



Fire Protection Association Australia
Bushfire Planning & Design (BPAD)
Auditing and Compliance
Policy and Procedures
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BPAD Auditing and Compliance Policy and Procedures

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1.0 Introduction

Fire Protection Association Australia (FPA Australia) accredits practitioners under the Bushfire Planning and Design Accreditation Scheme in response to demands from the community, government and industry to establish a recognition program for bushfire planning and design (BPAD) practitioners. The BPAD scheme assists the community undertaking development on land subject to bushfire impact.

These practitioners are required to comply with all relevant laws, regulations, standards, and codes, and to act ethically at all times.

In Western Australia, practitioners accredited under the BPAD scheme are formally recognised as a BPAD practitioner.

FPA Australia is committed to auditing a certain proportion of practitioners each year to ensure ongoing compliance and the highest possible standards of performance.

2.0 Objectives

This document outlines the policy and procedures applying to the audit and investigation of practitioners accredited under the Bushfire Planning and Design Schemes. This should be read in conjunction with the relevant Auditing of Practitioners of the Bushfire Planning and Design Accreditation Scheme handbooks.

The policy and procedures will deliver on FPA Australia's commitment to the protection of life, property and the environment.

3.0 Definitions

Audit	A process for assessing the ongoing performance and compliance of practitioners.
Accreditation Appeals Panel	A group of independent individuals who oversee the decisions made by FPA Australia with respect to breaches that are appealed.
Authorised officer	An employee of FPA Australia who is approved to carry out audits and investigate complaints about practitioners.
Breach	A failure to comply with any provisions, terms, or conditions relating to accreditation.
Breach of Discipline	Includes, but is not limited to, behavioural or operational performance that would otherwise be considered unsatisfactory.
Case Management Committee	A group of FPA Australia employees who decide the outcomes of a Notice of Decision in accordance with the Disciplinary Framework.
Complaint	An expression of grievance or dissatisfaction with a service offered or provided by a practitioner or Fire Protection Association Australia.
Corrective Action	Identifies where a practitioner requires remedial training to improve upon their work performance. Corrective Action is outlined in a Notice of Decision.
Disciplinary Framework	Assessment criteria a breach is measured against to determine the most appropriate course of outcome.
Document	Electronic or paper-based materials containing information relating to the work of a practitioner.
Bushfire Planning and Design Scheme	An accreditation scheme that has been recognised by the respective regulator regarding evidence of competence for practitioners carrying out design or bushfire planning and assessment work.

KPI	Key Performance Indicators that enable an auditor to assess documents and determine compliance.
Misconduct	Includes, but is not limited to, behavioural or operational performance that would otherwise be considered unethical, unsafe, or unlawful.
Notice of Decision	A formal document, which sets out the decision made by FPA Australia with respect to a breach.
Practitioner	Under this policy means, accredited to carry out work in bushfire planning and design.
Reasonable Excuse	Circumstances considered being beyond the practitioner’s control, including prolonged illness, planned recreational leave and financial duress.
Show Cause Notice	A formal document, which sets out the basis for FPA Australia’s understanding of an alleged breach.
Workplace Activity (WPA)	A job executed by a practitioner which demonstrates their competency in an area of accreditation.

4.0 S.E.L.F Test

FPA Australia uses the S.E.L.F (scrutiny, ensure compliance, lawful, fair) test to determine potential breaches committed by practitioners.

The S.E.L.F test allows an authorised officer to identify whether a breach, discipline, or misconduct has occurred by asking the following key questions:

- Would the practitioner’s behaviour or performance withstand **scrutiny** of FPA Australia and the appeals panel if the breach were overseen?
- Did the practitioner’s behaviour or performance **ensure compliance** with FPA Australia’s Code of Professional Conduct, relevant rules, regulations, policies, procedures and legislation?
- Was the practitioner’s behaviour or performance **lawful**?
- Was the practitioner’s behaviour or performance **fair** to the client?

If the practitioner’s behaviour or operational performance does not withstand the standards of the S.E.L.F test, then an Authorised Officer must follow the procedures outlined in this policy.



