand and understand the purpose of the Mid-South Canterbury Rural Fire Authority.
2. Communities aspire to participate as rural fire volunteers.
3. Promote a culture of awareness and responsibility.

GOAL 2

The Mid -South Canterbury Rural Fire Authority is operationally safe and effective

Objectives

1. All operational equipment is maintained to the required state of readiness.
2. All staff are trained for their role and functions in rural fire management.

GOAL 3

The Mid-South Canterbury Rural Fire Authority is able to maintain business continuity.

Objectives

1. Ensure that the Mid-South Canterbury Rural Fire Authority can access resources from outside the region if required.

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1 **INTRODUCTION**

The Territorial Local Authorities (TLA's) are the key organisations responsible for Rural Fire to the extent that they are rural fire controlling authorities.

The obligations are contained in the Forest Rural Act 1977 and Forest and Rural Fires Regulations 2005 and the Fire Service Act 1975.

Rural Fire can be categorised into four major elements-:

Reduction	Policies and procedures in place that reduce the likelihood and consequences of fire in the district.
Readiness	Implementation of policies and procedures in relation to readiness for fire suppression in its district.
Response	The implementation of policies and procedures for responding to fire incidents within the district.
Recovery	The implementation of policies and procedures it has for activities it undertakes following fire events in its district.

The Mid-South Canterbury Rural Fire Authority is a legal entity created by the four Territorial Local Authorities (TLA's) of Ashburton, Mackenzie, Waimate and Timaru District Councils, Department of Conservation, a New Zealand Forest Owner's Association representative and the New Zealand Fire Service.

The Mid-South Canterbury Rural Fire Authority is responsible for the funding for rural fire management. They have chosen to form the Mid-South Canterbury Rural Fire Committee to meet its obligations in a combined manner.

The obligations of the Board are as follows:

- 1 Implementing the projects approved and funded by Mid-South Canterbury Rural Fire Authority.
- 2 Providing a forum for rural fire contributors.
- 3 Co-ordinating rural fire issues and programmes.
- 4 Carrying out any other rural fire initiatives.

Performance of these obligations by the Board is achieved by the appointment of a Principal Rural Fire Officer who is employed to manage the district to achieve the key objectives.

2 *RURAL FIRE AUTHORITY GOVERNANCE AND MANAGEMENT*

The Mid-South Canterbury Rural Fire Committee set up to administer the enlarged rural fire district is made up of appointees of each of the Territorial Local Authorities, a representative of the Department of Conservation, a representative of the New Zealand Forest Owner's Association, a representative of the New Zealand Fire Service and two independent directors appointed by the Board. The Board will meet at least quarterly and has governance responsibilities.

The Board employs a Principal Rural Fire Officer who has management responsibility and is also responsible to assist the Board in meeting its objectives and obligations.

While the Principal Rural Fire Officer is employed by the Board and is responsible directly to the Chairman, the Fire Authority will be administratively supported by either one of the constituent Territorial Local Authorities on a cost recovery basis.

A Secretary will be appointed by the Mid-South Canterbury Rural Fire Committee who will be responsible to ensure:

- Management advice
- Board Secretary duties including meetings co-ordination, agenda preparation and minute taking for the Mid- South Canterbury Rural Fire Committee.
- Supporting the Chairman as the Employer's representative including formulation of an employment contract, arranging performance appraisal, monitoring work attendance, leave etc.
- Corporate support including office, typing, reception and clerical (mail, filing, etc), accounting services, audit, payroll and information technology (phone, fax and computer).

3 *BUSINESS PLAN*

Each year a business plan and annual programme is to be formulated for the approval of the Fire Authority and will be drafted by the Principal Rural Fire Officer and outline:-

- What is to be done
- How it is to be done
- Who is to do it
- Performance measures both qualitative and quantitative (What will be achieved, by when and at what cost).

The Business Plan will include reference to project funding and to Territorial Local Authority administration funding.

The Business Plan will utilise data from the following sources

- Standards set by the National Rural Fire Authority
- Results of investigations carried out locally
- Input from contributing groups including Federated Farmers
- Corporate members

Following Fire Authority approval, applications are made to the financial members

- General maintenance
- Principal Rural Fire Officer's salary and Administration Assistant's salary
- Capital purchases
- Fire Fighting costs

The current Business Plan is attached in Appendix 5.

4 **FINANCIAL**

Income

The core funding of the Fire Authority's activities comes from the financial members of the Mid-South Canterbury Rural Fire Committee (salary and administration) and from the Local Authorities (operations). From this the Fire Authority employs the Principal Rural Fire Officer, Deputy Principal Rural Fire Officer, Administration Assistant, meets administration costs, and funds operational projects

Fire Fighting Costs

As per the Committee charter each member will be required to fund firefighting activities for fire incidents that occur within their management zone until the cost recovery action is complete.

Budget

The Mid-South Canterbury Rural Fire District is seeking funding from the following members over the next five years:

ASHBURTON DC	2016 April-June	2016 - 2017	2017-2018	2018-2019	2019 -2020	2020-2021
Administration	\$11,250	\$45,000	\$45,000	\$45,000	\$45,000	\$45,000
Operations	\$56,506	\$226,000	\$226,000	\$226,000	\$226,000	\$226,000
Capital Works	\$46,497	\$186,790	\$186,790	\$186,790	\$186,790	\$186,790
TOTAL	\$114,253	\$457,790	\$457,790	\$457,790	\$457,790	\$457,790

TIMARU DC	2016 April-June	2016 - 2017	2017 - 2018	2018-2019	2019-2020	2020 -2021
Administration	\$11,250	\$45,000	\$45,000	\$45,000	\$45,000	\$45,000
Operations	\$25,749	\$103,000	\$103,000	\$103,000	\$103,000	\$103,000
Capital Works	\$4,500	\$113,000	\$68,000	\$113,000	\$8,000	\$8,000
TOTAL	\$41,499	\$261,000	\$216,000	\$261,000	\$156,000	\$156,000

WAIMATE DC	2016 April-June	2016- 2017	2017- 2018	2018-2019	2019-2020	2020 -2021
Administration	\$11,250	\$45,000	\$45,000	\$45,000	\$45,000	\$45,000
Operations	\$15,525	\$72,100	\$59,000	\$59,000	\$59,000	\$59,000
Capital Works	\$3,649	\$162,600	\$7,600	\$6,000	\$6,000	\$6,000
TOTAL	\$30,424	\$279,700	\$111,600	\$110,000	\$110,000	\$110,000

MACKENZIE DC	2016 April-June	2016 -2017	2017 - 2018	2018-2019	2019-2020	2020 -2021
Administration	\$11,250	\$45,000	\$45,000	\$45,000	\$45,000	\$45,000
Operations	\$15,000	\$60,000	\$56,000	\$56,000	\$56,000	\$56,000
Capital Works	\$15,624	\$8,000	\$8,000	\$113,000	\$8,000	\$8,000
TOTAL	\$41,874	\$113,000	\$109,000	\$214,000	\$109,000	\$109,000

DEPARTMENT OF CONSERVATION	2016 April-June	2016 - 2017	2017 - 2018	2018-2019	2019-2020	2020 -2021
Administration	\$11,250	\$45,000	\$45,000	\$45,000	\$45,000	\$45,000
Operations	\$26,125	\$104,500	\$104,500	\$104,500	\$104,500	\$104,500
Capital Works						
TOTAL	\$37,375	\$149,500	\$149,500	\$149,500	\$149,500	\$149,500

NEW ZEALAND FOREST OWNER'S GROUP	2015 - 2016	2016 - 2017	2017-2018	2018-2019	2019 -2020
Administration	\$45,000	\$45,000	\$45,000	\$45,000	\$45,000

NATIONAL RURAL FIRE AUTHORITY	2015 - 2016	2016 - 2017	2017-2018	2018-2019	2019 - 2020
NRFA Bulk Funding Grant	\$72,539	\$193,000	\$193,000	\$193,000	\$193,000

National Rural Fire Authority pays bulk funded monies to enlarged rural fire districts called the Bulk Funding Grant. This allocation is based according to each ERFD's individual characteristics and current performance levels.

Expenditure

Expenditure is controlled by the Principal Rural Fire Officer based on the Business Plan and agreed programme under specified delegated authority limits as set by the Fire Authority in accordance with the Fire Authority charter.

It is recognised that the Fire Authority may also directly fund capital projects of their own. Usually this would relate to specific projects within a district. Normally it is expected that all programmes would be co-ordinated through the Principal Rural Fire Officer.

GST and Audits

The Fire Authority is GST registered. Independent audits of the Committee's accounts are carried out annually. The current auditor is Audit New Zealand.

Distributions to Members

No dividend or return of members' capital is envisaged as members' annual contributions are set at a level to cover costs net of grants and receipts from sales.

Accounting Policies

Refer to Appendix 3 - Statement of Accounting policies

Cash Flow

Refer to Appendix 2

Profits

Nil

5 *TIMETABLE*

Annual funding approval process for the following financial year is as follows:

July	Request funding from members as appropriate for the New Year
September	Prepare Annual Accounts for Audit and forward to corporate members
September	Draft Annual budget for next financial year for members to consider for approval at December Board meeting
November	Liaise with corporate members re content of both Administration and Operations Budgets
December	Board approval of the Administration Budget
February	Confirm Budgets
February	Confirm Business Plan for next year

6 *REPORTING*

The Principal Rural Fire Officer will report in writing to each quarterly meeting of the Fire Authority as per the Local Government Act schedule. The reports are to contain information on progress against the Business Plan and information on the activities of the Officer.

The Principal Rural Fire Officer will prepare an annual report for the Fire Authority annual meeting.

Reporting to each Territorial Local Authority and the Department of Conservation will be carried out as arranged by that Fire Authority member.

Written reports to the Fire Authority are to be circulated at least five working days prior to the meeting and unconfirmed minutes of all meetings are to be distributed to members prior to the next meeting.

