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New Zealand Defence Force
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New Zealand

OIA-2025-5383



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Dear

I refer to your email of 8 May 2025 requesting, under the Official Information Act 1982 (OIA), information on the New Zealand Defence Force (NZDF) residential housing portfolio. A response to the various parts of your request are set out below.

I accept that part 1 of OIA-2025-5311 would require a substantial collation and research effort to provide all reports on Defence housing.

Given that this part of the request was declined, I would like to request more specific information about the Defence Force's residential property portfolio (not including barracks accommodation):

the number of residential properties the Defence Force owns (by region);

The number of residential properties the NZDF owns, broken down by Base/Camp, is provided in the table below. This includes abandoned properties still owned by the NZDF.

Base/Camp	Count of Site
Burnham	307
Devonport	128
Linton	302
Ohakea	201
Papakura	55
Trentham	71
Waiouru	209
Woodbourne	176
Whenuapai	130
Total	1579

 the number of houses currently inhabited by Defence Force to Regular Force members (by region);

The number of NZDF residential properties currently inhabited by Regular Force personnel, broken down by Base/Camp, is provided in the table below.

Base/Camp	Count of Site
Burnham	100
Devonport	240
Linton	219

Base/Camp	Count of Site
Ohakea	76
Papakura	71
Trentham	61
Waiouru	100
Woodbourne	39
Whenuapai	163
Total	1069

 the number of houses in the Defence Force's residential portfolio currently meeting Healthy Homes Standards (by region).

All NZDF houses designated as rental homes were compliant with the legislation as at 1 July 2023.

Additionally, given that the previous request of any monthly, quarterly, and annual reports was too broad, I would instead like to request:

 Any annual reports on the Defence Force's residential property portfolio from the years 2023 and 2024.

The only annual report produced on the NZDF residential housing portfolio is on Healthy Homes Compliance, and a copy of this report is enclosed. Where indicated, the names of two individuals are withheld in accordance with section 9(2)(a) of the OIA to protect privacy.

You have the right, under section 28(3) of the OIA, to ask an Ombudsman to review this response to your request. Information about how to make a complaint is available at www.ombudsman.parliament.nz or freephone 0800 802 602.

Please note that responses to official information requests are proactively released where possible. This response to your request will be published shortly on the NZDF website, with your personal information removed.

Yours sincerely

GA Motley

Brigadier Chief of Staff HQNZDF

Enclosure:

1. DEI Programme Closure Report, Healthy Homes Compliance Programme



DEFENCE ESTATE AND INFRASTRUCTURE

DEI PROGRAMME CLOSURE REPORT

HEALTHY HOMES COMPLIANCE PROGRAMME

Date: 31 May 24

Version: 2.0

Approval of the Programme Closure Report indicates an understanding of the purpose and content described in this deliverable. By signing this deliverable, each individual agrees the programme information is accurate and complete.

APPROVAL

Position Name		Signature	Date
GM Estate Delivery	Wally Butt	8	

ENDORSEMENT

Position	Name	Signature	Date
Director Delivery	Neil Taylor		
Programme Director Estate Regeneration Maintenance	s. 9(2)(a)		

DOCUMENT OWNER

Position	Name	Signature	Date
Alliance PMP Lead	s. 9(2)(a)		

REFERENCES

	Document name	Date of issue	Version
A.	Healthy Homes Programme Execution Plan	28 Jan 22	2.0
В,	Healthy Homes ArcGIS How to Guide	17 Oct 23	1.1
C.	Healthy Homes GIS Application (As-built)	17 Oct 23	1.2
D.	Healthy Homes GIS Solution (Technical Specification)	17 Oct 23	1.1

DOCUMENT HISTORY

Version	Date	Name	Description
1.0	16 Oct 23	s. 9(2)(a)	Initial version
2.0	31 May 24	s. 9(2)(a)	Final version