5.0 Selection of candidates for audit

In accordance with the respective regulatory requirements, FPA Australia is required to audit a certain percentage of practitioners to ensure compliance.

Within Western Australia, FPA Australia have an arrangement to audit 20% of the total accredited practitioners.

Within New South Wales and other states where an FPA Australia scheme is recognised, no agreement is currently in place. However, to maintain compliance FPA Australia will audit 10% of the total accredited practitioners.

5.1 Selection criteria

To ensure fairness and transparency, practitioners will only be selected for a scheduled audit if:

- they are currently accredited and have been for at least twelve (12) months; and
- they have not been through a scheduled audit within the previous five (5) years.

The only exceptions to these criteria will be if the practitioner has been the subject of a successful complaint or investigation, in which case they will be added to the pool of candidates (see section 5.2 *Selection process*, below).

5.2 Selection process

Candidates for an audit are selected in the following way:

- i. every twelve months, FPA Australia records the total number of accredited BPAD practitioners;
- ii. respective percentage of practitioners are selected using a rule-based formula; and
- iii. once a practitioner has been audited and deemed compliant, they are moved out of the current selection pool.

A practitioner may be audited more than once over the course of a year if a complaint has been upheld against them, or at the request of FPA Australia.

If a practitioner is the subject of a successful complaint or investigation, they will be added to the selection pool for audit in either the current year or the next – these candidates will be in addition to the required minimum number of practitioners.

5.3 Audit plan

Once candidates have been selected, they are allocated an expected timeframe in which their audit is to occur.

An Authorised Officer must then complete an audit plan, in line with this policy and procedures that outlines when each practitioner's audit will occur.

Once the annual audit plan is established, it is presented to the COO of FPA Australia for approval.

6.0 Scheduled audit

An Authorised Officer may conduct a scheduled audit on a practitioner accredited with FPA Australia.

There is no specific period regarding the length of a scheduled audit, though it is generally expected that all audits identified in an annual audit plan be completed prior to the commencement of the next phase.

An Authorised Officer must comply with the following procedure and exercise reasonable care and attention when carrying out a scheduled audit:

- i. ensure that the practitioner meets the prerequisites for a scheduled audit;
- ii. send the practitioner a notification requiring a list of WPA's;
- iii. allow five (5) business days for the practitioner to provide their WPA list;
- iv. allow ten (10) business days to upload and prepare all relevant WPAs for the purposes of the audit;
- v. issue a notification, nominating the time, date, and place where the audit will occur (if necessary) and the five WPAs that will be audited;
- vi. use KPI's and the S.E.L.F test to examine the WPAs and determine compliance;
- vii. outline the practitioner's compliance/non-compliance in the concluding report; and
- viii. if a practitioner is found not to have complied, detail in the concluding report the decisions made by FPA Australia and the actions to be undertaken by the practitioner.

6.1 Documents required for scheduled audit

Detailed records are essential for a practitioner to show how they have approached bushfire planning, design, and the reasoning behind each of their decisions.

If a practitioner doesn't have clear records, and to make it easier to record their workplace activities (WPA), FPA Australia has developed [Form 1 – List of jobs](#).

While not mandatory, Form 1 provides a process for a practitioner to register any assessment jobs or design projects where good records may not be readily available, although the form does not substitute the need for additional documentation.

Prior to a scheduled audit, the Authorised Officer will send a notification to the practitioner about the documents they will expect to see within five (5) business days, including a list of WPAs for which they have prepared reports/relevant documents within the past twelve (12) months (all jobs completed, up to one hundred (100), should be recorded, prioritising the most recent jobs).

Practitioners will be required to upload all documents to a Dropbox folder created by FPA Australia. The Authorised Officer will review the list submitted by the practitioner and select WPA's that cover the level of accreditation held by the practitioner.

During a scheduled audit, the Authorised Officer will assess:

- a minimum of five workplace activities (WPA); and
- a maximum of 10% of all WPAs for the year, or up to ten (10), whichever is less.