At the half year meeting a Balance Sheet and Profit and Loss Account including budget figures is to be tabled. Explanations of major deviations from budget, and their implications shall be explained to members in the Principal Rural Fire Officer's report.

7 *MEETINGS*

Fire Authority - Mid-South Canterbury Rural Fire Committee

The Mid-South Canterbury Rural Fire Committee's Annual General Meeting shall be held prior to 30 September of each year.

General meetings shall be held at least quarterly but may also be convened at any time by the Chairperson (subject to the requirements of notice set out in the Charter) or upon receiving a request of any member to do so.

At all meetings of the Mid-South Canterbury Rural Fire Committee a quorum shall be as identified in the Charter.

The Mid-South Canterbury Rural Fire Committee shall meet a minimum of four times per year. Normally meetings are held every three months. This Board provides opportunity for sharing information, discussing problems and issues and co-ordinating activities. It can also act to lobby organisations for particular rural fire safety outcomes.

8 *APPENDICES*

APPENDIX 1 - MEMBERS

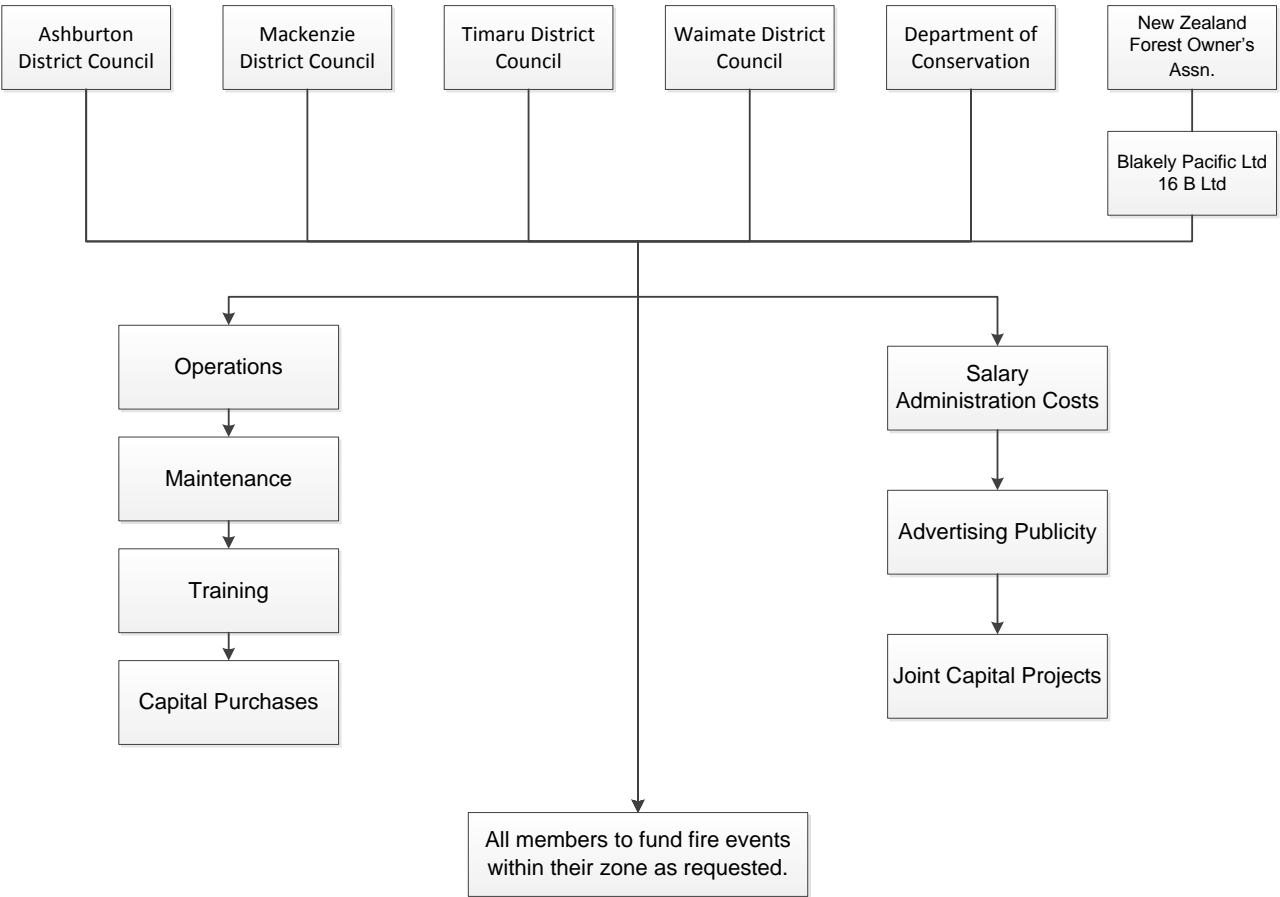
Mid-South Canterbury Rural Fire Committee - Members

Ashburton District Council
Mackenzie District Council
Timaru District Council
Waimate District Council
Department of Conservation
New Zealand Forest Owner's Association
New Zealand Fire Service
Two Independent Directors appointed by the Board

Standing invitation to attend all Committee Meetings

- Principal Rural Fire Officer
- MSCRFA Administration Assistant
- Blakely Pacific Ltd (Timaru Manager and Forest Managers)
- New Zealand Forest Owners Assn Group members
- Advisory Staff from each Territorial Local Authority
- Advisory Staff from Department of Conservation

APPENDIX 2 - CASH FLOW



APPENDIX 3 - STATEMENT OF ACCOUNTING POLICIES

Reporting Entity

The South Canterbury Rural Fire Authority was incorporated in 1998 under the Forest Rural Fire Act 1977 for the purpose of fire protection in South Canterbury. The South Canterbury Rural Fire Authority altered its membership and boundaries in 2016 and as a result has included Ashburton. The Committee now operates as the Mid-South Canterbury Rural Fire Authority.

The Mid-South Canterbury Rural Fire Authority is a council organisation as per the Local Government Act 2002.

The Financial Statements form a General Purpose Financial Report that is prepared in accordance with the Framework for Differential Reporting issued by the Institute of Chartered Accountants of New Zealand.

Measurement Base

The Financial Statements are prepared on the basis of historical cost, with the exception of those items for which specific accounting policies are identified.

Specific Accounting Policies

The following specific accounting policies which materially affect the measurement of the financial performance and the financial position are applied:

Funding

Mid-South Canterbury Rural Fire Authority is a Council organisation. Current practice is to invoice Council and Corporate members for maintenance by annual invoicing in advance. Capital projects are invoiced to members when approved. Additional funding is obtained from third parties by donations, National Rural Fire Authority subsidy, and fire fighting charges.

Goods and Services Tax (GST)

Items of income and expenditure are stated exclusive of GST. Accounts Receivable and Payable are stated inclusive of GST.

Taxation

The Authority is taxed as a company, but currently no income tax is payable due to accumulated losses.

Fixed Assets

(Non Current assets)

All fixed assets are initially recorded at cost.

Depreciation is provided on a diminishing value basis at rates that will write off the cost of the assets to their estimated residual values over their useful lives. The depreciation rates of major classes of assets have been applied as follows:

- | | |
|----------------------------------|-----------|
| • Plant | 25% |
| • Furniture and office equipment | 15% - 30% |
| • Motor Vehicles | 33% |



STATEMENT OF STRATEGIC INTENT 2016

APPENDIX 4 - STATEMENT OF STRATEGIC INTENT 2016

MSCRFA STATEMENT OF STRATEGIC INTENT		
Vision –		
Purpose – partnering with communities to protect life and property from the threat of fire		
Goal 1	Goal 2	Goal 3
The communities of Mid - South Canterbury are engaged on the subject of rural fire	The MSCRFA is operationally safe and effective	The MSCRFA is able to maintain business continuity
Objectives <ol style="list-style-type: none"> 1. Communities recognise the MSCRFA brand and understand the purpose of the MSCRFA 2. Communities aspire to participate as rural fire volunteers 3. Promote a culture of awareness and responsibility 	Objectives <ol style="list-style-type: none"> 1. All operational equipment is maintained to the required state of readiness 2. All staff are trained for their role and functions in rural fire management 3. Maintain an effective Health & Safety Employment system 	Objectives <ol style="list-style-type: none"> 1. Ensure that the MSCRFA can access resources from outside the region if required
Business plan actions <ol style="list-style-type: none"> 1. Develop Community Engagement and Education Plan 2. Develop a rural fire volunteer recruitment plan 3. Implement the strategic tactical plans with communities (2016 – 2018) 	Business plan actions <ol style="list-style-type: none"> 1. Maintain the 10 year rolling programme of capital maintenance and replacement (2016 – 2018) 2. Maintain hazard plans 	Business plan actions <ol style="list-style-type: none"> 1. Maintain strong regional and national relationships (2016 – 2018) 2. Document key processes and systems 3. Maintain mutual assistance agreements 4. Develop and maintain a current Business Continuity Plan
Measurement <ol style="list-style-type: none"> 1. The understanding of rural fire matters is increased 2. The number of rural fire volunteers is maintained or increased 3. The readiness level of communities is improved 	Measurement <ol style="list-style-type: none"> 1. The MSCRFA meets the NRFA minimum standards 2. All MSCRFA staff are appropriately trained for their roles 3. MSCRFA is adequately resourced for threat 4. (incl. funding, equipment, people) 	Measurement <ol style="list-style-type: none"> 1. The MSCRFA is prepared for extreme events or constraints to local resource availability



