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## **WPMA's comments to MPI's Treatment Standard: Treatment Provider Requirements**

The Wood Processors & Manufacturers Association of New Zealand (WPMA) would like to provide the following comments to the MPI's draft Treatment Standard: Treatment Provider Requirements (the Standards).

WPMA represents the perspectives and interests of its members, including sawmill operators, timber manufacturers, pulp and paper producers, and suppliers to the industry. Our members are companies that have made major investments in adding value to New Zealand's annual forest harvest, which contributes to a bio-circular economy and provides economic growth and employment opportunities across regional and metropolitan areas throughout New Zealand.

After reviewing the Standards, WPMA acknowledges that the treatment standards have minor if any effect on our membership. This submission has therefore been completed out of interest of the process and potential for similar activities occurring in the review of existing standards or the development of new standards applicable to our membership in future.

Our comments are directed toward the proposed highlighted amendments contained within the Standards.

### Subsection 2.1.2 Treatment Provider Supervised by IVA

Under table 1 Reqt 1 WPMA recommends that a reasonable timeframe (of say 10 working days) be included in the table for the IVA to report back to the applicant in processing their application.

### Subsection 2.3.1 Process of approving treatment provider and provision of official treatments

Under Figure 2 on the Treatment Provider Approval process, the IVA **or** MPI Inspector recommends the approval of the treatment provider to MPI Treatments Team. This may cause confusion or mixed messaging as to who provides the ultimate approval of treatment providers. This could be reworded to '*The IVA or MPI Inspector (if applying for Post-border treatments at PEQ facilities) recommends the approval ...*', or words to that effect.

### Subsection 3.1.1 Requirements to become a MATP

Under subsection 3.1.1(1)(a) key personnel are required to be 'fit and proper persons' to hold MPI approval status. How (or where) is a fit and proper person test defined and measured in the context of holding MPI approval status under this section.

Under subsection 3.1.1(1)(d) MPI would ensure that treatment providers meet the health and safety (H&S) requirements. WPMA notes businesses are already required to comply with the Health and Safety at Work Act 2015. Understanding who bears the responsibility for the

health and safety obligations of workers (eg. the treatment providers or MPI) would be a helpful addition to the Standards.

Under subsection 3.1.1(1)(e) the ability for MPI to impose any other requirements that it 'considers may be relevant to the applicant's application' is very broad. Some context on how this power might be applied would be helpful to avoid any unnecessary delays in processing applications. MPI may wish to consider providing an example in the proposed Guidelines.

### Subsection 3.3 Process for approving treatment providers

Under Step 3 of the Table 3 for the treatment provider approval process, it is recommended that in acknowledging the receipt of the application, IVA or MPI identify the timeframe for completing the application process, as has been referred to in Step 5.

### Subsection 4.6.1 General staff competency and training

Under subsection 4.6.1(3) a register of treatment technicians must show what treatments they are **qualified** and competent to use. We are unsure what is meant by qualified as this has not been clearly defined, although this could be interpreted as a certified handler qualification under subsection 4.6.1(6)(c). Understanding what qualifications are being referred to would be helpful.

### Subsection 4.6.3 Competency assessment

Under subsection 4.6.3(1)(c) the treatment provider's documented procedures for staff competency assessment must describe how the assessor of staff competency is involved in the observation of the trainees completing practical implementation tasks. Under the Guidelines (accepting these are more about providing supporting information) it refers to the 'competency assessor should have been assessed as being competent in the competency that they are assessing'.

We find this section confusing. We ask who is responsible for assessing the competency of the assessor. Would this be determined against a formal criteria delivered by an authorised body in assessing the assessor's competency, or is this assessment made by the assessors immediate supervisor based on the ability to follow a company's standard operating procedures/QMS.

### Subsection 4.11 QMS review

Under subsection 4.11(1) the treatment provider must review the QMS at least annually to ensure its suitability and effectiveness continue to meet the requirements of this standard. It is not stated whether this needs to be completed in writing or through some other means, although this needs be submitted to MPI within 5 working days of performing the review (Table 7). Further guidance would be helpful in this regard.

### **For more information**

Should you wish to discuss any aspect of this submission, please call me on 027 226 3331.

Yours sincerely,



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