Once the WPAs' have been selected, the Authorised Officer will advise the practitioner of the projects chosen and allow ten (10) business days for them to provide:

- any relevant reports, documents, diagrams, or evidence that substantiate the practitioner's competency in identified levels of accreditation;
- any photographic or other evidence that supports the bushfire planning and design and how the practitioner's decisions were made; and
- CDP experience logs and evidence.



This evidence will be reviewed and assessed as part of the audit process, and if the Authorised Officer seeks more information or documentation, they will advise the practitioner accordingly.

FPA Australia reserves the right to ask for materials or information not described above as part of the audit process, if required.

6.2 *Key performance indicators*

FPA Australia uses the program iAuditor for its assessments, and compares WPA's against Key Performance Indicators (KPI's) within that program.

These have been developed to ensure compliance with the FPA Australia Code of Professional Conduct, relevant legislation, and this policy.

6.3 *Scheduled audit document examination*

Once an Authorised Officer has selected the relevant WPA's for review, they will examine any supporting documentation using the S.E.L.F-test and the KPIs in the iAuditor program.

In order to be deemed compliant, a practitioner must provide either:

- i. evidence contained within a WPA; or
- ii. additional information, as identified by the Authorised Officer, to assist in the examination; or
- iii. a verbal explanation.

FPA Australia reserves the right to determine if sufficient evidence has been provided to support the WPA, and may outsource to industry professionals to conduct an assessment on the PRACTITIONERS's performance, where required.

6.4 *Finalisation of scheduled audit*

At the conclusion of a scheduled audit, the Authorised Officer will complete a report outlining the outcomes of the audit, including whether the practitioner was compliant or non-compliant (breach). Details of the audit will be provided to the practitioner and the outcome will be kept in the practitioner's records.

If a breach is identified during the audit, the Authorised Officer will follow the process outlined in **Section 8** of this policy.

7.0 Investigations

Where required, FPA Australia reserves the right to investigate a practitioner in response to a complaint, as part of an audit or for reasons identified by FPA Australia.

An Authorised Officer must evaluate the legitimacy and determine whether an investigation is to occur. FPA Australia will endeavour to investigate each complaint when there are sufficient grounds to do so.

A complaint occurring prior to the practitioner's accreditation may not be investigated.

An Authorised Officer may decide that a complaint is frivolous or vexatious and not require an investigation audit or an investigation (general). A frivolous or vexatious complaint must be recorded within the relevant register though may not be produced or used as the practitioner's compliance history.

7.1 Investigation (general)

Investigation (general) is a means of determining whether a practitioner has committed a breach when an investigation audit is not appropriate or necessary. An investigation (general) is required to be finalised within a twenty-one (21) business day period or as soon as reasonably practicable.

An Authorised Officer must comply with the following procedure and exercise reasonable care and attention in carrying out an investigation (general):

- i. disclose sanitised information regarding the complaint to the practitioner;
- ii. ensure that sufficient inquiries have been conducted;
- iii. advise the complainant and practitioner upon finalisation; and
- iv. record the outcome in the relevant FPA Australia register.

If a practitioner is found to have committed a breach when conducting an investigation (general) an Authorised Officer must:

- i. provide the practitioner a Show Cause Notice and allow them fourteen (14) days to respond;
- ii. identify whether the breach constitutes a **Breach of Discipline** or **Misconduct**;
- iii. make an assessment and submit to FPA Australia Case Management Committee to determine the outcome;
- iv. following assessment, complete a Notice of Decision and allow the practitioner 14 days to appeal; and
- v. in the event that the complaint cannot be finalised within the twenty-one (21) business day period, notice is to be provided to the complainant with an update on the investigation status.

A practitioner who is found to have committed a Breach of Discipline or Misconduct because of an investigation (general) will be subject to outcomes outlined *under section 9.4 of the Code of Professional Conduct*.

7.2 Investigation Audit

An investigation audit process must follow the same process as a scheduled audit. Additional information may be required of the practitioner to allow an Authorised Officer to sufficiently investigate the matter. Investigation audits are required to be finalised within a twenty-one (21) business day period, or as soon as reasonably practicable.