BUSINESS

PLAN

2016/2017

APPENDIX 5 - BUSINESS PLAN 2016/2017

MID-SOUTH CANTERBURY RURAL FIRE AUTHORITY BUSINESS PLAN 2016/2017					
Goal	Objective	Strategic Intent Business Plan Action	Intended Action	Measurement	Target Date By
The communities of Mid-South Canterbury are engaged on the subject of rural fire	Communities recognise the Mid- South Canterbury Rural Fire Authority brand and understand their purpose		Review Statement of Intent. Set Business Plan to identify the key projects set for the following year.	A Statement of Intent and Business Plan for the following year is approved by MSCRFA stakeholders	June 2017
		Goal 1. Action 3 Implement the strategic tactical plans with communities	Prioritise the mitigation action for each of the 3 Plan Areas. Budget to carry out mitigation actions.	Carry out mitigation actions as agreed by the Board for 2016 – 2017 year	June 2017
	Promote a culture of awareness and responsibility		Educate the rural communities via the Fire permit system	Develop the permitting system to meet the needs of the expanded Authority	Oct 2016
			Educate key groups within the rural sector i.e. Federated Farmers	Attend Federated Farmers Committee Group meeting	June 2017
			Develop and provide the education material to meet the need of the current situation	Attend Canterbury Regional Coordinating Committee meetings and Sub-Committees as required Educational publications are available to the public.	June 2017
				Water hydrants Winchmore Installing 48 hydrants on the Ashburton Lyndhurst irrigation system	June 2017

Goal	Objective	Strategic Intent Business Plan Action	Intended Action	Measurement	Target Date By
				Water Tanks Lake Clearwater Replace two water tanks to support fire response in the Clearwater village	June 2017
The Mid-South Canterbury Rural Fire Authority is operationally safe and effective	All operational equipment is maintained to the required state of readiness		Compliance with the Forest and Rural Fire Act, New Zealand Fire Service Act and the Rural Fire Regulations	Carry out actions as required by the NRFA to meet the Audits and assessments carried out by National Rural Fire Authority in 2013/14	June 2016
			Carry out internal audits to ensure all Fire Units have the required operational equipment and that it is to the Industry standard	Audit will meet industry national standards	June 2017
			Carry out annual testing as required by the National Rural Fire Authority standards	Will meet National Rural Fire Authority Equipment Audit	June 2017
			Maintain the communication network to ensure it meets the needs of both the Fire District and the New Zealand Fire Service	Effective turnout systems are maintained and communication networks link the Rural Fire Authority and New Zealand Fire Service	June 2017
			Maintain a register of all equipment and test results	Equipment test results are recorded	June 2017
		Goal 2. Action 1 Maintain the 10 year rolling programme of capital maintenance and replacement	Develop equipment and fleet to ensure that all equipment is of a high standard and meet the changing needs of the industry	Clandeboyne Generator Purchase a generator for Clandeboyne, Timaru	June 2016

Goal	Objective	Strategic Intent Business Plan Action	Intended Action	Measurement	Target Date By
				Pump Burkes Pass Purchase a Pump Kit for Burkes Pass	June 2016
				GPS Purchase GPS for all units within Timaru, Mackenzie and Waimate	June 2016
				Rakaia Tanker Replace the rural fire tanker sited at the Rakaia Fire Station	June 2016
				Willowby Tanker Replace the rural fire tanker sited at the Willowby Fire Station	June 2016
				Hinds Fire Station Construct the Hinds fire station as per the agreed design	June 2016
				Ashburton Fire Station Construct the Ashburton fire station as per the agreed design and plans	June 2016
				Mt Somers Fire Station Develop the Mt Somers station to include a training room, kitchen, toilet facilities	June 2016
				Rakaia Tanker Shed Alter current tanker shed to accommodate the new tanker	June 2016
				Geraldine Tanker Replace the rural fire tanker sited at the Geraldine Fire Station	December 2016

Goal	Objective	Strategic Intent Business Plan Action	Intended Action	Measurement	Target Date By
				Cannington Appliance Develop a medium 4 x 4 appliance for the Cannington unit	February 2017
				St Andrews Tanker Develop a tanker for placement at the St Andrews fire brigade	March 2017
				Pendarves Tanker Develop a tanker for placement at the Pendarves unit	June 2017
				Hose Replacement of hose stock that has failed the annual testing	February 2017
				Thermal camera Purchase a thermal camera for the Mackenzie zone	December 2016
				Radios Lake Clearwater, Cave, Clandeboye, Peel Forest and Rangitata Provide 2 radios to the Lake Clearwater, Cave, Clandeboye, Peel Forest, Rangitata units	June 2017
				Hinds MVLP Pump Purchase a suitable filling pump for the Hinds unit	September 2016

Goal	Objective	Strategic Intent Business Plan Action	Intended Action	Measurement	Target Date By
The Mid South Canterbury Rural Fire Authority is operationally safe and effective	All staff are trained for their role and functions in rural fire management	Goal 2 - Objective 2 All staff are Trained for the Role and functions within Rural Fire	Carry out training to New Zealand Qualification Authority unit standards	All staff are trained in a minimum of Unit Standard 3285	June 2017
				Train a minimum of 10 Fire fighters in the basic fire fighter unit standards	Minimum 10 people gain Unit Standard June 2016
			Maintain a register of all training carried out for both currency and unit standards achieved	All Rural Fire Officers or trainer are to process training forms	All year
			Carry out an annual Rural Fire Officers course to educate all Rural Fire Officers in the correct procedures surrounding coordinated response	20 Rural Fire Officers attend annual training	July 2017
			To provide training to administration staff, contractor volunteers that would normally be involved in fire incidents	50% of staff to attend annual regional training and regional exercise	October 2016
		Goal 2 Objective 3 Maintain an effective Health and Safety at Work system	Inform the MSCRFA Board of any changes to Health and Safety	Annually present to the Board on their responsibilities for Health & Safety	June 2017
			Review the Health and Safety plan annually	The MSCRFA Board will review and update the MSCRFA Health and Safety Plan annually.	June 2017

Goal	Objective	Strategic Intent Business Plan Action	Intended Action	Measurement	Target Date By
			Arrange Health and Safety meetings and report outcomes to the Board	Three monthly meetings are carried out and the outcomes reported to the quarterly Board meeting.	June 2017
			Ensure that all staff , contractors and volunteers are inducted in the relevant health and safety procedures	Staff are inducted in the H&S procedures. All volunteers are given a Health and Safety Induction prior to joining. MSCRFA preferred contractors are inducted prior to entry into the workplace.	June 2017
			Staff Training in Health and Safety	There is a health and safety training plan prepared for all permanent and part time staff.	June 2017
			Provide the opportunity for volunteers to have their health monitored	Offer this process to 50% of the teams that are budgeted to go through this process	June 2017
		Goal 2 Action 2 Maintain hazard plans	Review the hazard plan within the operational fire plan	Carry out a review of the hazards within the Fire Plan annually	June 2017
			Develop site hazard plans for all volunteer stations	Carry out an assessment of all locations and display site hazard plan at stations	June 2017
The Mid-South Canterbury Rural Fire Authority is able to maintain business continuity	Ensure that the Mid-South Canterbury Rural Fire Authority can access resources from outside the region if required	Goal 3. Action 1 Maintain strong regional and national relationships	Arrange quarterly operation meetings to address operational issues in a timely manner. Maintain a Duty Roster system to ensure response requirements are met.	A minimum of 4 operation meetings are held a year. A Duty Roster is maintained throughout the year	August November February May

Goal	Objective	Strategic Intent Business Plan Action	Intended Action	Measurement	Target Date By
			Purchase insurance cover to provide adequate protection for Rural Fire Officers of the Mid-South Canterbury Rural Fire Authority	Insurance cover is in place that includes public liability, professional indemnity, death and disability, personal effects and private vehicles for members of the Voluntary Rural Fire Forces within the Mid-South Canterbury Rural Fire district area.	July 2016

Goal	Objective	Strategic Intent Business Plan Action	Intended Action	Measurement	Target Date By
			Review the fire plan as required by the Forest & Rural Fire Regulations	The Fire Plan is approved by the MSCRFA Board and is accepted by the National Rural Fire Authority	April 2016
		Goal 3. Action 3. Maintain mutual assistance agreements	Have agreement in place with the New Zealand Fire Service, the Canterbury Regional Coordinating Committee, Contractors	Review all Agreements that are in place	October 2016

MACKENZIE DISTRICT COUNCIL

REPORT TO: PLANNING & REGULATION COMMITTEE

SUBJECT: DISTRICT LICENCING COMMITTEE CHANGE OF
COMMISSIONER

MEETING DATE: 19 JULY 2016

FROM: NATHAN HOLE, PLANNING & REGULATIONS MANAGER

PURPOSE OF REPORT:

To confirm the resignation of Pat Mulvey as District Licensing Committee (DLC) Commissioner, and to confirm the appointment of Sharyn Cain the new DLC Commissioner.

STAFF RECOMMENDATIONS:

1. That the report be received; and
2. That the Committee recommends to the Chief Executive that the resignation of Pat Mulvey from the role of Commissioner of the Mackenzie District Licensing Committee is accepted and that it is effective from the appointment of a new Commissioner of the Mackenzie District Licensing Committee; and
3. That the Committee recommends to the Chief Executive that Sharyn Cain is appointed Commissioner of the Mackenzie District Licensing Committee effective immediately.

WAYNE BARNETT
CHIEF EXECUTIVE OFFICER

ATTACHMENTS:

N/A

BACKGROUND:

The Mackenzie DLC was formed at the implementation of the Sale and Supply of Alcohol Act 2012 (the Act) in December 2013. The purpose of the Committee is to consider all licence applications, including new applications and renewals for on, off, club and applications for special licences. It also considers all managers' certificates applications (new applications and renewals) and applications for temporary authorities. The DLC is effectively a semi-judicial board of inquiry, making decisions on local licensing matters that can be appealed to the Wellington based Alcohol Regulatory and Licensing Authority (ARLA).

Mackenzie District Council works with Timaru and Waimate District Councils under a joint model that is overseen by a Commissioner. The Commissioner acts as Chair of each district's DLC in conjunction with two locally appointed DLC members. In addition, the Councils share appointed members when local members are not available.

The Act states that a DLC member or the Commissioner can be any person of standing in the community who has the necessary experience for the role. They must act in a non-political fashion and not be subject to bias. The roles can be filled by elected members or from outside Council.

