Self-contained Vehicles

Certification Authority Audit Policy

Self-contained Vehicles Regulatory System

Version 1.2

11 June 2025

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Introduction

Self-containment certification authorities (Certification Authorities) are appointed by the Plumbers, Gasfitters, and Drainlayers Board (Board) under section 87C of the Plumbers, Gasfitters, and Drainlayers Act 2006 (Act) to carry out their **core functions** of:

- appointing vehicle inspectors who meet prescribed competency requirements
- issuing, renewing, or revoking certificates of self-containment, which involves:
  - arranging for a vehicle inspector to carry out an inspection
  - ensuring the inspection is carried out in accordance with requirements in the Act, the Plumbers, Gasfitters, and Drainlayers (Self-Contained Vehicles) Regulations 2023 (Regulations), and the Plumbers, Gasfitters, and Drainlayers Board (Motor Vehicle Inspections) Notice 2023 (Notice)
  - issuing a certificate (and warrant card) if satisfied the vehicle meets the requirements in the Act and Regulations, and the person applying for the certificate has paid the levy; and
- entering information into the national register of self-contained vehicles (Register).

Certification Authorities play an important compliance role in the self-contained vehicles regulatory system.

During the transitional period ending 6 June 2025[1], a certifying plumber is deemed to be a Certification Authority.

The Board intends to audit the performance of each Certification Authority at least once during their five-year appointment period. The Board may require an audit at more frequent intervals or an additional audit at any time where it has concerns about a Certification Authority's performance.

The Board will audit the Certification Authority's compliance against their own procedures and with the Act, Regulations, and Notice. The audit is a means to ensure the Certification Authority is following the legal requirements and processes related to the carrying out of their core functions. It is also an opportunity for the Board to inform the Certification Authority about good practice. It is expected that Certification Authorities performance will improve over time, as each responds to any non-conformances identified in their audit report.

The legal authority for carrying out Certification Authority audits is provided for in section 137(k)(ii) of the Act. This section provides that a function of the Board is to promote, monitor, and review the ongoing competency and performance of Certification Authorities. Section 138 of the Act provides the Board with the powers to carry out this function.

Purpose

The purpose of this Certification Authority Audit Policy is to describe the Board's approach to Certification Authority audits.

This policy is designed for internal operational use to guide Board decisions about the scope of an audit, including which areas to prioritise when planning an audit, when an additional or more

[1] The status of certifying plumbers as deemed Certification Authorities will end on 6 June 2025 regardless of whether or not the transitional period for privately owned vehicles is extended beyond that date.

frequent audit may be required, and to inform the development of more detailed internal processes and tools to support this policy.

Scope

This policy applies to the auditing of all Certification Authorities (either appointed by the Board under section 87C of the Act or deemed to be a Certification Authority until 6 June 2025).

Relevant legislation and policies

The following legislation is relevant to this policy:

- Plumbers, Gasfitters, and Drainlayers Act 2006;
- Plumbers, Gasfitters, and Drainlayers (Self-Contained Vehicles) Regulations 2023;
- Plumbers, Gasfitters, and Drainlayers Board (Motor Vehicle Inspections) Notice 2023.

The following guidance documents are also relevant to this policy:

- Being a Certification Authority;
- Printing and issuing certificates and warrant cards;
- Vehicle inspection guidance;
- Guidance notes and other directions issued by the Board.

Objectives

The objectives of this audit policy are:

- To inform decisions about audit scope and those aspects of the Certification Authority's activities, processes, and procedures that will be audited.
- To inform decisions about initiating an audit or more frequent audits, when there are concerns about a Certification Authority's performance (having regard to the Certification Authority's compliance and audit history).
- To enable continued improvement of a Certification Authority's performance by identifying areas of compliance, major non–conformances, and minor non-conformances.
- To provide consistency in managing Certification Authority audits and addressing non-conformances identified.

Audit approach

The Board will take a proportionate, risk-based approach to auditing Certification Authorities. Audit frequency, scope, and follow up decisions will be based on a consideration of risk factors and available evidence, as outlined below.