An investigation audit may occur at any time from the date the practitioner is accredited with FPA Australia.

An Authorised Officer must comply with the following procedure and exercise reasonable care and attention in carrying out an investigation audit.

- i. An Authorised Officer must disclose sanitised information regarding the complaint to the practitioner.
- ii. An Authorised Officer must send the practitioner a notification requiring a list of WPA's or information specific to the complaint.
- iii. Five (5) business days must be given to the practitioner to provide the list.
- iv. Once determined, an Authorised Officer must provide the practitioner ten (10) business days to upload and prepare all relevant WPA's for the purposes of the audit.
- v. A notification must outline the WPA's for examination.
- vi. An Authorised Officer must utilise KPI's and the S.E.L.F test when examining audit WPA's to ensure compliance.

7.3 Documents required for investigation audit

Prior to an investigation audit, the Authorised Officer will send a notification to the practitioner regarding the documents they will expect to see within five (5) business days, including:

- a list of WPAs (jobs executed) for which they have prepared reports/relevant documents within a specific time frame
- evidence that the practitioner has completed the required Continual Professional Development (CDP) for the period of accreditation.

Practitioners will be required to upload all documents to a Dropbox folder created by FPA Australia. The Authorised Officer will review the list submitted by the practitioner and select the relevant WPA's for audit.

During an investigation audit, the Authorised Officer will assess:

- a minimum of five workplace activities (WPA);
- documents provided by the practitioner pertaining to the investigation audit; and
- CDP experience logs and evidence.

There is no maximum amount of documents an Authorised Officer may assess during an investigation audit.

Once the WPA's have been selected, the Authorised Officer will advise the practitioner of the projects chosen and allow ten (10) business days for them to provide:

- Details of any complaints / adverse reports or other correspondence received from Local Government or other regulatory body. This should include the contact details of the person/organisation, details of the complaint/adverse report and details on how the practitioner managed the complaint.

This evidence will be reviewed and assessed as part of the audit process, and if the Authorised Officer seeks more information or documentation, they will advise the practitioner.

FPA Australia reserves the right to ask for materials or information not described above as part of the audit process, if required.



7.4 *Investigation audit document examination*

Once an Authorised Officer has selected the relevant WPA's for review, the case will be forwarded to FPA Australia's BPAD auditor who will examine any supporting documentation using the S.E.L.F-test and the KPI's in iAuditor.

In order to be deemed compliant, the practitioner must provide either:

- i. evidence contained within a WPA;
- ii. additional information, as identified by the Authorised Officer, to assist in the examination; or
- iii. a verbal explanation.

FPA Australia reserves the right to determine if sufficient evidence has been provided to support the WPA, and may outsource to industry professionals to conduct an assessment on the practitioner's performance, where required.

7.5 *Finalisation of investigation audit*

At the conclusion of an investigation audit, the Authorised Officer will complete a report outlining the outcomes of the audit, including whether the practitioner was compliant or non-compliant (breach). The practitioner will be advised of the audit outcome and the report will be kept with the practitioner's records.

If a breach is identified during the audit, the Authorised Officer will follow the process outlined in **Section 8** of this policy.

8.0 Breaches

Breaches under FPA Australia's BPAD Auditing and Compliance Policy and Procedure are categorised into either a Breach of Discipline or Misconduct to aid in providing the most appropriate outcome when non-compliance is identified.

A Breach of Discipline or Misconduct is identified when the practitioner does not meet compliance standards or withstand elements of the S.E.L.F test.

A Breach of Discipline or Misconduct is determined based on their definition outlined in this policy and is not enforced until after the fourteen (14) business day appeals period has passed or an appeals panel decision has been made.

An Authorised Officer is required to record all Breaches of Discipline and Misconduct including the action taken within a register to ensure accuracy and fairness when investigating future breaches.

Practitioners who are deemed to have committed a breach will be subject to sanctions outlined under **section 9.4 of the Code of Professional Conduct**.

In the event that the Accreditation Appeals Panel oversees a breach and provides an alternative course of outcome, the decision is to be recorded within a register and used for future audits.

