

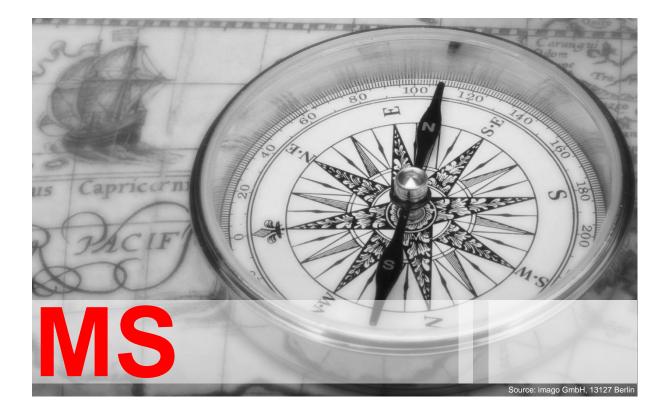
Swiss Confederation

Federal Departement of the Environment, Transport, Energy and Communications DETEC

Federal Office of Civil Aviation FOCA Safety Division - Flight Operations

FOCA GM/INFO Guidance Material / Information

Certification Leaflet Management System



Scope	All aspects of management system requirements
Applies to	AOC-Holders, ATOs, AeMCs, CAMOs, NCC-, FSTD-, SPO-Operator
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Log of Revision

Date	Issue	Revision	Highlight of Revision
18.06.2013	1	0	First Issue
28.04.2015	1	1	Chapter 3.X partly amended
14.06.2016	1	2	Cover Page: FOCA division identification amended
14.06.2016 09.11.2017	1	2 3	 Cover Page: FOCA division identification amended Integration of NCC and SPO operations: The implementation of NCC and SPO relevant items, such as the declaration process which does not (or only in rare occasions) imply approval points. Accordingly the chapter about prior approval and non-prior approval had to be revised and the term «Air Operations» (as it was used in the revisions before this one) had to be split into several different kind of Air Operators (refer to chapter 0.4 «Terms and conditions» and 2.7 «Structure of the Reference Box system» on how these are applied). References for declared Operators – NCC and SPO as well as SPO Authorisation holders Integration of Organisational Review concept for «non-complex ATO providing training for LAPL, PPL, SPL and BPL only»: The «organisational review» provides a new possibility to perform safety and risk management as well as compliance management. Unfortunately this concept only exists on the Air Crew Regulation side for ATOs in the context mentioned above. On the Air Operations side the concept was revealed during the CRD process in 2015. Accordingly these ATOs (providing training only for LAPL, PPL, SPL and BPL) had to be taken up and separately handeled within this whole document. Consequently where the requirements of such an ATO versus the requirements for an «classic» ATO (at some places now named «ATO CPL, MPL and ATPL») do not match anymore, the two kind of ATOs will be distinguished (refer to chapter 0.4 «Terms and conditions» and 2.7 «Structure of the Reference Box system» on how these are applied). Updating of diverse Regulation references or amendments Implementation of List of Appendices (LOApp). Integration of revised occurrence reporting acc. (EU) No 376/2014 & (EU) 2015/1018 and consequent update of chapter 6 «reporting scheme» Chapter 4.4.1 «Accountab
			 circumstances where the ACM is not the CEO. Overall: Several minor typing errors corrected, Terms and
			Conditions updated, List of Abbreviations (LoA) amended, legal references updated.

List of effective Appendices

Name/Labelling	Issue	Revision	Effective Date
Appendix OMM to FOCA GM/INFO «CL Management System» – Template: Organisation Management Manual (OMM)	1	1	09.11.2017
Appendix OMM-OR to FOCA GM/INFO «CL Management System» – Template: Organisation Management Manual (OMM), Organisational Review (OR)	1	0	08.11.2016
Appendix FSTD to FOCA GM/INFO «CL Management System» – Supplementary Provisions for FSTD Qualification Certificate Holders»	1	0	13.08.2013
Appendix AeMC to FOCA GM/INFO «CL Management System» – Supplementary Provisions for AeMC Certificate Holders	1	0	12.11.2013

List of Effective Chapters

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The following abbreviations are within this GM/INFO:

Abbreviation	Definition	Abbreviation	Definition
ABB	Abbreviation	CEO	Chief Executive Officer
ACM	Accountable Manager	CFI	Chief Flight Instructor (ATO)
ADMIN	Administration	Ch.	Chapter
AED	Automatic External Defibrillator	CISM	Critical Stress Management
AeMC	Aero Medical Centres	CL	Certification Leaflet
AIP	Aeronautical Information Publications	CMC	Crisis Management Centre
ALARP	As low as reasonably practicable	СММ	Compliance Monitoring Manager
AltMoC	Alternative Means of Compliance	CMS	Compliance Monitoring System
AMC	Acceptable Means of Compliance	CoA	Certificate of Airworthiness
AME	Authorised Medical Examiner	CORA	Consistency of Organisation Approvals
ANS	Air Navigation Services	СР	Cover Page
AOC	Air Operator Certificate	CPL	Commercial Pilot Licence
APP	Approval – Element requiring prior Approval	CRD	Comment Response Document
ARA	Authority Requirements Air Crew	CS	Certification Specifications
ARINC	Aeronautical Radio Incorporated	СТКІ	Chief Theoretical Knowledge Instructor (ATO)
ARO	Authority Requirements Air Operations	CV	Curriculum Vitae
Art.	Article	CVR	Cockpit Voice Recorder
ATC	Air Traffic Control	DEF	Definition
ATM	Air Traffic Management	DG	Dangerous Goods
ATO	Approved Training Organisation	DOC	Document
ATPL	Airline Transport Pilot Licence	EASA	European Aviation Safety Agency
BITD	Basic Instrument Training Devices	EC	European Commission
BPL	Balloon Pilot Licence	EDP	Electronic Data Processing
BR	Basic Regulation	EEC	European Economic Community
CAM	Continuing Airworthiness Manager	EFB	Electronic Flight Bag
CAME	Continuing Airworthiness	ENR	Enroute
CAMO	Management Exposition Certified Aircraft Maintenance	ERP	Emergency Response Planning
	Organisation	ETOPS	Extended Range Operations with two Engine Aeroplanes
CC	Cabin Crew	EU	European Union

Abbreviation	Definition	Abbreviation	Definition
FC	Flight Crew	MOE	Maintenance Organisation Exposition
FCL	Flight Crew Licensing	MOP	Method of Procedure
FDM	Flight Data Monitoring	Mount.	Mountainous
FDR	Flight Data Recorder	MRO	Maintenance/Repair and Overhaul
FFP	FSTD Focal Point	MKO	
FOCA	Federal Office of Civil Aviation		Management System
FSO	Flight Safety Officer	NCC	Non-Commercial Air Operations with Complex Motor-Powered Aircraft
FSTD	Flight Simulation Training Device	NMR	Notification of Manual Revision
FTE	Full Time Equivalent	No.	Number
FTL	Flight and Duty Time Limitation	NOTAM	Notice to Airman
GAR	Green-Amber-Red Model	NP	Nominated Person
GEN	General	NPA	Notice of Proposed Amendment
GM	Guidance Material	NPCT	Nominated Person Crew Training
HAeMC	Head of Aero Medical Centre	NPFO	Nominated Person Flight Operations
HEMS	Helicopter Emergency Medical Service	NPGO	Nominated Person Ground Operations
HHO	Helicopter Hoist Operations	NVIS	Night Vision Imaging Systems
HoA	Highlights of latest Amendment	OD	Operational Directive
HT	Head of Training (ATO)	OM	Operations Manual
ICAO	International Civil Aviation Organisation	OM A	Operations Manual Part A, General / Basic
ISS	Issue	OM B	Operations Manual Part B, Aircraft
JAA	Joint Aviation Authorities		Operating Matters
LAPL	Light Aircraft Pilot Licence	OM C	Operations Manual Part C, Route, Role, Area and Aerodrome,
LECR	List of Effective Certification Leaflet Chapters and Reference Boxes		Operating Site Instructions and Information
LoC	List of Effective Chapters	OM D	Training
LoP	List of Effective Pages	OMM	Organisation's Management Manual
LoR	Log of Revision	ORA	Organisation Requirements Air Crew
LoR	List of Revisions	ORO	Organisation Requirements Air Operations
LVO	Low Visibility Operation	Para.	Paragraph
MEL	Minimum Equipment List	PBN	Performance Based Navigation
MLR	Manuals, Logs and Records	PPL	Private Pilot Licence
MMEL	Master Minimum Equipment List		

Abbreviation	Definition	Abbreviation	Definition
PRA	Proposed Revision / Amendment	SMM	Safety Management Manual
	Form	SMS	Safety Management System
РТО	Pilot Training Organisation	SOP	Standard Operating Procedures
QTG	Qualification Test Guide	SoR	State of Register
RA	Risk Assessment	SPO	Specialised Operations
RB	Reference Box	SPA	Single Pilot Aeroplane
Ref.	Reference	SPI	Safety Performance Indicator
REGA	(Rettungsflugwacht Garde Aérienne	SPL	Sailplane Pilot Licence
	or Guardia Area) Swiss Air Rescue		-
REV	Revision	SRB	Safety Review Board
SAG	Safety Action Group	тс	Third Country
SCMM	Safety Management and Compliance Monitoring Manual	ТКІ	Theoretical Knowledge Instructor (ATO)
SE	Safety Experts	ТМ	Training Manual
SEC	Security	ТоС	Table of Content
SM	Safety Manager		

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0 Introduction

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All Guidance Material / Information (GM/INFO) are intended to assist the organisation/operator in administrative matters. The administrative requirements and processes will facilitate liaising with the Federal Office of Civil Aviation (FOCA). It is to be considered a tool for the organisation/operator in order to ease processes of obtaining required and defined approvals and authorisations issued by the Federal Office of Civil Aviation (FOCA). Using the GM/INFO will be conducive to establishing compliance with FOCA requirements and will lead through the respective certification or variation process in regard to administrative tasks.

0.1 Purpose of this GM/INFO

Ch. 0.1 ISS1 / REV0 / 18.06.2013

The purpose of this GM/INFO is to provide:

- an overview over the general requirements of the Management System;
- guidance on the possibility to develop an Organisation's Management Manual;
- a correlation between a possible basic structure of the Organisation's Management Manual and the relevant legal requirements;
- a self-assessment tool for organisations to verify the compliance with the relevant legal requirements; and
- a certification tool for the competent authority to conduct document evaluation regarding the compliance with the relevant legal requirements.

Due to the attempt of EASA to harmonise the regulations regarding organisational requirements, this guideline could also be used for <u>other</u> organisations than Approved Training Organisations or Air Operators.

0.2 Scope

Ch. 0.2 ISS1 / REV3 / 09.11.2017

The material on hand covers all aspects of management system requirements and shall assist the applicant to implement a Management System and to comply with the requirements.

To ease the technical development of a manual system, FOCA publishes dedicated templates in Microsoft Word format which may be downloaded on the FOCA webpage. Currently published templates are found above in this GM/INFO Certification Leaflet (CL) Management System (MS), «List of effective Appendices».

The templates/examples provided may be incomplete and solely represent a possible means of how to provide required data. An organisation must add further information or adapt the examples to their specific needs in accordance with the necessary requirements.

Definitions, when necessary, are outlined and explained within the reference boxes. A separate list of definitions is not provided.

0.3 Terms and Conditions

Ch. 0.3 ISS1 / REV3 / 09.11.2017

When used throughout the GM/INFO the following terms shall have the meaning as defined below:

Term	Meaning	Reference
Air Operator	This term addresses AOC holders, NCC- and SPO Operators	
AOC holder	Air Operator Certificate holder. Sometimes refered to as «certified operator» in the regulation.	(EU) No 965/2012
ATO CPL, MPL and ATPL	ATOs providing training for the CPL, MPL and ATPL and the associated ratings and certificates;	FOCA Abbreviation – used herein for simplification
ATO LAPL, PPL, SPL and BPL	ATOs providing training only for the LAPL, PPL, SPL and BPL and the associated ratings and certificates;	Derived from (EU) No 1178/2011 and (EU) No 290/2012
could	This term expresses a possibility.	http://oxforddictionaries.com/ definition/english/could
FSTD Qualification Certificate holder only	The word <i>only</i> in this context means, that the organisation does ONLY operate FSTDs and does not have another branche subject to certification, declaration, approval or authorisation according to (EC) 216/2008.	FOCA Term used for this CL
ideally	This term expresses a best possible means of compliance and/or best experienced industry practice.	FOCA recommendation
may	This term expresses a positive permission.	EC English Style Guide: Ch. 7.21
may not, must not	These terms express a prohibition.	EC English Style Guide: Ch. 7.20
NCC or SPO; NCC / SPO	This term is meant to address both «Non commercial operator of complex motor powered aircraft» and «Specialised operations Operators», sometimes refered to as «declared operator» in the regulation.	(EU) No 965/2012
need not	This term expresses a negative permission.	EC English Style Guide: Ch. 7.22
Organisation	This term herein covers any company including the <i>«air-</i> operator», wheras the term <i>«operator»</i> only aims at air operators.	FOCA advise for this certification leaflet
shall not, will not	These terms express an obligation, a negative command.	EC English Style Guide: Ch. 7.20
shall, must, will	These terms express an obligation, a positive command.	EC English Style Guide: Ch. 7.19
should	This term expresses an obligation when an acceptable means of compliance should be applied.	EASA Acceptable Means of Compliance publications FOCA policies and requirements
SPO Authorisation holder	SPO Operator who holds an (or several) «authorisation(s) for high risk commercial specialised operations». Such operators are sometimes refered to as «auhorised operator» in the regulation.	(EU) No 965/2012

Note: To highlight an information or editorial note, a specific note box is used.

• The use of the male gender should be understood to include male and female persons.

0.4 List of References

Ch. 0.4 ISS1 / REV3 / 09.11.2017

This GM/INFO is based on the legal references listed below:

Legal Reference	Issue	Subject
Basic Regulation (EC) No 216/2008	20.02.2008	Common rules in the field of civil aviation and establishing a European Aviation Safety Agency
Commission Regulation (EU) No 965/2012 05.10.2012		Technical requirements and administrative procedures related to air operations Annex I: DEF; Annex II: Part-ARO; Annex III: Part-ORO; Annex IV: Part-CAT; Annex V: Part-SPA; Annex VI: Part-NCC; Annex VII: Part- NCO; Annex VIII: Part-SPO
Commission Regulation (EU) No 1178/2011	03.11.2011	Technical requirements and administrative procedures related to civil aviation aircrew Annex I: Part-FCL; Annex II: Conversion of existing national licences and ratings; Annex III: Acceptance of Licences of third countries; Annex IV: Part-MED
Commission Regulation (EU) No 290/2012 (amending regulation 1178/2011)	30.03.2012	Technical requirements and administrative procedures related to civil aviation aircrew Annex V: Part-CC; Annex VI: Part-ARA; Annex VII: Part-ORA
Regulation (EU) No 376/2014 of the European Parliament and of the Council	03.04.2014	On the reporting, analysis and follow-up of occurrence in civil aviation
Commission Implementing Regulation (EU) 2015/1018	29.06.2015	Laying down a list classifying occurrences in civil aviation to be mandatorily reported according to Regulation (EU) No 376/2014
Regulation (EU) No 996/2010	20.10.2010	Investigation and prevention of accidents and incidents in civil aviation

0.5 Organisation/Operator Responsibilities

Ch. 0.5 ISS1 / REV0 / 18.06.2013

The organisation has to establish the organisation's documentation constituting its Management System and including:

defined lines of responsibility and accountability throughout the organisation, including a direct safety accountability of the accountable manager;

a description of the overall philosophies and principles of the organisation with regard to safety, referred to as the Safety Policy;

the identification of aviation safety hazards entailed by the activities of the organisation, their evaluation and the management of associated risks, including taking actions to mitigate risks and to verify their effectiveness;

training to maintain personnel skilled and competent to perform their tasks; and

documentation of all Management System key processes, including a process for making personnel aware of their responsibilities and the procedure for amending this documentation.

Note: The set-up of the manuals has to be done according to the relevant Regulation.

0.6 Format of the GM/INFO

Ch. 0.6 ISS1 / REV1 / 28.04.2015

This GM/INFO has the format of a Certification Leaflet (CL). The CL consists of a standardised modular reference box system. The following presentation provides details of the defined format:

RVSM	ORO.MLR.105 CAT.IDE.A.105 LEGAL REFERENCE	•
4-B9-020 ChOM ChSeqNo.	OM – B, Section 9, Minimum Equipment List (MEL)	
APP: The ME	L and any amendment thereto requires prior approval	
IF APPLICABLE, BRIEF	DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL	
	L amended in order to cover all system components that are rele	vant for the PV/SM

The minimum equipment list shall be amended in order to comply with the requirement for RVSM
 operations in respect to system capability and redundancy.

0	Title – subject description of the Reference Box (RB) including revision status
0	FOCA evaluation method (based on most stringent legislation, i.e. the one for AOC holders)
6	 FOCA / Topic Reference Number which may be used as identification in addition to interlink between this leaflet and the Document Evaluation Report (Finding Report). The Number consists of a combination of: a subject code related to the specific topic/ theme; and sequence number in the respective chapter of the CL. The above example 4-B9-020 indicates: RVSM = CL regarding RVSM Specific Approval, 4 = CL section; B9 = OM chapter under evaluation
	(here OM-B, Chapter 9.), followed by 020 = sequence number.
4	Associated legal reference and/ or reference to other relevant publications including information on formal Acceptance (ACC) or Approval (APP) where applicable.
6	Reference to the Part(s), Chapter(s) and/or Subchapters of the organisation's document systems or manual system as required by the applicable Part.
0	If the legal provision requires a formal approval, a short description of the content of this approval is provided.
Ø	Questions for self-assessment and compliance verification.
8	Provides instructions, provisions, regulatory requirements, guidelines, acceptable means of compliance and examples of current best practice.

1 Requirements related to Management Systems

Ch. 1 ISS1 / REV0 / 18.06.2013

1.1 Basic Regulation (EC) No 216/2008 Ch. 1.1 ISS1/REV3/09.11.2017

The consolidated Version¹ of the Basic Regulation (EC) No 216/2008 of the European Parliament and of the Council states, as one of the essential requirements, that the following organisations must implement and maintain a Management System:

Organisations concerned	Respective Paragraph in the Basic Regulation
Design and Manufacture Organisations Maintenance Organisations Continuing Airworthiness Organisations	Airworthiness: Art. 1, Para. 1(a), (c) - Annex I; Para. 3ff
Training Organisations and FSTD Qualification Certificate Holders Aero-Medical Centres	Pilot Licensing: Art. 1, Para. 1(b) - Annex III; Para. 3° - Annex III; Para. 4c
Commercial Operations Non-Commercial Operations of complex motor- powered aircraft	Air Operations: Art. 1, Para. 1(b) - Annex IV; Para. 8a
Airport Operator	Aerodromes: Art. 1, Para. 1(b): - Annex Va ; Para. B2
ATM/ANS Service Providers Training Organisations	ATM/ANS and ATC: Art. 1, Para. 1(ff) - Annex Vb; Para. 5° - Annex Vb; Para. 5d

All those Management Systems are focused on safety, intending to provide safe services (training, operation, etc.) as well as airworthy products.

