



Office of
Transport Safety
Investigations

FERRY SAFETY INVESTIGATION

Interim Factual Statement

Safety and assurance systems for defect management
(critical steering controls) in the Emerald Class
Generation II Fleet (*Fairlight, Clontarf and Balmoral*)
Sydney Harbour, NSW

26 September 2022



About the Office of Transport Safety Investigations (OTSI)

OTSI is an independent NSW authority which contributes to the safe operation of bus, ferry and rail passenger and rail freight services in NSW by investigating safety incidents and accidents and transport safety risks, identifying system-wide safety issues and sharing lessons with transport operators, regulators and other stakeholders.

OTSI is empowered under the *Transport Administration Act 1988* to investigate rail, bus, and ferry accidents and incidents in accordance with the provisions of the *Passenger Transport Act 1990* and *Marine Safety Act 1998*. It also conducts rail investigations on behalf of the Australian Transport Safety Bureau under the *Transport Safety Investigation Act 2003* (Cth).

OTSI investigations are independent of regulatory, operator or other external entities. OTSI investigates using a 'no-blame' approach to understand why an occurrence took place and to identify safety factors that are associated with an accident and incident, to make recommendations or highlight actions that transport operators, regulators and government can take to prevent recurrence and improve safety.

Evidence obtained through an OTSI investigation cannot be used in any subsequent criminal or disciplinary action. However, a regulator can undertake its own investigation into an incident OTSI has investigated and coronial inquiries can obtain access to OTSI information.

OTSI does not investigate all transport safety incidents and accidents but focuses its resources on those investigations considered most likely to enhance bus, ferry or rail safety.

Many accidents result from individual human or technical errors which do not involve safety systems so investigating these in detail may not be justified. In such cases, OTSI will not generally attend the scene, conduct an in-depth investigation or produce an extensive report.

OTSI may request additional information from operators or review their investigation reports which may lead to several actions, such as the release of a Safety Advisory or Alert to raise industry awareness of safety issues and action.

OTSI investigators normally seek to obtain information cooperatively when investigating. However, where it is necessary to do so, OTSI investigators may exercise statutory powers to conduct interviews, enter premises and examine and retain physical and documentary evidence.

Incident overview

On 26 September 2022, Transdev Sydney Ferries (TDSF) removed from service three (3) Emerald Class Generation II Ferries, the *Fairlight*, *Balmoral* and *Clontarf*, after two steering failures in as many days occurred on Sydney Harbour. This incident was the latest in a series of steering related failures. It involved a steering failure on the *Fairlight* to the west of Fort Denison while conducting a passenger service. The previous day, the vessel *Clontarf* was conducting a passenger service from Circular Quay to Manly, when a steering failure occurred to the east of Fort Denison while travelling in an easterly direction. Both incidents occurred on separate Generation II vessels and resulted in a full loss of steering control. The master conducted the pre-determined immediate response drills to respond to the incidents.

Following the second incident, TDSF temporarily removed the three Generation II vessels from service. In the interim, two *Freshwater* class vessels have been re-introduced into service to support the regular Manly-Circular Quay passenger service.

The operator (TDSF) engaged an external engineering specialist to assist in root cause analysis, engineering assessment and defect repair. As of 17 October 2022, the cause was still under investigation and the vessels remain temporarily removed from service.

Since 1 December 2021 – 26 September 2022, OTSI received nineteen (19) notifiable occurrence reports regarding the Generation II ferry class. Ten (10) of these related to steering defects with no known root cause. The remaining notifiable incidents related to other general passenger, engineering, operational or assurance incidents arising from regular passenger ferry services onboard the Generation II vessels.

Scope of the investigation

Based on findings from OTSI's preliminary enquiries, the Chief Investigator determined that the matter warranted investigation in accordance with Section 46 of the *Passenger Transport Act 1990* (NSW).

The scope of the investigation includes, but is not limited to:

- Defect management systems and associated assurance processes for critical steering failures at introduction into service and throughout the service life of the vessels;
- The effectiveness of the SMS in managing risks to service operations while critical steering defects are identified and repaired; and
- Engineering resource and competence to support defect management and associated assurance processes across the fleet.

The Chief Investigator has required the Investigator in Charge (IIC) to:

- Identify the factors, both primary and contributory related to critical steering failure defect management at introduction into service and throughout service life
- Examine the effectiveness of controls in place to manage the related risks
- Advise on any matters arising from the investigation that would enhance the safety of ferry operations

The IIC will consult with all Directly Involved Parties (DIPs) throughout the investigation.

Publication of the investigation report

OTSI produces a written report on every investigation for the Minister for Transport, as required under section 46BBA of the *Passenger Transport Act 1990*.

Investigation reports strive to reflect OTSI's balanced approach to the investigation, explaining what happened and why in a fair and unbiased manner. All DIPs will be given the opportunity to comment on the draft investigation report.

The final investigation report will be provided to the Minister for tabling in both Houses of the NSW Parliament in accordance with section 46D of the *Passenger Transport Act 1990*. The Minister is required to table the report within seven days of receiving it.

Following tabling, the report is published on the OTSI website and information on the safety lessons promoted to relevant stakeholders. The published report will replace this Interim Factual Statement.