8.1 Deciding a Breach of Discipline or Misconduct

The procedure of deciding whether a breach is a Breach of Discipline or Misconduct should be initiated or continued wherever it appears to be in the interest of FPA Australia or the community.

If it is not, in the interests of FPA Australia and the community, commencement of a breach should not be initiated, continued or pursued.

The scarce resources available for managing breaches should be used to pursue, with appropriate vigour, cases worthy of managing and not wasted pursuing inappropriate cases.

An Authorised Officer must ensure each case passes a two-tier test and should not proceed with further action if the case does not meet the following:

- i. There is sufficient evidence to support the breach, and
- ii. Commencement of managing a breach is in the interest of FPA Australia and the community.

Once an authorised officer has determined that a case concerning a breach meets the above mentioned, they must assess whether the breach is a **Breach of Discipline** or **Misconduct**.

- i. An authorised officer must assess the circumstances against FPA Australia's Disciplinary Framework and ensure that it meets all criteria, constituting either a Breach of Discipline or Misconduct.
- ii. An authorised officer must only conduct an assessment based on their investigation, which is then presented to FPA Australia Case Management Committee.
- iii. The Case Management Committee will be responsible for deciding a Breach of Discipline or Misconduct and the outcome based on the information provided by the Authorised Officer. The decision must be made unanimously and in accordance with the Disciplinary Framework.

8.2 *Breach of Discipline*

FPA Australia recognises a Breach of Discipline as being behavioural or operational performance that would otherwise be considered unsatisfactory of the practitioner and not withstand elements of the S.E.L.F-test.

Behaviour or operational performance that may constitute a breach of discipline includes though is not limited to.

- i. Failure to submit relevant evidence or WPA's for the purposes of a scheduled audit.
- ii. Unbecoming behaviour towards clients or FPA Australia members.
- iii. Does not meet compliance for WPA's examined for audit.

It is deemed that if a practitioner commits two (2) separate acts of Breach of Discipline that on the following breach regardless of the nature, the practitioner is said to have committed Misconduct.

8.3 *Misconduct*

FPA Australia recognises Misconduct as being behavioural or operational performance that would otherwise be considered unethical, unsafe or unlawful of the practitioner and not withstand elements of the S.E.L.F-test.

FPA Australia must consider termination or suspension of a practitioner's accreditation when Misconduct has occurred.

Behavioural or operational performance that may constitute Misconduct includes, though is not limited to:

- i. Completion of work without attaining the correct accreditation from FPA Australia.
- ii. Failure to permit a scheduled or investigation audit without reasonable excuse.
- iii. Providing false or misleading accreditation particulars.

8.4 *Failure to permit scheduled / investigation audit or investigation (general)*

Once a scheduled or investigation audit has been arranged with a practitioner, they must permit an Authorised Officer to complete the audit. If the practitioner refuses or is unable to allow the scheduled / investigation audit to be conducted, the practitioner must do the following:

- i. Provide an Authorised Officer written notice as soon as reasonably practicable after being advised of the scheduled or investigation audit. Written notice provided must outline a reasonable excuse regarding why the scheduled / investigation audit could not be conducted.
- ii. Propose an alternative date and time no later than ten (10) business days of the original audit date.

FPA Australia will consider the practitioner's reasonable excuse and determine whether it meets the definition as outlined under this policy. If the reasonable excuse is accepted by FPA Australia, then an extension will be granted.

8.4 *Monitoring practitioners after non-compliance*

A practitioner must comply with the outcomes of a Notice of Decision, which is effective fourteen (14) days after the signing of the Notice of Decision, if no appeal application is received.

An Authorised Officer will monitor the progress of practitioners subject to a Notice of Decision and ensure that it is adhered.

FPA Australia reserves the right to conduct additional audits on a practitioner within two (2) years after they were found to be non-compliant.

The audit will follow the same process of a scheduled audit and ensure that the practitioner has maintained compliance across all areas of their work.

