

ENQ-40261-Z2L3Y6

1 December 2020

██████████

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Official Information Act Request

Dear ██████████

I refer to your request received on 3 November 2020, for information about the recent audit report on Waikato District Health Board <https://www.epa.govt.nz/assets/Uploads/Documents/Hazardous-Substances/VTA-audit-reports/Waikato-DHB-VTA-Audit-Report-June-2020.pdf>

You have asked about the actions taken to remediate the 18 permissions related to vertebrate toxic agent (VTA) operations that were signed off by a non-warranted officer.

- 1. Please list the applications/permissions that were involved*
- 2. What adverse effects were reported to EPA in those drops*
- 3. What actions were taken by PHU or EPA to remediate the issue identified in the 18 permissions and all the other non compliance issues identified; please supply evidence that remediation has occurred and*
- 4. Please list the locations of all 1080 drops that occurred within the audited period and*
- 5. How many of those drops have gone through a new permission process because of the non compliance of the original application and permission?"*

Your request has been treated as a request for information under the Official Information Act 1982 (OIA). The response to your request follows. We have answered your questions individually.

- 1. Please list the applications/permissions that were involved*

The 18 permissions are listed in Table 1 at the end of this letter. Please note that for most of these, the VTA was Feratox, not 1080, and operations were ground-based, not aerial.

- 2. What adverse effects were reported to EPA in those drops*

No incidents were reported to the EPA related to adverse effects for these permissions.

- 3. What actions were taken by PHU or EPA to remediate the issue identified in the 18 permissions and all the other non compliance issues identified; please supply evidence that remediation has occurred*

Table 2 at the end of this letter details the action points formulated in response to the audit report and their outcomes.

- 4. Please list the locations of all 1080 drops that occurred within the audited period*

There is only one aerial operation covered by one of the 18 permissions you have requested information on. Please refer to Permission 18-3499-CM-WAPH (the second to last entry) in Table One that follows this letter.

5. How many of those drops have gone through a new permission process because of the non compliance of the original application and permission?"

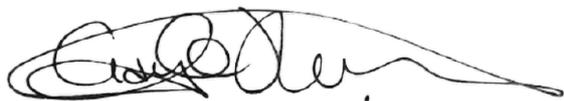
All of these permissions were re-assessed by Enforcement Officers. Of these, 16 were not revoked and re-issued as the operations were already completed. Two permissions were revoked and re-issued as the operations had not taken place.

We trust this fully answers your questions. You have the right to seek an investigation and review by the Ombudsman of this decision. You can contact the Ombudsman on 0800 802 602, or by email at info@ombudsman.parliament.nz.

If you have any further queries, please do not hesitate to contact us via ministerials@epa.govt.nz.

We will publish your request and our response on our website, www.epa.govt.nz, within 10 working days from today. We make OIA responses available so others can read more about the work we do and the questions we are asked. Any information that might identify you will be removed to protect your privacy.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Gayle Holmes', with a long horizontal flourish extending to the right.

Gayle Holmes
General Manager

Compliance, Monitoring and Enforcement

Table 1: Status of permissions in the Waikato DHB audit report

Operation Name	Start Date	End Date	Applicant	location	VTA	Permission ID	Revocation notes
Taringamotu PCC	1/10/2018	30/09/2019	EcoFX	Ruapehu	Feratox -ground	18-3496-CM-WAPH	
Mahoenui	22/10/2018	18/10/2019	EcoFX	Mahoenui	Feratox -ground	18-3498-CM-WAPH	
Arohena sector 2 Ground addition	5/11/2018	31/10/2019	EcoFX	Lake Arapuni	1080 ground	18-3500-CM-WAPH	
North Waikato 6G2 East	5/11/2018	4/11/2019	EcoFX	East of Meremere	Feratox -ground	18-3503-AS-WAPH	
Te Hape Waimiha	5/11/2018	26/10/2019	EcoFX	Waitomo	Feratox -ground	18-3501-CM-WAPH	
Kaitieke Ground	19/11/2018	31/10/2019	EcoFX	Kaitieke	Feratox -ground	18-3506-CM-WAPH	
Waiaanga PCO 2018/2019	19/11/2018	31/10/2019	EcoFX	Ohura	Feratox -ground	18-3504-CM-WAPH	
Taumarunui Rollback Ground	19/11/2018	31/10/2019	EcoFX	Taumarunui	Feratox -ground	18-3511-CM-WAPH	
Waikaka South PCO	19/11/2018	31/10/2019	EcoFX	Ohura	Feratox -ground	18-3508-CM-WAPH	
Kirikau Ground Control Strata	3/12/2018	30/11/2019	EcoFX	Kirikau	Feratox -ground	18-3507-CM-WAPH	
Hikumutu PCO 2018/2019	3/12/2018	30/11/2019	EcoFX	Taumarunui	Feratox -ground	18-3505-CM-WAPH	

