0 SHOWING CONFORMANCE

0.1 Options

0.1.1 There are three options to demonstrate conformance when applying this system procedure:

a. Follow the defined system procedure using the recommended guidance and tools, including allowed variations and options.

b. Use an equivalent process and tool set generated elsewhere and document evidence of procedural equivalence.

c. Use an equivalent bespoke process and tool set for the project and document evidence of procedural equivalence.

1 INTRODUCTION

1.1.1 It is important that measures are put in place to ensure that gaps and deviances (known as non-conformances), in the operation of the SMS and EMS are identified and where necessary corrected, and prevented from recurring. It is also beneficial for measures to be put in place to capture and address areas of potential improvement which have been identified (Observations). Non-conformances and observations are equally important to the SMS and EMS documentation and records, as they are to the equipment’s safety and environmental performance.

1.1.2 Non-conformances and observations are most likely to be identified by IPT staff, auditors and the equipment users, but may also be highlighted by external parties or become apparent through an accident or incident. It is essential that the IPT has a process for capturing details of the non-conformances and observations and using this to continually improve both the Management Systems’ and the equipment’s performance.

1.1.3 Further information on how this procedure interacts with other non-conformance system is provided in the Guidance section at the end of this procedure.

2 PROCEDURE OBJECTIVES

2.1.1 To ensure that gaps, inaccuracies and improvements in the IPTs’ SMS and EMS, and equipment’s safety and environmental performance are identified, reported and then investigated and recorded.

2.1.2 To ensure that corrective, preventive and improvement actions are planned, implemented and recorded.
3 RESPONSIBILITIES

3.1 Accountability

3.1.1 The IPTL is accountable for the completion of this procedure.

3.2 Procedure Management

3.2.1 IPTLs may delegate the management of this procedure to the IPT Safety and Environmental Focal Point(s).

3.3 Procedure Completion

3.3.1 The diagram below shows the steps described in the Description section of this procedure against those parties or individuals that may be responsible for their completion.

3.3.2 Where a contractor is responsible for operating part of the SMS or EMS, they will also have a role in the completion of this procedure. Where tasked by the IPT, the contractor can take on the role of the Safety and Environmental Focal Point(s) and subsequently operate the management system on behalf of the IPT.

4 WHEN

4.1.1 This procedure applies as soon as the IPT starts to implement its SMS or EMS, as non-conformances can surface as soon as the first elements of the management systems have been implemented. The procedure will continue to apply until the end of the project(s) to which the SMS and EMS apply.
5 REQUIRED INPUTS
   a. Results of internal and external audits (see AAP01);
   b. Internal and external communications regarding the IPT’s safety and environmental management system(s), including suggestions for improvement. (See SSP01)
   c. Internal and external communications regarding the equipment’s safety and environmental performance, including complaints. (See SSP01)
   d. Results of Monitoring and Measurement (See AAP02)
   e. Results of Management Reviews (See AAP03)

6 REQUIRED OUTPUTS
   a. Completed Form AAP04/F/01 – Non-Conformance and corrective action record.
      OR
      Equivalent actions and documentation that ASEG is satisfied achieve the same objectives.

7 DESCRIPTION

7.1 Introduction
   7.1.1 A non-conformance is a situation that does not comply with the requirements of one or more of the following:
      • POSMS, POEMS or functional safety management policy;
      • IPT’s SMS and EMS;
      • Applicable safety or environmental legal and non-legal standards; or
      • Equipment safety or environmental performance.
   7.1.2 An observation can also be identified in the above areas. An observation is an identified improvement or need for improvement which does not relate to a conformance issues but may otherwise be of benefit. It can also be used to note good practice which may be of benefit to other parties conducting similar activities.
   7.1.3 The following steps define a system for identifying, reporting, investigating, actioning and recording non-conformances and observations.

7.2 Step 1: Identify non-conformance or observation
   7.2.1 Non-conformances can be identified in a number of ways:
      • As a result of system audits (see AAP01) or equipment audits;
• As a result of accidents, incidents and near-misses;
• From internal and external communications, including suggestions and complaints (see SSP01);
• As a result of monitoring and measurement (See AAP02);
• As a result of management reviews (See AAP03).

7.2.2 A non-conformance or observation can be identified and reported by a member of the IPT, internal or external auditors, Customer 2, contractors, regulatory authorities or members of the public. In fact, non-conformances or observations can be identified and reported by anyone who has a role or interest in the safety and environmental issues of the equipment.