8.5 Failure to comply with Notice of Decision

Once a practitioner has become subject to sanctions enforced by a Notice of Decision, the practitioner must complete all requirements. If the practitioner refuses or is unable to complete the requirements outlined within twenty-one (21) business days, prior to the conclusion of the monitoring the practitioner must provide an authorised officer written notice and outline a reasonable excuse regarding why they were unable to complete all that was required.

The practitioner may propose an extension date in writing to an Authorised Officer in order to complete the requirements.

An Authorised Officer must consider if the practitioner's excuse and proposed extension date are reasonable. If an extension is granted an Authorised Officer may determine the extension length and advise the practitioner.

If the practitioner fails to comply with this section, an Authorised Officer must advise and make a recommendation to FPA Australia's Case Management Committee, who will oversee the matter and determine an outcome.

8.6 Appeals and Grievances

A practitioner may appeal decisions made by FPA Australia, though this must be done within fourteen (14) days after being provided a Notice of Decision.

Upon receipt of an appeal application, FPA Australia will suspend the decision until such time that the Accreditation Appeals Panel (AAP) oversees the matter. An Authorised Officer will then complete the following:

- i. Ensure the appeal application has been completed and payment for appeal received.
- ii. Compile a Brief of Evidence which includes the Appeal Application and evidence.
- iii. Forward the Brief of Evidence to FPA Australia's Accreditation Manager.

FPA Australia's Accreditation Manager will review the Brief of Evidence and convene the Accreditation Appeals Panel (AAP).

The Accreditation Appeals Panel will review the Brief of Evidence and decide whether a hearing is required.

In the event of a hearing, the AAP secretary must:

- i. Issue a Notice of Hearing to FPA Australia within ten (10) business days after the Brief of Evidence is received.
- ii. Request FPA Australia to supply any additional evidence within ten (10) business days.

Following a review of a Brief of Evidence or hearing, the AAP will make a final decision to either:

- i. Affirm (uphold) FPA Australia's decision or
- ii. Quash (dismiss) FPA Australia's decision or
- iii. Quash (dismiss) FPA Australia's decision and provide a substitute decision.

An authorised officer will then complete a Final Notice of Decision, which will outline the decision made by the AAP. The decision made by the AAP is final and may only be challenged by way of civil court proceeding.

9.0 Administration

FPA Australia's BPAD Auditing and Compliance Policy and Procedure follows administration processes to ensure that data obtained is accurately recorded and managed. The guidelines, which relate to auditing administration, allow data pertaining to scheduled and investigative audits to be easily accessed by an Authorised Officer or a respective management member of FPA Australia. The auditing process utilises a paperless system to ensure efficiency and accuracy.

9.1 Dropbox

Practitioners are required to upload all WPA's and relevant documents, including insurance records and CDP, to an allocated Dropbox.

The information uploaded to Dropbox must only contain data relating to the audit, as well as notifications and correspondence.

Dropbox must only be accessed by the relevant practitioner, Authorised Officers and FPA Australia management in order to maintain confidentiality. Improper use of Dropbox may lead to a practitioner being investigated.

9.2 Naming conventions

Once a practitioner is selected for a scheduled or an investigation audit, they are assigned identification particulars. The particulars are created using a formula which ensures that no one practitioner will have the same throughout an audit. The particulars are used for documentation purposes, including notification letters and registers.

Once an audit or investigation is finalised, the particulars remain until the data is disposed of (**9.4 Data Management**). If another audit or investigation occurs, then the practitioner is assigned other naming particulars to differentiate them.

9.3 Registers

Audit registers are maintained by an Authorised Officer of FPA Australia. Registers are required to be updated and should accurately capture the most current information relating to audits.

Registers may only be accessed by Authorised Officers and FPA Australia management in order to maintain confidentiality.

9.4 Data management

Upon finalisation of a scheduled audit or investigation audit, WPA's and documents relating to the audit are retained for twenty-one (21) business days, after which they are disposed of.

In the event that a breach is identified and a practitioner is subject to **8.4 Monitoring practitioners after non-compliance** of this policy, WPA's are retained for twenty-one (21) business days after the secretary of the relevant government agency is notified. FPA Australia will retain the iAuditor results relating to investigation audits for up to five (5) years.