Niho Ground Control	3/12/2018	30/11/2019	EcoFX	Matiere	Feratox -ground	18-3510-CM-WAPH	
Waikaka PCO 2018/2019	4/12/2018	30/11/2019	EcoFX	Waikaka	Feratox -ground	18-3512-CM-WAPH	
Tatu Heao PCO	4/12/2018	30/11/2019	EcoFX	Tokirima	Feratox -ground	18-3509-CM-WAPH	Revoked on 9 July 2019 and reissued by EO
Ngaroma Ground	5/12/2018	30/11/2019	EcoFX	Ngaroma	Feratox and 1080 ground	18-3513-CM-WAPH	
North West Waikato West	11/02/2019	31/01/2020	EcoFX	Waikato DC	Feratox -ground	19-3514-CM-WAPH	
Arohena Sector 2 Aerial Extension	28/02/2019	30/10/2019	EcoFX	Lake Arapuni	1080 aerial	18-3499-CM-WAPH	
Maraekowhai Possum Control Operation	13/05/2019	30/04/2020	Dylan Tovey	Taumarunui	Feratox -ground	19-3516-CM-WAPH	Revoked on 20 Aug 2019 and reissued by EO

Table 2: Actions taken by Waikato DHB in response to EPA audit report

	Actions	Timeframes / outcomes
NC1	Identify all VTA permissions that were signed off by an unwarranted HPO instead of by an EO. A current EO will conduct and document a risk assessment on these VTA permissions. Another current EO will peer review the risk assessment.	Completed
	Revoke and re-issue any VTA permissions that were not signed off by an EO, for which the operation had not yet occurred.	Completed
	Develop and maintain a database of warranted EOs, which prompts HSNO training as required at appropriate intervals.	Completed
	Health Protection administration staff member to maintain scanned copies of EO warrants in an appropriate electronic file.	Completed
	Update the Standard Operating Procedure (SOP) for Vertebrate Toxic Agent (VTA) Applications to clarify that a warranted EO must undertake all aspects of the assessment and sign off for VTA permission applications.	Completed
NC2	Update the Vertebrate Toxic Agent (VTA) Applications SOP to clarify that all permissions (including extensions) require a new application and risk assessment completed.	Updated SOP completed and presented to EOs.
	Update the SOP to clarify that all risk assessments for new permissions will be peer reviewed by an EO. The updated SOP will clarify what the peer reviewer must check, including that application paperwork is complete. The peer review will help capture and prevent any inappropriate issuing of permissions without a new application. The completed SOP will be presented to the current EOs on completion, so that they are aware of changes and key areas of importance.	An experienced HSNO EO from another PHU will provide training for WDHB EOs. This has not yet taken place due to the disruptions caused by COVID-19.
	Update VTA coversheet to include a checklist for assessing VTA applications. This will include a checkbox for checking that the application is complete, with all fields completed.	Completed
	Initiate an internal audit program for the issuing of VTA permissions to identify any ongoing issues with non-conformances. Audit to be undertaken one year after SOP finalised, and then at the time of the next	First audit to be completed one year after introduction of SOP.