PROGRAMME SUMMARY

Programme details

- 1. Residential Tenancies (Healthy Homes Standards) Regulations 2019 set specific and minimum standards for heating, insulation, ventilation, moisture ingress and drainage, and draught stopping in rental properties. Houses are required to meet legislated standards by 1 July 2025 or within 120 days of re-tenanting.
- 2. The Healthy Homes Compliance Programme was established to ensure that all residential properties owned by the New Zealand Defence Force (NZDF) meet the requirements of the Government's Healthy Homes Standards.
- 3. A Programme Team was established in April 2021 to lead planning, execution and management control activities, working alongside the local delivery teams at each camp and base.
- 4. The Programme Execution Plan (PEP) was approved on 28 January 2022. The Plan outlined the programme scope and outcomes, delivery strategy, tenant engagement and communication strategy, team structure, roles and responsibilities, information management and reporting, and management control activities.
- 5. The NZDF has over 1,800 residential properties attached to the camps and bases. Approximately 10% of the properties met the minimum Healthy Homes requirements at the start of the programme, and the remaining properties were upgraded to meet the standard over the course of FY21 23.
- 6. The Programme was practically complete on 30 June 2023, two years ahead of the legislative deadline. Total programme cost was \$33.9m (see Financials section for details).

Programme delivery

- 7. Programme delivery involved carrying out compliance inspection, defining the remediation work scope, packaging and procuring the work, carrying out the physical work and issuing the compliance certificate.
- 8. The Programme Team used the Survey123 mobile app and ArcGIS Online system to collect and analyse inspection data on the current level of compliance of the properties.
- 9. The Programme Team then worked with the local delivery teams to prioritise and package the work based on various factors, such as NZDF priorities, property vacancy, tenancy changes and dependency with other housing programmes. The local delivery teams scoped and issued work orders to the Facilities Maintenance (FM) providers to carry out the remediation works.
- 10. Once the remediation work had been completed, the Programme Team would generate a compliance certificate from ArcGIS. The compliance certificates were stored in the SAP ILFM system and could be made available to tenants on request. Compliance certificate generation was a newly developed function by the Programme Team.

Programme procurement and performance

- 11. Procurement for the housing inspection and remediation works was led by the local DEI delivery teams through direct sourcing from FM providers as the nature and value of the works were very similar to the annual planned housing maintenance.
- 12. Quality assurance inspections of the remediation works were undertaken by the Programme Team. Approximately 10% of the works were inspected in accordance with the PEP. Most of the works were satisfactory with the exception of draught stopping at Ohakea that required some rework.

Programme hand-over and sustainment

- 13. Sustaining Healthy Homes compliance requires on-going inspection and maintenance of the houses. For example, insulation material will sink overtime and requires a top up. A list of recommended inspection and maintenance activities is documented in Annex A. These should be carried out by the FM providers as part of annual PMP housing maintenance.
- 14. Inspection records (including photos) and revised compliance status should be updated in ArcGIS to maintain the integrity of the asset data. Refer to Reference B: Healthy Homes ArcGIS How to Guide for a step-by-step guide on updating records.

REVIEW OF BUSINESS CASE

Objectives

- 15. A formal business case was not developed for this Programme, primarily due to the nature of work being very similar to the existing annual planned housing maintenance programme, and the minimum scope and requirements were prescribed by the Healthy Homes standards.
- 16. The strategic context, benefits management, financial and implementation considerations typically covered by a business case were instead documented in the PEP.
- 17. The investment objectives outlined in the PEP were:
 - a. Ensure that all NZDF residential properties meet the minimum Healthy Homes standards by 1 July 2023.
 - b. Lead and promote a safe and healthy work environment and strive to achieve zero harm throughout the delivery of the programme.
 - c. Provide integrated communication to residents and key stakeholders in a timely manner and provide avenues and opportunities for collaboration and feedback.
- 18. Outcomes: The objectives as delivered by the programme were fully met.

Scope

- 19. The programme scope outlined in the PEP was:
 - a. Determine the levels of compliance and implement systems and processes to ensure compliance obligations are met by 1 July 2023.
 - Undertake the works and inspections required to meet the Healthy Homes standards, limited to the minimum standard of compliance in each of the standard categories.
 - c. Give consideration to the privacy and rights of tenants under the terms of their tenancy agreement.
 - d. Provide feasibility studies and cost estimates required to support the development and assessment of options.
 - e. Engage with and provide support to internal and external stakeholders including tenant liaison, governance reporting, and Ministerial advice and papers.
- 20. **Outcomes:** The scope as delivered by the programme was fully met.