The specific definitions of the Basic Regulation vary from annex to annex but the essence is identical:

• The organisation must implement and maintain a Management System to ensure compliance with the essential requirements and aim for continuous improvement of this system!

1.2 Implementing Rules Ch. 1.2 ISS1/REV3/09.11.2017

For the time beeing, Implementing Rules considering organisation requirements have been set in force for Air Crew, Air Operations and for ATM/ANS providers only. Those for Airworthiness will follow in the future. The scope of this certification leaftlet does not cover ATM/ANS nor Airworthiness.

Regulation Air Operations (Annex III: Part-ORO (Organisation Requirements Air Operations)) and Regulation Aircrew (Annex VII, Part-ORA (Organisation Requirements Aircrew)) require from organisations to establish a Management System:

(a) The organisation shall establish, implement and maintain a Management System that includes:
	(1) clearly defined lines of responsibility and accountability throughout the organisation, including a direct safety accountability by the accountable manager;
	(2) a description of the overall philosophies and principles of the organisation with regard to safety, referred to as the safety policy;
	(3) the identification of aviation safety hazards entailed by the activities of the organisation, their evaluation and the management of associated risks, including taking actions to mitigate the risk and verify their effectiveness;
	(4) maintaining personnel trained and competent to perform their tasks;
	(5) documentation of all Management System key processes, including a process for making personnel aware of their responsibilities and the procedure for amending this documentation;
	(6) a function to monitor compliance of the organisation with the relevant requirements. Compliance monitoring shall include a feedback system of findings to the accountable manager to ensure effective implementation of corrective actions as necessary; and
	(7) any additional requirements that are stipulated in the relevant subparts of this Part or other applicable Parts. (see Source further down)
	b) The Management System shall correspond to the size of the organisation and the nature and complexity of its activities, taking into account the hazards and associated risks inherent in these activities
\$	ource: Regulation Aircrew: Annex VII, Part-ORA, Subpart-GEN.200 Management System Regulation Air Operations: Annex III, Part-ORO, Subpart-GEN.200 Management system

The Implementing Rules permit to avoid duplications by establishing cross references:

ORGANISATION'S MANAGEMENT SYSTEM DOCUMENTATION

- (a) It is not required to duplicate information in several manuals. The information may be contained in any of the organisation's manuals (e.g. operations manual, training manual), which may also be combined.
- (b) The organisation may also choose to document some of the information required to be documented in separate documents (e.g. procedures). In this case, it should ensure that manuals contain adequate references to any document kept separately. Any such documents are then to be considered an integral part of the organisation's Management System documentation.

Source: Regulation Aircrew: GM1 ORA.GEN.200(a)(5) Management System Regulation Air Operations: GM1 ORO.GEN.200(a)(5) Management System

1.3 Elements of the Management System requiring Approval

Ch. 1.3 ISS1 / REV3 / 09.11.2017

For all AOC holders, AeMCs and ATOs any of the elements of the Management System require prior approval by FOCA. This does not apply to «declared operators» unless active in Part-SPO where elements which require an authorization apply «auhorised operators» (ref. to chapter 0.4 «terms and conditions' for terminology»).

Elements of the Management System are defined as:

- 1. Lines of Responsibilities and Accountability; and
- 2. Safety Policy.
- (a) The organisation shall establish, implement and maintain a management system that includes:
 - (1) clearly defined lines of responsibility and accountability throughout the operator, including a direct safety accountability of the accountable manager;
 - (2) a description of the overall philosophies and principles of the operator with regard to safety, referred to as the safety policy;

(a) Any change affecting:

(1) ...; or

- (2) any of the elements of the operator's management system as required in ORO.GEN.200(a)(1) and (a)(2) shall require prior approval by the competent authority.
- (b) For any changes requiring prior approval in accordance with Regulation (EC) No 216/2008 and its Implementing Rules, the organisation shall apply for and obtain an approval issued by the competent authority. The application shall be submitted before any such change takes place, in order to enable the competent authority to determine continued compliance with Regulation (EC) No 216/2008 and its Implementing Rules and to amend, if necessary, the operator certificate and related terms of approval attached to it.

The organisation shall provide the competent authority with any relevant documentation.

The change shall only be implemented upon receipt of formal approval by the competent authority in accordance with ARO/ARA.GEN.330.

The organisation shall operate under the conditions prescribed by the competent authority during such changes, as applicable.

(c) All changes not requiring prior approval shall be managed and notified to the competent authority as defined in the procedure approved by the competent authority in accordance with ARO/ARA.GEN.310(c).

Source:	ORO.GEN.130(a)(2)
	ORA.GEN.130(a)(2)
	ORO.GEN.200(a)(1) and (a)(2)

Explanation

- Lines of Responsibilities means a graphic representation of the structure of an organisation showing the relationships of the positions also referred to organisation chart;
- Responsibility indicates the duty assigned to a position or the state or fact of having a duty to deal with something or of having control over someone;
- Accountability is the liability created for the use of authority. Authority is the right or power assigned to an executive or a manager in order to achieve certain organisational objectives. Responsibility may be delegated, accountability not.
- The Safety Policy is the description of the overall philosophies and principles of the organisation

1.4 Different requirements for Complex and Non-Complex Organisations Ch. 1.4 ISS1/REV3/09.11.2017

During the implementation of a Management System the complexity of the organisation must be considered:

- a) An organisation should be considered as **complex** when it has a workforce of more than 20 full time equivalents (FTEs) involved in the activity subject to Regulation (EC) No 216/2008 and its Implementing Rules.
- (b) Organisations with up to 20 FTEs involved in the activity subject to Regulation (EC) No 216/20084 and its Implementing Rules may also be considered complex based on an assessment of the following factors:
 - (1) in terms of complexity, the extent and scope of contracted activities subject to the approval;
 - (2) in terms of risk criteria, the extent of the following:
 - (i) operations requiring a specific approval;
 - (ii) high-risk commercial specialised operations;
 - (iii) operations with different types of aircraft used; and
 - (iv) operations in challenging environment (offshore, mountainous area, etc.).

Source: AMC1 ORO.GEN.200(b) Management system – size, nature and complexity of the activity AMC1 ORA.GEN.200(b) Management system – size, nature and complexity of the activity

Training Organisations:

(c) Regardless of the criteria mentioned in (a) and (b), the following organisations should **always** be considered as **non-complex**:

- (1) Approved Training Organisations (ATOs) only providing training for the light aircraft pilot licence (LAPL), private pilot licence (PPL), sailplane pilot licence (SPL) or balloon pilot licence (BPL) and the associated ratings and certificates;
- (2) Aero-Medical Centres (AeMCs).

Source: AMC1 ORA.GEN.200(b) Management system – size, nature and complexity of the activity

 By the implementation of the ED Decision 2015/011/R (Amendment 3 of the AMCs and GMs to Part-ORA), the provions of an *organisational review concept* was introduced for ATOs providing training only for LAPL, PPL, SPL and BPL and associated ratings and certifiates, which may accomplish the safety and risk management and compliance monitoring for such a organisation. Refer to chapter 11 «Management Review» for details of the «Organisational Review Programm – ATO LAPL, PPL, SPL and BPL».

Note: The requirements for non-complex organisations are lower than those for complex organisations.

Ch. 2 ISS1 / REV0 / 18.06.2013

2.1 Purpose of a Management System Ch. 2.1 ISS1/REV0/18.06.2013

The whole set of manuals of an organisation (organisation's documentation) describing philosophies, policies, responsibilities and key processes related to safety, is considered as Management System Documentation.

The purpose of a Management System is to establish a policy, to deploy objectives from this policy and to achieve those objectives by means of the consistent implementation of clearly defined procedures and responsibilities.

A Management System of an organisation can include different sub-systems, related to quality management, safety management, financial management or environmental management.

2.2 Initial Stage

Ch. 2.2 ISS1 / REV0 / 18.06.2013

2.2.1 Duplicated Definitions (undesired redundancies)

The rule making process by EU/EASA considered the aspect of undesired redundant/duplicated definitions whilst establishing the Regulations Air Crew and Regulation Air Operations in a way that the Implementing Rules regarding Organisation Requirements Aircrew (Annex VII, Part-ORA) and Organisation Requirements Air Operations (Annex III, Part-ORO) are mainly identical in the Subpart General Requirements (GEN) and allow the establishment of organisations' documentation without

duplications if clear references are provided.

The key issue for organisations will be to document all general organisational aspects of the company in the Organisation's Management Manual, which is part of the organisation's documentation (Management System Documentation).

2.3 Documentation and Implementation of a Management System Ch. 2.3 ISS1 / REV3 / 09.11.2017

As stated in the Basic Regulation (EC) No 216/2008, the organisation must <u>implement</u> and <u>maintain</u> a <u>Management System</u> to ensure compliance with the essential requirements, to provide safe services and to aim for continuous improvement of this system.

«Implementation» and «Maintenance» of the Management System means that:

- 1. Philosophies, policies, procedures and tasks including responsibilities, accountabilities and course of action must be documented in an appropriate set of manuals and implemented.
 - Organisation's Documentation
 - Management System Documentation
- 2. Employees must be trained based on this documentation.
 - Training
- 3. The qualification and performance of individuals, their adherence to the documentation and last but not least, the outcome of their work must be verified.
 - Checking
 - Compliance Monitoring
 - Testing
- 4. Experiences made shall help to further develop the organisation (including its Management System) as well as the products and services.
 - Feedback
 - Continuous improvement

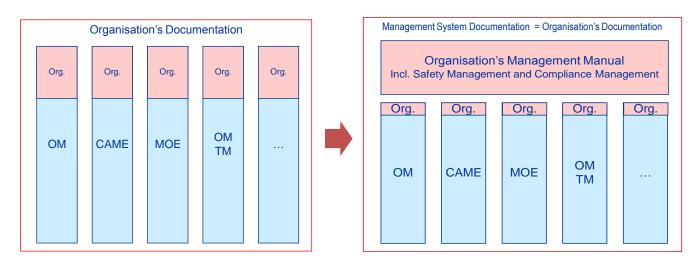
Conclusion

The Management System Documentation consists of the whole set of documents / manuals, which are maintained in an organisation (Organisation's Documentation).

2.4 The Possibility to develop an Organisation's Management Manual Ch. 2.4 ISS1 / REV0 / 18.06.2013

For combined organisations, it is recommended to develop a controlling manual describing the general organisation, responsibilities, procedures, etc., which are common and valid also for other manuals / documents of the organisation. Whereas specific topics related to operations, training, maintenance for example still remain documented in the respective manuals (e.g. MOE, CAME, TM, OM, FSTD) as required by the respective Part.

The controlling manual may be named as Organisation Management Manual (OMM), as this OMM is describing the organisation as a whole. This is also in line with the description and guidelines as published in the «Foreign ATO Approvals User Guide» for ATO Manuals from EASA.



2.4.1 Safety Management System and Compliance Monitoring System ^{Ch. 2.4.1} ISS1/REV3/09.11.2017

The AMC and GM to Regulation Air Operations; Annex III: Part-ORO (Organisation Requirements Air Operations), and to Regulation Aircrew; Annex VII: Part-ORA (Organisation Requirements Aircrew) stipulate within the requirements of the Management System that the organisations also have to establish and maintain:

- 1. a Safety Management System SMS; and
- 2. a Compliance Monitoring System CMS.

The EASA clearly states that these requirements do <u>not impose a separate</u> Safety Management System or a separate Compliance Monitoring System.

Instead of an add-on-approach which would lead to a separate SMS-Manual and a separate CMS-Manual in addition to the Organisation's Management Manual, it is strongly recommended to strive for an integrated system, where safety is one of the parameters to be taken into account with each decision.

An integrated management system enables its managers to recognise and take into account significant influence on their organisation, such as the strategic direction of their business, relevant legislation and standards, internal policies and culture, risks and hazards, resource requirements and the needs of those who may be affected by any aspect of the organisation's operation.

2.5 Processes and Procedures

Ch. 2.5 ISS1 / REV3 / 09.11.2017

The content of the organisation's documentation – independent of the activity of an organisation – consists of philosophies, principles, policies, processes, procedures, tasks and subtasks.

The new regulations in Regulation Air Operations, Annex III: Part-ORO, and Regulation Aircrew, Annex VII: Part-ORA require amongst others, that the lines of responsibility and accountability throughout the organisation and the key processes of the organisations are defined and documented.

To be complete and meaningful, the processes and procedures defined in the manuals must as a minimum, provide information in order to answer the following questions:

- What must be done?
- Who does it?
- How, when and where must it be done?
- Which tools / forms have to be used?

The state-of-the-art to document management systems is to consistently follow the process-oriented approach. This is partially in contradiction with the legal requirements set in force in aviation, which <u>demand</u> a <u>specific structure of the manuals</u>.

Nevertheless and to avoid plain text descriptions, it is recommended to document the required processes by means of flow-charts or – in a simpler but also meaningful way – by means of matrix-diagrams:

Example:

Activity	Remarks	Тооі	Responsibility
Establish audit plan	 Consider changes in organisation legislation infrastructure Consider required scopes as defined in 	 Audit plan (Template) 	Compliance Monitoring Manager
Assign auditors	Consider independency and competence / qualification	List of auditors	Compliance Monitoring Manager
Prepare audit	Establish audit programme	Audit programme (Template)	Auditor
	•	•	

This way of documenting processes and procedures clearly provide information to the reader on how to answer the mentioned questions:

Activity

Remarks

- \rightarrow What must be done?
- Responsibility ->
 - → Who does it?
 - \rightarrow How, when and where must it be done?
- Tool → Which tools / forms have to be used?

It is a matter of fact, that the effectiveness of documents (manuals, concepts, procedures, etc.) is only given, if the «internal customer», the employee, who must adhere to the standards, has easy access to the document and easily understands it!

2.6 Language

Ch. 2.6 ISS1 / REV0 / 18.06.2013

The organisation shall ensure that all personnel are able to understand the language in which those parts of the organisation's documentation – which pertain to their duties and responsibilities – are written. The content of the documentation shall be presented in a form that can be used without difficulty and observes human factor principles.

A respective requirement can be found for Air Operations in Regulation Air Operations, Annex III: Part-ORO: ORO.MLR.100(k) Operations manual – general

As a consequence, the organisation shall establish the documentation in a common language, but also consider the (future) collaboration with other persons and organisations (e.g. contractors). This can lead to the use of different languages in different parts of the organisation's documentation (Management System).

2.7 Structure of the Reference Box System Ch. 2.7 ISS1 / REV3 / 09.11.2017

The reference boxes are structured to address all kind of organisations, even if they have to comply with different requirements.

- At the beginning, there is the part **«General»** requirements for which compliance from all organisations is necessary; and
- there is a further sub-categorisation of organisations (refer to the *terms* in the list below), with which the respective organisation, **in addition to the General requirements**, also have to comply with.
 - Complex
 - Non-Complex
 - *Air Operators* (this term would summarize the AOC holders, NCC and SPO declared operators and the SPO Authorisation holders as listed below)
 - AOC holders (Certified Operators)
 - NCC / SPO (Declared Operators)
 - SPO Authorisation holders (commercial SPO declaring operators doing high risk SPO)
 - Approved Training Organisations $\rightarrow ATO$
 - Approved Training Organisations providing training for the CPL, MPL AND ATPL and the associated ratings and certificates \rightarrow ATO CPL, MPL AND ATPL
 - Approved Training Organisations providing training only for the LAPL, PPL, SPL and BPL and the associated ratings and certificates \rightarrow ATO LAPL, PPL, SPL and BPL
 - FSTD Qualification Certificate Holders → FSTD
 - Aero Medical Centres AeMC

<u>For example</u>: An AOC holder has to comply with the General part, plus the part for AOC holder and, if he is a complex organisation, also with the requirements for Complex.

3 Organisational Elements and Requirements

Ch. 3 ISS1 / REV0 / 18.06.2013

3.1	Forma Ch. 3.1	t of Manual and ISS1/REV3/09.11.2017	I Documents			M/CC EVALUATION METHOD
MS CL TOPIC		ORO.GEN.200 LEGAL REFERENCE	ORO.MLR.100	ORA.GEN.200	ORA.ATO.130	
3-OMM0-00 CL ChOM Ch		OMM, Chapter (MANUAL REFERENCE) «Manual Syste	m and Record of	Edition/Revisions»	

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

General:

- □ Is the manual system presented in a format which can be used without difficulty?
- □ Is there a correct table of contents?
- □ Are the record of revisions / amendments, as well as the list of effective pages available, and/or the list of effective chapters updated?
- □ Are all pages numbered throughout the manual?
- Does every page or chapter provide information about the effective date and the revision status?
- □ Is there an annotation of page layout?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

- The quality of the organisation's documentation and especially the internal processes related to its validation, distribution and control are the determining factors as to the capacity of the organisation to ensure consistent adherence by the employees and to demonstrate effective compliance towards the competent authority.
- Due to the fact, that FOCA does not approve/accept the organisation's documentation as such, but only specific elements thereof, it is important, that the revision status of the specific element is consistent with the issued approval;
- It is recommended that the OMM is prepared in the English language. In addition, the manual or parts thereof may be translated into any other language as required.
- Organisation's documentation can be established as a paper manual and/or as an electronic document (FOCA approval required).
- Explanations and definitions of terms and words needed for the use of document systems shall be directly available in the manual concerned (e.g. Definitions & Abbreviations).
- The manual system shall be presented in a format which can be used without difficulty:
 - The format of the manual shall be uniquely identifiable and the page layout explained;
 - The manual / layout shall be designed in a form that is easy to revise;
 - Chapters shall be separated by dividers;
 - Each chapter shall represent an area of document development and should be divided into subchapters and subsections which are chronologically numbered;
 - The manual shall have the effective date and the revision status on each page concerned;
 - The pages shall be numbered;
 - References must be comprehensible and correspond to the wording used in the different manuals. For example
 - Refer to the Operations Manual Part B, Chapter 4 Performance «En-Route climb limits»

Note: For a document system issued in electronic format, refer to EDP or EFB guidance material

• Record of Edition / Revisions:

Edition No	Revision No	Effective Date	Entered by	Date
1	0	dd.mm.yy	abc	dd.mm.yy
1	1	dd.mm.yy	abc	dd.mm.yy
1	2	dd.mm.yy	abc	dd.mm.yy
2	0	dd.mm.yy	abc	dd.mm.yy

• Record of Temporary Revision:

Temporary Revision Number	Effective Date	Entered by	Date	Validity	Cancellation	Removed by	Date
01	dd.mm.yy	bcd	dd.mm.yy	dd.mm.yy			

• List of effective Chapters:

Chapter	Edition No	Revision No	Effective Date
1.1	1	0	dd.mm.yy
1.1.1	1	2	dd.mm.yy
1.2	1	1	dd.mm.yy

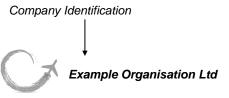
• Highlights of latest Amendment:

Revision	Highlights of Revision
01/01	Implementation of the Organisations Management Manual within the organisations documentation
01/02	Mission, vision and safety policy amended, legal standards and requirements corrected

Example of Page Annotation

• Header

Title of Document / Manual Part



Organisation Management Manual (OMM)

Chapter 2.3 «System of Amendement and Revision»

Chapter, Chapter-Number and Title of Chapter

• Footer

ОММ	01/02	Page 5 of 21
	↑	
Abbreviation of Document	Document Status: Number of Edition/ Revision Status of Page	Page Number and Number of Total Pages of the concerned Chapter

3.2 Electro Ch. 3.2	ISS1/REV0/18.06.2013	M/CC EVALUATION METHOD
MS CL TOPIC	ORO.MLR.100 FOCA Requirement	
3-OMM0-010 CL ChOM ChSeqNo.	Complete Manual System and Company Documentation; and OMM, Chapter 2.X «Organisation Documentation, System of Amendme MANUAL REFERENCE	nt and Revision»

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

General

- □ Are there concepts and procedures for documents in an EDP solution?
- □ Is the accessibility as well as the usability defined and are respective procedures available?
- □ Is the backup system defined and the reliability ensured?
- □ Are there common provisions in regard to physical security?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

- If an organisation decides to present the relevant documentation in an EDP solution and / or if
 records related to the management system are stored by EDP solutions only, the accessibility,
 usability and reliability including the back-up system, shall be described. The documented
 concept should include specific procedures and responsibilities.
- Accessibility:
 - User must have access to hardware, software and data 24 hours a day:
 - User should be supplied with controlled hardware together with the required software and data for operations;
- Reliability including Back-Up System:
 - Data mirroring (data saved onto two separate hard drives) and automatically, a periodical or instant save on another data medium/carrier;
 - It is recommended to include data recovery with periodic spot checks to verify the effectiveness of the back-up;
 - Notice should be made of the compatibility of the EDP solution to the system/software used internally and externally of the organisation;
 - The EDP solution shall be tested, functional and well implemented.
- Usability:
 - The EDP solution should be presented in a form, in which it can be applied / executed without difficulty. Either established with standard software solution or specific training needs to be implemented for all users. Information / files / data should be easily and quickly downloaded and / or up-dated e.g. specific online tools accessible via internet;
- Physical Security:
 - A description of the security policy;
 - A description of the handling and exposure of hardware/software components in general
 - Instructions in the handling of access rights and passwords;
 - Instruction, how the securing of hardware shall take place within the operation;
 - The provision of an anti-virus systems;
 - Information concerning Data corruption and protection;
 - Explanation on preventive use of dedicated Hard Disk Drive partitions.

