



REPORT TO HARBOURS SUB COMMITTEE - 18 MARCH 2021

CONTINUOUS IMPROVEMENT

1 Reason for Report / Summary

- 1.1 To ensure continuous improvement of Aberdeenshire Council's Marine Safety Management System (MSMS), it requires to be audited and reviewed regularly and to have Key Performance Indicators established. Members are being asked to agree the Audit and Review of the system, agree the Performance Measures for 2021 and note the outstanding Action List.

2 Recommendations

The Sub-Committee is recommended to:

- 2.1 Approve the Audit and Review Policy as can be seen in Appendix 1;
- 2.2 Approve the Performance Improvement Plan as can be seen in Appendix 2; and
- 2.3 Note the Actions List as can be seen in Appendix 3.

3 Purpose and Decision Making Route

- 3.1 At its meeting on 12th March 2020 ([Item 10](#)), Infrastructure Services Committee agreed to establish a sub-committee to be known as the Harbours Sub-Committee. The Sub-Committee has the power to exercise the functions of the Duty Holder under the Port Marine Safety Code and therefore the remit to consider matters arising from harbour operations.

4 Discussion

- 4.1 The Port Marine Safety Code (PMSC) item 2.24, Monitoring performance and auditing, states;

'The MSMS must incorporate a regular and systematic review of its performance. This should be based on information from monitoring the system itself and from independent audits of the whole system. Performance of the MSMS should be assessed against internal performance indicators.....'

- 4.2 Officers with assistance of the Designated Person have prepared the Audit and Review Policy as can be seen in **Appendix 1**. This establishes the frequency of audits, the audit purpose and objectives and by who the audits shall be carried out by. The annual External Audit is carried out by the Designated Person as required by the PMSC, this in the last 3 years has occurred in January. An annual Internal Audit will now also be carried out by an Officer from the Quality and Resources Team within Infrastructure Services. It is proposed that these internal audits occur June or July to allow sufficient time between external and

internal audits for continuous improvement to be demonstrate at regular intervals of 6 months. Officers and the Designated Person are satisfied that the Audit and Review Policy as seen in **Appendix 1** meets the requirements under the PMSC.

- 4.3 Officers with the assistance of the Designated Person have prepared the Performance Improvement Plan as can be seen in **Appendix 2**. Within the Performance Improvement Plan, performance measures have been identified both as Annual Standing Objectives and also year specific Objectives. These Objectives will be used to assess the performance of the MSMS as required by the PMSC and will assist Officers, the Designated Person and the Duty Holders to better demonstrate continuous improvement. Officers and the Designated Person are satisfied that the Performance Improvement Plan as seen in **Appendix 2** meets the requirements under the PMSC.
- 4.4 **Appendix 3** is an Action List detailing items within the MSMS that require further improvement and input. These actions have been recorded within the Safety Action Plan, so that when the actions are completed, there is an auditable trail that demonstrates continuous improvement. There are currently 32 Actions outstanding. The level of input required to complete each of these actions varies from approval from Duty Holders, to written completion of 21 Operational Procedures. Although we are compliant with the PMSC, and significant progress has been achieved to fully populate the MSMS with the information required, for transparency, it is important for Duty Holders to note that there is significant work still required, and while Officers are dedicated to completing these, time restraints and competing with day to day duties will mean these are a work in progress.

5 Council Priorities, Implications and Risk

- 5.1 This report helps deliver the Strategic Priority “Infrastructure” within the Pillar “Our Environment”, and the key principle of “right people, right place, right time”.
- 5.2 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed.

Subject	Yes	No	N/A
Financial		X	
Staffing	X		
Equalities		X	
Fairer Scotland Duty		X	
Town Centre First		X	
Sustainability		X	
Children and Young People’s Rights and Wellbeing		X	

- 5.3 An equality impact assessment is not required because the recommendations in the report do not have a differential impact on any of the protected characteristics.
- 5.4 The staffing implications are that to fully populate the MSMS and complete Management Policies and Operational Procedures require significant staffing resources that cannot be currently accommodated from the Harbour Service. Officers will continue to make progress with the MSMS against other competing priorities and deadlines.
- 5.5 The following Risks have been identified as relevant to this matter on a Corporate Level:
- [Corporate Risk Register](#).
 - ACORP006, Reputation Management - It is important to demonstrate continuous improvements to maintain a professional reputation within the industry.
 - ACORP009, Operational Risk Management - the proposed audits will reduce this risk.

No Risks have been identified as relevant to this matter on a Strategic Level.