The risk factors include, but are not limited to:

- Whether the Certification Authority is new to carrying out self-containment inspection and certification work (such as when they and/or their vehicle inspectors lack experience and/or a compliance and audit history).

- Whether the Certification Authority routinely carries out remote inspections, rather than carrying out inspections in-person.
- Whether the Certification Authority has a wider network of vehicle inspectors operating across multiple sites.
- Whether the Certification Authority processes certification for larger numbers of smaller converted vehicles, rather than purpose built motorhomes, caravans, and campervans.
- The Certification Authority's history of compliance with requirements related to the core functions of a Certification Authority; including from audit reports, investigations, complaints, and concerns (excluding those that are frivolous, vexatious, or unsubstantiated).
- The Certification Authority's attitude to compliance (e.g. willing and able to do the right thing, try but don't always succeed, don't want to comply, will not comply).
- The volume (or lack of volume) of certificates issued by the Certification Authority.
- Any other relevant circumstances that suggest an audit would be in the public interest.

The Board will assess relevant risk factors to identify what to audit and help prioritise, scope, and determine the frequency of audits.

Audit scope

The assessment of risk factors described above will determine the audit scope and those aspects of the Certification Authority's activities, processes, and procedures that will be audited.

The audit will assess a Certification Authority's decision making, systems, processes, procedures, and practices for:

- appointing vehicle inspectors who meet the prescribed competency requirements, monitoring their performance, and ensuring their ongoing competency;
- issuing or renewing certificates of self-containment and warrant cards, including:
    - arranging for vehicle inspectors to carry out inspections;
    - ensuring that inspections are carried out in accordance with the requirements prescribed by the Regulations and the Notice, and have regard to any guidance or directions issued by the Board;
    - considering the findings of inspections carried out by their vehicle inspectors;
    - issuing certificates and warrant cards if satisfied that the vehicle meets the prescribed requirements, and the levy has been paid;
- revoking certificates and warrant cards where appropriate;
- making entries into, and searching, the Register;
- managing conflicts of interest and maintaining impartiality;
- manging customer complaints;
- collection and timely payment of levies to the Board —

in order to verify that these comply with the relevant requirements under the Act, Regulations, and Notice.

Generally, a sample of the Certification Authority's activities, inspection records, and certificates they've issued would be audited, in line with accepted audit practices.

Audits will be conducted in two stages:

- **Stage one** is a **desktop review** of documented evidence of the Certification Authority's processes and procedures.
- **Stage two** is an **onsite visit** at the Certification Authority's place (or places) of business. During this stage the Board's audit team will discuss their findings from stage one, observe an inspection (or inspections) being carried out, and interview a number of the Certification Authority's vehicle inspectors and other key staff.

To help the Board assess the Certification Authority's compliance with matters relevant to the audit, the Board may supplement the audit with additional information provided/received during the course of the audit. For example, additional information may be sought when auditing certification and vehicle inspection records or to verify the assessment of certificates issued to vehicle owners by the Certification Authority.

Audit frequency

The Board intends to audit each Certification Authority at least once every five years.

The Board may determine that an audit is required at more frequent intervals, or an additional audit is required at any time, if it has a reasonable concern about the conduct or ability of the Certification Authority to comply with the relevant requirements of the Act, Regulations, and Notice.

The Board will make this decision on a case by case basis taking into account relevant factors, which may include but are not limited to:

- investigations or a pattern of complaints and/or concerns relating to the Certification Authority;
- the Certification Authority's audit history, including the nature and number of non-conformances (particularly major non-conformances) identified in the audit report and any corrective actions that are not closed out in a reasonable timeframe;
- the Certification Authority's attitude to compliance (e.g. willing and able to do the right thing, try but don't always succeed, don't want to comply, will not comply);
- the apparent competence of the Certification Authority (and their vehicle inspectors) and the effectiveness of their processes and procedures for carrying out their core functions;
- whether an audit at more frequent intervals, or an additional audit at any time, would be in the public interest.