3.3	Structo Ch. 3.3	ure of the Mana ISS1 / REV1 / 28.04.2015	M/CC EVALUATION METHOD			
MS CL TOPIC		ORO.GEN.200 LEGAL REFERENCE	ORO.AOC.100	ORO.MLR.100	ORA.GEN.200	ORA.ATO.130
3-OMM02-0 CL ChOM Ch		OMM, Chapter 2 System » MANUAL REFERENCE	2.X «Structure of	the Organisatior	n's Documentatio	on / Management

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

General:

□ Is an overview available over the manuals, which are in place to comprehensively define the lines of responsibility and accountability as well as the organisation's key processes?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

- The organisation should state the manuals, which are in place to comprehensively define the lines of responsibility and accountability as well as the organisation's key processes. The illustration by the organisation should provide an overview over the hierarchy and interrelation of the manuals thus creating the Management System of the organisation.
- The organisation's Management System Documentation may be included in a separate manual or in (one of) the manual(s) as required by the applicable Subpart(s).
- It is not required to duplicate information in several manuals. The information may be contained in any of the organisation's manuals (e.g. operations manual, training manual), which may also be combined, and
- the organisation may also choose to document some of the required information in separate documents (e.g. procedures). In this case, it should be ensured that manuals contain adequate references to any documents kept separately. Any such documents are then to be considered an integral part of the organisation's Management System Documentation.

OMM	Organisation's Management Manual	The Organisation's Management Manual documents the management system including all superior aspects of the company such as philosophies, policies, processes, guidelines and responsibilities.
OM A	General / Basic	The Operations Manual Part A comprises all non-aeroplane type related operational policies, instructions and procedures.
OM B	Aeroplane XYZ	Aeroplane type XYZ operating matters, comprises all aeroplane type XYZ related instructions and procedures including minimum equipment list (MEL)
OM B	Aeroplane ABC	Aeroplane type ABC operating matters, comprises all aeroplane type ABC related instructions and procedures including the minimum equipment list (MEL).
OM C	Route/role/area and aerodrome/operating site instructions and information	The Operations Manual Part C comprises all instructions and information for route and aerodromes needed in accordance with the area of operation. It refers to the services of company «Route Manual Sample Service Ltd» and contains procedures for distribution, revision and a description of accessibility and usability.
OM D	Training	The Operations Manual Part D comprises the organisation's training concept, training and checking programme and its associated procedures and instructions.
CAME	Continuing Airworthiness Management Exposition	The Continuing Airworthiness Management Exposition comprises instructions and procedures to be followed by the maintenance management personnel and the subcontracted Part 145 maintenance organisation.

Example of an overview

Non-Complex

The following organisations shall have one single Management System Documentation:

- ATO LAPL, PPL, SPL and BPL;
- AeMCs; and
- FSTD Qualification Certificate Holders only.

3.3.1 Orga Ch. 3.3.1	ISS1/REV3/09.11.2017 M/CC						
MS CL TOPIC	ORO.GEN.200 LEGAL REFERENCE	ORA.GEN.200					
3-OMM02-020 CL ChOM ChSeqNo.	•	al System and Organisation Documentation; and 2.X «Organisation Documentation, System of Amendment	nt and Revision»				

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

General:

- Does the organisation use the possibility to develop an OMM?
- □ If yes, is there a brief description of the purpose and the scope of application of the defined OMM?
- □ Is there an introductory text describing the scope and applicability?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

- For the purpose to gain a certain degree of standard and if the organisation has decided to develop an Organisation Management Manual, it is strongly recommended, to implement the instructions and guidelines of this Certification Leaflet.
- If the organisation decides, due to its size and nature, not to produce an Organisation Management Manual and to pursue an integrated approach within an existing manual system, the instructions, guidelines and principles shall be implemented in the respective chapters of that manual system.
- As part of the Management System the OMM shall contain all common/general definitions related to the organisational requirements. This, in addition to specific definitions provided in other manuals such as OM, CAME, MOE, etc.
- Together with other manuals, the OMM covers:
 - defined lines of responsibility and accountability throughout the organisation;
 - a description of the overall philosophies and principles of the organisation with regard to safety, referred to as safety policy;
 - the identification of aviation safety hazards entailed by the activities of the organisation, their evaluation and the management of associated risks, including taking actions to mitigate the risk and verify their effectiveness;
 - maintaining personnel trained and competent to perform their tasks;
 - documentation of all Management System key processes, including a process for making personnel aware of their responsibilities and the procedure for amending this documentation.

Example introductory text (AOC holder)

This Organisation's Management Manual (OMM) has been created to demonstrate and harmonise companywide processes and systems such as Safety- and Compliance Management. The OMM has been developed with considerations to ANNEX VII to the Regulation on Air Crew, Part ORA and Annex III to the Regulation on Air Operations Part ORO, Management System and relevant Acceptable Means of Compliance (AMC) and Guidance Material (GM). The OMM documents all superior aspects of the company such as philosophies, policies, processes, guidelines and responsibilities.

3.3.2 Ov	view – Basic Structure of an Organisation's Management Manual ISS1 / REV3 / 09.11.2017	EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 LEGAL REFERENCE	
3-OMMToC-025 CL ChOM ChSeq	Organisations Management Manual Structure	

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

□ Are all relevant Chapters of the OMM systematically structured?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

Log of Revision (LoR) List of Effective Chapters or Pages (LoC/LoP) Highlights of latest amendment (HoA) Table of Content (ToC)

Abbreviations, Terms and Definitions (DEF)

OMM Chapter	Subchapter
1 The Organisation and Scope of Activity	 Safety Policy The Organisation – Vision, Mission, Values and Strategy Introduction Scope of Activity Statement of Complexity Relevant Standards and Requirements Compliance Statement Exemption and Derogation Alternative Means of Compliance Locations, Facilities and Infrastructure Power of Authority
 Organisation Documentation, System of Amendment and Revision 	 Overview of the Organisation Documentation System and Form of Distribution System of Amendment and Revision Changes/Elements requiring prior Approval Changes/Elements not requiring prior Approval Control of External/Foreign Documents
Organisational Structure, Duties, Responsibilities and Accountabilities	 Organisational Structure Management Personnel – Name and Contacts Duties, Responsibilities and Accountabilities Accountable Manager Safety Manager Compliance Monitoring Manager
4 Safety Management	 Safety Policy (if not presented at the beginning of the manual) Hazard Identification and Risk Management Flight Data Monitoring Programme Change Management Safety Board (SRB) Safety Action Group (SAG) Safety Performance Monitoring and Measurement Safety Promotion Safety –Studies, -Reviews, -Surveys and Investigation

		Compliance Monitoring Programme
		Audits and Inspections
5	Compliance Management	Auditors and Inspectors
		Findings, Corrective- and Preventive Actions
		Classification of Findings
6	Monogoment Evoluction	Management Evaluation
O	Management Evaluation	Continuous Improvement
7	Departing Scheme	Reporting- and Feedback System
1	Reporting Scheme	Occurrence Reporting
8	Emorgonou Roononoo Blonning	Objectives and Scope
0	Emergency Response Planning	Concept and Planning
		Management System Basic Training
9	Management System Training	Management System Advanced Training
		Management System Continuous Training
10	Record Keeping	Record Keeping and Archiving
10		
		Contracting and Monitoring of Contractors
11	Contracting and Leasing	Leasing
		Code-Share Agreement

Note: The OMM structure above is a guidance for a logical sequence for the required content of a management system documentation. An organisation may deviate according to its size, complexity and scope of activities.

3.4 Syste	em of Amendmei ISS1/REV3/09.11.2017	M/CC EVALUATION METHOD			
	ORO.GEN.130 ORO.SPO.115 LEGAL REFERENCE	ORO.MLR.100	ORO.GEN.130	ORA.GEN.130	ORA.GEN.200
3-OMM02-030 CL ChOM ChSeqNo		2.X «System of A	mendment of Ma	anuals»	

- **APP:** For AOC holders, AeMCs and ATOs prior approval by the competent authority is required for any changes to the organisation's procedure, describing how changes not requiring prior approval will be managed and notified to the competent authority. Consequently, the complete system of amendment and revision, established for each manual concerned, must be approved by the competent authority.
- **APP:** For SPO Authorisation holders (only) the changes affecting the scope of the authorisation shall require prior approval.

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

AOC holders / AeMC / ATO / SPO Authorisation holders:

- □ Is there a comprehensive amendment procedure, valid either for the whole Management System Documentation or for the individual manuals/parts, as specifically required?
- □ Is there a reference to the applicable system of amendment and revision?
- □ Is there a log of revisions/amendments and a record of revision highlights?
- □ Is there a list of effective pages/list of effective chapters?
- □ Are the different types of revisions which may be carried out defined (standard revision, temporary revision, urgent revision)?
- □ Is there a statement that revisions/amendments are to be processed and concluded entirely before new changes are initiated?
- □ Does this revision/amendment procedure ensure compliance verification prior to the submission of the document to FOCA?

Changes requiring prior approval or not requiring prior approval

- Does/do the procedure(s) consider both kind of changes: changes needing prior approval and changes not needing prior approval by the competent authority?
- □ In the case of revisions/amendments not affecting elements requiring prior approval, is there a statement that the compliance manager ensures, that no element requiring prior approval is included?

AOC holders:

□ For changes requiring prior approval – does/do the procedure(s) consider to conduct a safety risk assessment to be provided to the competent authority upon its request?

AOC holders / SPO Authorisation holders:

- Does the operator have processes for the production of manuals and any other documentation required and associated amendments?
- □ Is the operator capable of distributing operational instructions and other information without delay?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

- The quality of the organisation's documentation and especially the internal processes related to its validation, distribution and control are determining factors as to the capacity of the organisation in order to ensure consistent adherence by the employees and to demonstrate effective compliance towards the competent authority.
- The amendment procedure shall ensure that unforeseen changes should be notified at the earliest opportunity, in order to enable the competent authority to determine compliance with the applicable requirements and to amend the certificate and related terms of approval if necessary.
- The amendment procedure must consider all interactions with the competent authority and effective distribution:
 - revisions and amendments are to be processed and concluded entirely before new changes are initiated and submitted to FOCA;
 - submissions to FOCA shall only take place after internal compliance verification;
 - statement that the documentation sent to the competent authority has been verified and found in compliance with the applicable requirements;
 - insertion of effective date after acceptance / approval;
 - provision of final edition to authority;
 - effective distribution of manual without delay to employees concerned;
 - ensuring awareness of personnel regarding the changes that are relevant to their duties;
 - ensuring that all personnel have easy access to the portions of the OMM that are relevant for their duties.
- The amendment procedure could be limited to the OMM or include a statement for which manual system it is applicable.
- A clear reference to the applicable system of amendment and revision for each part/manual/ document is necessary.
- The document responsible/owner must be clearly defined. Distribution of owner and responsibilities is idealyy shown in a simple matrix.

Types of Revisions (Definitions)

Depending on the situation, the revisions may be carried out as:

• Standard revision:

Regularly and permanently performed changes on specific subjects in Parts, Chapters and/or Subchapters;

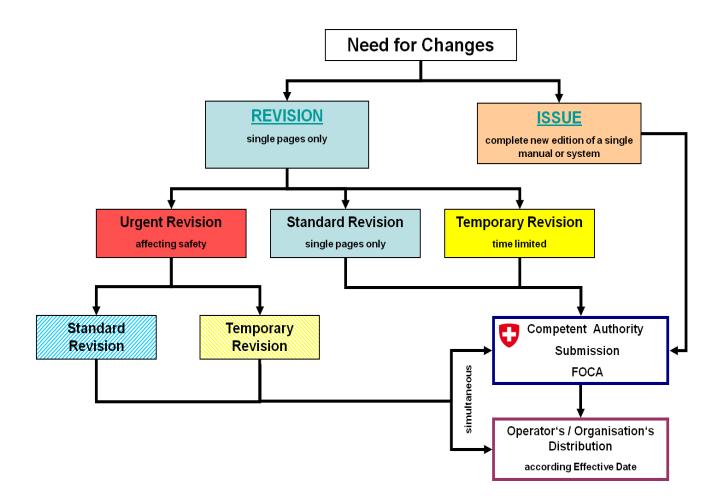
Temporary Revision

Time limited changes or amendments, published additionally to the revision in effect.

Temporary Revisions are to be cancelled after expiration or if no longer valid, appropriate or applicable. Temporary revisions are printed on yellow paper. The start and end date of the temporary revision is printed on the lower left-hand corner;

• Urgent Revision

When immediate amendments or revisions are required in the interest of safety, they may be published and implemented immediately, provided that any required approval has been applied for and FOCA is supplied with the intended revision. Immediate revisions may be published time limited as Temporary Revision or Standard Revision.



Example Responsibility Matrix

Document	Owner	Owner Content	Format	Content Owner								
				ACM	SM	CMM	NP FO	NP CT	NP GO	NP CAM	SECO	
Management System	СММ	Complete Organisation Documentation	EDP/Text- Paper	x								
OMM	ACM	Safety Management	EDP		x							
		Compliance Monitoring	EDP/Text- paper			x						
		Occurrence Reporting	EDP/Text- paper				X					
OM A	NPFO	 Flight Procedures					X					
		Ground Operations	Text-Paper						X			
		Operational Control	Text-Paper						x			
ОМ В Туре А	NPFO	Operating Procedures					X					
ОМ В Туре В	NPFO	Operating Procedures					Х					
OM C	NPFO	Route and Aerodrome					Х					
OM D	NPCT	Flight Crew Training						x				
		Cabin Crew Training						x				
		Management System Training				x						
		Security Training									x	
CAME	CAM									X		

Example Revision/Amendment Process AOC Holders

Step	Remarks	ΤοοΙ	Responsibility
Monitoring and Change Identification	 Collection of suggestions and discrepancies Findings, corrective and preventive actions Changes in relevant standards and Requirements Change Management 	 Rules and regulations Audit- and Inspection Reports Suggestions Form 	Document Owner
Identification of elements requiring prior approval or not requiring approval	 Identify elements requiring prior approval/acceptance Select administrative requirements for submission accordingly Ensure Compliance Check prior to FOCA submission 	List of Acceptances and Approvals or Compliance List	Document Owner
Change Initialisation	 Identify/define type of revision: Revision or new edition? Standard Revision? Temporary Revision? Urgent Revision? Ensure that no actual revision/amendment is in process and/or pending by FOCA 	 OMM, Chapter 2 «Organisation Documentation, System of Amendment and Revision 	Document Owner
Establish draft of revision/amendment	 Edit and establish change Mark any changes to previous version by a vertical line on the border of the page Eliminate change indicators from the previous revision of that page 	Manual System	Document Owner
Compliance Check	 Verify compliance, compatibility and completeness with standards, requirements and regulations, harmonisation with other documents, viability & appropriateness conduct assessment of risks, if required Verify the requirement of a detailed audit ensure traceability of changes Check completeness In case of changes not requiring prior approval, ensure that no element requiring prior approval is included 	 Relevant Requirements and Standards Cross reference tables Risk Assessment in case of Flexibility Provisions or Alternative Means of Compliance (AltMoC) 	Compliance Monitor Manager Document Owner
FOCA Submission with elements requiring prior approval	 Prepare submission in accordance with the administrative requirement changes requiring prior approval/acceptance: submit revised pages as draft at least 30 days before the date of the intended changes in case of planned change of a nominated person: inform 	 FOCA administrative requirements FOCA Homepage Form 44.20/PRA/Compliance List Proposed revision/ amendment/ manual/document For nominated persons: Form 44.20 and CV 	Nominated Person of the department/Divisi on

Step	Remarks	ΤοοΙ	Responsibility
	 FOCA at least 20 days before the date of the proposed change in case of unforeseen changes: inform FOCA at the earliest opportunity 	 In Case of flexibility provisions/alternative means of compliance: Application Full description proposed revision amendment including documented assessment demonstrating compliance 	
FOCA Submission without any element requiring prior approval	 Prepare submission in accordance with the administrative requirements Confirm that no elements requiring prior approval are included submit revised pages at least 30 days before the date of the intended changes in case of unforeseen changes: inform FOCA at the earliest opportunity 	 FOCA administrative requirements FOCA Homepage Form Notification of Manual Revision (NMR)/Compliance List revised/amended/ manual/document/pages 	Nominated Person of the department/Divisi on
Document Evaluation	 Apply corrective actions Agree implementation or conditions with FOCA Implement FOCA prescribed conditions under which the organisation may operate during the implementation Agree effective Date with FOCA 	 Document Evaluation Report Emails Phone 	Document Owner FOCA
Distribution	 If approval or acceptance by FOCA required, initiate distribution and implementation only after formal approval or approval/acceptance is received by FOCA Add effective date Complete List of Highlights of Revision Poss. Up-date list of alternative means of compliance / flexibility provisions distribute new edition/revision/amendment (including FOCA) together with the Letter of Revision ensure withdrawal of old version documents if necessary instruct / inform employees 	 Distribution list OMM, Chapter 2 «Organisation Documentation, System of Amendment and Revision 	Employee XX
Up-date document / manual	 enter revision/amendment correctly sign and date the change in the Record of Revision send the signed Letter of Revision to the document owner 	 Revision/Amendment Letter of Revision 	Document user
Monitor	 Collect Letter of Revision Monitor the reception and completion of the revision of each document holder 	 Letter of Revision Excel File «Monitoring of Company Documents» 	Document owner

3.5 Chang	es / Elements requiring prior Approval	M/CC EVALUATION METHOD							
MS CL TOPIC	ORO.GEN.130 ORA.GEN.130 ARO.GEN.330 LEGAL REFERENCE								
3-OMM02-035 ChOM ChSeqNo.	OMM, Chapter 2.X «Changes / Elements requiring prior Approval MANUAL REFERENCE	»							
	olders, AeMCs and ATOs any of the elements of the operator's/orga all require prior approval by the competent authority; and	anisation's management							
	olders, AeMCs and ATOs the scope of the certificate or the terms or ganisation requiring prior approval.	f approval of an							
	olders any changes to the accountable manager specified in ORO. ate or terms of approval/approval schedule attached to it, require pri								
	uthorisation holders the changes affecting the scope of the authoris or approval.	ation operations shall							
IF APPLICABLE, BRIEF DES	SCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL								
General:									
Is there a process which covers elements requiring prior approval or is it included within the system of amendment and revision?									
□ Is there a re	□ Is there a reference to the «Compliance List» or «List of Acceptance and Approvals»?								
Does the an changes tak	nendment procedure consider that the application needs to be a place?	e submitted before any							

Does this revision/amendment procedure ensure compliance verification prior to the submission of the document to FOCA?

