

See Distribution

24 Dec 16

**MINUTE OF THE MR MEETING– NAVAL AND MARITIME ACADEMY HELD ON  
20<sup>TH</sup> DECEMBER 2016**

1. Following officers were present during the Management Review meeting held at CN&MA conference hall NMA.

CAPT (CDO)	KKIU	Kasiwatta	TC/MR
CDR (S)	UG	Jayalath	OIC Supply & Secretariat School
CDR (E)	HKA	Amaranath	OIC Engineering School
CDR(ASW)	JPKP	Kumara	DS I JNSC
CDR(ND)	YR	Edirisinghe	DS II JNSC
CDR(NP)	SP	Chandrasoma	DS III JNSC
LCDR(S )	MPSDP	Fernando	LLMC Course Coordinator
LCDR(PRO)	DKEDC	Dassanayaka	OIC Provost School
LCDR( ND )	BJJP	Cooray	Executive Officer
LCDR(C)	RRR	Lakmal	OIC Communication School
LCDR(CDO)	SC	Perera	OIC Diving School
LCDR(E)	UKBD	Wijesinghe	OIC NBCD School & ISO Coordinator
LCDR(ASW)	TRCB	Thennakoon	OIC ASW School
LCDR(IT)	TL	Mahawatta	OIC IT School
LCDR(VNF)	KAB	Ajantha	2IC OIC GED
LCDR(NP)	MTCY	De Silva	2IC CTU
LCDR	KSM	Silva	A/ISO Coordinator - OTW
LT(L)	HR	Thushara	2IC Electrical School
LT	RHSL	Rathnapriya	3IC Navigation School
LT(NP)	RPB	Rajarathna	2IC NM&ST School
LT(AOH)	PDVN	Pothpitiya	OIC Medical School
LT(I)	HGA	Somasiri	2IC TDEC
LT(VNF)	JD	Nanayakkara	2IC Seamanship School
LT(VNF)	TMCK	Senevirathne	English Department
LT(VNF)	ASAR	De Silva	OIC PT School
LT(VNF)	JAD	Jayasooriya	3IC Gunnery School
LT(VNF)	DMIK	Dassanayake	2IC ELT School
SLT(VNF)	RMNB	Rathnayaka	2IC PT School

2. At the outset, MR welcomed all the officers and ISO coordinator sailors with a brief introduction about the purpose of conducting the Management Review meeting and the importance of the ISO certification to NMA. He further elaborated the points to be discussed during the meeting such as,

a. Meeting inputs

- (1). Results of Internal & External audits.
- (2). Customer feedback.
- (3). Process performance and product conformity.
- (4). Status of Corrective and Preventive actions.
- (5). Follow up action arising from the previous MR meeting.
- (6). Changes that could affect the QMS.
- (7). Recommendations for improvements.

b. Meeting Outputs

- (1). Improvements of the effectiveness of the QMS.
- (2). Improvement to product related to customer requirement.
- (3). Any resources needed.

3. MR discussed the Quality Policy of NMA and explained how Quality Policies of Schools and Departments should in line with the main Quality Policy of NMA.

4. The meeting commenced with reading the important matters of the last minutes of the MR meeting by the ISO Coordinator. On completion LCdr(PRO) DKEDC Dassanayake proposed that the minutes were true and Cdr(S) UG Jayalath seconded it.

**ITEM NO 01**  
**CUSTOMER FEEDBACK REPORTS**

5. The gathering indicated that there is a poor response from ships/ establishments regarding sending Performance Appraisal forms.

6. MR instructed all OICs/HODs to draft reminder signal messages to ships/ establishments in time to time and same has to be initiated by respective School / Department which conducted the course.

7. ISO Coordinator indicated that a new Customer feedback form has been implemented for short courses (Less than 03 months.) and same has to be used to obtain feedback on completion of different modules and short courses. MR instructed all OICs/ HODs to utilize same as necessary.

**All OICs &  
HODs**

**ITEM NO 02**  
**DAS OFFICE**

8. MR indicated the importance of maintaining proper documentation procedure at DAS office in case of an external audit conduct by KDU or University of Kelaniya or SLI. Further he instructed ISO Coordinator to appoint a board including DAS as chairman, A/DAS as a member and Lt(I) HGA Somasiri as a member to study and arrange the documentation as per ISO 9001 standard.

**ISO  
Coordinator**

### **ITEM NO 03**

#### **QUALITY OBJECTIVES**

9. MR indicated that some Quality objectives that have been selected by some Schools/ Departments are not per with the SMART requirement and same was witnessed during last external audit at MMTS. ISO Coordinator explained how to select a proper Quality Objective. MR instructed all OICs/HODs to select the Quality objectives accordingly.

**All OICs &  
HODs**

10. OIC Engineering School indicated that the awareness of Quality objectives of a School by whole staff of that particular school cannot be achieved. ISO Coordinator replied that it is a mandatory requirement of the standard. MR instructed ISO Coordinator to obtain clarifications from SLSI.

**ISO  
Coordinator**

### **ITEM NO 04**

#### **ISO TRAINING/AWARENESS PROGRAMMES**

11. ISO Co-ordinator presented the progress of training on ISO as follows.

a. In house Worksop on existing QMS and ISO 9001:2015 QMS was conducted by SLSI lecturer on 19<sup>th</sup> and 20<sup>th</sup> February 2016.

b. Awareness programme for newly joined sailors was conducted by ISO Coordinator on 02<sup>nd</sup> March 2016.

c. In house workshop on ISO 9001:2015 version QMS was conducted by ISO Coordinator on 06<sup>th</sup> August 2016.

12. MR indicated the importance of training another sailor to look after the job of ISO coordinator sailor of each school before they are drafted.