7.2.3 When a potential or actual non-conformance is identified it must be recorded. **Form AAP04/F/01** – Non-conformance and corrective action record form can be used to do this. This records details of the non-conformance, including its severity and how it was identified, by whom and when. Non-conformances will be classified as either major or minor, as shown below:

### 7.2.4 Major non-conformance:
• An absence of control/system where they are required;
• Where the control/system is in place but there are significant failings/inadequacies; * or
• Issue otherwise requiring urgent attention.

### 7.2.5 Minor non-conformance:
• Where the control/system are in place but there are non-significant failings/inadequacies; * or
• Where there is a minor breach of controls/procedures which could cause a problem if no corrective action to be taken
  * where more than one failings/inadequacies are identified but are significantly related, these can be managed as one non-conformance

7.3 **Step 2: Investigate non-conformance or observation**

7.3.1 Non-conformances will be investigated to establish whether there is potential for recurrence. This investigation will try to answer the following questions:
• What happened?
• Why did it happen?
• Who or what was responsible?
• How serious was the actual and potential consequence(s)?
• Could this happen again? If yes, how likely is this?
### AAP04: Non-Conformance and Corrective Action

<table>
<thead>
<tr>
<th>MOD</th>
<th>ASEM Procedures</th>
<th>Procedure AAP04</th>
</tr>
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</table>

- How could this situation be avoided in future?

**7.3** The results of the investigation will be recorded on the Form AAP04/F/01 – Non-conformance and corrective action record form.

**7.3.2** Observations will be investigated to establish whether the identified area for improvement is justified and feasible.

**7.3.3** The Safety and Environmental Focal Point(s) will normally undertake the investigations, or they may assign an alternative person to complete the task, for example, a person who works in the area where the non-conformance or observation has been identified.

**7.3.4** Alternatively, an IPT may decide to ask ASEG, an independent safety consultant, or SME to undertake the work where assistance is required in the task, or where proving objectivity is important.

### 7.4 Step 3: Recommended Corrective, Preventive or Improvement Action

**7.4.1** The person who undertakes the investigation will identify one or more recommended course of action.

**7.4.2** It should be noted that where a non-conformance or observation has been identified in a system audit, a recommended action may also be identified by an auditor. They may provide recommended actions without undertaking the investigation stage detailed in Step 2 above. In this case the Safety and Environmental Focal Point(s) may decide to undertake Step 2 above, before confirming the course of action to be taken.

**7.4.3** It is possible to decide that no action will be taken in relation to observations, for example if it is considered not practical or cost effective to implement an improvement. Justification for all decisions taken is to be recorded.

### 7.5 Step 4: Decide Action to be taken

**7.5.1** The investigation will have identified one or more ways of mitigating and/or avoiding a recurrence of the non-conformance, or possible improvements to address an observation. This may include changes to SMS or EMS documentation, or operational control, or it may identify a training need.

**7.5.2** It is not mandatory to undertake the recommended action when an alternative action can be identified. This particularly applies where actions have been recommended by auditors who have not completed the investigation stage prior to providing a recommended action. When deciding what corrective and preventive action will be taken, it is important to ensure that the action is proportional to the seriousness of the non-conformance.

**7.5.3** Where the non-conformance applies to an area outside the IPT’s control, it is appropriate for an action to be raised regarding communicating the presence of the non-conformance to the party concerned. For example, where Customer 2 has not complied with a documented safety or environmental objective or operational control, it would be necessary to inform them of this. In this situation Customer 2 would be

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This document was archived on 24 February 2015 and is now out of date. A current version can be found within the Acquisition Safety and Environmental Management System (ASEMS) held on the Acquisition System Guidance (ASG, formerly the AOF). For access to ASEMS via the ASG please register at www.defencegateway.mod.uk
required to keep the IPT informed of progress in addressing the non-conformance (which would feed into AAP03 – Monitoring and Measurement), although auditing the effectiveness of the action would be outside the remit of the IPT.

7.5.4 The Safety and Environmental Focal Point(s) and the manager of the areas in which the non-conformance or observation was identified, will decide the action to be taken. For particularly sensitive or major non-conformances/observations it is recommended that the Safety and/or Environmental Committee(s) is involved in deciding, or endorsing the action to be taken.

7.5.5 Once appropriate actions have been identified and agreed, responsibility for ensuring that they are carried out must be assigned, along with a timetable for implementation. This can be documented in Form AAP04/F/01 – Non-conformance and corrective action record form.

