## 8.1 NON-CONFORMANCE, CORRECTIVE AND PREVENTIVE ACTION

# FLEET PROCEDURE MANUAL

Sect: 8.1
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Date: 6-Aug-25
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# NON-CONFORMANCE, CORRECTIVE AND PREVENTIVE ACTION

## 1. SCOPE

The scope of this procedure covers the requirements of both ISO, ISM, ISPS and MLC Codes for the reporting of deviation, corrective action and preventive action. Environmental complaints handling is covered under a separate procedure (see section 13.7)

## 2. CODES

ISM

9; 10.2; 10.3

# 3. RESPONSIBILITY AND AUTHORITY

# 3.1. Company Employees

All Company employees are responsible for identifying and reporting to their immediate head of department any deviation that they may witness or be involved in.

# 3.2. Master

Is responsible for reporting to the DPA any deviation that occurs onboard the ship. Has the authority to close out deviation's applicable to own ship but the Ships Manager must agree before doing so.

# 3.3. Department Heads (Ashore)

Are responsible for reporting to the HSEQ Manager any deviation that occurs within their department, and have the authority to close out deviation's applicable to own department.

# 3.4. HSEQ Manager

The HSEQ Manager is responsible for;

- a. Reviewing all deviation reports, for circulating them for action, and for co-ordinating these reports.
- b. Defining and initiating corrective and preventive actions involving modifications to the SMS as appropriate.
- c. Where appropriate, reviewing existing systems for any necessary improvements.
- d. Reviewing and analysing deviation reports to ensure that defined preventive action is appropriate and effective.
- e. Following up on corrective and preventive actions to ensure they have been implemented and effective.



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f. Keeping Management appraised of the nature of deviation raised and status of corrective and preventive action.

Has the authority to close out deviation's, to grant a concession but Marine Manager must agree, to reject deviation's as unsuitable, to reassign deviation's.

#### 3.5. Internal Auditor

Is responsible for identifying and reporting to the HSEQ Manager any deviation that is discovered during an internal audit of the ship or department.

# 3.6. Ships Manager

Is responsible for identifying and reporting to the HSEQ Manager and DPA any deviation that is discovered during an inspection or visit to a ship. Has the authority to close out deviation's applicable to the fleet, to grant a concession but the Marine Director<sup>1</sup> must agree, to reject a deviation as unsuitable but must consult with the HSEQ Manager and DPA before doing so.

The HSEQ Manager, DPA, Ships Manager, Masters and Chief Engineer Officers are responsible for deciding upon and ensuring that the appropriate corrective and preventive action is taken, and that such actions are effective.

## 4. **DEVIATIONS**

- 4.1. A deviation is categorised into two areas:
  - a. A Non-conformity which can be categorised as Major or Minor. A Major Non-conformance (a deviation which if not addressed immediate may result serious harm to life, property environment, or reputation of the company) will be reported immediately to the Marine Manager who will designate the immediate action to be taken, which may require Senior Management intervention. Non-conformity is an observed situation where objective information indicates the non-fulfilment of a specified requirement, or an identifiable deviation that poses a serious threat to safety of people, the environment, the ship or its cargo.
  - b. An Observation is a potential problems, risks, inefficiencies or failure to apply best practice.

<sup>1</sup> W 08 / 2024

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# 5. REPORTING DEVIATIONS

- 5.1. CFM<sup>2</sup> is to be used to report Major Non-conformities and Minor non-conformances. The NCR is to be raised for any of the following circumstances:
  - a. A significant CUSTOMER complaint
  - b. A deviation from agreed or contracted CUSTOMER service standards.
  - c. A deficiency relating to the essential "must have" requirements of the Company ship inspection programmes (e.g. Rightship<sup>3</sup> vetting inspection).
  - d. A deviation from the requirements specified in the SMS.
  - e. A deviation from the regulations specified in the Statutory Codes (e.g. SOLAS; MARPOL; STCW 95).
  - f. A failure or deficiency in any system or process or key shipboard operation which could endanger or has compromised the safety of people, the environment, the ship or its cargo.

The submission of a deviation shall in no way relieve the originator or the Master from completing any statutory reports required by the responsible authorities.

- 5.2. The Master/Department Head will:
  - a. Forward via CFM<sup>4</sup> if raised on a ship or e-mail a copy to the DPA.
- 5.3. For Office NCR received by the HSEQ Manager, the deviation is entered and managed into CFM<sup>5</sup>.
- 5.4. When an Internal Auditor or Ships Manager raises a deviation, they will:
  - a. Raise it in CFM<sup>6</sup>
  - b. Recommend or define necessary corrective and preventive.
  - c. Set a completion date.
  - d. Identify who will be responsible for the corrective action.

# 6. DOCUMENT CONTROL

6.1. All NCR's will be maintained in CFM<sup>7</sup> and automatically numbered by the system.

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<sup>5</sup> W 08 / 2024

<sup>6</sup> W 08 / 2024

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<sup>&</sup>lt;sup>2</sup> W 03 / 2024

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# 7. CORRECTIVE ACTION

- 7.1. The Master/Department Head shall:
  - Investigate or cause to be investigated the circumstances and cause of the deviation.
  - b. If necessary identify and isolate the non-conforming item to minimise any risk until the defect is corrected.
  - c. Recommend or define corrective and preventive action as necessary to ensure that non-conformances do not reoccur and describe it in Section B of the deviation form. In the case of shipboard deviation's this will be done in close liaison with the Ships Manager who may prescribe the corrective action to be taken.
  - d. Identify a person who will be responsible for performing the corrective action and set a completion date if this has not already been done.
- 7.2. The Master/Department Head verifies that the corrective/preventive action is effective and that the cause of the deviation has been dealt with and not just the symptoms.

If no further corrective/preventive action is necessary, the CFM entry is closed out<sup>8</sup>

# 8. CLOSING OUT DEVIATION'S

- 8.1. NCRs are managed in CFM. They are closed out in the following manner<sup>9</sup>:
  - a. The corrective/preventive action is checked to ensure that the potential causes of the non-conformance have been eliminated.
  - b. The potential for similar non-conformances to occur on other vessels or within other departments is checked.
  - c. Additional preventive action that may be necessary is identified and defined.
  - d. The closed-out deviation along with copies of all correspondence is captured in the system<sup>10</sup>.
  - e. Copies of closed out deviations are visible to all relevant access users to CFM<sup>11</sup>.
- 8.2. Where the corrective or preventive action involves the amendment of a procedure, the deviation can be considered closed out when the proposed changes have been agreed between the appropriate Department Head/Ships Manager and the HSEQ Manager, and the corrected in the company's SMS<sup>12</sup>.

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<sup>8</sup> W 08 / 2024

<sup>&</sup>lt;sup>10</sup> W 08 / 2024

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# 9. PREVENTIVE ACTION

- 9.1. Potential non-conformances are identified:
  - a. By review of observations or findings raised during internal and external audits
  - b. By regular inspection of the vessels by the Ships Manager
  - c. By encouraging "Management by Walking About" requiring Department Heads/Masters to tour their department/ship to identify potential problems and opportunities for improvements.
  - d. By review of the HSEQ Management system by Management and Masters.
  - e. By feedback from month end reports and handover notes.
  - f. By analysis of Accident and Near Miss reports.
  - g. During the monthly management and HSE meetings on board ship.
  - h. During weekly ship management liaison meetings.
- 9.2. Department Heads are required to ensure that the causes of the identified potential nonconformances are determined, including the potential to impact on other departments or vessels, and to implement appropriate corrective action to eliminate the causes.