In July 2016 DLC Commissioner Pat Mulvey submitted his resignation from the DLC as he is not seeking re-election as an elected member for Timaru District Council. This set in motion a selection process to identify his replacement. The Act requires that a Commissioner be appointed by the Chief Executive (CE) of the Council based on the recommendation of the Council. As the Commissioner is shared by all three councils the new commission appointment requires a resolution from the Timaru, Waimate and Mackenzie District Councils, prior to the respective CE's making the appointment to their individual DLCs.

The role of replacement Commissioner was advertised with three expressions of interest received by the Secretary to the DLC. These in turn were forwarded to the Mayor's from each district to agree on a joint recommendation to each Council on who should be the new commissioner. The successful applicant and person recommended is Waimate District Council's Deputy Mayor Sharyn Cain.

It is also important to note that Timaru District Council's DLC has replaced two of its members following the resignations of Graeme Broker and Peter Thompson. They have been replaced by Peter Burt and David Jack who are both Timaru District councillors. The reason for noted the change with Timaru's DLC is that the three councils share members when our own appointed members are unavailable to attend a Mackenzie DLC hearing.

POLICY STATUS:

Sale and Supply of Alcohol Act 2012

SIGNIFICANCE OF DECISION:

This matter is not deemed significant under the Council's Significance and Engagement Policy.

CONSIDERATIONS:

The process to appoint a replacement Commissioner has been robust with the Mayors of all three councils working together to make a joint recommendation.

CONCLUSION:

The joint DLC approach with Timaru and Waimate District Councils has worked well since its inception in December 2013.

Sharyn Cain is the recommended replacement for retiring Commissioner Pat Mulvey, who will come to the role (subject to approval) after serving as a member of the Waimate DLC for the past two years.

MACKENZIE DISTRICT COUNCIL

REPORT TO: PLANNING & REGULATIONS COMMITTEE
SUBJECT: BUILDING ACCREDITATION ASSESSMENT REPORT
MEETING DATE: 19 JULY 2016
FROM: NATHAN HOLE, PLANNING & REGULATIONS MANAGER

PURPOSE OF REPORT:

To table International Accreditation NZ's (IANZ) assessment report of Mackenzie District Council's Building Consent Authority (BCA).

STAFF RECOMMENDATIONS:

1. That the report be received.

WAYNE BARNETT
CHIEF EXECUTIVE OFFICER

ATTACHMENTS:

IANZ Building Consent Authority Accreditation Assessment Report

BACKGROUND:

Mackenzie District Council's BCA underwent its routine BCA assessment undertaken by IANZ on 22nd to 22th June 2016 to assess compliance with the Building (Accreditation of Building Consent Authorities) Regulations 2006. The assessment was brought forward from November to June due to the significant staff changes in the BCA.

The attached report describes IANZ's observations and the five corrective actions required to be cleared by 1 September 2016. The report also makes a number of strong recommendations that should be implanted prior to the BCA's next audit.

Provided the corrective actions are cleared within the required timeframe and there are no other significant changes to the BCA it is likely that the next BCA audit will be undertaken in June 2018.

POLICY STATUS:

Building (Accreditation of Building Consent Authorities) Regulations 2006.

SIGNIFICANCE OF DECISION:

No decision required.

ISSUES & OPTIONS:

N/A

CONSIDERATIONS:

N/A

ASSESSMENT OF OPTIONS:

N/A

CONCLUSION:

While there are areas of the BCA where improvement is required, I consider this to have been a very successful audit, especially given the changes in the BCA makeup, and the timeframe to prepare for the audit. The ongoing challenge for the Mackenzie BCA is going to be compliance with Regulation 8 which is ensuring that we have enough employees and contractors.



BUILDING CONSENT AUTHORITY ACCREDITATION ASSESSMENT REPORT

Mackenzie District Council

Routine Reassessment

22 to 24 June 2016

ASSESSMENT REPORT

Organisation Details

Organisation	Mackenzie District Council
Address	53 Main Street Fairlie 7925 New Zealand
Client Number	7471
Accreditation Number	53
Authorised Representative	Nathan Hole
Programme	Building Consent Authority Accreditation

Assessment Team

Lead Assessor	Adrienne Woollard
Technical Experts	John Tait Wayne Roden

Report Preparation

Prepared by:	Adrienne Woollard
Checked by:	Carolyn Osborne
Date finalised:	8 July 2016

Introduction

This report relates to the Routine Reassessment of your Building Consent Authority (BCA) which took place between 22 and 24 June 2016 to determine conformance with the requirements of the Building (Accreditation of Building Consent Authorities) Regulations 2006 (Regulations 4 – 18 inclusive) and applicable technical and procedural criteria.

Accreditation is a conclusion by IANZ that your organisation complies with the Building (Accreditation of Building Consent Authorities) Regulations 2006 and other normative documents as relevant. When any non-compliance is identified during an assessment it is IANZ's duty to ensure that compliance is re-established if accreditation is to continue. How re-establishment of compliance is approached depends on the seriousness of the non-compliance, but also on the level of proven commitment of your organisation to the principles of accreditation and the accreditation process. Whether a minor non-compliance is raised as a Corrective Action Request (CAR) or a strong recommendation will depend on the level of confidence that IANZ has that your organisation will take effective action in a timely manner to address the issues. Organisations that establish a record of timely and effective actions on any non-compliance are likely to receive fewer CARs.

The assessment was a sampling exercise and therefore this report is based on the observations made during the assessment.

Compliance with all legal requirements, including those relating to health and safety, is the responsibility of your organisation. Where some items relating to legal requirements such as health and safety may have been identified, this does not represent an exhaustive report on your compliance with such legal requirements. Auditing for compliance with legal requirements except those explicitly quoted elsewhere in this report is outside the scope of this assessment.

A copy of this report and information regarding progress towards clearance of Corrective Action Requests (CARs) will be provided to the Ministry of Business, Innovation and Employment in accordance with IANZ's contractual obligations.

Executive Summary

This Routine Reassessment of Mackenzie District Council Building Consent Authority (MDC BCA) was brought forward from its originally planned date of November 2016 due to staff changes within the BCA and the need to assure IANZ that the BCA continued to comply with the Regulations during this period of change.

The BCA was able to demonstrate that compliance with the accreditation regulations had, for the most part, continued however, the assessment identified that the recent staff changes had exposed a weakness in the BCAs ability to process some commercial consents in-house. This was being managed by contracting this work to other BCAs however many of the issues identified during this assessment appeared to result as an outcome of this change.

There were also several issues raised as CARs during the previous assessment that had not been fully addressed and have been raised as CARs again as part of this report. Any CAR marked with an asterisk (*) is similar to one raised previously and must be addressed urgently.

The assessment outcome was that continued accreditation would be recommended once the 5 Corrective Action Requests (CARs), listed below and detailed in the following pages, have been cleared. It is recommended that all submissions are received by IANZ at least 10 working days prior to the clearance date.

- CAR 1 Regulations 6, 7(2)(d) and 10
- CAR 2 Regulation 7 (2)(d) and (f)
- CAR 3 Regulation 8
- CAR 4 Regulation 11
- CAR 5 Regulation 12

Note that when non-conformance with Regulations 7 to 18 is identified, Regulations 5 and/or 6 also apply.

Unless the BCA undergoes any critical changes that require early assessment of the BCA, your next assessment will be carried out in June 2018.

Observations and recommendations contained within this report provide further detail on the BCAs conformity with general accreditation criteria and industry specifics. Strong recommendations have the potential to become non-conformances and will be followed up at the next assessment.

Conditions of Accreditation

Some instances were identified where the systems or procedures did not comply with the stated requirements or applicable technical documents and these are detailed in Corrective Action Request (CAR) numbered 1 to 5.

Any corrective actions requested must be implemented in accordance with the timescale agreed between the assessor and the authorised representative at the exit meeting and recorded on each CAR before the continuation of accreditation can be recommended. Please complete the appropriate section of each CAR explaining your corrective actions and forward a copy along with any supporting documents to IANZ for review.

Concerns about the technical findings of the report, or its clearance, that cannot be resolved should be submitted in writing to the Chief Executive Officer of IANZ. The Complaints and Appeals procedure is contained in the IANZ document "Procedures and Conditions of Building Consent Authority Accreditation".

OBSERVATIONS

In this part of the report guidance has been provided regarding the requirements of each regulation or part regulation. This is presented in a text box at the beginning of each section. This information is intended to provide context for the observations that follow.

Regulation 5 Requirements for Policies, Procedures and Systems

5(a) Policies, procedures and systems are required to be documented.

5(b) The BCA is required to have appropriate documentation that includes sufficient detail to ensure that staff using the procedure are clear what to do, when to do it and what records are required to be kept. A BCA is also required to have an appropriate and documented procedure for document control.

Policies, procedures and systems were documented in the MDC Quality Assurance System (QAS) Manual. This was available to staff electronically, with all staff having authorised access via password protection.

Document controls for system documentation such as the MDC QAS Manual were in place and being implemented well.

Regulation 6 Observance of Policies, Procedures and Systems

6(a) The BCA is required to have a system to ensure that it implements effectively the policies, procedures, and systems required by the regulations.

MDC had chosen to ensure the effective implementation of their policies, procedures and systems through the use of internal audits.

6(b)(c) & (d) The BCA must record the decisions it makes under its policies, procedures and systems and the reasons for, and outcomes of, those decisions.

A number of BCA records were reviewed during this assessment. Of these, some did not include appropriate records of reasons for decisions, especially for some Building Act and Building code clauses. This is discussed further under Regulation 7 and in **CAR 1**.

Regulation 7 Performing Building Control Functions

7(2)(a) This regulation requires the BCA to provide information to applicants wishing to apply for a building consent, on how an application is processed, how work is inspected during construction and how completed building work is certified.

Information was provided to applicants wishing to apply for a building consent, on how an application was processed, how work was inspected during construction and how completed building work was certified via the MDC website. While it provided most of the suggested information a number of aspects could be improved to better inform applicants before they apply. See **R1**.