	<p>SOP review (SOPs are reviewed three yearly). This will help identify any ongoing issues with this non-conformance, so that further actions can be initiated if necessary.</p>	<p>Following audits to be completed at the time of SOP review.</p> <p>Initial audit has been added to the HPO calendar.</p>
	<p>An annual internal refresher will be introduced for EOs within the PHU, ensuring that all EOs have recently refreshed their knowledge of the SOPs and are up to date with requirements.</p> <p>An annual sign-off for EOs will be required to ensure that they have read the SOPs</p>	<p>Annually</p>
NC3	<p>This non-conformance occurred as a result of our non-conformance 1, that a non-EO signed of VTA permissions and used the incorrect code. Actions that address NC1 will therefore also help address NC3</p>	<p>Completed</p>
	<p>Update the Vertebrate Toxic Agents (VTA) Applications SOP to clarify what is to be checked in the peer review. This will include checking that the correct naming convention has been used.</p> <p>The completed SOP will be presented to the current EOs on completion, so that they are aware of changes and key areas of importance.</p>	<p>Completed</p>
	<p>Initiate an internal audit program for the issuing of VTA permissions. This will identify any ongoing issues with non-conformances. Audit to be undertaken one year after SOP finalised, and then at the time of the next SOP review (SOPs are reviewed three yearly). This will help identify any ongoing issues with this non-conformance, so that further actions can be taken if necessary.</p>	<p>First audit to be completed one year after introduction of SOP.</p> <p>Following audits to be completed at the time of SOP review.</p> <p>Initial audit has been added to the HPO calendar.</p>
NC 4	<p>Update the Vertebrate Toxic Agents (VTA) Applications SOP to include requirement to document telephone conversations and to maintain electronic records of all interactions with applicants relating to the application. This creates a clear audit trail of decisions made.</p> <p>The completed SOP will be presented to the current EOs on completion, so that they are aware of changes and key areas of importance.</p>	<p>Completed</p>
	<p>Update the Vertebrate Toxic Agents (VTA) Applications SOP to clarify what needs to be checked in the peer review process. The peer review will include checking the application is complete and that other relevant documentation is sufficient.</p>	<p>Completed</p>

	The completed SOP will be presented to the current EOs, so that they are aware of changes and key areas of importance.	
	Revise VTA coversheet to include a checklist for assessing VTA applications. This will include a checkbox for checking that the application is complete, with all fields completed. This will ensure that all sections of the application are completed appropriately.	Completed
	An annual internal refresher will be introduced for EOs within the PHU, ensuring that all EOs have recently refreshed their knowledge of the SOPs and are up to date with requirements. An annual sign-off for EOs will be required to ensure that they have read the SOPs	Annually
NC 5	Update the risk assessment template form and standardise for use by all EOs within public health, Waikato DHB.	Completed
	Medical Officer of Health to peer review a selection of risk assessments completed by each current EO and provide feedback to the relevant EO on the level of detail required in a completed risk assessment form.	Completed
	Risk assessments have been completed by a current EO for all cases previously signed off by the non-warranted officer as identified in EPA's audit. These risk assessments have been sent to EPA. Feedback has been received from EPA which has been disseminated amongst current EOs. This will provide guidance on the level of detail required in a completed risk assessment form.	Completed
	Update the Vertebrate Toxic Agents (VTA) Applications SOP to clarify what information needs to be checked in the peer review process. This will include review of the completed risk assessment form to ensure appropriate reasons for setting, amending or modifying conditions are given. The completed SOP will be presented to the current EOs, so that they are aware of changes and key areas of importance.	Completed
	Revise VTA coversheet to include a checklist of actions required by the EO. This will include the completion of a risk assessment template form.	Completed
	Initiate an internal audit program for the issuing of VTA permissions. Audit to be undertaken one year after SOP finalised, and then at the time of the next SOP review (SOPs are reviewed three yearly). This	First audit to be completed one year after introduction of SOP.