- Does this amendment procedure ensure that the application for the amendment of an operator / organisation certificate should be submitted at least 30 days before the date of the intended change?
- □ Does this amendment procedure ensure that in case of a planned change of a nominated person, the operator should inform the competent authority at least 20 days before the date of the proposed change?
- □ Does this amendment procedure ensure that unforeseen changes should be notified at the earliest opportunity, in order to enable the competent authority to determine continued compliance with the applicable requirements and to amend, if necessary, the operator certificate and related terms of approval?
- □ Is there a statement, that amendments requiring prior approval may only be implemented upon receipt of a formal approval?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

- Refer also to FOCA Certification Leaflet (CL) Management System (MS), Chapter 3.4 «System of Amendment and Revision.
- Changes requiring prior approval may only be implemented by the organisation upon receipt of formal approval by the competent authority.
- To provide an overview of the elements requiring prior approval, the process should include a reference to the list of «Acceptance and Approvals» or «Compliance List».
- The process shall include the step that the compliance manager checks compliance with the valid regulations and the FOCA published alternative means of compliance, certification leaflets and/or guidance material, as applicable.

- The organisation shall integrate the handling of changes/elements requiring prior approval into the system of amendment and revision process which describes the administrative procedures with FOCA.
 - For example, refer to CL MS, Chapter 3.4 «System of Amendment and Revision».
- The amendment procedure must specify, that the application is submitted before any changes take place.
- The operator/organisation shall ensure that the relevant administrative procedure in terms of forms is included within the amendment process.
- The application for the amendment of a certificate should be submitted at least 30 days before the date of the intended changes.
- The amendment procedure shall ensure that in the case of a planned change of a nominated person, the operator should inform the competent authority at least 20 days before the date of the proposed change.

3.6 Cha	anges / Elements NOT requiring prior Approval SS1 / REV3 / 09.11.2017	M/CC EVALUATION METHOD					
MS CL TOPIC	ORO.GEN.130 ORA.GEN.130 ARO.GEN.310 ARA.GEN.310 LEGAL REFERENCE						
3-OMM02-040 ChOM ChSeqNo.	OMM, Chapter 2.X «Changes / Elements not requirement prior Appr MANUAL REFERENCE	oval»					
APP. For AOC holders, AcMCs and ATOs all sharpes not requiring prior energy of shall be managed and							

APP: For AOC holders, AeMCs and ATOs all changes not requiring prior approval shall be managed and <u>notified</u> to the competent authority as defined in the procedures approved by the competent authority.

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

General:

- □ Is there a comprehensive procedure which defines the handling of elements not requiring prior approval?
- Does/do the procedure(s) differ between changes requiring prior approval and changes not requiring prior approval by FOCA?
- Does the procedure include guidance on how to distinguish between changes requiring prior approval and changes not requiring prior approval?
- □ Is there a statement that revisions/amendments are to be processed and concluded entirely before new changes are initiated?
- Does this revision/amendment procedure ensure compliance verification prior to the submission of the document to FOCA?
- □ Is there a requirement that the application needs to be submitted before any amendment/revision takes place, even for those elements not requiring prior approval?
- □ Is there a statement that the compliance manager ensures, that no element requiring prior approval is included?
- Does the procedure include that the revision/amendment is to be submitted to FOCA at least 30 days prior to the planned publication;

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

- Refer also to FOCA Certification Leaflet (CL) Management System (MS), Chapter 3.4 «System of Amendment and Revision».
- The procedures which handles changes not requiring prior approval needs to be approved by FOCA.
- The organisation shall integrate the handling of changes/elements **not** requiring prior approval into the system of amendment and revision process which describes the administrative procedures with FOCA.
 - For example, refer to CL MS, Chapter 3.4 «System of Amendment and Revision».
- Processes related to the handling of changes not requiring prior approval shall include at least the following steps:
 - that the compliance manager checks compliance with the valid regulations and the FOCA published alternative means of compliance, certification leaflets and/or guidance material as applicable; and
 - verification that no element requiring prior approval is included;
 - verification that no actual revision/amendment of the concerned part/manual/document is in process and/or pending at FOCA.
- In order to identify the elements not requiring prior approval, the procedure should include a reference to the list of «Acceptance and Approvals» or «Compliance List». Such

revisions/amendments are to be submitted to FOCA at least 30 days prior to the planned publication accompanied by:

- The «Notification Manual Revision Form (NMR)»;
- the compliance list, appropriate to the concerned revision/amendment;
- a statement by the Accountable Manager (ACM) and the respective responsible nominated person for the planned revision/amendment, that the content of the revision/amendment is in accordance with:
 - the operational need;
 - o the general compliance statement and safety policy; and
- the ACM's and the respective nominated person's releases of the revision/amendment.

3.7	Docun Ch. 3.7	nent Control of external / foreign Documents ISS1 / REV3 / 09.11.2017	M/CC EVALUATION METHOD
MS CL TOPIC		ORO.GEN.200 ORA.GEN.200 LEGAL REFERENCE	
3-OMM02-045 CL ChOM ChSeqNo.		OMM, Chapter 2.X «Control of external / foreign Documents» MANUAL REFERENCE	

General:

□ Is there a process for the amendment of defined foreign documents, which lists the different kind of external documents, the responsible persons and their activities?

□ Are updated versions of the relevant documents available?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

- External documents are established and amended by third parties (e.g. law, international standards, manufacturers' documents, etc.). They have an impact on the organisation's activities and therefore often also on the organisation's standards.
- The amendment process shall ensure that new issues and revisions of foreign documents are identified.
- The process should specify who is responsible to identify changes in external (foreign) documents and who is in charge to identify the impact on the organisation's activities and specific standards. Major elements of such processes are :
 - Identify new issues and changes in external documents
 - Verify the impact on the companies processes
 - Trigger the amendment process
 - Ensure that old versions of documents are stored to ensure traceability
- Examples of external documents are: Aircraft Flight Manual, MMEL, Airworthiness Directives, Service Bulletins, commercially produced manuals or any kind of legal documents such as EU Regulations or EASA AMCs.
- If the organisation decides to use material from another source for their Manual System they should either copy the applicable material and include it directly in the relevant part of the Manual, or the Manual should contain a statement, that the specific Manual(s) (or parts thereof) may be used instead.

Example of relevant external / foreign documents with allocated responsibility

Legal Reference	Issue	Subject	Responsible
Basic Regulation (EC) No 216/2008	20.02.2008	Common rules in the field of civil aviation and establishing a European Aviation Safety Agency	Accountable Manager
Commission Regulation (EU) No 965/2012	05.10.2012	Technical requirements and administrative procedures related to air operations Annex I: DEF; Annex II: Part-ARO; Annex III: Part-ORO; Annex IV: Part- CAT; Annex V: Part-SPA; Annex VI: Part-NCC; Part VII: Part-NCO; Annex VIII: Part-SPO;	Flight Operations
Commission Regulation (EU) No 1178/2011	03.11.2011	Technical requirements and administrative procedures related to civil aviation aircrew Annex I: Part-FCL; Annex II: Conversion of existing national licences and ratings; Annex III: Acceptance of Licences of third countries; Annex IV: Part-MED	
Commission Regulation (EU) No 290/2012 (amending regulation 1178/2011)	30.03.2012	Technical requirements and administrative procedures related to civil aviation aircrew Annex V : Part-CC ; Annex VI : Part- ARA ; Annex VII : Part-ORA	
Regulation (EU) No 376/2014 of the European Parliament and of the Council	03.04.2014	On the reporting, analysis and follow- up of occurrence in civil aviation	Regulation (EU) No 376/2014 of the European Parliament and of the Council
Commission Implementing Regulation (EU) 2015/1018	29.06.2015	Laying down a list classifying occurrences in civil aviation to be mandatorily reported according to Regulation (EU) No 376/2014	Commission Implementing Regulation (EU) 2015/1018
Regulation (EU) No 996/2010	20.10.2010	Investigation and prevention of accidents and incidents in civil aviation	
AMC & GM to Regulation Air Operations Annex III / Part-ORO	25.11.2012	Regulation Air Operations Annex III / Part-ORO: «Organisation Requirements Air Operations: Acceptable Means of Compliance (AMC) and Guidance Material (GM) to Part-ORO	
AMC & GM to Regulation Air Crew Annex VII / Part-ORA	19.04.2012	Regulation Air Crew Annex VII / Part- ORA: «Organisation Requirements Air Crew: Acceptable Means of Compliance (AMC) and Guidance Material (GM) to Part-ORA	

3.8 Orga Ch. 3.8	Inisational Strategic Planning ISS1 / REV0 / 18.06.2013 CA EVALUATION METHO					
MS CL TOPIC	Best practice out of strategic management LEGAL REFERENCE					
3-OMM01-050 CL ChOM ChSeqNo	OMM, Chapter 1.X «The Organisation – Vision, Mission, Values and Stramanual Reference	ategy»				

□ Is there a statement regarding the organisation's Vision, Mission and Values?

□ Is the statement consistent with the Safety Policy?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

- Strategic planning is an organisation's process of defining its strategy or direction, and making sustainable decisions on allocating its resources to pursue the predefined strategy. In order to determine the direction of the organisation, it is necessary to understand its current position and the possible options through which it can pursue a particular course of action. Generally, strategic planning deals with the following three key questions:
 - What do we do?
 - For whom do we do it?
 - How do we excel our competitors?
- In many organisations this is viewed as a process for determining the direction of an
 organisation over the next year (short term) or more typically over the next 3 to 5 years (longterm).
- The key components of strategic planning include an understanding of the Organisation's Vision, Mission, Values and Strategies. This is often as well referred to as the Organisation's Vision and Mission Statement. The terms Vision, Mission, Values and Strategy will be further explained:
 - **Vision:** Outlines what the organisation wants to be, or how it wants the world in which it operates to be. This is an idealised view of the world. It is a long-term view and concentrates on the future. It can be emotive and is a source of inspiration.
 - **Mission:** Defines the fundamental purpose of an organisation, concisely describing why it exists and what it does to achieve its vision.
 - Values: Believes that are shared among the stakeholders and employees of an organisation. Values drive an organisation's culture, priorities and the way an organisation is operating. Values provide a framework in which decisions are made.
 - **Strategy:** A strategy is a roadmap which is the path chosen to work towards the final vision. The most important part of implementing the strategy is ensuring the company is going in the right direction. Common tools to achieve a strategy are goals for which the organisation is striving and policies by which the organisation is seeking to get there.
- For an organisation's vision and mission to be effective, they must become assimilated into the organisation's culture. They should also be assessed internally and externally. The internal assessment should focus on how employees interpret their mission statement. The external one is valuable since it offers a different perspective. The discrepancies between these two evaluation methods can provide valuable information into their effectiveness.

Example for an Organisational Vision, Mission and Value

Our Vision	 Be the leading and most successful VIP Business Operator: We are constantly innovating our services, taking the smallest detail into account in our pursuit of excellence and perfection.
Our Mission	 Sophisticated, reliable and discreet travel experience around the world: We are providing a full range of high quality hospitality and travel experience for our distinguished guests. We are always one step ahead and anticipating our distinguished guests requests or desires throughout the entire service chain.
Our Values	 Safety is paramount and the top priority in all our endeavours: We are committed to a sustainable economical and ecological operation. We are social, respectful and esteem cultural differences. We believe in strong team behaviour and highly motivated employees through individual responsibility.

3.9 The Company and its Scope of Activity

Ch. 3.9 ISS1 / REV3 / 09.11.2017

3.9.1 Scope Ch. 3.9.1	of Activity ISS1/REV3/09.11.2017				M/CC EVALUATION METHOD
	ORO.GEN.125 ORA GEN.125 LEGAL REFERENCE	ORO.GEN.200 ORA.GEN.200	ORO.AOC.100 ORA.AeMC.200	ORO.DEC.100	
3-OMM01-055 CL ChOM ChSeqNo.	OMM, Chapter 7	1.X «Scope of Act	tivity – AOC/ATC	D/AeMC Certificate Nur	nber»

APP: For AOC holders, AeMCs and ATOs the scope of the certificate or the terms of approval of an organisation requiring prior approval.

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

General:

- □ Are the different types of activities clearly defined (either in the OMM or in other relevant manuals)?
- □ For AOC holders, AeMCs and ATOs: Are the privileges and detailed scopes of activities defined for which the organisation seeks certification or is certified for?
- □ For NCC or SPO declared operator: Are the privileges and detailed scopes of activities defined according what the operator declared and/or is seeking authorisation or is authorised?
- □ Are the scopes of activities defined and consistent with the terms of any approval(s) held?

AOC holder:

□ Does the operator provide a description of the proposed area and type of operation, including the type(s), and number of aircrafts to be operated and the respective specific approvals?

ATO:

□ Does the organisation provide a list of approved training courses and – if already approved – the number of the certificate?

FSTD:

□ Does the organisation provide a list of FSTD(s) and – if already certified - the FSTD Qualification Certificate Number(s)?

AeMC:

□ Does the AeMC provide a list with the privileges and the scope of activities as listed in the terms of approval and – if already approved – the assigned number of the AeMC?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

- There shall be a description of the types of activities conducted by the organisation: e.g. CAT operations, NCC Operations, commercial high risk SPO, continuing airworthiness management organisation, maintenance organisation, approved training organisation, Aero Medical Centre etc.
- The detailed list of activities (e.g. specific approvals, type of training provided) should be defined in the respective manuals (e.g. Training Manual, MOE). As a consequence, a respective cross-reference from the OMM to the respective manual (e.g. Training Manual, MOE) must be established.

• The approval certificate number or declaration number shall be included in the title of this chapter.

3.9.2 The Co	ISS1/REV3/09.11.2017	M/CC EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 LEGAL REFERENCE	
3-OMM01-060 CL ChOM ChSeqNo.	OMM, Chapter 1.X «Statement of Complexity» MANUAL REFERENCE	

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

- □ Is the organisation defined, either as non-complex or complex?
- □ Is this categorisation appropriate?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

- The organisation shall be categorised in accordance with its scope, complexity, terms of risk criteria, full-time equivalent and terms of approval.
- If at least one of the branches (e.g. AOC, or ATO, or FSTD, etc.) within the organisation is complex then the whole organisation is to be considered as complex.
- An organisation should be considered as complex when it has a workforce of more than 20 fulltime equivalents (FTEs) involved in the activity subject to Regulation (EC) No 216/2008 and its Implementing Rules.
- Organisations with up to 20 FTEs involved in the activity subject to Regulation (EC) No 216/2008 and its Implementing Rules may also be considered complex <u>based on an assessment</u> comprising the following factors:
 - in terms of complexity, the extent and scope of contracted activities subject to the approval/declaration;
 - in terms of risk criteria, the extent of the following:
 - I. operations requiring a specific approval;
 - II. high risk commercial specialised operations;
 - III. operations with different types of aircraft used; and
 - IV. operations in challenging environment (offshore, mountainous area, etc.).
- The following organisations should <u>always</u> be considered as <u>non-complex:</u>
 - ATO LAPL, PPL, SPL and BPL;
 - FSTD Qualification Certificate Holders only; and
 - Aero-Medical Centres (AeMCs).

Example statement of complexity for complex organisation

>20FTE	<20FTE	PBN AR	LVO	ETOPS	нно	HEMS	NVIS	DG	Types	Mount.
YES	-	-	-	-	YES	YES	YES	YES	1	YES

Due to the size of the company and the kind of activities listed under the chapter «scope of activity» and the table above, the Organisation has to be considered complex.

Example statement of complexity for non-complex organisation

>20	TE	<20FTE	PBN AR	LVO	ETOPS	нно	HEMS	NVIS	DG	Types	Mount.
-		Х	NO	NO	NO	NO	NO	NO	NO	1	YES

Due to the size of the company and the kind of activities listed under the chapter «scope of activity», the table above and the associated risk assessment, in which the hazards for mountainous area are addressed, the organisation can be considered as non-complex.

		Int legal Requirements and Standards ISS1/REV3/09.11.2017	M/CC EVALUATION METHOD
MS CL TOPIC		ORO.GEN.200 ORO.AOC.100 ORA.GEN.200 LEGAL REFERENCE	
3-OMM01-065 CL ChOM ChSeqNo.		OMM, Chapter 1.X «Relevant Standards and Requirements» MANUAL REFERENCE	

General:

- Does a list of relevant legal requirements / regulations exist?
- Did the organisation provide the competent authority with a statement that all the submitted documentation was verified and was found in compliance with the applicable requirements?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

• The organisation shall list all legal requirements and standards relevant to its activities.