Regulations 7(2)(b), (c) & (d)(i) refer to requirements for receipt of applications, checking that they have all the necessary content according to the Building Act and relevant Regulations, then lodging them into the organisation's consent management system.

While most applications reviewed during this assessment were seen to be complete, several did not include sufficient detail regarding means of compliance or the specified systems involved in the project. It is strongly recommended (**R2**) that the BCA ensure that all applications are complete before they are accepted.

Applications were lodged into the electronic work management system (NCS) and the 20 day clock started. This generally occurred within 48 hours of receipt however the BCA had experienced some delays in the past. This appeared to have been resolved.

Regulation 7(2)(d)(ii) requires that the BCA assesses the content of the application in preparation for allocation to a competent processor. This requires a decision about the complexity of the application using the BCA's building categorisation system.

Administration staff assessed the application and assigned it to a building category. This appeared to be working appropriately in most cases however some commercial work was observed that may have been miscategorised.

Regulation 7(2)(d)(iii) requires the BCA to have a procedure for the allocation of applications to appropriate Building Control Officers (BCOs) or contractors (consultants) for processing.

A self-allocation system was in place for BCOs to allocate work according to their assessed competency. Work had generally be allocated appropriately according to the assessed competence of individuals however competence assessments indicated that individuals had not been assessed for commercial work yet some staff were carrying out those activities. See **CAR 1**.

Regulation 7(2)(d)(iv) requires the BCA to have appropriately documented and implemented procedures for processing of building consents.

Most simple applications were observed to have been processed appropriately however there was some evidence that more complex consents had been issued without a robust decision making process occurring. In particular it was questionable whether the grounds used to accept the application were appropriate and often these were not appropriately recorded (as required by Regulation 6 (c)). See **CAR 1**.

Some commercial consent documentation contained insufficient critical analysis of the application. Items not appropriately considered included Section 112 and its effects, and content of Fire Reports when considering the C clauses. See **CAR 1**.

Regulation 7(2)(d)(v) requires the BCA to grant Building Consents (BCs) that meet the requirements of the Forms Regulations and are issued in a timeframe compliant with the Building Act. (The statutory clock for processing consent applications is within 20 working days).

The procedure for granting/refusing consents was not adequate in that there was no procedure available to guide staff regarding how to refuse a consent. There was also no information regarding how to complete and issue a BC when the project involved specified systems. See **CAR 2**

Some granted BCs reviewed contained inappropriate conditions and one did not include a requirement for inspection to occur. Building consents for projects that involved specified systems did not appropriately list the specified systems and their performance standards on the consent (or on an attached Draft Compliance Schedule referred to in the consent). Some BCs requiring a Compliance Schedule stated that "A Compliance Schedule is not required". See **CAR 2**.

Regulation (7)(2)(d)(v) also requires the BCA to effectively manage lapsed consents twelve months after they have been issued.

The requirement to manage lapsed consents twelve months after they have been issued was generally being managed effectively, with 10 month reminder letters sent, followed by 12 month lapsed letters sent to building consent applicants. When a consent lapsed it was recorded as "Consent Refused" in NCS. While this was necessary in order to drive the NCS system appropriately it was not as per the BCAs procedure and was not considered to be appropriate. The report generated by NCS did not report on consents that had included an extension of time. This made management of lapsing more difficult. Copies of the 10 and 12 month lapsing letters were sometimes not available on the applications file. See **R3**.

Regulation 7(2)(e) requires BCAs to plan, manage and perform inspections.

The process for planning and implementing inspections was generally working well. Since the last assessment inspectors had moved away from recording inspection information in diaries. Inspection bookings were recorded in staff Microsoft Outlook calendars and inspection notes recorded on inspection record forms. The new system allowed for appropriate management and recording of inspections however there were some issues identified during the assessment with the recording of supervision staff when operating outside of their scope when conducting inspections.

It is strongly recommended (**R4**) that some additional focus is applied to the requirement to supervise staff. This is to ensure that adequate records of supervision are maintained in every case when supervision is required and conducted.

Regulation 7(2)(f) requires appropriate completion of Form 6 by applicants, compliance with Form 7 & Section 93(2)(b) of the Building Act by the BCA and for the BCA to be compliant with meeting the statutory clock for processing Code Compliance Certificate (CCC) applications.

The documented procedure for issuing CCC's was contained in the MDC QAS Manual. The Final Document Checklist/Application for CCC Form was being used to check all information on the file. This was completed appropriately and the files reviewed appeared to contain the required information to be able to issue a CCC.

The issued CCCs reviewed by the assessment team were found to be generally appropriate although two were seen to not appropriately list the building's "Year First Constructed". It is recommended (**R5**) that the BCA ensures that information regarding "Year First Constructed" is obtained at the time of the assessment (where appropriate) and where the project is an alteration to a building (e.g. replacement of a solid fuel heater) that the "Year First Constructed" is recorded as the year the building was constructed not the year that the alteration was made.

CCCs were seen to have attached advisory notes. It is recommended (**R6**) that the BCA review these notes to ensure that they are technically correct and consider what value the addition of these notes adds to the CCC process.

There were no CCCs for projects that included specified systems available for review at the time of the assessment. The assessment team were therefore unable to determine whether these were appropriate. This aspect will be closely reviewed at the next assessment. This will include checking that the paragraph on Form 7 under Code Compliance "(b) the specified systems in the building are capable of performing to the performance standards set out in the building consent" is included for projects involving specified systems and that Compliance Schedules are listed as an attachment (when required).

Regulation 7(2)(f) also requires the BCA to manage consents that have not had an application for a CCC at 24 months.

The requirement to manage consents that had not had an application for a CCC at 24 months was being appropriately addressed. Letters were sent to clients at 22 and 24 months to remind them of the upcoming requirement for the BCA to make a decision. While these were accepted it is recommended (**R7**) that the BCA consider amending the 24 month letter to provide more information regarding the client's alternatives once a CCC is refused. It is also recommended (**R8**) that from time to time the BCA runs a report to cover the last few years of CCCs rather than just the previous month. This will catch any that have slipped through the 24 month process.

Regulation 7(2)(f) additionally requires the BCA to issue Compliance Schedules that list specified systems and the inspection, maintenance and reporting requirements of those systems with the relevant CCC.

Issued compliance schedules did not include sufficient detail regarding the type (and make where available) of specified systems or the details of the standard (including the year) to which the specified system complied. Also, issued compliance schedules did not include sufficient information regarding the location of the items and the inspection, maintenance and reporting requirements for each specified system. See **CAR 2**.

It appeared that draft incomplete compliance schedules were being issued with the BC, but there was no evidence that this had occurred as it was not listed as an attachment to the BC. Also there was no evidence of it being marked as “Draft” if it was issued. See **CAR 2**.

Regulation 7(2)(f) requires that where a BCA issues a Notice to Fix it is required to comply with the template provided in Form 13 of the Forms Regulations and be issued according to the BCA’s documented procedures.

A Notice to Fix procedure was in place within the MDC QAS Manual. This included requirements to record particulars of the breach, and the timeframe in which compliance was to be achieved. No Notices to Fix had been raised since the last IANZ assessment.

Regulation 7(2)(g) requires a BCA to have a documented and implemented system for management of inquiries other than those addressed by the information detailed under Regulation 7(2)(a).

The QAS Manual contained a procedure for the receiving and managing of inquiries. This required inquiries about specific consents to be provided in email form. It is recommended (**R9**) that the BCA consider accepting/responding to inquiries made other than by email.

Trends in inquiries received were discussed at operational management meetings.

Regulation 7(2)(h) requires a BCA to have a documented and implemented system for management of complaints.

Complaints were required to be made in writing. Records of these were maintained in the “Complaints Folder” however, the Complaints Register form was not used to record the management of each complaint (the Complaint Register form, although available as a template, was not being completed). It is strongly recommended (**R10**) that records of complaint management are maintained.

Regulation 8 Ensuring enough Employees and Contractors

Regulation 8 (1) requires the BCA to have a system for ensuring that it has enough employees and contractors to perform its building control functions. Regulation 8 (2) requires the BCA to have implemented a system for assessing the need to employ contractors if it does not have enough available employees assessed as competent to perform the tasks. This process usually includes a review of the range of skills available in-house along with how much work the BCA is processing.

The BCA had a system in place to ensure that there were sufficient numbers of employees and contractors employed to perform its building control functions. However, the performance of the BCA against statutory timeframes for issue of BCs was found to be 93%, 74% and 76% over the three months preceding the assessment. Compliance with statutory timeframes for issue of CCC had improved over the last few months and the statistics confirmed that the BCA was currently meeting its statutory requirements for issue of CCC. The BCA had introduced new systems for inspection management to improve efficiency. At the time of the assessment inspections were being undertaken within two days of booking. See **CAR 3**.

Regulation 8(2) prompts the BCA to monitor relevant indicators to determine whether the BCA has sufficient staff to complete all of its required functions. Indicators could include completing internal audits according to the annual program, completing competency assessments annually, performing annual training needs assessments, training being delivered as specified, on-going monitoring of the performance of contractors, continuous improvements being progressed in a timely manner, operations meetings occurring regularly and as planned, strategic reviews happening at least annually, maintenance of the quality manual and monitoring of (and meeting) the statutory clocks.

The BCA was found to be generally performing well in relation to completing its quality management functions such as implementation of internal audits, competency assessments, management reviews (both strategic and operational) and completion of training as planned.

Although the quality management functions were being completed on time, the BCA was not meeting its statutory requirements. See **CAR 3**.

Regulation 9 Allocating Work to Competent Employees and Contractors

This Regulation requires the BCA to have a system for ensuring the allocation of processing and inspections to competent persons (employees or contractors).

A procedure describing how work was allocated to competent staff was in place within the BCA documented system. A self-allocation system was used, based on the location and type of building by classification category. The BCA Manager was responsible for management of work involving categories above staff competence levels. Isolated examples of this process not working correctly were seen. Refer to **CAR 1**.