	<p>will help identify any ongoing issues with this non-conformance so that further actions can be taken if necessary.</p>	<p>Following audits to be completed at the time of SOP review.</p> <p>Initial audit has been added to the HPO calendar.</p>
	<p>An annual internal refresher will be introduced for EOs within the PHU, ensuring that all EOs have recently refreshed their knowledge of the SOPs and are up to date with requirements.</p> <p>An annual sign-off for EOs will be required to ensure that they have read the SOPs</p>	<p>Annually</p>
NC 6	<p>Update VTA Applications SOP and VTA Audit SOP to clarify that all permissions must be audited, and that the rationale for the type of audit is to be documented.</p> <p>Update the VTA audit SOP to provide greater detail about expectations of what is required for an audit of a VTA operation.</p> <p>The completed SOP will be presented to the current EOs, so that they are aware of changes and key areas of importance.</p>	<p>Completed</p>
	<p>Update the risk assessment template to include a section to document the rationale for the type of audit required.</p> <p>The completion of this section of the risk assessment form will be checked by another EO during the peer review process.</p>	<p>Completed</p>
	<p>Introduce the use of Healthscape electronic database.</p> <p>Audit tracking will be established as part of Healthscape.</p> <p>Include fields to be completed in Healthscape to indicate the type of audit required and when the audit has been completed.</p>	<p>Use of Healthscape electronic database for VTAs application has started.</p> <p>Addition of audit tracking fields to Healthscape database will be completed within two months.</p>

		If required updates are likely to be delayed beyond two months because of ongoing COVID-19 workload for those with administration rights to this database, then an Excel spreadsheet will be introduced to manage audit tracking in the interim period.
	Audit tracking database will be reviewed on a six monthly basis to identify the current state of permissions and whether audits have been completed. Where an audit has not been marked as completed for completed operations, then this will be followed up by the Operations Manager - Health Protection.	Six monthly.
	Update the audit template form to be completed by EOs when auditing operations. This will provide greater clarity to EOs about what is required for an audit.	Completed
	Increase EO knowledge in this area by obtaining EO training from an experienced EO from another PHU.	An experienced HSNO EO from another PHU will provide training for WDHB EOs. This has not yet taken place due to the disruptions caused by COVID-19.
	The PHU now has three EOs processing VTA applications and conducting VTA operation audits, and intends to increase this number as training is available. This will mean that more than one operation can be field audited at the same time, and will mean that audits can occur even when an EO is on leave.	Completed
	Initiate an internal audit program for the issuing of VTA permissions. Audit to be undertaken one year after SOP finalised, and then at the time of the next SOP review (SOPs are reviewed three yearly). This will help identify any ongoing issue with this non-conformance, so that further actions can be initiated if necessary.	First audit to be completed one year after introduction of SOP. Following audits to be completed at the time of SOP review.

		Initial audit has been added to the HPO calendar.
	An annual internal refresher will be introduced for EOs within the PHU, ensuring that all EOs have recently refreshed their knowledge of the SOPs and are up to date with requirements. An annual sign-off for EOs will be required to ensure that they have read the SOPs	Annually
NC 7	Update VTA Audit SOP to clarify EO role in relation to non-compliances and escalation process.	Completed
	Introduce the use of Healthscape electronic database. Actions taken in relation to non-compliances or incidents will be entered into the Healthscape database.	Completed
	Increase EO knowledge in this area by obtaining EO training from an experienced EO from another PHU	An experienced HSNO EO from another PHU will provide training for WDHB EOs. This has not yet taken place due to the disruptions caused by COVID-19.
	Initiate an internal audit program for the issuing of VTA permissions. Audit to be undertaken one year after SOP finalised, and then at the time of the next SOP review (SOPs are reviewed three yearly). This will identify any ongoing issues with this non-conformance, so that further action can be taken if required.	First audit to be completed one year after introduction of SOP. Following audits to be completed at the time of SOP review. Initial audit has been added to the HPO calendar.
	VTA work is now being conducted by a team of EOs within the PHU instead of VTA work being primarily conducted by a single EO. This has resulted in a culture change within the unit, such that all EOs discuss requirements with each other and provides a greater understanding of what is required in the event of non-compliances.	Completed
	An annual internal refresher will be introduced for EOs within the PHU, ensuring that all EOs have recently refreshed their knowledge of the SOPs and are up to date with requirements. An annual sign-off for EOs will be required to ensure that they have read the SOPs	Annually