Example for an Organisation, holding an AOC, a NCC- or a SPO DEC, a SPO Authorisation, an ATO or FSTD Qualification Certificate

The company ensures the compliance with the following legal requirements (including their amendments):

- **Basic Regulation** (EC) No 216/2008 of 20/02/2008 on common rules in the field of civil aviation and establishing a European Aviation Safety Agency;
- Commission Regulation (EU) No 965/2012 of 05/10/2012 laying down technical requirements and administrative procedures related to **air operations**;
- Commission Regulation (EU) No 1178/2011 of 03/11/2011 laying down technical requirements and administrative procedures related to civil aviation **aircrew**;
- Commission Regulation (EU) No 290/2012 30/03/2012 (amending Regulation (EU) No 1178/2011) laying down technical requirements and administrative procedures related to civil aviation **aircrew**;
- Commission Regulation (EU) No 1321/2014 of 26 November 2014 on the continuing airworthiness of aircraft and aeronautical products, parts and appliances, and on the approval of organisations and personnel involved in these tasks;
- Commission Regulation (EU) No 376/2014 of the European Parliament and of the Council of 3 April 2014 on the reporting, analysis and follow-up of occurrence in civil aviation;
- Commission Implementing Regulation (EU) 2015/1018 of 29 June 2015 laying down a list classifying occurrences in civil aviation to be mandatorily reported according to Regulation (EU) No 376/2014;

Example for Air Operator Certificate (AOC) holder only, operating with cabin crew

- **Basic Regulation** (EC) No 216/2008 of 20/02/2008 on common rules in the field of civil aviation and establishing a European Aviation Safety Agency;
- Commission Regulation (EU) No 965/2012 of 05/10/2012 laying down technical requirements and administrative procedures related to air operations;
- Commission Regulation (EU) No 1178/2011 of 03/11/2011 laying down technical requirements and administrative procedures related to civil aviation **aircrew**;

- Commission Regulation (EU) No 290/2012 30/03/2012 (amending Regulation (EU) No 1178/2011) laying down technical requirements and administrative procedures related to civil aviation **aircrew**;
- Commission Regulation (EU) No 1321/2014 of 26 November 2014 on the **continuing airworthiness** of aircraft and aeronautical products, parts and appliances, and on the approval of organisations and personnel involved in these tasks;
- Commission Regulation (EU) No 376/2014 of the European Parliament and of the Council of 3 April 2014 on the reporting, analysis and follow-up of **occurrence** in civil aviation;
- Commission Implementing Regulation (EU) 2015/1018 of 29 June 2015 laying down a list classifying occurrences in civil aviation to be mandatorily reported according to Regulation (EU) No 376/2014;

Example for Approved Training Organisation only

- **Basic Regulation** (EC) No 216/2008 of 20/02/2008 on common rules in the field of civil aviation and establishing a European Aviation Safety Agency;
- Commission Regulation (EU) No 1178/2011 of 03/11/2011 laying down technical requirements and administrative procedures related to civil aviation **aircrew**;
- Commission Regulation (EU) No 290/2012 30/03/2012 (amending Regulation (EU) No 1178/2011) laying down technical requirements and administrative procedures related to civil aviation **aircrew**;
- Commission Regulation (EU) No 1321/2014 of 26 November 2014 on the continuing airworthiness of aircraft and aeronautical products, parts and appliances, and on the approval of organisations and personnel involved in these tasks;
- Commission Regulation (EU) No 376/2014 of the European Parliament and of the Council of 3 April 2014 on the reporting, analysis and follow-up of **occurrence** in civil aviation;
- Commission Implementing Regulation (EU) 2015/1018 of 29 June 2015 laying down a list classifying occurrences in civil aviation to be mandatorily reported according to Regulation (EU) No 376/2014;

Example FSTD Qualification Certificate Holder only

- **Basic Regulation** (EC) No 216/2008 of 20/02/2008 on common rules in the field of civil aviation and establishing a European Aviation Safety Agency;
- Commission Regulation (EU) No 290/2012 30/03/2012 (amending Regulation (EU) No 1178/2011) laying down technical requirements and administrative procedures related to civil aviation **aircrew**;
- Commission Regulation (EU) No 1321/2014 of 26 November 2014 on the continuing airworthiness of aircraft and aeronautical products, parts and appliances, and on the approval of organisations and personnel involved in these tasks;
- Commission Regulation (EU) No 376/2014 of the European Parliament and of the Council of 3 April 2014 on the reporting, analysis and follow-up of occurrence in civil aviation;
- Commission Implementing Regulation (EU) 2015/1018 of 29 June 2015 laying down a list classifying occurrences in civil aviation to be mandatorily reported according to Regulation (EU) No 376/2014;
- Any Primary reference documents such as CS-FSTD A/H, JAR-FSTD A/H etc., as applicable to the device(s) operated;
- Any applicable local regulation for FSTD Installations according to ORA.GEN.215 & ORA.FSTD.115;
- ARINC 433 for FSTD compliance measurement.

Example for Aero Medical Centre (AeMC)

- **Basic Regulation** (EC) No 216/2008 of 20/02/2008 on common rules in the field of civil aviation and establishing a European Aviation Safety Agency;
- Commission Regulation (EU) No 1178/2011 of 03/11/2011 laying down technical requirements and administrative procedures related to civil aviation **aircrew**;
- Commission Regulation (EU) No 290/2012 30/03/2012 (amending Regulation (EU) No 1178/2011) laying down technical requirements and administrative procedures related to civil aviation **aircrew**;
- Commission Regulation (EU) No 376/2014 of the European Parliament and of the Council of 3 April 2014 on the reporting, analysis and follow-up of **occurrence** in civil aviation;
- Commission Implementing Regulation (EU) 2015/1018 of 29 June 2015 laying down a list classifying occurrences in civil aviation to be mandatorily reported according to Regulation (EU) No 376/2014;

	Compl Ch. 3.11	iance Statement ISS1/REV3/09.11.2017	M/CC EVALUATION METHOD
MS CL TOPIC 3-OMM01-070 CL ChOM ChSeqNo.		ORO.GEN.200 ORO.AOC.100 ORA.GEN.200 LEGAL REFERENCE	
		OMM, Chapter 1.X «Compliance Statement» MANUAL REFERENCE	

General:

□ Is there a statement, signed by the accountable manager, which confirms that the organisation will continuously work in accordance with the applicable requirements and the organisation's documentation as required by the respective Annexes?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

Master text

The undersigned declares, that

- our organisation's documentation (Management System) has been established and will be maintained in full compliance with the provisions of the legal requirements as stated in Chapter 1.X «Relevant Standards and Requirements» and that it complies with the terms and conditions of the company's Approval(s) and Certificate(s);
- I am responsible for the content of the Management System and confirm, that besides the requirements stated in Chapter 1.X «Relevant Standards and Requirements» all relevant national rules and regulations as well as ICAO standards and procedures are reflected in the different chapters;
- I am familiar with and understand the content and meaning of the Management System and will perform all duties in full accordance with it;
- the detailed knowledge of the relevant content is mandatory to all personnel concerned and we commit to make sure that they comply with the instructions given in the Management System and;
- I am aware of the fact, that FOCA does not approve/accept the organisation's documentation as such, but only specific elements thereof, as indicated on the respective compliance list. The responsibility for the completeness and the correctness of the organisation's documentation remains therefore solely with the organisation.

Accountable Manager:

Name:_____

Signature:_____

3.12 Flexik	bility Provision	M/CC / M/IN
Ch. 3.12	ISS1 / REV0 / 18.06.2013	EVALUATION METHOD
MS CL TOPIC	216/2008 Art. 14 LEGAL REFERENCE	
3-OMM01-075 CL ChOM ChSeqNo.	OMM, Chapter 1.X «Exemption and Derogation» MANUAL REFERENCE	
	otion or Derogation from (EC) 216/2008 (Basic Regulation) and it prior approval by the competent authority	s Implementing Rules
APP: Procedure	es related to the process of an Exemption or Derogation are subj	ect to prior approval
IF APPLICABLE, BRIEF D	ESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL	
□ Are there p	rovisions related to an exemption or derogation?	
	tatement, that the organisation must not implement an Exe ving received the formal approval?	emption or Derogation
Does the a	ssessment of Exemption/Derogation include a risk assessr	ment?
□ Is there a li	st and brief description of approved Exemptions/Derogatio	ns?
□ Is the list in	conformity with the granted approvals?	
QUESTION FOR COMPLIA	ANCE VERIFICATION AND SELF ASSESSMENT	
	ty Provision is an exemption or derogation from (EC) 216/2 nenting Rules.	008 (Basic Regulation) and
	nisation needs an exemption or derogation with or without I e same level of safety, the organisation has to provide FOC	
	en application;	
	description of the exemption/derogation,	
	oposed revision/amendment or temporary amendment of t ing the exemption or derogation; and	he manual system
- A docu	umented assessment including risk-assessment, demonstra 6/2008 and its Implementing Rules are met.	ating that Regulation (EC)
	y prescribe conditions under which the organisation may on or derogation;	perate during the
 The organ formal appression 	nisation must not implement an exemption or a derogation volution or a derogation volution v	without having received the
•	proval will be granted on specific documentation issued by organisation has received respective documentation.	FOCA and effective only
••	exemption and derogations including those of limited durate ent system documentation.	tion, are to be stated in the
- Those	with limited duration, are listed by the temporary revision re-	ecord;
	t for exemptions or derogations with unlimited duration sho	ould include:
	gal Reference;	
	nort description;	
	ate of Approval: and reference to the evidence and documentation of the exemp	tion or derogation

• a reference to the evidence and documentation of the exemption or derogation.

Note: Formal approval by FOCA will only be granted to the Organisation after EASA has approved the exemption or derogation to FOCA.

3.13 Alter Ch. 3.1	rnative Means of Compliance (AltMoC)	M/CC / M/IN EVALUATION METHOD
MS CL TOPIC	ORO.GEN.120 ORA.GEN.120 LEGAL REFERENCE	
3-OMM01-080 CL ChOM ChSeq1	OMM, Chapter 1.X «Alternative Means of Compliance» MANUAL REFERENCE	
	C holders, SPO Authorisation holders, AeMCs and ATOs processes relativities to the means of Compliance require prior approval	ed to the handling of
	C holders, SPO Authorisation holders, AeMCs and ATOs Alternative Mea C) are subject to prior approval by the competent authority	ns of Compliance
IF APPLICABLE, BRIE	F DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL	
General:		
□ Are there	e provisions related to AltMoCs?	
	e assessment of Alternative Means of Compliance include a demon nting Rules are met?	stration that the
Does the	assessment of AltMoCs include a risk assessment?	
\Box Is the list	in conformity with any granted approvals?	
AOC holder	s / SPO Authorisation holders / AeMCs / ATOs:	
	a statement, that the organisation must not implement AltMoCs with al approval?	nout having received
\Box Is there a	a list and brief description of approved AltMoC(s)?	
QUESTION FOR COM	PLIANCE VERIFICATION AND SELF ASSESSMENT	
 Instead may be 		• • • •
 Instead may be of safety AOC ho holder n 	PLIANCE VERIFICATION AND SELF ASSESSMENT of Acceptable Means of Compliance (AMC), Alternative Means of (established to ensure compliance with the Implementing Rules, pro	ovided the same level ne SPO Authorisation
 Instead may be of safety AOC ho holder m i.e. the a 	PLIANCE VERIFICATION AND SELF ASSESSMENT of Acceptable Means of Compliance (AMC), Alternative Means of C established to ensure compliance with the Implementing Rules, pro y is ensured. Iders, AeMCs and ATOs must get prior approval for any AltMoC, the nust get prior approval for any AltMoC affecting his authorisation di associated SOP and/or RA <u>or</u> any part of the authorisation itself. nisation shall notify the competent authority when it intends to use	ovided the same level ne SPO Authorisation rectly or indirectly,
 Instead may be of safety AOC ho holder n i.e. the a An orga Complia AOC ho 	PLIANCE VERIFICATION AND SELF ASSESSMENT of Acceptable Means of Compliance (AMC), Alternative Means of C established to ensure compliance with the Implementing Rules, pro- y is ensured. Iders, AeMCs and ATOs must get prior approval for any AltMoC, the nust get prior approval for any AltMoC affecting his authorisation di associated SOP and/or RA <u>or</u> any part of the authorisation itself. nisation shall notify the competent authority when it intends to use ance	ovided the same level ne SPO Authorisation rectly or indirectly, Alternative Means of
 Instead may be of safety AOC ho holder n i.e. the a An orga Complia AOC ho - An a 	PLIANCE VERIFICATION AND SELF ASSESSMENT of Acceptable Means of Compliance (AMC), Alternative Means of C established to ensure compliance with the Implementing Rules, pro- y is ensured. Iders, AeMCs and ATOs must get prior approval for any AltMoC, the nust get prior approval for any AltMoC affecting his authorisation di associated SOP and/or RA <u>or</u> any part of the authorisation itself. nisation shall notify the competent authority when it intends to use ance	ovided the same level ne SPO Authorisation rectly or indirectly, Alternative Means of
 Instead may be of safety AOC ho holder n i.e. the a An orga Complia AOC ho - An a A ful - The 	PLIANCE VERIFICATION AND SELF ASSESSMENT of Acceptable Means of Compliance (AMC), Alternative Means of C established to ensure compliance with the Implementing Rules, pro- y is ensured. Iders, AeMCs and ATOs must get prior approval for any AltMoC, the nust get prior approval for any AltMoC affecting his authorisation di associated SOP and/or RA <u>or</u> any part of the authorisation itself. nisation shall notify the competent authority when it intends to use ance Iders, AeMCs and ATOs have to provide the competent authority of application;	ovided the same level ne SPO Authorisation rectly or indirectly, Alternative Means of with:
 Instead may be of safety AOC ho holder n i.e. the a An orga Complia AOC ho - An a AOC ho - A ful - The alter A do 	PLIANCE VERIFICATION AND SELF ASSESSMENT of Acceptable Means of Compliance (AMC), Alternative Means of C established to ensure compliance with the Implementing Rules, pro- y is ensured. Iders, AeMCs and ATOs must get prior approval for any AltMoC, the nust get prior approval for any AltMoC affecting his authorisation di associated SOP and/or RA <u>or</u> any part of the authorisation itself. Inisation shall notify the competent authority when it intends to use ance Iders, AeMCs and ATOs have to provide the competent authority of application; I description of the Alternative Means of Compliance, proposed revision/amendment of the manual system reflecting the	application of the
 Instead may be of safety AOC ho holder m i.e. the a An orga Complia AOC ho An orga Complia AOC ho An a A ful The alter A do Impli 	PLIANCE VERIFICATION AND SELF ASSESSMENT of Acceptable Means of Compliance (AMC), Alternative Means of G established to ensure compliance with the Implementing Rules, pro- y is ensured. Iders, AeMCs and ATOs must get prior approval for any AltMoC, the nust get prior approval for any AltMoC affecting his authorisation di associated SOP and/or RA <u>or</u> any part of the authorisation itself. Inisation shall notify the competent authority when it intends to use ance Iders, AeMCs and ATOs have to provide the competent authority of application; I description of the Alternative Means of Compliance, proposed revision/amendment of the manual system reflecting the native means of compliance; and ocumented assessment, demonstrating that Regulation (EC) No 210 ementing Rules are met.	ovided the same level ne SPO Authorisation rectly or indirectly, Alternative Means of with: application of the 6/2008 and its
 Instead may be of safety AOC ho holder mile. the a An orga Complia AOC ho - An a AOC ho - An a A full The alter A do Impl SPO Au authority An a 	PLIANCE VERIFICATION AND SELF ASSESSMENT of Acceptable Means of Compliance (AMC), Alternative Means of G established to ensure compliance with the Implementing Rules, pro- y is ensured. Iders, AeMCs and ATOs must get prior approval for any AltMoC, the nust get prior approval for any AltMoC affecting his authorisation di associated SOP and/or RA <u>or</u> any part of the authorisation itself. Inisation shall notify the competent authority when it intends to use ance Iders, AeMCs and ATOs have to provide the competent authority of application; I description of the Alternative Means of Compliance, proposed revision/amendment of the manual system reflecting the native means of compliance; and ocumented assessment, demonstrating that Regulation (EC) No 210 ementing Rules are met.	ovided the same level ne SPO Authorisation rectly or indirectly, Alternative Means of with: application of the 6/2008 and its provide the competent

- In order to demonstrate that the Implementing Rules are met, the assessment shall include a documented risk-assessment. The result of this risk-assessment should demonstrate that an equivalent level of safety as the one established by the Acceptable Means of Compliance (AMC) adopted by the Agency is reached.
- FOCA may prescribe conditions under which the organisation may operate during the implementation of an Alternative Means of Compliance;
- Approved AltMoCs are to be listed in the management system documentation. The list should include:
 - Legal Reference;
 - Short description;
 - Date of Approval (or notification for declared operatos); and
 - a reference to the evidence and documentation of the Alternative Means of Compliance

Example for an AOC holder, AeMC or an ATO

List of approved Alternative Means of Compliance with a brief description:

Legal Reference	Short Description	Date of Approval	Reference
ORO.MLR.101	Difference in the sequence of OM-A subchapter in Chapter 8 «Operating Procedures».	DD.MM.YYYY	AltMoC FOCA Ref Form XX

AOC holders, AeMCs and ATOs

- The organisation must not implement Alternative Means of Compliance without having received the formal approval;
- Formal approval will be granted on specific documentation issued by FOCA and effective only after the organisation has received respective documentation.

SPO Authorisation holders

• For an Alternative Means of Compliance requiring prior approval as explained above, the organisation must not implement them/it without having received the formal approval.

	Location, Facilities and Infrastructure Ch. 3.14 ISS1 / REV3 / 09.11.2017					M/CC / M/IN EVALUATION METHOD
MS CL TOPIC		ORO.GEN.215 LEGAL REFERENCE	ORO.AOC.140	ORA.GEN.215	ORA.AeMC.215	ORA.FSTD.115
3-OMM01-085 CL ChOM ChSee		OMM, Chapter 7 MANUAL REFERENCE	1.X «Location, Fa	acilities, Infrastru	cture»	

General:

- □ Is there list containing a general description of the location and the facilities?
- □ Is there a clear reference to another manual including the respective chapter if the definition is made outside the OMM?

Air Operators:

- □ Are appropriate ground handling facilities available to ensure the safe handling of flights?
- □ Are there operational support facilities at the main operating base, appropriate for the area and type of operation?
- □ Is the available working space at each operating base sufficient for personnel whose actions may affect the safety of flight operations?
- □ ATOAre appropriate flight operations accommodation (facilities) available?
- □ Are appropriate facilities for theoretical knowledge instruction available?

AeMC:

□ Is the AeMC equipped with medico-technical facilities adequate to perform aero-medical examinations necessary for the execution of the privileges included in the scope of the approval?

FSTD:

□ Is the FSTD housed in a suitable environment that supports safe and reliable operation?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

For the detailed requirements regarding the infrastructure and facilities please refer to the respective AMC:

- ATO CPL, MPL and ATPL, refer to AMC1.ORA.GEN.215
- ATO LAPL, PPL, SPL or BPL, refer to AMC2.ORA.GEN.215
- **AeMC**, refer to AMC1.ORA.AeMC.215
- **FSTD**, refer to ORA.FSTD.115, AMC1 & GM1 ORA.FSTD.115

3.15 Acc Ch. 3.1	ess and Power of Authorities 5 ISS1/REV3/09.11.2017	M/CC EVALUATION METHOD
MS CL TOPIC	ORO.GEN.140 ORA.GEN.140 LEGAL REFERENCE	
3-OMM01-090 CL ChOM ChSeqN	OMM, Chapter 1.X «Power of Authorities»	

General:

□ Is the power and access for authorities specified?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

• The organisation shall specify how access is granted to the competent authority:

Master text

- a) For the purpose of determining compliance with the relevant requirements of Regulation (EC) No. 216/2008 and its Implementing Rules, the organisation shall grant access to any facility, aircraft, document, records, data, procedures or any other material relevant to its activity subject to certification, SPO authorisation or declaration, whether it is contracted or not, to any person authorised by the Federal Office of Civil Aviation (FOCA).
- b) Any person authorised by the Federal Office of Civil Aviation (FOCA) is permitted to board and fly in any aeroplane operated in accordance with the <u>AOC</u> at any time, and to enter and remain on the flight deck. Any person authorised by the competent civil aviation authority of an EASA member state is permitted to enter the Aircraft and to perform inspections on its territory.