Regulation 10 Establishing and Assessing Competence of Employees

In regulation 10(1) a BCA is required to have a system for establishing the competence of a person who applies for employment to perform building control functions.

The MDC QAS Manual contained a procedure for establishing the competence of people applying for employment by the BCA. However, the procedure did not state the timeframe within which the BCA would assess the competence of a person joining the organisation without a competence assessment. This was also raised during the previous assessment. It is strongly recommended (**R11**) that this timeframe is defined.

In Regulations 10(2) and (3) the BCA is required to have a system for regularly assessing the competence of employees performing building control functions.

This system is to include:

- 10(3)(a) philosophy and principles of building design and construction;
- 10(3)(b) understanding and knowledge of building products and methods;
- 10(3)(c) knowledge and skill in applying the Act, the building code, and any other applicable regulations under the Act;
- 10(3)(d) ability to process applications, inspect and certify work;
- 10(3)(e) ability to communicate with internal and external persons;
- 10(3)(f) ability to comply with the building consent authority's policies, procedures, and systems.

The BCA had a documented procedure for annually assessing the competence of its staff and records demonstrated that competency reviews were being conducted annually. These records were generally good however in two instances the outcomes in the Skills Matrix were not supported by the findings in the competence assessments. This was because there were no commercial jobs available at the time of the competence assessments so the assessor had identified that further assessment of staff performing commercial work was required when it became available. This had not occurred. See **CAR 1**.

Training needs were identified as part of the competency assessment process.

Regulation 11 Training Employees

Regulation 11(1) requires the BCA to have a system for training its employees and 11(2) details training system requirements including making needs assessments, preparing training plans, providing training, monitoring effectiveness of training, supervising employees, recording qualifications, etc. and recording professional development

Regulation 11(1) To meet this clause the BCA is required to have a training system for employees who perform building control functions.

Regulation 11(2)(a) requires regular (annual) training needs assessment for performing building control functions for the BCA. These are usually defined as the training needs for the organisation as a whole and for individuals within that organisation.

Regulation 11(2)(a) requires regular (annual) training needs assessment for performing building control functions for the BCA. These are usually defined as the training needs for the organisation as a whole and for individuals within that organisation.

The BCA had documented its procedures for establishing the training needs of the organisation and of individuals within the BCA.

Training needs for BCA staff were assessed as part of the annual competency assessments. These had been completed for all BCA staff performing a technical job. Training plans had then been developed using the outcome of competence assessments and a review of organisational training needs.

The BCA was seen to be recording its training plans however the training plans did not include planned training dates or a record of the training that was provided. Although training dates were discussed during operational management meetings and were recorded in those minutes this was not as per the documented procedure. See **CAR 4**.

Regulation 11(2)(d) requires the BCA to monitor and review employees' application of the training they have received, including by observing relevant activities;.

While the BCA was recording training that had taken place it was not monitoring and recording the effectiveness of the training received. This activity was partially prevented because the BCA had not recorded specific objectives for its planned training (i.e. specifically what they wanted to achieve by providing the training) so it was impossible to measure whether the objectives had been achieved. See **CAR 4**.

Regulation 11(2)(e) requires the BCA to have a procedure in place to supervise an employee whilst under training or at any other time supervision is needed.

A review of BCA files revealed a number of anomalies in relation to supervision of staff when operating outside of their scope when conducting inspections. It is strongly recommended that some additional focus is applied to the requirement to supervise staff when operating outside of their scope when conducting inspections. This is to ensure that adequate records of supervision are maintained in every case when supervision is required and conducted. Supervision records should include as a minimum the name of the supervisor, together with their signature and information about what was supervised, what was seen and what, if any, further training is required. See strong recommendation **R4**.

Regulation 11(2)(f) & (g) requests the compilation of records including qualifications and certificates from training received and on-going professional development.

Records of qualifications and training courses were maintained in individual's training folders. The BCA's procedures required staff to keep a log of informal training undertaken. While it was reported that staff completed informal training on a regular basis this was not being recorded. See **CAR 4**.

Regulation 12 Choosing and using Contractors

Regulation 12 (1) requires a BCA to have a system for choosing and using contractors and Regulation 12 (2) defines what that system must cover. This includes establishing contractors' competence, engaging contractors, making agreements with contractors, recording contractors' qualifications, monitoring and reviewing their performance and regularly assessing their competence.

Regulation 12(2)(b) requires the BCA to have a system for engaging contractors if required.

Regulation 12(2)(c) requires the BCA to have a system for making agreements with contractors if required.

The BCA had documented a procedure for choosing and using contractors as required. This procedure covered selecting and engaging the contractors, establishing and reviewing their competence, recording their qualifications and monitoring their performance.

Regulation 12(2)(a) requires a BCA to establish the competence of a person or organisation that they wish to engage as a contractor.

Regulation 12(2)(f) requires a BCA to regularly (at least annually) reassess the competence of its contractors.

During the period since the last assessment the BCA had used several BCAs within a “Cluster” (to which they belonged) to provide processing support and some training. The BCA held a Memorandum of Understanding and “Resource Sharing Agreement” with the “Cluster” members and relied on the ongoing accreditation of the members as evidence of their competence. Compliance with this section of the Regulations was confirmed.

Regulation 12(2)(d) requires the BCA to establish and record contractors’ qualifications.

The BCA relied on the accreditation of the BCAs and therefore their compliance with Regulation 18 instead of recording the contractors’ qualifications. This was considered to be acceptable.

Regulation 12(2)(e) requires the BCA to monitor and review contractor performance.

The BCA’s procedure required Key Performance Indicators (KPI’s) to be established at the beginning of a contract and for the contracted BCA to be measured against those KPI’s annually. This had not occurred. **CAR 5** requests the BCA review the performance of its contractors as per its documented procedures.

Regulation 17(4)(b) requires contractor compliance with QA Systems (either the BCAs or their own).

BCAs contracted under the “Resource Sharing Agreement” worked under their own quality system. As they were all accredited this was accepted as appropriate however the BCA is encouraged to obtain copies of the accreditation reports of BCAs it contracts work to, to establish whether the BCA is in an appropriate position to be offering contracted work. See recommendation **R12**.

Regulation 13 Ensuring Technical Leadership

Regulation 13(a) relates to identifying employees or contractors, who are competent to provide technical leadership and 13(b) relates to giving those Technical Leaders powers and authorities to enable them to provide leadership.

The BCAs Technical Leaders had been identified as part of their competence assessment. A list of Technical Leaders was displayed within the BCA offices to ensure that all staff were aware of the identity of its Technical Leaders.

Technical leadership had been identified as part of competence assessment. The Technical Leaders reviewed demonstrated appropriate technical skills to act as the Technical Leader in the identified fields.

Regulation 14 Ensuring Necessary Resources

Appropriate technical information is required to be made available to those staff needing to make use of it.

Technical information such as codes and standards were available on line, with the BCA maintaining a subscription to “Standards on Line” to allow ready access to relevant standards.

Appropriate technical facilities are required to be made available to BCA staff.

The BCA Manager was responsible for the provision of adequate resources such as computer equipment, stationery, vehicles, measuring and safety equipment to BCA staff. All technical facilities appeared to be appropriate.

Appropriate, calibrated equipment is required to be made available to staff.

Measuring equipment was made available to relevant staff. Equipment such as measuring tapes and levels were considered to maintain their calibration (or be obvious if they were broken) and as such the BCA did not require their regular calibration. The BCA had just purchased new moisture meters and thermometers.

These were purchased already calibrated so no recent records of the calibration process were available for review. Records of the old equipment demonstrated that the BCA had calibrated its equipment on an annual schedule to nationally traceable standards. It is suggested that the BCA could consider in-house checks of its new moisture meters against a test block of known electrical conductivity, rather than sending them away for calibration, unless they also need repair or battery replacement.

The BCA is required to document the records it will maintain and where and for how long they will be stored.

The retention period for all types of file records was not defined. It is strongly recommended that the BCA considers amending the QAS Manual so that it states the retention periods for all types of records held. See **R13**.

Regulation 15 Keeping Organisational Records

A BCA is required by Regulation 15(1) to record its organisational structure and record in the structure reporting lines & accountabilities and relationships with external organisations.

Mackenzie District Council had documented its organisational structure. BCA staff were included within this structure although the BCA itself was not defined in the structure. It is recommended (**R14**) that the BCA define which staff are included within the BCA. A chart of the BCAs relationships with external organisations was attached as an appendix to the QAS manual during the assessment to enable easy retrieval in the future.

Regulation 15(2) requires that roles, responsibilities, powers, authorities & limitations are recorded. Job descriptions are required for all staff in the BCA (or alternate means to document roles and responsibilities).

Position descriptions were in place for BCA staff such the BCOs and BCA Manager. The Mackenzie District Council Delegations Manual recorded delegations from the CEO to appropriate BCA staff.

Regulation 16 Filing Applications for Building Consent

Regulation 16(1) requires unique identification of Application files.

Applications for Building Consents and Amendments each received a unique identification number. The BCA had very recently moved from providing Amendments with a sequential file number to giving them the same number as the building consent file to which they belonged, with an A/B/C etc. suffix to identify them both as belonging to that consent, but also as a unique application.

The purpose of Regulation 16(2)(a) is to provide a means for the BCA to verify an application files' completeness prior to handing it over to the Territorial Authority for storage.

File content was managed and recorded using a "Final Document Checklist". All residential files reviewed were seen to contain the required information. Only a very few examples of commercial work were available during the assessment, therefore, the team were unable to determine whether the BCA's system was adequate for ensuring that files of commercial applications were complete.

Regulation 16(2)(b) requires that the files are accessible and retrievable and 16(2)(c) requires that they are stored securely.

Active files were stored at their relevant office (Fairlie and Twizel), with files being transferred to Fairlie for storage in the File Room once the CCC was completed. Files in both offices were considered to be accessible, retrievable and adequately secured.