Benefits

- 21. The benefits outlined in the PEP were:
 - a. NZDF residential properties meet the Government's Healthy Homes standards.
 - b. Regular Force (RF) personnel and their families will have an improved quality of home that is healthier, warmer, drier and with lower running costs.
- 22. **Outcomes:** The benefits as delivered by the programme were fully met.

Milestones (Time)

23. The key planned milestones and actual achievement are listed in the table below.

Description	Baseline	Actual/Final
60% of properties meet Healthy Homes Standards	July 2022	July 2022
85% of properties meet Healthy Homes Standards	December 2022	January 2023
100% of properties meet Healthy Homes Standards	July 2023	July 2023

Table 1 – Programme Delivery Milestones

FINANCIALS (COST)

24. This programme was funded from planned housing maintenance (SAP Cost Element 6912) over FY21 – 23. A breakdown of the actual expenditure is summarised in the table below.

Location	FY2	1	FY.	22	FY	23	То	tal
Whenuapai	\$	1,066,333	\$	193,852	\$	413,394	\$	1,673,579
Devonport	\$	2,045,420	\$	2,842,702	\$	1,522,416	\$	6,410,538
Papakura	\$	2	\$	=	\$	145,598	\$	145,598
Waiouru	\$	1,584,116	\$	668,616	\$	1,306,721	\$	3,559,453
Ohakea	\$	1,275,235	\$	1,343,170	\$	1,728,300	\$	4,346,705
Linton	\$	1,103,272	\$	1,518,956	\$	4,473,977	\$	7,096,205
Trentham	\$	460,865	\$	132,501	\$	397,802	\$	991,168
Woodbourne	\$	450,837	\$	629,986	\$	516,222	\$	1,597,045
Burnham	\$	1,582,194	\$	2,691,176	\$	2,033,418	\$	6,306,788
Sub-total	\$	9,568,272	\$	10,020,959	\$	12,537,848	\$	32,127,079
Management	\$	145,438	\$	839,492	\$	801,379	\$	1,786,309
Total	\$	9,713,710	\$	10,860,451	\$	13,339,227	\$	33,913,388

Table 2 – Programme Cost Summary

25. Detailed in the table below is the approved vs actual funding.

	Approved (\$)	Actual (\$)	Variance (\$)
OPEX Expenditure Funds	\$33,770,000	\$33,913,388	\$143,388

Table 3 - Operating Budget

PROGRAMME DOCUMENTATION

- 26. All programme related information has been stored in http://ddms-r/ds/D8-0066/16/Forms/AllItems.aspx
- 27. All compliance certificates have been stored in individual property folders in http://ddms-r/ds/D8-0066/16/Forms/AllItems.aspx
- 28. Compliance certificates can also be generated from ArcGIS based on the inspection records. Refer to Reference B: Healthy Homes ArcGIS How to Guide for a step-by-step guide on generating compliance certificates.

LESSONS LEARNED

29. The following key lessons were learned during the progression of the Programme.

Theme (Working Well or Area for Improvement)	Phase	Lesson/Opportunity	Impact/Cause & Effect		
Worked well All		Centralised planning and control, and local delivery. Planning, programmatics and control were centralised and primarily carried out by the Programme Team; while delivery coordination and management were decentralised and primarily carried out by the local delivery teams.	This enabled consistency in the overall execution of the programme and reporting, whils acknowledging the importance of local ways of working and engagement preferences.		
Worked well	All	Surge support from alliance partners. Alliance partner resources were used to augment local delivery teams as required (e.g. carrying out housing and quality assurance inspections, acting as Project Officers).	This enabled DEI to have adequate resources throughout the programme, in particular, scaling up or down quickly and getting access to specialists when required.		
Worked well	All	Integrated housing communication. Adopting a resident-centric approach to provide integrated housing communication beyond the Healthy Homes scope alone and leveraging the local relationships with DSSG.	This enabled residents to learn about what is planned for housing upgrades via a primary point of contact and not have siloed communications from multiple programme/project teams.		
Worked well	All	Sought and acted on residents' feedback. Provided avenues and opportunities to sought feedback, and acted on those feedback where practicable even if it	This enabled the Programme to deliver what is important to residents within reasonable bounds and contributing to NZDF		