### **ITEM NO 05**

#### **APPROVED FORMATS**

13. ISO Coordinator indicated that all approved formats used for training purposes are already have been published on NMA website. MR instructed all OICs/HODs to utilize NMA website effectively.

14. Further, ISO Coordinator indicated that all formats used in the training processes have been maintained at MR office.

### **ITEM NO 06**

#### **ADDRESSING OF RISK**

15. ISO Coordinator indicated that as per the new version ISO 9001 QMS, addressing Risk is a mandatory requirement and it is necessary to maintain a Risk Register in each process. Further he indicated that the Risk Registers need to be reviewed in every 3 months duration by discussing the matter with respective staff of Schools/ Departments.

**ITEM NO 07**

**OBSERVATIONS OF RE-CERTIFICATION/ SURVEILLANCE AUDIT**

16. ISO Coordinator indicated that re-certification audit conducted by SLSI on 04<sup>th</sup> and 05<sup>th</sup> November 2016 was a success and there is a delay in obtaining the certificate due non settlement of payments to SLSI. The observations of re-certification as follows.

- a. Risk assessment has not been carried out for Library and TDEC.

**Decision**

MR instructed Library and TDEC staff to prepare Risk registers and maintain accordingly

**OIC- Library  
OIC - TDEC**

- b. Fire points have not been numbered and fire exit not displayed in no. 06 building.

**Decision**

ISO Coordinator indicated that action being initiated to implement a Fire plan to NMA including all new buildings. Further he indicated that necessary action being initiated to make standard signs to indicate the fire extinguisher points.

**ISO  
Coordinator**

- c. No evidence available regarding discussion of Quality Policy in previous MR meeting.

**Decision**

ISO Coordinator indicated that as per the new ISO 9001:2015 standard, it is mandatory to discuss the Quality Policy of the organization during MR meeting.

- d. Some Quality Objective are not measurable.

**Decision**

MR indicated the importance of selecting Quality Objectives considering SMART requirement.

**All OICs  
/HODs**

- e. Safety aspects to be improved. eg: Gas cylinders and Fire extinguishers left without supports.

**Decision**

MR instructed all OICs/HODs to re-check the safe storing of such items in order to prevent harmful incidents. Further ISO Coordinator indicated that a softcopy related to standard safety sign formats as per ISO standard has been published in NMA web. MR instructed all OICs/ HODs to refer same and implement standard safety signs as necessary.

**All OICs  
/HODs**

- f. Memorandum NMA/T2 dated 26 Dec 14 need to be updated

**Decision**

ISO Coordinator indicated that necessary action need to be initiated to update the said memorandum as per the new ISO 9001:2015 standard.

**MR**

- g. A mechanism to demonstrate monitoring of Quality Objectives.

**Decision**

ISO Coordinator indicated that a graphical method such as 'work performance chart' to monitor the progress of Quality Objective was suggested by the SLSI audit team. MR instructed all OICs/HODs to follow such a methodology in future.

**All OICs  
/HODs**

- h. Details of users of Internet Knowledge Centre (IKC) to be maintained

**Decision**

ISO Coordinator indicated that during the previous recertification audit it was observed that non availability of user register for computers at IKC. MR instructed OIC-IKC to implement same.

**OIC-  
IKC**

- j. Record keeping of completed programmes to be maintained.

**Decision**

MR instruct all OICs/HODs to maintain proper records of completed course programmes as per the proper documentation standard.

**All OICs  
/HODs**

- k. Date of examination on examination results not recorded.

**Decision**

MR indicated the importance of maintaining proper records and instructed all OICs/HODs to follow proper record maintaining procedure.

**All OICs  
/HODs**

- l. Incidents to be reported and recorded to prevent occurrence elsewhere.

**Decision**

MR indicated that the matter to be initiated and handled from TDEC to maintain a centralized record on incidents occurred.

**OIC  
TDEC**

- m. Uniform manner to be adopted to indicate Schools/ Departments in NMA website par with the Quality Manual.

**Decision**

ISO Coordinator indicated that the order of the Schools/ Departments of NMA website to be rearranged as per the list available in Quality Manual.

**Web  
Master**

- n. Checklist to be introduced to conduct examinations.

**Decision**

MR indicated the importance of implementing such a check list for examination.

**OIC  
TDEC**

**ITEM NO 08**  
**INTERNAL AUDIT**

17. MR invited CDR(NP) SP Chandrasoma (Internal audit team leader) , members of the previous Internal audit team and ISO Coordinator to present the findings of 02<sup>nd</sup> Half Internal Audit 2016, which was conducted in the month of October 2016.

18. All the NCRs raised during the Internal audit was discussed and MR instructed the all OICs/ HODs to find the root causes and implement the proposed corrections and corrective actions as appropriately in liason with the audit team. **All OICs & HODs**

19. The summery of common observations made by Internal audit were discussed as follows.

- a. Non availability of Risk Registers
- b. Non availability of suitable record rooms
- c. Lack of awareness regarding ISO 9001:2015 QMS by staff
- d. Improper Maintaining and following up the progress of Quality objectives
- e. Lack of infrastructure facilities in some schools
- f. Poor maintenance of Trainees feedback
- g. Awareness of Quality Policy and Quality Objectives by staff is less

20. MR instructed ISO Coordinator to collect the completed NCRs and Observations of the Internal Audit and to publish the scanned copies in the NMA web site for future reference. **ISO COORDINATOR**

21. Thereafter, since there were no suggestions, the meeting was adjourned by MR finally greeting all present.



UKBD WIJESINGHE  
Lieutenant Commander (E)  
ISO Coordinator

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