

Chapter 9 Non-Conformities

- 1.0 [Introduction](#)
- 2.0 [Definitions](#)
- 3.0 [Responsibility](#)
- 4.0 [Reporting and Recording](#)
- 5.0 [Root Cause Analysis](#)
- 6.0 [Corrective Action Plan](#)
- 7.0 [Processing Non-Conformities](#)

1.0 Introduction

This chapter describes the protocols established to ensure that non-conformities are reported to the Company, investigated and analyzed with the objective of improving safety and pollution prevention. Figure 1 below.

A non-conformity is a failure to comply with a written requirement, law or standard, company policy or procedure that governs the safe operation of TDI-Brooks vessels. It may be discovered through an internal or external audit, routine maintenance/ inspections, an incident or an observation.

This is **not** the same as an incident, accident or near-miss. Those events are defined and procedures for handling them are established in the corresponding SOP.

Non-conformities will be analyzed in order to continuously improve the Company SMS through updating and amendment.

2.0 Definitions

Non-conformity-- a failure to comply with a written requirement, law or standard or the policies and procedures established by the TDI-Brooks Safety Management System that govern the safe operation of TDI-Brooks vessels. The following are the various classifications to be used for non-conformity evaluations.

- **Major non-conformity** - an identifiable deviation that poses a serious threat to personnel or the ship's safety or a serious risk to the environment and requires immediate action.

Title of Document:	Safety Management Manual	Document Number:	SMM Ch 9
Authority:	Director of Marine Operations	Revision:	3
Custodian/Owner:	Designated Person Ashore	Issue Date:	March 2023
			Page 1 of 4

- **Minor non-conformity**- an identifiable deviation that could pose a threat to personnel or the ship’s safety or risk to the environment and requires action in a timely manner.
- **Observation** - a finding or condition, which left uncorrected, may result in a non-conformity.

Remedial Action is the immediate action taken to contain or correct the problem and is implemented right away.

Corrective Action Plan (CAP) is a plan to prevent recurrence of the problem. This plan is developed by the vessel and submitted to the Port Captain for approval.

Corrective Action Report (CAR) is a report created and maintained in The Quality and Compliance program describing how the CAP was implemented, evaluated for effectiveness and verified by an office representative. It tracks the life of the non-conformity from discovery to closure.

3.0 Responsibility

It is the responsibility of the Port Captain to ensure that a system for the effective reporting of non-conformities is in place and an investigation and analysis is implemented.

The Port Captain will be responsible for making sure vessels submit CARS and implement approved CAPs within the required timeline.

The Port Captain will document the actions in the Quality and Compliance record as they are completed, will assign someone to verify the effectiveness of the CAP and upon verification, will close the non-conformity in the Quality and Compliance program

The Captain should immediately report any suspected non-conformities as well as events that involve the Port State, regulatory agencies or class issues to the Port Captain.

4.0 Reporting and Recording

TDI-Brooks maintains a system of reporting non-conformities and corrective actions in the Quality and Compliance program tracking system. This reporting system is designed to improve the Company SMS, **not to assign blame** or avoid responsibility.

The Company undergoes frequent audits by internal and external auditors, clients and some Port State authorities. The resulting findings, observations and suggestions are reviewed by TDI-Brooks management for opportunities to improve our systems.

Non-conformities and observations that management has determined are significant enough to warrant investigation will be entered into the Quality and Compliance program by the Port Captain.

Title of Document:	Safety Management Manual	Document Number:	SMM Ch 9
Authority:	Director of Marine Operations	Revision:	3
Custodian/Owner:	Designated Person Ashore	Issue Date:	March 2023
			Page 2 of 4

Employees are encouraged to report suspected non-conformities.

5.0 Root Cause Analysis

A CAP must start with a **Root Cause Analysis**. To prevent something from happening again, you have to determine why it happened the first time. The root cause is rarely what appears to be the problem at first evaluation. It is usually the combination of a series of events or circumstances that eventually results in the non-conformity.

There are many methods of determining a root cause. TDI-Brooks has developed tools to assist the vessel in the root cause investigation and corrective action plan development.

6.0 Corrective Action Plan

There are generally two parts to correcting a non-conformity.

The **Remedial Action** is the immediate action taken to correct the problem and is implemented right away.

The **Corrective Action Plan (CAP)** is a plan to prevent recurrence of the problem. According to the ISM 2010 code Section 9.2, the corrective action plan CAP for a non-conformity will include a preventative action to prevent recurrence.

Example: A hydraulic hose on an A-frame breaks and causes a spill on the deck.
Remedial Action: Stop the leak and clean up the spill.
Corrective Action: Conduct a root cause analysis to determine why the hose broke in the first place. Then create a Correction Action Plan to prevent it from happening again.

CAP Submission: The CAP should be created by the vessel, submitted to the Port Captain and approved within 30 days of the initial report, unless unanticipated circumstances prevent. The crew of the vessel must work together to conduct a root cause investigation and create a Corrective Action Plan (CAP).