		meant going beyond the programme scope. E.g. Additional draught stopping carried out based on resident feedback even though some of what have been asked for are beyond the minimum Healthy Homes requirements.	senior leadership's directive on looking after our people.
Worked well	All	GIS-based dashboard. A common data capture and visual reporting dashboard was created at the outset.	This enabled near real-time access to critical information about the programme, supporting rapid response to senior stakeholder queries and information requests. The consistency and robustness of the information also gave senior stakeholders a high degree of confidence in how the programme is progressing.
Area for improvement	All	Inconsistency in remediation options. The Programme Team did not standardise preferred option(s) at the outset, resulting in a variety of remediation options being adopted. E.g. Draught stopping can range from full window replacement to installing foam tape/seal around a window.	This led to a large range in costs and delivery times per property, as well as some disparity between camps and bases. While the Programme ultimately met the cost and time baselines, the Programme was at risk of not doing so for a few quarters in FY22 – 23. Greater standardisation would likely have reduced the variances.
Area for improvement	All	Lack of training on the tools. While the GIS-based toolset achieved great value in data capture and reporting, insufficient training was provided to the local delivery teams.	This led to the local delivery teams being dependent on the alliance partner resources to carry out data uploads and maintenance activities on the toolset. Knowledge transfer is essential to enable the Programme to transition into ongoing operation.

ISSUES

- 30. The following key issues occurred during the progression of the project:
 - a. **Lack of funding.** DEI submitted an application in Budget 2022 for additional funds, but this was declined by the Government. This resulted in DEI diverting all planning housing maintenance budget in FY22 23 to complete Healthy Homes improvement and deferring general refurbishment to FY24. Camps and bases

- that achieved Healthy Homes compliance early received less funding for housing maintenance in subsequent years.
- b. Lack of trades availability. FM provider in the Central region did not have sufficient resources to meet the target milestone dates when the volume of activities ramped up concurrently in Waiouru, Linton and Ohakea. Additional resources were eventually brought onboard to increase delivery output. A dedicated team was also established to carry out draught stopping, which was falling well behind programme due to trades shortage and long lead time (for windows).

Annexes:

A. Inspection and maintenance schedules

ANNEX A

DATED 31 MAY 24

INSPECTION AND MAINTENANCE SCHEDULE

Building Component	Activity	Frequency (min)	Healthy Homes Compliance	
Gutter & Downpipe	 Check for and clear blocked gutters Check for and repair broken or loose gutters and downpipes 	Yearly	 Moisture ingress and drainage 	
Interior Moisture Levels	 Check for the following as indicators of potential excess moisture and identify ways to eliminate or control the sources of internal moisture Mould Condensation Musty smell Cracks Ants 	On-going (by resident)	 Moisture ingress and drainage Ventilation 	
Damp Proof Membrane	Check moisture barrier / damp proof membrane to confirm full coverage of soil under house	6 monthly	 Moisture ingress and drainage 	
Door & Window	 Check for and repair cracked or damaged weather strips Check for and repair loose opening and shutting 	Yearly	VentilationDraught stopping	

	Check for and repair broken latches and other locking mechanisms		
Kitchen & Bathroom Extraction	 Check airflow throughput to confirm volume of air is compliant. Check for, and clean or replace blocked filters. 	Yearly	 Ventilation
Heat Pump	 Check for, and clean or replace blocked filters Check for and clean dirt build up Check for and repair pumps and pipe work Note: Specialist services technician required to carry out these maintenance activities to meet warranty requirements. 	1 – 2 years	 Heating
Gas Heater	 Check for, and clean or replace blocked filters and flue Check for and clean dirt build up Note: Specialist services technician required to carry out these maintenance activities to meet warranty requirements. 	Yearly	 Heating
Fire Place / Solid Fuel	Check for and clear soot in chimney	Yearly	• Heating
Roof Space / Ceiling Void	 Check insulation thickness meets Healthy Homes requirement and top up as required Check that rangehood and bathroom extraction is still connected and venting to the outside 	Yearly	InsulationVentilation
Underfloor / Basement	Check insulation thickness meets Healthy Homes requirement and top up as required	Yearly	 Insulation