However, the commander may refuse access to the flight deck if he believes that the distractions or interferences caused might endanger the safety of the flight.

Note: For ATO replace the term AOC with ATO For AeMC only a) applies (without term aircraft). B) not applicable For FSTD only a) applies (without term aircraft but term FSTD); b) is not applicable

4 Organisation, Lines of Responsibilities and Accountabilities

Ch. 4 ISS1 / REV3 / 09.11.2017

4.1 Organ Ch. 4.1	isational Structure – General Concept ISS1/REV3/09.11.2017	M/CC EVALUATION METHOD		
	ORO.GEN.200 ORO.GEN.210 ORO.AOC.135 ORA.GEN.200 ORA.AeMC.210 LEGAL REFERENCE	ORA.GEN.210		
4-OMM03-005 CL ChOM ChSeqNo.	OMM, Chapter 3.X «Organisational Structure» MANUAL REFERENCE			
APP: The lines of responsibilities and accountabilities requires prior approval				

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

General:

- □ Is there a general description of the organisation including an organigram of all related companies?
- □ Are the titles and functions of nominated persons and management personnel defined?
- Does an organisation chart exist which shows the lines of responsibility between the Accountable Manager, the Safety Manager, the Compliance Monitoring Manager and nominated persons?
- □ Is there a cross-reference table, providing the link to subordinated organisational structures in other manuals, as required by the available organisation's approvals?

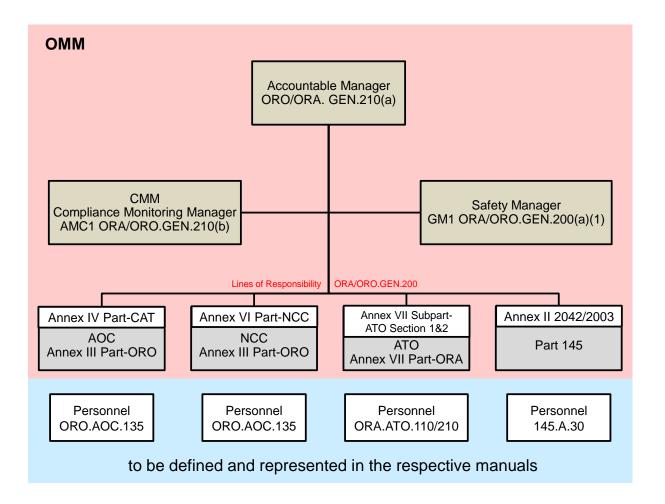
Complex Organisation:

- □ Is a Safety Review Board (SRB) designated?
- □ Is a Safety Action Group (SAG) designated?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

- Lines of Responsibilities means a graphic representation of the structure of an organisation showing the relationships of the positions also referred to organisation chart;
- This chapter should provide a definition of the organisational structure e.g. by means of organigram(s) / organisational chart(s), which show all relevant functions including their hierarchy. This, preferably without names, in order to avoid duplications with the subsequent list of nominated persons and management personnel.
- According to the scope and complexity of the organisation, the organisation's subordination and reporting lines shall clearly show the relationship between divisions, departments and functions defined and shall represent the organisation as a whole. Additionally, the organisation chart should show the lines of responsibility between nominated persons.
- The organigram must depict the relationship; in particular, the subordination and reporting lines of the different organisations, holding a certificate as required by the specific subpart e.g. Air Operator, Approved Training Organisation, Aero Medical Centre, Approved Maintenance Organisation etc.
- <u>The Safety Review Board (SRB) (relevant for complex organisations)</u> should be part of the organisational structure and therefore be visualised in the organisation chart.
- In case of combined organisations, the detailed subordinated structure as required by the specific part, shall be defined and represented in the respective manual. A cross-reference table shall link the organisational structure.

• To summarise, the OMM contains a general organigram which includes the general functions only, and a cross-reference to subordinated organisational structures as defined in other relevant manuals – example:



Note: ATO LAPL, PPL, SPL and BPL

 If applying the organisational review concept, neither a Safety Manager nor a Compliance Monitoring Manager is required. Accordingly the associated points above may be disregarded. However it shall be clearly defined which person or group of persons are responsible for the organisational review. Refer to chapter 11.1 «Management Evaluation» for further guidance on the organisational review.

4.2 Persor Ch. 4.2	ISS1/REV3/09.11.2017			M/CC EVALUATION METHOD	
MS CL TOPIC	ORA.ATO.110 C	DRA.ATO.210	ORO.AOC.135 ORA.AeMC.210	ORA.GEN.200	ORA.GEN.210
4-OMM03-010 CL ChOM ChSeqNo.	OMM, Chapter 3.X «Organisational Structure»; and OMM, Chapter 3.X. «Management Personnel – Name and Contacts» MANUAL REFERENCE				

General:

- □ Is an Accountable Manager appointed?
- □ Is a Safety Manager appointed?
- □ Is a Compliance Monitoring Manager appointed?
- □ Are other personnel requirements fulfilled, as specifically required by the organisation?
- □ Do those persons ultimately report to the Accountable Manager?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

- The following functions must be assigned:
 - Accountable Manager;
 - Safety Manager;
 - Compliance Monitoring Manager.
- ATO LAPL, PPL, SPL and BPL, when applying the organisational review concept, do not need to have a Safety Manager nor a Compliance Monitoring Manager but a person or group of persons responsible for the conduct of the organisational review. Refer to chapter 11 «Management Review» for further details on the organisational review.

Accordingly the points /questions above addressing the Safety Manager and Compliance Monitoring Manager may be disregarded.

Air Operators

- Additionally, persons responsible for the management and supervision of the following areas, shall be nominated:
 - flight operations;
 - crew training;
 - ground operations;
 - continuing airworthiness in accordance with Regulation (EC) No 2042/2003.
- Those persons may not act as Compliance Monitoring Manager.
- The person nominated by the holder of an AOC should not be nominated by another holder of an AOC, unless agreed with FOCA.

ATO CPL, MPL AND ATPL

- Additionally, persons responsible for the management and supervision of the following areas, shall be assigned:
 - Head of Training (HT)
 - Chief Flight Instructor (CFI)
 - Chief Theoretical Knowledge Instructor (CTKI)
- Those persons may not act as Compliance Monitoring Manager.

Non Complex Organisation

• The Accountable Manager may exercise the task as Compliance Monitoring Manager and/or Safety Manager.

ATO LAPL, PPL, SPL and BPL

- If applying the organisational review concept, neither a Safety Manager nor a Compliance Monitoring Manager is required. However it shall be clearly defined which person or group of persons are responsible for the organisational review.
- Additionally a Head of Training (HT) shall be assigned.

FSTD

- A FSTD Focal Point (FFP) shall be assigned.
- Further details for the FFP function is described in the «Appendix FSTD».

AeMC

- An aero-medical examiner (AME) shall be nominated as head of the AeMC;
- The AeMC shall have an adequate number of qualified AMEs and technical staff / experts.

4.3 Manag Ch. 4.3	Jement Personnel – Name and Contacts ISS1/REV3/09.11.2017	CA EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200ORO.GEN.210ORO.AOC.135ORA.GEN.200ORA.ATO.210ORA.ATO.110ORA.AeMC.210LEGAL REFERENCEORA.ATO.110ORA.AeMC.210	ORA.ATO.110
4-OMM03-015 CL ChOM ChSeqNo.	OMM, Chapter 3.X. «Management Personnel – Name and Contac OM A, Chapter 1.X. «List of Management Personnel» MANUAL REFERENCE	cts»

General:

- □ Is there a list of all management personnel?
- □ Are there references to the lists of nominated personnel as required by the specific subparts?
- □ Are contact details of management personnel provided?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

- The list of management personnel shall include:
 - The function;
 - Name of the function holder;
 - Name of deputy;
 - Contact details: Phone Number, Mobile Number and Email.

Example

Function	Name of Function Holder	Contact details
	Name of Deputy	
Accountable Manager	Ana Airflow	Office Example
		Musterstrasse 12
		1234 Beispielhausen
		ph: +4131
		mobile: +4179
		aairflow@example.ch
	Tom Airspeed	Office Example
		Musterstrasse 12
		1234 Beispielhausen
		ph: +4131
		mobile: +4179
		tairspeed@muster.ch
Safety Manager (SM)		
Compliance Monitoring Manager (CMM)		
AOC / NCC / SPO		
Flight Operations NPFO	Refer to OM A chapter 1.xx	
Crew Training NPCT	Refer to OM A chapter 1.xx	
Ground Operations NPGO	Refer to XXX chapter 1.xx	

Function	Name of Function Holder	Contact details
	Name of Deputy	
ΑΤΟ		
Head of Training (HT)		
Chief Flight Instructor (CFI)		
Chief Theoretical Knowledge Instructor (CTKI)		
FSTD Focal Point (FFP)	Refer to XXX chapter xx	
FSTD Qualification Certificate H	lolder	
FSTD Focal Point (FFP)	Refer to XXX chapter xx	
AeMC		
Head of AeMC (HAeMC)	Refer to XXX chapter xx	

4.4 Duties Ch. 4.4	Responsibilities and Acco	M/CC EVALUATION METHOD			
	ORO.GEN.200 ORO.GEN.210 ORA.ATO.210 ORA.ATO.110 LEGAL REFERENCE	ORO.AOC.135 ORA.GEN.200 ORA.AeMC.210	ORA.ATO.110		
4-OMM03-020 CL ChOM ChSeqNo.	OMM, Chapter 3.X «Duties, Responsibilities and Accountabilities» MANUAL REFERENCE				
APP: The accountability of management personnel requires prior approval.					

General:

- □ Is the accountability in each description of the duties and responsibilities clearly specified?
- □ Are the responsibilities and duties comprehensively defined (including their contribution to an effective Safety Management & Compliance Monitoring)?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

Concept

There should be a comprehensive concept on how the accountability, duties and responsibilities are defined and listed in the document system.

Accountability is the liability created for the use of authority. Authority is the right or power assigned to an executive or a manager in order to achieve certain organisational objectives.

The following paragraph is a concept guideline for designating duties, responsibilities and authority within the Organisation's Manual System:

- As a main concept, the functions/duties and responsibilities of the Accountable Manager (ACM), Safety Manager (SM), Compliance Monitoring Manager (CMM), shall be defined in the OMM. It is recommended to specify the subordinated functions and nominated persons (including duties and responsibilities) in the respective manual (e.g. OM, CAME, MOE) to avoid duplications.
- Ideally duties and responsibilities are to be established in a simple but logical order:
 - Short, brief description of the accountability and the function;
 - Reporting to (subordination);
 - Duties and responsibilities;
 - Power and authority.
- Personnel as required for specific organisations such as AOC, NCC, SPO, ATO, FSTD, Part 145 etc. shall be described in the relevant manual. Depending on the size and complexity of the organisation, and if not otherwise required, it is recommended to include all relevant functions within the OMM (e.g. FSTD, AeMC). However, a duplication of management personnel description shall be avoided.
- Besides the duties, responsibilities and accountabilities as required by the respective organisation and/or part of the duties and responsibilities concerning the Management System, the following are to be included in the duties and responsibilities for each nominated person:
 - Allocation of responsibilities and duties and issuing instructions to individuals, sufficient for implementation of the safety policy and the safety standards, in their area of activity;
 - Monitoring of safety standards, including the adherence of employees to these standards, also by means of inspections;
 - Evaluation of safety performance indicators in their field of activity;
 - Evaluation of safety relevant records in order to avoid the occurrence of undesirable trends;

- Recording and analysis of any deviations from company specific standards and ensuring correction, corrective action and preventive action within the organisational unit;
- Compilation of periodical data evaluation as an input to management evaluation activities;
- Promotes corporate culture of safety and quality, philosophy, policies and overall standard of performance, risk awareness and associated behaviour;
- Assurance of a comprehensive document and record management/ storage/ archive and liaising with FOCA regarding administration and coordination;
- Assurance that all subordinates meet the qualification requirements for their respective activities, management and planning of continuous education/ currentness and career development of the subordinates.

Note: This CL provides guidelines, requirements and explanations concerning duties, responsibilities and accountabilities for ACM, CMM, SM, SAG, SRB only.

4.4.1 Accour Ch. 4.4.1					M/CC EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORA.ATO.210 LEGAL REFERENCE	ORO.GEN.210 ORA.ATO.110	ORO.AOC.135 ORA.AeMC.210	ORO.GEN.200 ORA.ATO.210	ORO.GEN.210 ORA.ATO.110
4-OMM03-025 CL ChOM ChSeqNo.	OMM, Chapter 3.X «Accountable Manager» MANUAL REFERENCE				

APP: The nomination of the Accountable Manager requires prior approval.

APP: The accountability of the Accountable Manager requires prior approval.

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

General:

- □ Are the accountability, responsibilities and duties of the Accountable Manager comprehensively defined?
- □ Is a direct safety accountability of the Accountable Manager including the responsibility for establishing and maintaining an effective Safety Management System defined?

□ Do the defined responsibilities include the endorsement of the safety policy?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

- The accountability, responsibilities and duties of the Accountable Manager shall include:
 - His duty to endorse the safety policy;
 - His responsibility of establishing and maintaining an effective Management System;
 - His duty is to endorse a statement to confirm that the operator will continuously work in accordance with the applicable requirements and the operator's documentation;
 - His authority to ensure that all activities can be financed and carried out in accordance with the applicable requirements;
 - His authority to designate the Compliance Monitoring Manager;
 - His duty to grant direct access to nominated persons and the Compliance Monitoring Manager;
 - His duty to ensure that sufficient resources are allocated, taking into account the size of the
 organisation and the nature and complexity of its activities.
 - His accountability in relation to Safety Policy, that the management personnel (senior management):
 - continually promote the Safety Policy to all personnel and demonstrate their commitment to it;
 - o provide necessary human and financial resources for its implementation; and
 - o establish safety objectives and performance standards
 - o to endorse the Safety Policy
- The accountable manager should have the overall responsibility for running the organisation.
- When the accountable manager is not the chief executive officer, the competent authority should be assured that the accountable manager has direct access to the chief executive officer and has the necessary air operations funding allocation.

Non-Complex Organisations

- The Accountable Manager may exercise the task as Compliance Monitoring Manager provided he has demonstrated having the appropriate defined competence and that audits are conducted by an independent body.
- The Accountable Manager may exercise the task as Safety Manager and Compliance Monitoring Manager.

AeMC

• The head of the AeMC is responsible for coordinating the assessment of examination results and signing reports, certificates, and initial class 1 medical certificates.

	-	Manager (SM) ISS1 / REV0 / 18.06.2013		M/CC EVALUATION METHOD
MS CL TOPIC		ORO.GEN.200 O	DRA.GEN.200	
4-OMM03-030 CL ChOM ChSeqNo.		OMM, Chapter 3.X	< «Safety Manager»	

General:

- □ Are the responsibilities and duties of the Safety Manager comprehensively defined?
- □ Are the responsibilities within the organisation defined for hazard identification, risk assessment and mitigation?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

- The safety manager should act as the focal point and be responsible for the development, administration and maintenance of an effective safety management system.
- The functions of the safety manager should be to:
 - facilitate hazard identification, risk analysis and management;
 - monitor the implementation of actions taken to mitigate risks and evaluates their results/effectiveness;
 - provide periodic reports on safety performance;
 - ensure maintenance of safety management documentation;
 - ensure that there is safety management training available and that it meets acceptable standards;
 - provide advice on safety matters; and
 - ensure initiation and follow-up of internal occurrence / accident investigations.
 - actively promotes corporate culture for safety;
- The Safety Manager may be assisted by additional safety personnel.
- The function of the Safety Manager may be combined with the Compliance Monitoring Manager. In such cases, the Accountable Manager should ensure that sufficient resources are allocated to both functions.

Complex Organisations

• The Safety Manager may attend, as appropriate, Safety Review Board meetings. He may communicate to the Accountable Manager all information, when necessary, to allow decision-making based on safety data.

Non-Complex Organisations

• The Safety Manager may be the Accountable Manager or a person with an operational role within the organisation.

4.4.3 Compl Ch. 4.4.3	h. 4.4.3 ISS1 / REV0 / 18.06.2013				M/CC EVALUATION METHOD
MS CL TOPIC 4-OMM03-035 CL ChOM ChSeqNo.	ORO.GEN.200 ORA.ATO.110 LEGAL REFERENCE	ORA.GEN.200 ORA.ATO.210	ORO.GEN.210 ORA.AeMC.210	ORA.GEN.210	ORO.AOC.135
	OMM, Chapter 3.X «Compliance Monitoring Manager» MANUAL REFERENCE				

General:

□ Are the responsibilities and duties of the Compliance Monitoring Manager comprehensively defined?

□ Has the Compliance Monitoring Manager direct access to the Accountable Manager?

□ Is ensured, that the Compliance Monitoring Manager is not one of the nominated persons?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

- The Compliance Monitoring Manager should be designated by the Accountable Manager.
- The responsibilities, duties and competences of the Compliance Monitoring Manager should include:
 - Ensuring that the activities of the organisation are monitored for compliance with the applicable regulatory requirements and standards, as well as any additional requirements as established by the organisation;
 - Ensuring that these activities are being carried out properly under the supervision of the relevant head of the respective functional area;
 - Responsibility to ensure that the compliance monitoring programme is properly implemented, maintained, continually reviewed and improved;
 - Performing of audits and inspections provided he has the related competence in the area of audits/inspections to be conducted. He may appoint one or more auditors by choosing personnel having the related competences either from within or outside the organisation, assuring their independence.
 - Direct accessibility to the Accountable Manager;
 - Not being one of the other persons (Nominated Person NP) referred to:

Air Operator	ATOs	AeMC	FSTD
 Flight Operations Crew Training Ground Operations Continuing Airworthiness 	 Head of Training Chief Flight Instructor Chief Theoretical Knowledge Instructor 	Head of Aero medical Centre	FSTD Focal Point

- Ability to demonstrate relevant knowledge, background and appropriate experience related to the activities of the organisation, including knowledge and experience in compliance monitoring; and
- Accessibility to all parts of the organisation, and if necessary, any contracted organisation.
- In case, that the same person acts as Compliance Monitoring Manager and as Safety Manager, the Accountable Manager should ensure that sufficient resources are allocated to both functions.

Non-Complex Organisations

• The task as Compliance Monitoring Manager may be exercised by the Accountable Manager provided he has demonstrated having the related competence.

FSTD

• The Compliance Monitoring Manager is also responsible to schedule and coordinate QTG-runs and fly outs as specified in the «Appendix FSTD». He may delegate these activities to another person provided that this person has the necessary qualification.