Overall management of audits

The audit will typically require reviewing and assessing the Certification Authority's documentation and records, discussions with relevant people, and include observations of practice.

In cases where an audit requires entry to the Certification Authority's place of business, the Board's audit team will enter with the consent of the Certification Authority.

The audit team will typically consist of a lead auditor and a technical advisor with deeper knowledge of vehicle self-containment. At times a larger audit team may be needed, for example, where the Certification Authority has a wider network of vehicle inspectors across multiple sites. In that

situation an additional auditor and technical advisor may be assigned to the audit team but there will always be a Lead Auditor assigned to the audit who will be the Certification Authority's main point of contact.

Provision of information

Should a Certification Authority provide insufficient access or information to the Board, or fail to provide requested information to assure the traceability of the Certification Authority's decisions within a reasonable time, the Board may seek additional evidence. If the Certification Authority fails to provide the requested information or it cannot be obtained in a reasonable time, then the audit report will take this into account in determining non-conformance and corrective actions.

Non-conformance

Audit findings of non-conformance mean the Certification Authority is not complying with the relevant requirements under the Act, Regulations, and Notice and/or is not meeting the expectations set in the relevant guidance (*Being a Certification Authority, Vehicle inspection guidance, Printing and issuing certificates and warrant cards*).

Non-conformances can be either major or minor in nature:

- **major non-conformance**. These are medium to high risk matters that should be addressed quickly.
- **minor non-conformance**. These are lower risk matters that are important to correct but the risk is less immediate.

Major non-conformances and/or failure to undertake corrective actions within the timeframes specified may be regarded as grounds for significant concern about the ability or conduct of the Certification Authority. This may trigger an investigation of the Certification Authority and may lead to disciplinary action being taken by the Board, which could include suspension or revocation of their appointment.

Audit outcomes and re-audit

Following the audit the Certification Authority will be provided with a copy of the draft audit report and have an opportunity to comment on any issues identified. Once the draft report has been finalised the Certification Authority will be issued with the final audit report.

If any non-conformances were identified during the audit, then the Certification Authority will be required to prepare a corrective action plan to address the non-conformances promptly and send it to the Board.

The audit findings and corrective action plan outcomes will inform the Board's decisions about audit follow-up and audit frequency and will also be used to inform reappointment application decisions.

The audit will be closed off by the Board, depending on the nature of non-conformances observed. For major non-conformance, the Board will close the audit either with confirmation that the non-conformance has been addressed or when the time allocated in the corrective action plan has lapsed. For minor non-conformance, the Board will close the audit when the corrective action plan has been received and is acceptable to the Board.

Certification Authorities are expected to address any non-conformances as soon as practicable. The Board expects confirmation within 14 days that any major non-conformance has been addressed and confirmation within 28 days that any minor non-conformance has been addressed. If this is not practicable the Certification Authority should contact the Board as soon as possible identifying the reason for the delay, with a plan that is acceptable to the Board indicating when the non-conformance will be addressed. If the Certification Authority fails to demonstrate they have completed the corrective actions within the timeframes specified or to present an acceptable plan to address these, follow up action may be initiated. For major non-conformances, this may include a follow-up audit or an investigation initiated by the Board.

The Board may require a follow-up audit to verify that corrective actions were taken. The Board will base this decision on the risks associated with the non-conformances identified and the Certification Authority's compliance history, audit history, and attitude to compliance.

Major non-conformances and/or failure to undertake corrective actions within the timeframes specified may be regarded as grounds for significant concern about the ability or conduct of the Certification Authority. This may trigger an investigation of the Certification Authority and may lead to disciplinary action being taken by the Board.

Version management

Date	Details
20 November 2024	Version 1.0 - Approved by Chief Executive
15 April 2025	Version 1.1 – Approved by Chief Executive. Updated to reflect changes made following testing.
11 June 2025	Version 1.2 – Approved by Chief Executive. Updated to include the legal authority for carrying out Certification Authority audits.