Regulation 17 Quality System

Regulation 17(1) requires a BCA to have an integrated Quality System and 17(2) defines requirements for that system.

Regulation 17(2)(a) requires that the system for assuring quality covers the policies, procedures and systems described in regulations 5 to 16 (arguably this should read 5 to 18 for clarity)

MDC had documented its quality system in the MDC Quality Assurance System Manual. This had undergone regular review and update as evidenced by the Revision History provided in the manual.

Regulation 17(2)(b) states that a Quality Policy is required.

The DBH Regulation 17 guidance document requires that the quality policy includes high level measurable objectives. The intent of these objectives is to provide a framework for establishing the effectiveness of the quality assurance system.

The MDC BCA Quality Policy had been defined and documented. This had last been updated in October 2013. The Quality Policy contained quality objectives, however not all of these were fully measurable. Point 8 in the Quality Policy did not make it clear that the BCA would ensure that applications for both Building Consent and CCC would be monitored against statutory timeframes. It is recommended that the BCA consider revision of the quality objectives within the Quality Policy to enable them to be more measurable. See **R15**.

Regulation 17(2)(d) requires BCAs to undertake regular operational reviews (meetings) to communicate progress against objectives.

Operational reviews were being carried out by BCA staff at approximately monthly intervals. Minutes were kept of each meeting. A review of a sample of these indicated that the BCA was reviewing appropriate topics and maintaining a good record of discussions.

Regulation 17(2)(e) requires a documented system for management of continuous improvement of the performance of the BCA's functions.

The continuous improvement system was well managed using a standard template to record continuous improvements (CI) raised within the BCA's system. These records included details of the reason for raising the CI, proposed improvement, intended outcome, source of proposal, approval, actions required and evidence of implementation. The CI system was seen to be meeting the current needs of the BCA.

Regulation 17(2)(h) requires a procedure for ensuring that internal audit of every building control and related function is undertaken at least annually.

Internal audits of all Regulations were planned over a 12 month timeframe. These were mostly conducted as scheduled, with a few minor variations. Internal audit reports were well written and maintained, with good records of the evidence reviewed included in the audit record. Any identified issues that required improvement were transferred to the CI system.

It was noted that, while auditing of compliance with the Quality System was being performed as planned, there had been no technical audits carried out in the last year. While this is strictly a non-compliance with the regulations and could have been raised as a Corrective Action Request, taking into account your organisation's positive approach to continuous improvement, IANZ is confident that positive and timely action will be taken to address this on the basis of strong recommendation **R16**.

Regulation 17(2)(i) required a documented and implemented procedure for the identification and management of Conflicts of Interest.

The BCA had documented an appropriate procedure for management of conflicts of interest within its QAS Manual. Conflicts of interests were managed by the BCA management with details being recorded in the BCA Conflict of Interest register. Records sighted indicated that these were being appropriately recorded and addressed. During discussions it was identified that discussions between BCA staff and councillors, while having the possibility of influencing the BCA's officers, were not recorded. It is recommended (**R17**) that the BCA ensure that all conversations that could be considered as a potential or actual conflict of interest are recorded.

Regulation 17(2)(j) requires a procedure for communication with internal and external persons. This must document what, how, how frequently communications take place and who is responsible.

The MDC QAS Manual defined the media, frequency and who the relevant parties were, for each type of communication. The BCA had made some changes to its methods of communication but was yet to update its manual. It is strongly recommended (**R18**) that the information regarding enquiries, complaints and inspection is updated to reflect current practice.

Regulation 17(2)(n) requires an annual strategic review meeting to be carried out according to the BCAs documented agenda.

Annual strategic reviews were being held. The last annual strategic review was held during Feb 2016; for which appropriate records were available.

Regulation 17(3) requires a Quality Assurance manager to be named.

Nathan Hole had been named as the BCA Quality Manager. This was recorded within the MDC QAS Manual.

Regulation 17(3)(A) requires a documented system for management of complaints about professionals.

The BAC had documented an appropriate procedure for making complaints against practitioners however it was yet to experience a need to implement the procedure.

Regulation 17(4)(a) requires the monitoring of employee compliance with the BCA's QA systems.

Assessments of employee's compliance with the BCA's QA systems was assessed both as part of internal audits and during competence reviews. Any issues were recorded and addressed as training or CI issues.

Regulation 18 Requiring technical qualifications

Regulation 18(2) requires the BCA to have a system to ensure that every employee or contractor that performs building control functions by doing a technical job has appropriate technical qualifications

Qualifications for MDC BCA staff performing technical work was defined in both sections CA5 and CA9 of the MDC QAS Manual. The intention of the procedures was relatively clear and the BCA was seen to be meeting both procedures. However, with all MDC BCA technical staff holding or working towards an appropriate technical qualification, the two procedures appeared to be repetitive and to partially contradict each other. It is strongly recommended (**R19**) that the BCA revise CA5 and CA9 to ensure that there is no contradiction between the two procedures. Note that for easy interpretation they could be combined into one procedure. The BCA may also choose to review its exemption regarding retirement and replace it with reference to becoming eligible to superannuation.

Regulation 18(3)(a) requires the BCA to have a system for establishing the circumstances that would make it unreasonable for employees or contractors to hold the defined qualifications and Regulation 18(3)(b) requires those staff to be identified and recorded.

Circumstances in which qualifications were not required were documented in the MDC QAS Manual.

CORRECTIVE ACTION REQUEST

Building (Accreditation of Building Consent Authorities) Regulations 2006

CAR No: 1 *

Regulation 6 - Building consent authority's observance of policies, procedures, and systems

A building consent authority must record:

- (b) the decisions it makes under the policies, procedures, and systems required by these regulations; and
- (c) the reasons for the decisions; and
- (d) the outcomes of the decisions

Regulation 7 (2) (d) - Performing building control functions

1. A building consent authority must have policies and procedures for performing its building control functions.
2. The policies and procedures must cover the following:
 - (d) For applications that comply with the requirements that the Act and any applicable regulations under the Act specify for applications,
 - (iv) processing the applications to establish whether they comply with the requirements that the Act, the building code, and any other applicable regulations under the Act specify for buildings;

Regulation 10 - Establishing and assessing competence of employees

2. A building consent authority must have a system for regularly **assessing** the competence of its employees performing building control functions.
3. The competence assessment system must cover the following:
 - (a) employees' understanding of the philosophy and principles of building design and construction; and
 - (b) employees' understanding and knowledge of building products and methods; and
 - (c) employees' knowledge and skill in applying the Act, the building code, and any other applicable regulations under the Act; and
 - (d) employees' ability to:
 - (i) process applications for building consents; and
 - (ii) inspect building work; and
 - (iii) certify building work; and

Finding:

There was some evidence that consents had been issued without a robust decision making process being undertaken (both residential and commercial). In these cases it was not clear that reasonable grounds had been given by the applicant to allow the BCA to make an appropriate decision. The reasons for the decisions were not appropriately recorded so the assessment team could not follow the decision making process. In particular, some commercial applications contained insufficient records of critical analysis of the application with respect to items such as Section 112 and its effects, and the content of Fire Reports when considering the C clauses.

Staff were performing some commercial processing functions when their competence assessments did not indicate that they had the competence and the assessments did not include appropriate evidence for commercial work. This was because there were no commercial jobs available at the time of the competence assessments so the assessor had identified that further assessment of staff performing commercial work was required when it became available. This had not occurred.

The outcomes in the Skills Matrix were not supported by the findings in the competence assessments.

Action Required

Please develop a plan to ensure consent processing includes a robust decision making process being undertaken (for both residential and commercial work). This should include documenting the reasonable grounds that have been considered to allow the BCA to make its decision. In particular, the critical analysis of the application with respect to items such as Section 112 and its effects, and the content of Fire Reports when considering the C clauses should be recorded, especially for commercial projects. Please provide a copy of the plan to IANZ for review.

Depending on the content of the plan, please provide evidence of the implementation of the plan to ensure that all building consents issued are processed by processors assessed as competent and that appropriate reasons for decisions are made and recorded.

Please submit an up-to-date Skills Matrix with competence assessment records that support the recorded competencies.

Agreed clearance date: **1 September 2016**

For Building Consent Authority use:

Action taken: (please refer to any attachments)

Signed:

Date:

Attachments: Yes / No

Clearance by IANZ:

Signature:

Date:

CORRECTIVE ACTION REQUEST

Building (Accreditation of Building Consent Authorities) Regulations 2006

CAR No: 2 *

Regulation 7 (2) (d) - Performing building control functions

1. A building consent authority must have policies and procedures for performing its building control functions.
2. The policies and procedures must cover the following:
 - (d) For applications that comply with the requirements that the Act and any applicable regulations under the Act specify for applications,
 - (v) granting, refusing to grant, and issuing building consents;
 - (f) issuing and refusing to issue code compliance certificates and compliance schedules

Finding

There was insufficient information provided in the BCAs procedures regarding how to complete and issue a BC when the project involved specified systems.

There was no procedure available to guide staff regarding applying appropriate inspections and conditions to a consent or how to refuse a consent.

Building consents for projects that involved specified systems did not appropriately list the specified systems and their performance standards on the consent (or on an attached Draft Compliance Schedule referred to in the consent).

It was suggested that draft incomplete compliance schedules were being issued with the consent, but there was no evidence that this had occurred as draft compliance schedules were not listed as attachments to the consent. Also there was no evidence of it being marked as "Draft" if it was issued with the consent.

Some BCs requiring a compliance schedule stated that "A Compliance Schedule is not required".

Issued compliance schedules did not include sufficient detail regarding the make and model (where available) of specified systems or the details of the standard (including the year) to which the specified system complied.

Issued compliance schedules did not include sufficient information regarding the location of the items and the inspection, maintenance and reporting requirements for each specified system.