6 Scheme of Governance

- 6.1 The Head of Finance and Monitoring Officer within Business Services have been consulted in the preparation of this report and had no comments to make and are satisfied that the report complies with the [Scheme of Governance](#) and relevant legislation.
- 6.2 The Sub-Committee is able to consider and take a decision on this item in terms of Section F.1.1d and F.3.1 of the [List of Committee Powers in Part 2A](#) of the Scheme of Governance and the Terms of Reference approved by Infrastructure Services Committee on 12 March 2020. The Sub-Committee is responsible for harbours matters which fall within the remit of Roads, Landscape and Waste Services.

Alan Wood
Director of Infrastructure Services

Report prepared by Corrie McCall, Principal Officer - Harbours
Date 03 March 2021

List of Appendices –
Appendix 1 – Audit and Review Policy
Appendix 2 – Performance Improvement Plan
Appendix 3- Action List

Audit and Review Policy

Maritime Safety Management System (Item 1.5.1 of the MSMS)

1.5.1.1 Purpose

The auditing and review process of the Marine Safety Management System requires an assessment of continuous development and improvement and its responsiveness to events and changing circumstances.

In order to comply with the requirements of the PMSC, the Aberdeenshire Council Infrastructure Service will ensure appropriate internal and external audits of the MSMS are undertaken at appropriate periods. This will include audits or reviews undertaken by the appointed Designated Person.

1.5.1.2 Audit Objectives

Audits are conducted to achieve the following objectives:

- To determine if the Marine Safety Management System is being operated in accordance with ACIS's Marine Safety Policy (incl. supporting policies) and the Port Marine Safety Code.
- To monitor the overall effectiveness of the system.
- To identify and implement ways of improving overall performance.
- To confirm that relevant procedures are understood and being actioned by those involved

The overall objective is to implement systematic and independent audits to support the continuous improvement in marine safety performance.

1.5.1.3 Designated Person Audits

In order to comply with the recommendations of the Port Marine Safety Code, ACIS appoint an external 'Designated Person' to provide an independent annual audit of the Marine Safety Management System for the purpose of assessing the following:

- The continued provision of an appropriate and effective Marine Safety Management System.
- ACIS's ongoing overall performance with the requirements of the Port Marine Safety Code.

In addition, the Northern Lighthouse Board, the General Lighthouse Authority conducts periodic independent audits of the systems and procedures associated with the availability of aids to navigation. They also conduct a physical audit of the presence of, and functionality of navigation aids. (refer to relevant section of MSMS)

1.5.1.4 Internal Audits

The Quality and Resources Technician is responsible for conducting annual audits to verify:

- Compliance with the policies and procedures set out in the Marine Safety Management System.
- The effectiveness of the safety inspection and planned maintenance regimes.

1.5.1.5 Review

Reviews of the Marine Safety Management System performance are carried out routinely by the Marine Safety Committee in line with the Terms of Reference of that group.

1.5.1.6 Audit Reporting

All recommendations and actions from auditing will be added to the Safety Action Plan

1.5.1.7 Audit Schedule

The audit schedules are available in the Marine Safety Management System Matrix under this reference.

1.4 Performance Improvement Plan

1.4.1 Performance Measures

Standing Objectives - Annual

Objective		MSMS Ref
Annual Report	Provide annual report on compliance to the MSMS to the Duty Holder	
Risk Assessments	Review all risk assessments annually and following any incident	2.8
Internal audits	Complete internal audit	1.5
Designated Persons audit	Complete DP Audit	1.5.1.5
Consultation	Meet the consultation requirements as set out in the consultation Matrix and relevant Terms of Reference	2.9
Emergency Exercises	Complete the programme of Emergency Exercises	2.6
Marine Safety Committee	Meet the commitments to the Marine Safety Committee schedule and the relevant Terms of Reference	1.5.2
Aids to Navigation (AtoN)	Meet the availability criteria as set out by the NLB CATEGORY TARGET Category 1 Required IALA Standard Min 99.8% Category 2 Required IALA Standard Min 99.0% Category 3 Required IALA Standard Min 97.0%	2.8.4
Hydrographic Surveys	To ensure programme of hydrographic surveys is completed in line with plan and that information is made available to all users.	2.1.17

Annual Objectives

2019

Objective	Target
Develop a MSMS that provides a web-based environment for all documents and records	October 2019
Ensure all staff are familiar with the MSMS	October 2019
Review and Update Training Matrix	December 2019
Establish hazard database and ensure all hazards are risk assessed	December 2019
Keep PMSC Compliance Action Plan under review and updated	monthly