5 Safety Management

Ch. 5 ISS1 / REV3 / 09.11.2017

MS ORO.GEN.200 ORA.GEN.200 5-OMM04-005 OMM, Chapter 1.X «Safety Policy»; or OMM, Chapter 4.X «Safety Policy»; or OMM, Chapter 4.X «Safety Policy»; or	5.1	Safety Ch. 5.1	Policy ISS1 / REV3 / 09.11.2017		M/CC EVALUATION METHOD
5-OMM04-005OMM, Chapter 1.X «Safety Policy»; orCL Ch-OM Ch-Seq-No.OMM, Chapter 4.X «Safety Policy»	-			ORA.GEN.200	
MANUAL REFERENCE	5-OMM04-005		•		

APP: The defined safety policy requires prior approval.

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

General:

- □ Is there a comprehensive safety policy including all relevant elements defined?
- □ Is the Safety Policy endorsed by the Accountable Manager?
- Does the Safety Policy reflect organisational commitments regarding safety and its proactive and systematic management?
- □ Is there a statement indicating that the sole purpose of safety reporting and internal investigations is to improve safety and not to apportion blame to individuals?
- Does the Safety Policy reflect and foster the just culture?
- □ Is the Safety Policy promoted and deployed with visible endorsement throughout the organisation?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

Safety Policy

- The Safety Policy is the means whereby the organisation states its intention to maintain and, where practicable, improve safety levels in all its activities and to minimise its contribution to the risk of an aircraft accident as far as is reasonably practical.
- The safety policy should be endorsed by the Accountable Manager.
- Safety policies are to reflect organisational commitments regarding safety and its proactive and systematic management.
- As a minimum, Safety Policies should include commitment:
 - to improve towards the highest safety standards;
 - to comply with all applicable legislation, meet all applicable standards and consider best practices;
 - to provide appropriate resources;
 - to enforce safety as one primary responsibility of all managers; and
 - not to blame someone for reporting something which would not have been otherwise detected

Safety Policy Deployment

• The organisation should define how the Safety Policy is deployed within the organisation. Preferably, this should be combined with the business planning and steering process of the organisation, where the definition and communication of annual goals are part of it. • The promotion of the safety policy is part of the management activities of all management personnel. Beside the publication the safety policy should be actively disseminate in the various training events, meetings, decision process and in any other daily activity.

Example Safety Policy

XX is committed to ensure the safest operation possible satisfying Authorities and our customers' expectations –Our philosophy is to create and maintain a company which is healthy, proactive, safe, and successfully focused on business continuity. Therefore, it is imperative that all employees have uninhibited access to report accidents, incidents and occurrences.

Every employee is expected to show commitment to communicate in writing, or verbally to the Flight Safety Organisation, any occurrence that may affect the integrity of safety, including Flight, Maintenance and Ground safety; this communication shall be free of reprisal.

XX will not initiate disciplinary action against any employee who discloses an occurrence involving safety, in accordance with the company's Just Safety Culture.

Occurrences with elements of gross neglicence, intentional violations (SOP/MOP) or criminal act are exempt from the above statement and will not be tolerated.

Company Safety should be the concern of all employees at any level in the organisation; however the primary responsibility rests with the Management.

Procedures for collecting, recording and disseminating information have been developed to protect the identity of any employee who provides safety information to the extent permissible by law.

The Reporting Systems, including the above-mentioned Just Safety Culture, are:

Mandatory Occurrence Reporting Systems (FSR/MOR)

Company Safety Reports

Other confidential information

The sole purpose of safety reporting and internal investigations is to improve safety and not to apportion blame to individuals.

XX urges all employees to use the implemented Safety Management System in order to attain the highest level of safety in relation to our common goals.

Distribution of safety documents to sources outside of XX by any employee will be considered a violation of the confidentiality statement, which is accepted by the employee in his/her individual employment agreement and according to the Company Business Policy.

Accountable Manager:

Name:_____

Signature:_____

Source: JAA SMS Training course, 08.2009, amended by FOCA, 07.2017.

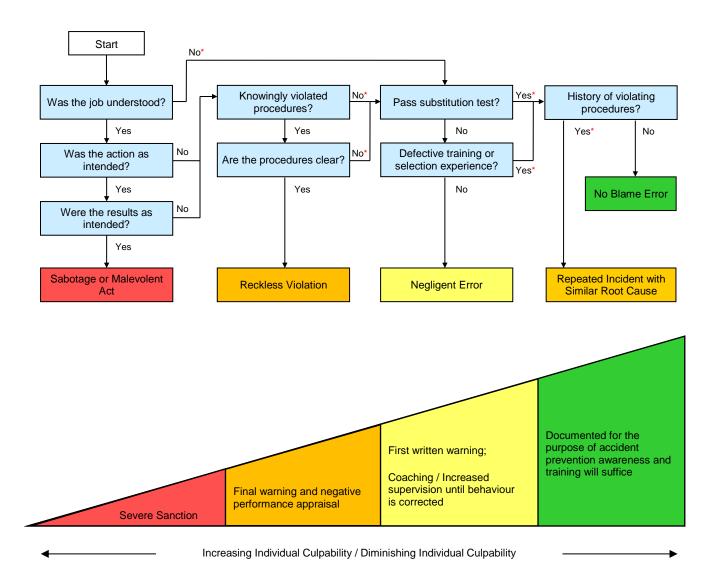
Safety Culture

The ideal safety culture is where staff and systems work supportively and constructively together in an environment where discovered errors are recognised and utilised in a positive and constructive way with a no-blame culture, i.e. with a Just Safety Culture as background.

- An «Informative» culture, which requires the management of all systems to have a positive knowledge view concerning human, technical, organisational and environmental factors with impact/contribute to the organisation, allowing for errors to occur.
- A «Flexible» culture open for changes based on «learning from experiences» and a solid safety culture with priorities for example on SAFETY – SCHEDULE – COMFORT- ECONOMY configuring the business in a timely and controlled manner to new challenges, changing conditions, environment and regulations.
- A «Reporting» culture based on an open organisational climate where all involved are encouraged to report all occurrences deviating from known standards and requirements, hazards and errors without any retribution.
- A «Learning» culture willing to perform proactive and corrective actions, and take appropriate action and decisions based on conclusions from relevant information. Willing to implement major reforms where deemed necessary.
- A «Just» culture« is a culture in which front-line operators and others are not punished for actions, omissions or decisions taken by them which commensurate with their experience and training, but where gross negligence, wilful violations and destructive acts are not tolerated.

Decision Tree for Unsafe Acts Culpability

- In order to strongly support and foster the organisation's Just Safety Culture the implementation of the below Decision Tree for Unsafe Acts Culpability may be recommended. The organisation may use the decision tree when analysing an adverse event or error. This will help to identify how human factors and organisational system deficiencies have contributed to the event.
- The below box and question «Pass Substitution Test» requires some further explanation: Would three other individuals with similar experience act in the same manner, in a similar situation and environment as the person being evaluated? If the answer is «Yes», the problem is not the individual, but more likely the environment that would lead most individuals to that action. If the answer is «No», it is more likely that the individual being evaluated is more culpable and accountable.



* Indicates a «System« induced error. Management personnel must evalutate what part of the system failed and what corrective action and preventive action is required. Corrective and preventative action shall be documented for management review/evaluation.

5.2 Hazaro Ch. 5.2	M/CC EVALUATION METHOD				
	ORO.GEN 120 ORA.GEN.205 LEGAL REFERENCE	ORO.GEN.200	ORO.GEN.205	ORA.GEN.120	ORA.GEN.200
5-OMM04-010 CL ChOM ChSeqNo. OMM, Chapter 4.X «Hazard Identification and Risk Management» MANUAL REFERENCE					

APP: For AOC holders, AeMCs and ATOs the processes related to the handling of Alternative Means of Compliance require prior approval.

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

General:

- □ Is there a process to identify aviation safety hazards entailed by the activities of the organisation?
- □ Is there a process to evaluate and manage the associated risks of the hazards?
- □ Is there a process for the implementation of corrective and preventive actions in order to mitigate the risk and verify their effectiveness?
- □ Is the hazard identification and safety risk management integrated into the day to day activities of the organisation?
- □ Is ensured that contracted activities are subject to hazard identification and risk management?
- □ Are the responsibilities for Hazard Identification and Risk Assessment defined?

Complex Organisations:

- □ Is there a process for reactive and proactive hazard identification?
- □ Is there a risk management process addressing the analysis of hazards in terms of likelihood and severity?
- □ Are the levels of management who have the authority to make decisions regarding the tolerability of safety risks specified?
- □ Is there a process to control and mitigate the associated risk of a hazard to an acceptable level?
- □ Are there examples existing for reactive and proactive hazard identification, risk analysis and mitigation action?
- □ Are internal safety investigations performed beyond the assessment of the occurrences?
- □ Is there a process by which the safety performance is monitored and verified in comparison to the safety policy and the organisation objectives?
- □ Is the Risk Management process periodically reviewed and improved?
- □ Is an emergency response plan established?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

• The management system shall include the identification of aviation safety hazards entailed by the activities of the organisation, their evaluation and the management of associated risks, including taking actions to mitigate the risk and verify their effectiveness.

A formal risk management process shall be developed and shall be maintained to ensure that analysis, in terms of likelihood and severity of occurrence; assessment, in terms of tolerability;

and control, in terms of mitigation of risks to an acceptable level. Additionally, the levels of management who have the authority to make decisions regarding the tolerability of safety risks shall be specified.

The hazard identification process is the formal means of collecting, recording, analysing, acting on and generating feedback about hazards and the associated risks that affect the safety of the Company's operational activities.

Complex Organisations

• In complex organisations the Safety Manager should facilitate hazard identification and risk analyses management. The Safety Management System which is an integral part of the Management System should include hazard identification and risk management schemes which address <u>reactive</u>, <u>proactive</u> and <u>predictive</u> schemes.

The reactive approach consists of analysing accidents and incidents which have already occurred. The proactive approach consists of analysing the organisations activities without having an occurrence. The <u>predictive</u> approach captures the system performance in real-time to identify potential problems, it <u>characterises</u> a <u>mature system</u>.

The process should address the identification of the hazards, a risk assessment in terms of tolerability and a mitigation process

Non-Complex Organisations

• The Safety and Risk Management may be performed using hazard checklist (refer to the example GAR-Model and example for hazard checklist for operational area planning)

ATO LAPL, PPL, SPL and BPL

• If applying the organisational review concept, hazard identification and risk management may be covered by an organisational review checklist which is referred to in chapter 11.1 «Management Evaluation» giving further guidance on the organisational review.

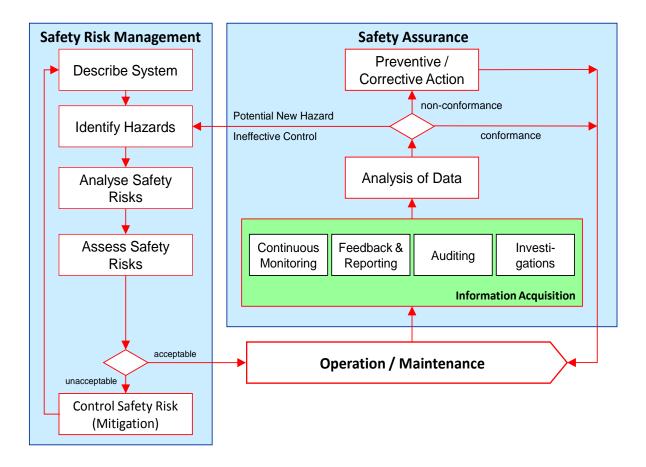
Definition and explanation for hazard identification and risk management

• Definitions of hazard and risk

Hazard: Condition or object with the potential of causing injuries to personnel, damage to equipment or structures, loss of material, or reduction of ability to perform a prescribed function.

Risk: The assessment, expressed in terms of predicted probability and severity, of the consequence(s) of a hazard taking as reference the worst foreseeable situation.

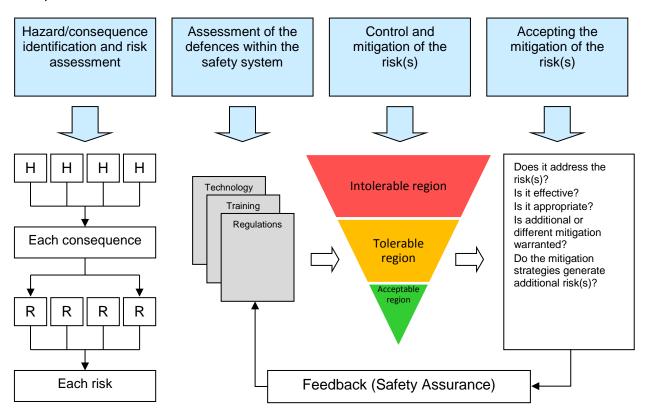
 Relation between Risk Management and Safety Assurance
 The Risk-Management and Safety Assurance activities are both very important elements, refer to the following scheme:



Source: Relation between Safety Management and Safety Assurance (Procede, Workshop FOCA SB Heli, 2010, S. 21).

Hazard and Risk Mitigation Process

All employees are obliged to report any condition or object with the potential of causing injuries to personnel, damage to equipment or structures, loss of material, or reduction of ability to perform a prescribed function (Hazard) to the Safety Manager. The Safety Manager is responsible to note and identify the reported hazard and asses its consequences and its risk in terms of probability and severity, considering existing mitigations (refer to Hazard Form for Safety Manager). Depending on the Risk, defences to mitigate the risk have to be defined until the risk is considered acceptable and thereafter be controlled for their effectiveness.



Source: The safety risk mitigation process (ICAO DOC 9859, 2009, S. 88).

Example Hazard reporting form

Description of Hazard (situation which could lead to an incident/accident)					
Proposal for preventive action:					
Avoiding that an occurrence/accident occurs					
Date &Signatures					
Reporter (s)	Safety Manager	Line Manager			

Example: Hazard Identification form for Safety Managers

1. Hazard Reference:		Title :				
		No : H-YYYY-xxx (e.g.	H-2013	-001)		
2. Area: (Specify the system to be considered. Does the hazard apply to a subset or the whole System?)						
3. Hazard Description: (Describe the Scenario)						
4. Hazard Causes: (Categories: Software, Hardware Environment, Liveware i.e. Huma Factors, Interfaces)						
5. Hazard Consequence: (Include any existing mitigations or assumptions which limit the consequences)						
6. Suggested Close Out Action(s): (Include any safety analyses req	uired)					
7. Information Provider:		Date/Signature				
8. Initial Hazard / Risk Ra	anking	/ Pre-mitigation actions				
Hazard Frequency: (How often an event may occur)	~	Accident Severity: (The severity of the potential accident arising from a hazard)	~	Risk Classification: (Initial qualitative judgement)	l	~
Frequent		Catastrophic		Unacceptable		
Occasional		Hazardous		Tolerable		
Remote		Major		Acceptable		
Improbable		Minor				
Extremely improbable		No Significant Safety Effect				
9. Division Manager Responsible for Oversight of Mitigation Actions:	10. A	ction:	Resp	onsible:	Due	Date:
miligation riotono.	1.					
	2.					
	З.					
11. Approval of Account	table M	anager:	Date/S	Signature		

Example: Probability Classification

Probability Classification	Definition	
	Qualitative	Likely to occur many times (has occurred frequently)
Frequent 5	Qualitative (System/Fleet)	May occur several times during operational life of the system
	Quantitative	Probability of occurrence per operational hour is greater than 1×10^{-3}
	Qualitative	Likely to occur sometime (has occurred infrequently)
Occasional 4	Qualitative (System/Fleet)	May occur once during total operational life of the system
	Quantitative	Probability of occurrence per operational hour is between 1 x 10^{-3} to 1 x 10^{-5}
	Qualitative	Unlikely but possible to occur (has occurred rarely)
Remote 3	Qualitative (System/Fleet)	Unlikely to occur during total operational life of each system but may occur several times when considering several systems of the same type or fleet
	Quantitative	Probability of occurrence per operational hour is between 1 x 10^{-5} to 1 x 10^{-7}
	Qualitative	Very unlikely to occur (not known to have occurred)
Improbable 2	Qualitative (System/Fleet)	Unlikely to occur when considering several systems of the same type, but nevertheless, has to be considered as being possible
	Quantitative	Probability of occurrence per operational hour is between $1x10^{-7}$ to $1x10^{-9}$
	Qualitative	Almost inconceivable that the event will occur
Extremely improbable 1	Qualitative (System/Fleet)	Has never occurred yet throughout the total operational life of an entire system or fleet
	Quantitative	Probability of occurrence per operational hour is less than 1x10 ⁻⁹

Example: Severity classification

	Severity Indicators	Severity Indicators									
Severity Classification	Level of damage	Level of injury	Safety Barriers (e.g. Emergency procedures, technical systems)	Operational / Human Factors							
Catastrophic 5	 Loss of Aircraft Equipment destroyed 	• Multiple fatalities	 No safety barriers remaining 	 Complete reduction of operational capability Complete loss of control Outcome is not under control Operator is unable to avoid accident 							
Hazardous 4	Substantial aircraft or equipment damage	• Fatal or serious injuries to a number of people	None or very few safety barriers remaining	 Large reduction of operational capability Physical distress Excessive workload such that operators cannot be relied upon to perform required tasks accurately or completely 							
Major 3	Minor damage to aircraft or equipment	 Individual serious injuries but no fatalities 	Several safety barriers remaining	 A significant reduction in the capability of the operators to cope with adverse operating condition Significant increase in operator workload, and significant concern over the consequences of failure Conditions impairing operator efficiency or creating significant discomfort Physical distress to passengers and operators 							
Minor 2	 Insignificant damage to aircraft or equipment 	 Individual minor injuries 	Multiple safety barriers remaining Alternate/emergency procedures are able to compensate for functional loss/ nuisance	 Actions required by operators are well within their capabilities but cause slightly increased workload/operation limitations/loss of efficiency Some physical discomfort to passengers (not to operators) Nuisance 							
No Significant Safety Effect 1	No damage to aircraft or equipment	No injury	Existing safety barriers come into play to avoid the event turning into a minor incident	 Nuisance/Failure can be eliminated by routine action, or does not require action at all 							

Example Risk Matrix:

Risk probability		Risk Severity						
		Catastrophic	Hazardous	Major	Minor	No Significant Safety Effect		
		5	4	3	2	1		
Frequent	5	25	20	15	10	05		
Occasional	4	20	16	12	08	04		
Remote	3	15	12	09	06	03		
Improbable	2	10	08	06	04	02		
Extremely Improbable	1	05	04	03	02	01		

Example: Definition of tolerability matrix:

Classification	Definition
Unacceptable	A risk falling into this region is regarded as unacceptable whatever the level of benefits associated with the activity. Any activity or practice giving rise to risks falling in that region would, as a matter of principle, be ruled out unless the activity or practice can be modified to reduce the degree of risk so that it falls in one of the regions below, or there are exceptional reasons for the activity or practice to be retained.
Tolerable	 Risks in that region are typical of the risks from activities that people are prepared to tolerate in order to secure benefits, in the expectation that: the nature and level of the risks are properly assessed and the results used properly to determine control measures. The assessment of the risks needs to be based on the best available scientific evidence and, where evidence is lacking, on the best available scientific advice; the residual risks are not unduly high and kept as low as reasonably practicable (the ALARP principle); and the risks are periodically reviewed to ensure that they still meet the ALARP criteria, for example, by ascertaining whether further or new control measures need to be introduced to take into account changes over time, such as new knowledge about the risk or the availability of new techniques for reducing or eliminating risks.
Broadly acceptable	Risks falling into this region are generally regarded as insignificant and adequately controlled. The levels of risk characterising this region are comparable to those that people regard as insignificant or trivial in their daily lives. They are typical of the risk from activities that are inherently not very hazardous or from hazardous activities that can be, and are, readily controlled to produce very low risks.