Action Required

Please review the BCAs procedures to ensure that adequate information is provided to allow staff to issue appropriate and complete consents, including appropriate inspections and conditions (if required). Please provide a copy to IANZ.

Please implement the procedures and provide evidence to IANZ of their implementation for a commercial project. The information provided should include a building consent (real or mocked up), completed application for CCC (with specified systems listed), issued CCC and a compliance schedule.

Agreed clearance date: **1 September 2016**

For Building Consent Authority use:

Action taken: (please refer to any attachments)

Signed:

Date:

Attachments: Yes / No

Clearance by IANZ:

Signature:

Date:

CORRECTIVE ACTION REQUEST

Building (Accreditation of Building Consent Authorities) Regulations 2006

CAR No: 3 *

Regulation 8 - Ensuring enough employees and contractors

1. A building consent authority must have a system for ensuring that it has enough employees and contractors to perform its building control functions.
2. A building consent authority must have a system for assessing the need to employ contractors if it does not have enough employees to perform its building control functions

Finding

The performance of the BCA against statutory timeframes for issue of BCs was found to be 93%, 74% and 76% over the three months preceding the assessment. The BCA was therefore not meeting its statutory obligations for issue of building consents.

Action Required

Please develop a plan to ensure that all building consents (and CCCs) are issued within statutory timeframes. The plan needs to take into consideration the requirements for quality as well as quantity. Please provide a copy of the plan to IANZ for review.

Please then implement the plan and provide evidence of compliance with statutory timeframes for June and July, including an analysis of all consents and CCC that exceed the timeframe. Note that IANZ accepts reasons for exceeding timeframes that are unpredictable and unmanageable.

Agreed clearance date: **1 September 2016**

For Building Consent Authority use:

Action taken: (please refer to any attachments)

Signed:

Date:

Attachments: Yes / No

Clearance by IANZ:

Signature:

Date:

CORRECTIVE ACTION REQUEST

Building (Accreditation of Building Consent Authorities) Regulations 2006 Clause No:

CAR No: 4

Regulation 11 - Training employees

1. A building consent authority must have a system for training its employees who perform the authority's building control functions by doing a technical job.
2. The system must cover the following:
 - (a) making regular training needs assessments; and
 - (b) preparing training plans that specify the training outcomes required; and
 - (c) ensuring that employees receive the training agreed for them; and
 - (d) monitoring and reviewing employees' application of the training they have received, including by observing relevant activities; and
 - (e) supervising employees under training; and
 - (f) recording employees' qualifications, experience, and training; and
 - (g) recording continuing training information

Finding

Training plans did not include planned training dates or a record of the training that was provided as per the documented procedure.

While the BCA was recording training that had taken place it was not monitoring and recording the effectiveness of the training received. This activity was partially prevented because the BCA had not recorded specific objectives for its planned training (i.e. specifically what they wanted to achieve by providing the training) so it was impossible to measure whether the objectives had been achieved.

The BCA's procedures required staff to keep a log of informal training undertaken. While it was reported that staff completed informal training on a regular basis this was not being recorded.

Action Required

Please develop a plan to ensure that the BCA is appropriately addressing all of the requirements of Regulation 11, including the above findings. Please provide a copy to IANZ for review.

Please implement the plan and provide evidence of training plans that include the desired training objectives. For the next training event please provide evidence of monitoring of the effectiveness of the training.

Agreed clearance date:

For Building Consent Authority use:

Action taken: (please refer to any attachments)

Signed:

Date:

Attachments: Yes / No

Clearance by IANZ:

Signature:

Date:

CORRECTIVE ACTION REQUEST

Building (Accreditation of Building Consent Authorities) Regulations 2006

CAR No: 5

Regulation 12 - Choosing and using contractors

1. A building consent authority must have a system for choosing and using contractors to perform its building control functions.
2. The system must cover the following:
 - (a) establishing contractors' competence; and
 - (b) engaging contractors; and
 - (c) making written or electronic agreements with contractors; and
 - (d) recording contractors' qualifications; and
 - (e) monitoring and reviewing contractors' performance; and
 - (f) regularly assessing contractors' competence

Finding

The BCA had not recorded an annual review of their contractor's performance and competence during 2015 or 2016.

The BCA's procedure required Key Performance Indicators (KPIs) to be established at the beginning of a contract and for the contracted BCA to be measured against those KPIs annually.

Action Required

Please carry out a review of the performance and competence of all contractors used in the last 12 months as per the BCA's documented procedures. Please provide a copy to IANZ.

Note that the review may require the BCA to develop a set of KPIs to measure the performance of its contractors against.

Agreed clearance date: **1 September 2016**

For Building Consent Authority use:

Action taken: (please refer to any attachments)

Signed:

Date:

Attachments: Yes / No

Clearance by IANZ:

Signature:

Date:

RECOMMENDATIONS

Recommendations are intended to assist your organisation in its efforts to maintain an effective quality management system. They are **not** conditions of accreditation.

- R1. It is **strongly recommended** that the public information is expanded to cover those aspects discussed during the assessment (and included in the IANZ check-sheet).
- R2. It is **strongly recommended** that the BCA ensure that all applications are complete before they are accepted. This includes requiring sufficient detail regarding means of compliance and the specified systems involved in the project
- R3. It is **strongly recommended** that the management of lapsing in NCS is reviewed to ensure that lapsed consents are recorded appropriately and that reports can be generated to manage the lapsing process for all consents, including those that have received an extension. Copies of all communications regarding an application, including these letters, must be maintained on an application file.
- R4. It is **strongly recommended** that some additional focus is applied to the requirement to supervise staff when operating outside of their scope when conducting inspections. This is to ensure that adequate records of supervision are maintained in every case when supervision is required and conducted. Supervision records should include as a minimum the name of the supervisor, together with their signature and information about what was supervised, what was observed and what, if any, further training is required.
- R5. It is **strongly recommended** that the BCA ensures that information regarding “Year First Constructed” is obtained at the time of the assessment (where appropriate) and where the project is an alteration to a building (e.g. replacement of a solid fuel heater) that the “Year First Constructed” is recorded on the Code Compliance Certificate as the year the building was constructed not the year that the alteration was made.
- R6. It is recommended that advisory notes attached to CCCs are reviewed to ensure that they are providing information that is technically correct and that the BCA consider what advantage the attachment of these notes provides to the BCA.
- R7. It is recommended that the BCA consider amending its 24 month CCC letter to provide more information regarding the client’s alternatives once a CCC is refused.
- R8. It is recommended that from time to time the BCA runs a report to cover the last few years of CCCs rather than just the previous month. This will catch any that have slipped through the 24 month process.
- R9. It is recommended that the BCA consider accepting/responding to inquiries made other than by email.
- R10. It is **strongly recommended** that records of complaint management are maintained (in a register or similar).
- R11. It is **strongly recommended** that the BCA specify the timeframe within which new employees shall have competency assessments performed when there is none available.

- R12. It is recommended that the BCA obtain copies of the accreditation reports of BCAs it contracts work to, in order to establish whether the BCAs are in an appropriate position to be offering contracted work.
- R13. It is **strongly recommended** that the BCA includes in its QAS Manual the retention periods for all types of records held.
- R14. It is recommended that the BCA define and document which staff are included within the BCA.
- R15. It is recommended that the BCA consider revision of the quality objectives within the Quality Policy to enable them to be more measureable.
- R16. It is **strongly recommended** that the BCA ensures that it completes technical audits at least annually of all types of work and all staff carrying out that work.
- R17. It is recommended that the BCA ensure that all conversations that could be considered as a potential or actual conflict of interest are recorded in the conflict of interest register.
- R18. It is **strongly recommended** that information regarding enquiries, complaints and inspection is updated in the “Communications” section of the QAS Manual to reflect current practice.
- R19. It is **strongly recommended** that the BCA revise procedures CA5 and CA9 to ensure that there is no contradiction between the two procedures. Note that for easy interpretation they could be combined into one procedure. The BCA may also choose to review its exemption regarding retirement and replace it with reference to becoming eligible to superannuation.

MACKENZIE DISTRICT COUNCIL

REPORT TO: PLANNING & REGULATION COMMITTEE

SUBJECT: PLAN CHANGE 13 TIMEFRAME

MEETING DATE: 19 JULY 2016

FROM: NATHAN HOLE, PLANNING & REGULATIONS MANAGER

PURPOSE OF REPORT:

To update the Committee on PC13 timeframes.

STAFF RECOMMENDATIONS:

1. That the report be received.

WAYNE BARNETT
CHIEF EXECUTIVE OFFICER

ATTACHMENTS:

N/A

BACKGROUND:

The Environment Court issued a minute on 17 May 2016 setting out the timeframes for the various parts of the process indicating a hearing on PC13 would be held in the week of 7 November.

POLICY STATUS:

N/A

SIGNIFICANCE OF DECISION:

No decision required.

ISSUES & OPTIONS:

N/A

CONSIDERATIONS:**1 July 2016**

Any submitter on the s293 version of PC13 who wants to become a party to the plan change under s274 of the RMA is to have lodged its application with the Environment Court. The parties that have made applications to join under s274 are by 1 July are:

- Environmental Defence Society (s274 status granted – 10th decision)
- Mackenzie Guardians (s274 status granted – 10th decision)
- Simons Pass Station Ltd
- Blue Lake Investments Ltd
- Environment Canterbury
- Ben Ohau Farming Ltd
- Irishman Creek Station Ltd
- Te Runanga O Ngai Tahu
- Department of Conservation

15 July 2016

The Respondent (MDC) must serve its evidence in chief on the parties.

19 August 2016

All appellants must serve their evidence in chief.

9 September 2016

All s274 parties must serve their evidence in chief

7 October 2016

Any rebuttal evidence must be served

28 October 2016

The respondent (MDC) is to lodge all the final evidence with the Environment Court.

Week of 7 November

Hearing in Twizel

CONCLUSION:

There is a lot of activity occurring with regard to PC13 between now and the end of the year, and it is useful for the Council to be aware of this timeframe.