Annual Objectives

2020

Objective	Target
Keep PMSC Compliance Action Plan under review and updated	monthly
Deliver training as identified in the training matrix to existing key staff	March 2020
Complete Asset list and Risk assessment of all AtoN	June 2020
Review and update port passage plans for all ports	September 2020
Review existing legislation to ensure it is fit for purpose	December 2020

Annual Objectives

2021

Objective	Target
Keep PMSC Compliance Action Plan under review and updated	monthly
Complete missing Operating procedures and instructions	December 2021
Prepare outstanding Policy and Procedures for adoption by the Duty Holder	August 2021
Establish the Marine Safety Committee, quarterly meetings	March 2021
Draft General Directions for each Harbour	June 2021
Establish members of the HAC's if ToR approved	Sep 2021
Review and update port passage plans for all harbours	October 2021
Gap analysis of Hydrographic Surveys	June 2021
Prepare Template for Published Annual Report	Dec 2021

Appendix 3 - Action List

MSMS section	Actions Required
1 Navigational SMS Information	
1.1 Management Standards	
1.1.6 Most recent published report	1. Standardised information to be included and format to be completed. No reports have been published
1.1.7 MCA statement of compliance	2. Draft for approval by Duty Holders at HSC
1.2 Policies	
1.2.1 Marine Safety Policy	3. Draft for approval by Duty Holders
1.2.2 Navigational Safety and Environmental Protection Policy	4. Draft for approval by Duty Holders
1.2.3 Enforcement and Prosecution Policy	5. No draft specific to harbours. Investigate if Council Policy is sufficient, if not, needs to be written.
1.4 Performance Improvement	
1.4.1 Performance Measures	6. To be Approved by Duty Holders at HSC 7. Then set up a methodology / system to report on them
1.4.2 Report on Performance Measures	8. Develop a draft structure for this report once PM's above agreed
1.5 Audit and Review	
1.5.1 Audit and Review of MSMS	9. TBC if 1.5.1.2 below is approved.

MSMS section	Actions Required
	10. Draft for approval by Duty Holders at HSC
	11. Internal auditor has been identified. Training will be required and made familiar with the MSMS.
	12. Standardised method for internal auditing and reporting to be prepared
1.5.2 Marine Safety Committee	13. A schedule of planned meetings will be agreed and established once ToR (item 12 below) are approved
	14. Draft for approval by Duty Holders at HSC
	15. Will be populated once Committee Established
2. Operating Control Information (by port where appropriate)	
2.1 Operating procedures & Instructions	
Operations procedures / review process for harbour activities that are not covered under a separate line within MSMS section 2	16. Additional 21 operational procedures required to be written. Procedures are in place but not written down. Another review to identify any others missing.
2.2 Port Act & Bylaws	
2.2.4 T&C's of Harbour Use	17. T&C's of harbour use are the rules users must comply with such as boat certification, rates to pay and insurance requirements / liabilities. These need to be drafted/collated.
2.3 General & special Directions (byelaws)	
2.3.1 Current General Directions	18. Standard General directions need to be drafted, these are standing instructions to vessels and some of this is already on the website but should be formalised into GD's
2.3.2 Procedures for providing General Directions	19. To be drafted once above completed
2.3.3	20. To be drafted once above completed

MSMS section	Actions Required
Procedure for review of General Directions	
2.3.4 Procedures for communicating GD	21. To be drafted once above completed
2.5 Incident Investigation	
2.5.3 Promulgation of information	22. There needs to be an agreed, written process/methodology for communicating these
2.6 Security & Emergency Plans & Procedures	23. This section needs further scoping, population, and input. Oil Spill Emergency Plans are already included.
2.6.1 Security plans	24. As above
2.6.3 General emergency plans	25. As above
2.7 Training	
2.7.6 Training Procedures	26. There need to be a process for applying for training and feedback and review following training , there maybe procedures in place within the council
2.8 Risk Assessment and Control Measures	
2.8.1 Risk Assessment Standards	27. This needs to be populated with information on the details of how the council evaluates risk,
2.9 Consultation and Communications	
2.9.1 Communicating with stakeholders Who/what/when/how	28. This should be a commitment on communicating with stakeholders
2.9.2 Consultation Matrix (who / what)	29. To be completed

MSMS section	Actions Required
(including contractors)	
2.9.3 Consultative forums schedule	30. There should be a pre-arranged schedule of advisory committee meetings
2.9.4 TOR's (that include standing agenda) for 2.9.2	31. Draft for approval of Duty Holder at HSC
2.9.5 Outputs from Consultation forums	32. There needs to be a process whereby the actions from the meetings are added to the safety action plan