7.5.6 For observations it is possible that no action will be taken, for example if it is considered not practical or cost effective to implement an improvement.

7.5.7 AAP02 – Monitoring and Measurement procedure will track progress of the decided action to be taken.

7.6 Step 5 Review and update of documentation

7.6.1 On completion of Step 4 above, the audit schedule (Form AAP01/F/01 – Audit Schedule) should be reviewed and modified to ensure that, checking the effectiveness of actions, is included in future audits.

7.6.2 Where the non-conformance was associated with an incident, accident or near-miss, then the Safety Hazard Log (SMP11) and/or Environmental Features Matrix (Form EMP02/F/01) should be reviewed and possibly revised, as it may be necessary to increase the probability rating, or to even insert the hazard if it was not identified already.

8 RECORDS AND PROJECT DOCUMENTATION

8.1.1 Where relevant, the outputs from this procedure should feed into the following:

a. Form AAP01/F/01 – Audit Schedule;

b. Management Reviews (See AAP03); and

c. Monitoring and Measurement (See AAP02).

8.1.2 A copy of the information produced from following this procedure should be stored in the Project Safety and Environmental Case.

9 RECOMMENDED TOOLS AND FORMS

a. Form AAP04/F/01 – Non-conformance and corrective action record.
10 GUIDANCE

10.1 General

10.1.1 JSP 454, 430, 538 and 553 include guidance on non-conformance, corrective and preventive action. The ISO14000 series is useful, particularly ISO14001 and ISO14004, and also OHSAS 18001, ISO 19011 and ISO 9001.

10.1.2 It should be noted that JSP 442 – Accident Reporting System, covers the procedure which should be followed when reporting serious safety and environmental incidents, accidents or near misses. Where this procedure applies, the Accident Reporting Form shown in JSP 442 must be completed in addition to Form AAP04/F/01 as the latter Form documents the completion of corrective and preventive action.

10.1.3 There may be other systems which must be followed in the event of an incident, accident or near miss, for example, D LOG (Strike) BP 1301 – reporting and Monitoring of Airworthiness matters and services occurrences. Where these systems cover all the issues documented in Form AAP04/F/01, there is no need to complete Form AAP04/F/01.

10.1.4 Where a safety and environmental non-conformance has been identified by Customer 2, details of the non-conformance, investigations completed and corrective and preventive action undertaken should be communicated to the IPT in order for it to review whether and how this affects the SMS and EMS.

10.1.5 Where the IPT has identified non-conformance associated with Customer 2, corrective, preventative action will generally involve the communication of the issue to Customer 2 for action, as they are outside the scope of the SMS and EMS and outside the direct control of the IPT.

10.2 Aligning safety and environment

10.2.1 The key alignment opportunity in this procedure is to ensure that both safety and environmental issues are considered when deciding upon corrective or preventive action. It is important to ensure that any safety implications of environmental changes are considered and vice versa.

10.3 Warnings and Potential Project Risks

10.3.1 If non-conformances are not recorded and responded to, there is a risk that they may reoccur. The outcome could be more serious next time, so near misses must be recorded, assessed and addressed.
## Form AAP04/F/01 – Non-Conformance and Corrective Action Form

<table>
<thead>
<tr>
<th>Project(s) Title</th>
<th></th>
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<tbody>
<tr>
<td>IPT:</td>
<td></td>
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### Non-Conformance or Observation

<table>
<thead>
<tr>
<th>Non-conformance/ Observation</th>
<th>Major non-conformance / Minor non-conformance / Observation</th>
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<tr>
<th>Details of the non-conformance/observation (including how identified):</th>
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<tr>
<th>Identified by:</th>
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<td>Date Identified:</td>
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### Investigation (If appropriate)

<table>
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<tr>
<th>Completed by:</th>
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<td>Date:</td>
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<tr>
<th>Details of investigation: (e.g. Why did it happen? Who or what was responsible? How serious were the actual and potential consequence(s)? Any immediate corrective action already taken?</th>
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<tr>
<th>What is the likelihood of this happening again?</th>
<th>Not Possible / Unlikely / Likely / Very Likely / Almost Certain</th>
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## MOD ASEMS Procedures

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### Recommended Corrective, Preventive or Improvement Action

| Completed by: |  |
| Date: |  |
| Recommended corrective, and or, preventative action: |  |

### Action to be taken

<table>
<thead>
<tr>
<th>Action</th>
<th>Person responsible</th>
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### Closure

| Completed by: |  |
| Date: |  |