CAP Implementation will be completed within 90 days of the initial report, unless unanticipated circumstances prevent and may begin as soon as it is approved.

CAP Verification: Once the CAP has been implemented, the Port Captain will arrange for verification of its effectiveness. If verified as effective, the Corrective Action Report of the non-conformity will be closed. If the corrective action plan was not effective, the vessel must begin a new RCA and CAP.

Title of Document:	Safety Management Manual	Document Number:	SMM Ch 9
Authority:	Director of Marine Operations	Revision:	3
Custodian/Owner:	Designated Person Ashore	Issue Date:	March 2023
			Page 3 of 4

7.0 Processing Non-conformities

Once a non-conformity has been identified, it will be processed and tracked in the manner described in this section. Target dates for corrective action may be changed as long as the reason has been approved by the Port Captain and noted in the Quality and Compliance record

Non-Conformities Process

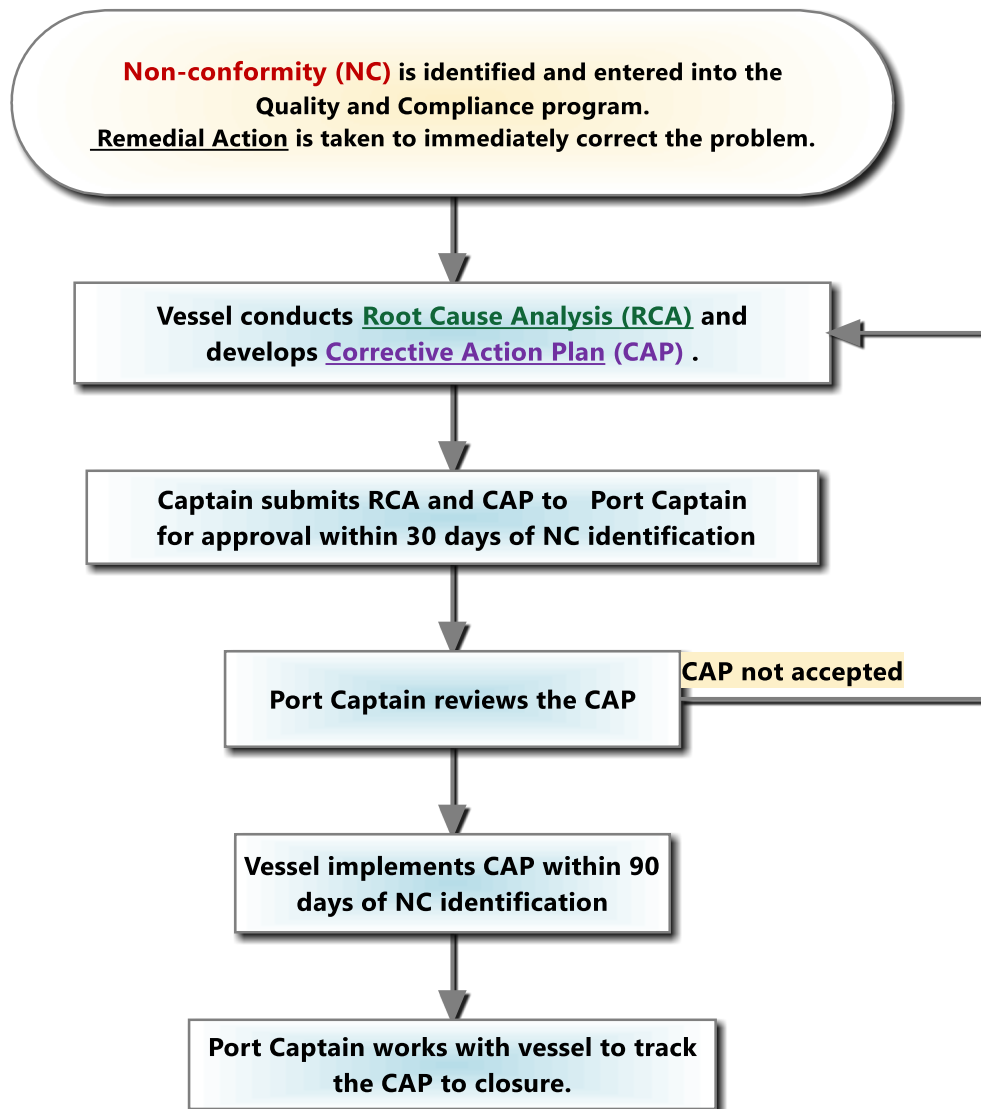


Fig. 1

Title of Document:	Safety Management Manual	Document Number:	SMM Ch 9
Authority:	Director of Marine Operations	Revision:	3
Custodian/Owner:	Designated Person Ashore	Issue Date:	March 2023
			Page 4 of 4