

## Non-Conformance Report (NCR) Log on Safety Culture

**Company Name:** Structural Repair Solutions Ltd

**Location:** Windsor

**Prepared By:** Neil Smuts

**Date:** 20/06/2024

**Review Date:** 2 Months

### NCR Log Overview

This Non-Conformance Report (NCR) Log is designed to document and track non-conformances related to the safety culture at Structural Repair Solutions Ltd. The goal is to identify issues, implement corrective actions, and enhance the overall safety culture within the organization.

### NCR Details

- NCR No.:** NCR-001  
**Date:** 01/06/2024  
**Reported By:** Neil Smuts  
**Description of Non-Conformance:** Lack of PPE compliance observed among workers in the workshop area  
**Root Cause Analysis:** Insufficient training on PPE importance and usage  
**Corrective Action:** Conduct PPE training sessions for all employees. Reinforce PPE policies through signage and regular reminders.  
**Responsible Person:** Neil Smuts  
**Target Date:** 15/06/2024  
**Completion Date:** 14/06/2024  
**Remarks:** Training completed. Compliance improved.

- NCR No.:** NCR-002  
**Date:** 05/06/2024  
**Reported By:** Laura Flynn  
**Description of Non-Conformance:** Inadequate reporting of near-misses, leading to underestimation of workplace hazards  
**Root Cause Analysis:** Employees unaware of near-miss reporting procedures



**Corrective Action:** Develop and distribute a near-miss reporting procedure guide. Conduct workshops on the importance of reporting.

**Responsible Person:** Laura Flynn

**Target Date:** 20/06/2024

**Completion Date:** 18/06/2024

**Remarks:** Reporting frequency increased.

**NCR No.:** NCR-003

**Date:** 10/06/2024

**Reported By:** Roger Line

**Description of Non-Conformance:** Fire exit in the mezzanine floor area blocked by equipment, creating a potential evacuation hazard

**Root Cause Analysis:** Poor housekeeping practices and lack of regular inspections

**Corrective Action:** Implement a weekly housekeeping inspection schedule. Clear all obstructions from fire exits immediately.

**Responsible Person:** Roger Line

**Target Date:** 12/06/2024

**Completion Date:** 11/06/2024

**Remarks:** Housekeeping schedule in place.

**NCR No.:** NCR-004

**Date:** 15/06/2024

**Reported By:** Neil Smuts

**Description of Non-Conformance:** Inconsistent use of safety checklists before commencing high-risk activities

**Root Cause Analysis:** Inadequate enforcement of safety protocols and checklists  
**Corrective Action:** Reinforce the use of safety checklists through supervisor oversight. Provide additional training on checklist use.

**Responsible Person:** Neil Smuts

**Target Date:** 30/06/2024

**Completion Date:** 29/06/2024

**Remarks:** Checklist usage compliance improved.

**NCR No.:** NCR-005

**Date:** 20/06/2024



**Reported By:** Laura Flynn

**Description of Non-Conformance:** Lack of regular safety meetings to discuss ongoing safety concerns and improvements

**Root Cause Analysis:** No established schedule for safety meetings

**Corrective Action:** Establish a bi-weekly safety meeting schedule. Ensure attendance and participation from all departments.

**Responsible Person:** Laura Flynn

**Target Date:** 05/07/2024

**Completion Date:** 04/07/2024

**Remarks:** Safety meeting schedule established.

**NCR No.:** NCR-006

**Date:** 25/06/2024

**Reported By:** Roger Line

**Description of Non-Conformance:** Inadequate documentation of safety training sessions, leading to gaps in training records

**Root Cause Analysis:** Poor record-keeping practices

**Corrective Action:** Implement a digital training record system. Ensure all training sessions are documented and records are updated promptly.

**Responsible Person:** Roger Line

**Target Date:** 10/07/2024

**Completion Date:** 09/07/2024

**Remarks:** Digital record system operational.

**NCR No.:** NCR-007

**Date:** 30/06/2024

**Reported By:** Neil Smuts

**Description of Non-Conformance:** Unsafe storage of hazardous materials in the workshop, increasing the risk of accidents

**Root Cause Analysis:** Lack of proper storage procedures and inadequate training

**Corrective Action:** Develop and implement proper storage procedures for hazardous materials. Conduct training on safe storage practices.

**Responsible Person:** Neil Smuts

**Target Date:** 15/07/2024

**Completion Date:** 14/07/2024

**Remarks:** Hazardous materials stored safely.



## Summary and Continuous Improvement

### Findings:

- Several non-conformances were related to inadequate training and awareness of safety procedures.
- Poor housekeeping and inadequate reporting practices were also significant issues.
- Implementation of corrective actions has led to improvements in compliance and safety culture.

### Recommendations:

- Continue regular training and reinforcement of safety procedures.
- Maintain a robust system for documenting and tracking safety training and near-miss reports.
- Schedule periodic reviews of housekeeping practices and fire safety measures.

**Next Review Date:** 20/08/2024

---

**Approval:** Approved

**Name:** Neil Smuts

**Position:** Technical Director

**Signature:** \_\_\_\_\_

**Date:** 20/06/2024 \_\_\_\_\_