NC 8	Updated Vertebrate Toxic Agents (VTA) Applications SOP to include the requirement that permissions are to be provided to the EPA within three working days. This shorter timeframe is required by the Ministry of Health and is part of our annual plan. Copies of the email sent to EPA must be saved electronically for audit purposes.	Completed
	Initiate an internal audit program for the issuing of VTA permissions. Audit to be undertaken one year after SOP finalised, and then at the time of the next SOP review (SOPs are reviewed three yearly). This will help identify any ongoing issues with this non-conformance, so that further actions can be taken if necessary.	First audit to be completed one year after introduction of SOP. Following audits to be completed at the time of SOP review. Initial audit has been added to the HPO calendar.
	Update VTA coversheet to record date of sending permissions to EPA. This change will act both as a reminder to EOs, and to assist in future internal audits of our processes.	Completed
	An annual internal refresher will be introduced for EOs within the PHU, ensuring that all EOs have recently refreshed their knowledge of the SOPs and are up to date with requirements. An annual sign-off for EOs will be required to ensure that they have read the SOPs	Annually
Obs 1	Health Protection administration staff member to maintain electronic copies of all EO warrants.	Completed
Obs 2	To be addressed by the Ministry of Health.	Completed by the Ministry of Health.
Obs 3	The SOPs are being updated as part of the response to the EPA audit. All current EO's (who work on VTA applications) will be involved in reviewing the draft updated SOP, so will have a greater understanding and ownership of what is included in the SOP. The completed SOP will be presented to the current EOs, so that they are aware of changes and key areas of importance.	Completed
	The updated VTA applications SOP will require that two warranted HSNO EOs must sign the risk assessment form. The risk assessment form has been updated and includes a specific location for the signatures of the two EOs.	Completed

	Peer reviewing of permissions issued by a second EO will provide a check on some of the SOP processes.	
	Initiate an internal audit program for the issuing of VTA permissions. Audit to be undertaken one year after SOP finalised, and then at the time of the next SOP review (SOPs are reviewed three yearly). This will help identify any ongoing issues with this non-conformance, so that further action can be taken if required.	First audit to be completed one year after introduction of SOP. Following audits to be completed at the time of SOP review. Initial audit has been added to the HPO calendar.
	Where it is identified that a particular HSNO officer has not followed the SOPs then this will be followed up by the Health Protection Manager.	Ongoing
	An annual internal refresher will be introduced for EOs within the PHU, ensuring that all EOs have recently refreshed their knowledge of the SOPs and are up to date with requirements. An annual sign-off for EOs will be required to ensure that they have read the SOPs	Annually
Obs 4	SOP will be updated to align with the Instrument of Delegation including: - The need to notify the EPA when a permission is revoked - The timeframe that the permission must be provided to the EPA (note this differs from the instrument of delegation requirement to meet our Annual plan and Ministry of Health requirements).	Completed
Obs 5	Update VTA coversheet to include fields for EO to verify that consultation meets the communication guideline.	Completed
	Update VTA applications SOP to include the requirement to complete the VTA coversheet section on verifying the communication guideline.	Completed
Obs 6	Introduce the use of Healthscape database. All incidents and complaints will be recorded in Healthscape.	Completed
	Update VTA Application SOP to provide greater guidance on actions to be taken in the event of incidents or complaints including entering the incident into the Healthscape database.	Completed

	An annual internal refresher will be introduced for EOs within the PHU, ensuring that all EOs have recently refreshed their knowledge of the SOPs and are up to date with requirements. An annual sign-off for EOs will be required to ensure that they have read the SOPs	Annually
Obs 7	To be addressed by the Ministry of Health.	To be addressed by the Ministry of Health.