Example: The GAR-Model

The GAR-Model (Green/Amber/Red-Model) is <u>one</u> possible simple methodology to identify operational hazards and assess inherent risk. Generally, there are six operational areas, where safety hazards can be identified:

1. Supervision

Supervisory Control considers how qualified the supervisor is and whether effective supervision is taking place. Even if a person is qualified to perform a task, supervision acts as a control to minimise risk. This may simply be someone checking what is being done to ensure it is being done correctly. The higher the risk, the more the supervisor needs to be focused on observing and checking. A supervisor who is actively involved in a task (doing something) is easily distracted and should not be considered an effective safety observer in moderate to high-risk conditions.

2. Planning

Planning and preparation should consider how much information you have, how clear it is, and how much time you have to plan the development or evaluate the situation.

3. Team Selection

Team selection should consider the qualifications and experience level of the individuals used for the specific event/development. Individuals may need to be replaced during the event/development and the experience level of the new team members should be assessed.

4. Team Fitness

Team fitness should consider the physical and mental state of the crew. This is a function of the amount and quality of rest a crewmember has had. Quality of rest should consider the accommodation, potential sleep length, and any interruptions. Fatigue normally becomes a factor after 18 hours without rest; however, lack of quality sleep builds a deficit that worsens the effects of fatigue.

5. Environment

Environment should consider factors affecting personnel performance as well as the performance of the asset or resource. This includes, but is not limited to, time of day, temperature, humidity, precipitation, wind conditions, proximity of aerial/navigational hazards and other exposures.

6. Operational Complexity

Operational complexity should consider both the required time and the situation. Generally, the longer one is exposed to a hazard, the greater are the risks. However, each circumstance is unique. For example, more iterations of an operation can increase the opportunity for a loss to occur, but may have the positive effect of improving the proficiency of the team, thus possibly decreasing the chance of error. This would depend upon the experience level of the team. The situation includes considering how long the environmental conditions will remain stable and the complexity of the work.

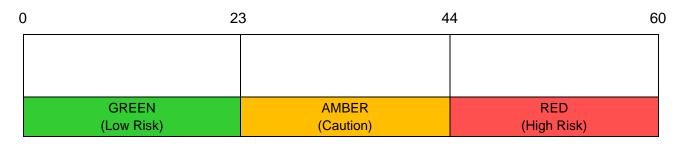
Workflow:

- Define the hazards and assign a risk code to each hazard in each operational sub area from 0 to 10 (0=no risk, 10= maximum risk).
- 2. To get the risk of the operational area: add up all values (for the example below, «Hazard Checklist for operational area planning»: 3 + 3 + 4 + 8 = 18. To get the risk value for the operational area divide 18 by 4 = 4.5.
- 3. Repeat step 1+2 for each operational area.
- 4. Add up the risk values for each operational area (for the example below, «Hazard Checklist for operational area planning», the risk value is 4.5).
- 5. The result shows the risk for the overall risk for the whole operation/mission.

Operational Area	Operational Sub-Area	Task	Risk
Supervision	 Organisational Supervision Crew Supervision Observation Cross-Checking & Monitoring Policies Processes SOP's Guidelines Checklists 	Consider Type, Quality and Quantity of the Supervision. Identify Hazards and assess the relevant Risk.	Assign a Risk Value from 0 to 10.
Planning	 Accuracy of information Amount of information Availability of information Time available 	Identify Hazards during the planning phase and assess the relevant Risk.	Assign a Risk Value from 0 to 10.
Team Selection	 Experience Level: Flying Hours, Mission Type, Area of Knowledge, Equipment of Knowledge, Route and Aerodrome Competence. Crew Composition: Interaction, 	Identify Hazards in the area Team Selection and assess the relevant Risk.	Assign a Risk Value from 0 to 10.
	Communication, Cohesiveness, Changes to the crew.		
Team Fitness	 Physical State Medical Problems Fatigue Rest Time Mental State Stress Factors Pressure on the Team 	Identify Hazards in the area Team Fitness and assess the relevant Risk.	Assign a Risk Value from 0 to 10.
Environment	 Physical Environment: Temperature, Time of Day, Visibility, Organisational Culture, Management Philosophy, Mission Pressure, Attitudes, Norms. Operational Environment: Traffic Density, Terrain Considerations, Controlled vs. Uncontrolled Airspace, Radar vs. Non-Radar Environment, Language Difficulties. 	Identify environmental Hazards and assess the relevant Risk	Assign a Risk Value from 0 to 10.
Operational Complexity	 Complexity of the task Time to complete the Task Number of Iterations Level of Stability 	Identify the Event or Evaluation Complexity Hazards and assess the relevant Risk.	Assign a Risk Value from 0 to 10.
Total Risk Score (add up	the value for each operational area)		Σ =

The mission risk can be visualized using the colours of a traffic light. If the total risk value falls in the GREEN ZONE (1-23), risk is rated as low. If the total risk value falls in the AMBER ZONE (24-44), risk is moderate and you should consider adopting corrective and preventive actions to minimise the risk. If the total value falls in the RED ZONE (45-60), you should implement measures to reduce the risk prior to starting the operation.

GAR Evaluation Scale – Colour Coding the Level of Risk



The ability to assign numerical values or «colour codes» to hazards using the GAR-Model is not the most important part of risk assessment. What is critical to this step is team discussions leading to an understanding of the risks and how they will be managed.

Example: Hazard Checklist for operational area planning

Operational Area	Operational Sub-Area	Question	Risk Value 1-10	Mitigation Action	Implementation Date	Implemented by
Planning	1.Accuracy of information	Is the information accurate?	3			
	2.Amount of information	Do we have all the information needed for the intended mission?	3			
	3.Availability of information	ls information available?	4			
	4.Time available	Do we have enough time for planning?	8	More time for planning and better information to Pilots	dd.mm.yyyy	M.Muster mmu
	Risk value for Planning (=18 divided by the amount of operational sub areas, 4)					

Before a mission starts consider each operational area:

Result: The total risk for planning is within the green range (low risk). Even though it is in the green range you can see in the sub area «time available for planning» that the risk value is quite high (8 out of 10), therefore mitigation action should be considered for this operational sub area.

5.3	Chang Ch. 5.3	e Management ISS1/REV3/09.11.2017				M/CA EVALUATION METHOD
MS CL TOPIC		ORO.GEN.200 LEGAL REFERENCE	ORO.GEN.205	ORA.GEN.200	ORA.GEN.205	
5-OMM04-0 CL ChOM Ch		OMM, Chapter 4	4.X «Change Ma	nagement»		

General:

- □ Is there a documented process to manage safety risks related to a change?
- Does this process enable to identify external and internal changes that may have an adverse effect on safety?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

- The process to manage safety risk related to a change should make use of the organisation's existing hazard identification, risk assessment and mitigation processes.
- Changes that could have a negative impact on safety could come from:
 - implementation of new, or modification of processes / procedures;
 - contracting new providers;
 - implementation of new or modification of tools;
 - implementation of new or modification of aircrafts;
 - evaluation of new stations;
 - definition of alternative means of compliance;
 - any kind of projects with safety relevance.

ATO LAPL, PPL, SPL and BPL

 If applying the organisational review concept, change management be covered by the organisational review which is referred to in chapter 11.1 «Management Evaluation» giving further guidance on the organisational review.

Example Change Process

Task	Note	Responsible
Identify scope of change	•	Responsible Manager (Project Manager)
Perform initial impact assessment	 Impact on SOP's Work-instructions Infrastructure Equipment Personnel 	Project Manager with Safety Manger
Perform Safety Risk Analyses	Identify Hazards (refer to risk assessment)	Project Manager with Safety Manager
Define mitigation actions	Preventive barriers	Domain Manager/SM
Identify key personnel	Key personnel who assists the implementation of the change	Project Manager
Define implementation plan	Timelines and also SPI's	Project Manager
Assess related financial costs	budgeting	Project Manger
Check overall effects through Safety Performance Monitoring	Refer to management evaluation	Safety Manager

5.4 Sat		CA EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 LEGAL REFERENCE	
5-OMM04-020 CL ChOM ChSeq	No. OMM, Chapter 4.X «Safety Review Board (SRB)» MANUAL REFERENCE	

Complex Organisation:

□ Is a Safety Review Board designated?

□ Is the Safety Review Board chaired by the Accountable Manager?

□ Are the SRB responsibilities and duties comprehensively defined?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

Complex Organisation

- The Safety Review Board (SRB):
 - should be a high level committee that considers matters of strategic safety in support of the Accountable Manager's safety accountability;
 - should be chaired by the Accountable Manager and be composed of heads of functional areas;
 - should monitor:
 - o safety performance against the safety policy and objectives;
 - o that any safety action is taken in a timely manner; and
 - o the effectiveness of the organisation's safety management processes.
 - should ensure that appropriate resources are allocated to achieve the established safety performance.
- The SRB should be part of the organisational structure.
- The Safety Manager or any other relevant person may attend, as appropriate, Safety Review Board meetings;
- He may communicate to the Accountable Manager all information, as necessary, to allow decision-making based on safety data.
- The SRB should provide strategic direction to the safety action group.
- The management evaluation activities conducted under former legal requirements are typical activities which should be assigned to the SRB to evaluate the safety performance and to ensure continuous improvement.
- The SRB and the Safety Action Group (SAG) may be combined.

	-	Action Group (SAG) ISS1 / REV0 / 18.06.2013	CA EVALUATION METHOD
MS CL TOPIC		ORO.GEN.200 ORA.GEN.200 LEGAL REFERENCE	
5-OMM04-025 CL ChOM ChSe		OMM, Chapter 4.X.X «Safety Action Group (SAG)» MANUAL REFERENCE	

Complex Organisation:

□ Is a Safety Action Group designated?

□ Are the SAG responsibilities and duties comprehensively defined?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

Complex Organisation

- A Safety Action Group may be established as a standing group or as an ad-hoc group to assist or act on behalf of the Safety Review Board.
- More than one Safety Action Group may be established depending on the scope of the task and specific expertise required.
- The Safety Action Group should report to and take strategic direction from the Safety Review Board and should be comprised of managers, supervisors and personnel from operational areas.
- The Safety Action Group should:
 - monitor operational safety;
 - resolve identified risks;
 - assess the impact on safety of operational changes; and
 - ensure that safety actions are implemented within agreed timescales.
- The Safety Action Group should review the effectiveness of previous safety recommendations and safety promotion.
- The SRB and the Safety Action Group (SAG) may be combined.

5.6	Safety Ch. 5.6	Performance N ISS1 / REV0 / 18.06.2013	Ionitoring and Measurement	M/CC EVALUATION METHOD
MS CL TOPIC		ORO.GEN.200 LEGAL REFERENCE	ORA.GEN.200	
5-OMM CL ChO	104-030 IM ChSeqNo.	OMM, Chapter	4.X «Safety Performance monitoring and measurement»	

Complex Organisation:

- □ Are Safety objectives defined?
- □ Are the Safety objectives communicated to all employees?
- □ Are Safety Performance Indicators (SPI's) defined?
- □ Is the Safety Performance checked on a regular basis?
- □ Is the Safety Performance communicated to all staff on a regular basis?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

Complex Organisation

- Definition and Explanation:
 - The Safety Performance Monitoring and Measurement should be a process by which the safety performance of the organisation is verified in comparison to the safety policy and objectives.
 - **Safety.** The state in which the possibility of harm to persons or of property damage is reduced to, and maintained at or below, an acceptable level through a continuing process of hazard identification and safety risk management.
 - Level of safety is the degree of safety of a system. It is an emerging property of the system, which represents the quality of the system, safety-wise. It is expressed through safety indicators.
 - **Safety indicators** are the parameters that characterise and/or indicate the level of safety of a system.
 - Safety targets are the concrete objectives of the level of safety.
 - Acceptable level of safety is the minimum degree of safety that must be assured by a system in actual practice.
 - **Safety indicator value** is the quantification of a safety indicator.
 - Safety target value is the quantification of a safety target. (ICAO DOC 9859, 2009, CH. 6)
 - Safety Performance is defined as the level of safety achievement against the Safety Performance Objectives or Targets (SPO's), using specific Safety Performance Indicators (SPI's). The Safety Performance reflects the ability of the organisation to effectively manage risks.

(EHEST, 2012, S. 50)

General

- At different levels of maturity of the Safety Management System, the amount of quality safety data differ. Therefore, FOCA recommends, a gradual approach for safety performance measurement:
- At the first stage, the focus should be on the establishing of a functioning reporting system (refer also to CL Chapter 6 Reporting Scheme). It is of utmost importance to receive enough reports in order to get evidence for analysing and improving the system concerned. Therefore, all employees need to be informed about the importance of the reporting (refer also to Safety Policy, culture).
- At the second stage, the measurement can begin. The management should set safety targets and define Safety Performance Indicators (SPI's) which are in-line with the safety policy. The targets can be of a quantitative (numerical) or of a qualitative (non-numerical) nature. The Safety Performance should then be verified and communicated on a regular basis.
- At the starting of the measurement the indicators might be of a more simple kind, such as simple counting of reports. Once the Safety Management is in place and compliance with requirements has been achieved, new more sophisticated SPI's will need to be introduced to achieve improvement of safety performance.
- At the maturity level where the compliance and an effective hazard and risk assessment process are established, safety issues can be identified, mitigation measures introduced and their effectiveness monitored. At this stage the focus should also be on continuous improvement of the system.

Example of Indicators

- Quantitative indicators:
 - the number of safety reviews performed;
 - the number of staff who received training in Safety Management;
 - the number of internal audits performed versus number of audits planned;
 - the number of voluntary safety reports per staff member per year;
 - the number of risk assessments performed following organisational changes;
 - average lead time for completing corrective actions following internal audit;
 - number of suggestions for safety improvements;
 - frequency and effectiveness of safety briefings;
 - number of hazard reports received;
 - relation number of high risk to low risk occurrences in relation to flight hours flown;
 - number of occurrence reports in relation to flight hours flown;
 - solidity of risk controls (defences) per 1 year;
 - risk value (total risk values/number of reports/flight hours per month).
- Qualitative indicators:
 - feedback received from staff on the safety policy;
 - feedback received from staff on new procedures implemented in the area of internal occurrence reporting or hazard identification.

Example Safety Performance Indicators

ltem	Objective						Year	хххх			9 10 11 12 4 th Quarter 2 nd Half Image:		
	-	1	2	3	4	5	6	7	8	9	10	11	12
	-	15	st Quar	ter	2 ^r	2 nd Quarter		3 ^r	^d Quar	ter	4 th Quarter		ter
	-			1 st	Half					2 nd	Half		
number of safety reviews performed													
number of internal audits performed versus number of audits planned													
number of voluntary occurrence reports per staff member													
number of mandatory occurrence reports raised/flight hour													
number of hazard reports received/flight hour													
number of risk assessments performed													
average lead time for completing corrective actions following internal audit													
number of suggestions for safety improvements													
relation number of high risk to low risk occurrences in relation to flight hours													
Risk value	3.5	4	4	4.5	4.2	3.8	3.4	3.3	3.2	3.1	2.8	2.8	2.8

5.7	Safety Ch. 5.7	Promotion and Communication ISS1 / REV0 / 18.06.2013	CA / IN EVALUATION METHOD
MS CL TOPIC		ORO.GEN.200 ORA.GEN.200 LEGAL REFERENCE	
5-OMM04 CL ChOM C		OMM, Chapter 4.X «Safety Promotion» MANUAL REFERENCE	

General:

□ Is there a procedure on how employees are informed about safety Issues?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

- Safety Promotion:
 - The Safety Promotion is a process aimed to promoting a culture of safety by ensuring that, all personnel in an organisation are aware that, at their level and in their day-to-day activity, they are key players in safety and that everyone, therefore, contributes to an effective safety management.
 - Managers are an important driving force of effective safety management. It is the responsibility of each manager to demonstrate his/her commitment to safety, to promote safety in everyday activities and to lead by example.
 - Training and effective communication on safety are two important processes supporting safety promotion.
 (EHEST, 2012, S. 60)
- Communication:
 - The organisation should establish communication about safety matters which:
 - a) Ensures that all personnel are aware of the safety management activities as appropriate for their responsibilities;
 - b) Conveys safety critical information, especially relating to assessed risk and analysed hazards;
 - c) Explains why particular actions are taken; and
 - d) Explains why safety procedures are introduced or changed.
 - Regular meetings with personnel where information, actions and procedures are discussed may be used to communicate safety matters.

Example safety communication concept

ΤοοΙ	Information	Frequency/Year	Responsibility
Safety Newsletter	International/National Safety development. General Information about Safety Issues.	12	SM
E-Mail	Special Information	When needed	Domain Manager
Safety Meetings	Information about company developments: OR, Hazard Reporting statistics, mitigation actions etc.	12	SM

ATO LAPL, PPL, SPL and BPL

• If applying the organisational review concept, safety promotion and communication may be covered by an organisational review which is referred to in chapter 11.1 «Management Evaluation» giving further guidance on the organisational review.

	5.8 Safety- Studies, -Reviews, -Surveys, -Investigation Ch. 5.8 ISS1 / REV0 / 18.06.2013		
MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 LEGAL REFERENCE		
5-OMM04-040 CL ChOM ChSeqN	OMM, Chapter 4.X «Safety- Studies, -Reviews, -Surveys, -Investigation» MANUAL REFERENCE		

Complex Organisation:

- □ Is a process defined how internal safety studies are conducted or how external studies are considered?
- □ Is a process defined how internal safety investigations are conducted?
- □ Is a process defined which addresses proactive and reactive evaluation of facilities, equipment, documentation and procedures?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

Safety Studies

• Safety Studies are rather large analyses encompassing broad safety concerns, which could be at state or global level. To underline some safety concerns it is not enough to argument on isolated occurrences and anecdotal information. Therefore, safety studies are addressed when a company has to analyse a system safety deficiency which requires a major change rather than identify specific, individual hazards (e.g.: incorrect procedures, incorrect instructions...).

Step	Remark	ΤοοΙ	Responsibility
Identify the need for a safety study	Conclude order to Safety Action Group (SAG)		Safety Review Board (SRB)
Plan Safety Study	 Define activities Define specialists		Safety Action Group (SAG)
Conduct Study	 Define scope Define method of study Define hypothesis Empiricism Analyses Define Hazards Define Risk Define possible mitigation actions including SPI's 	Hazard identification process	SAG
Communication to SRB	SRB Meeting	Power Point presentation	Safety Manager
Decision of Implementation	Board of Directors		Accountable Manager
Implementation Action	•		SAG
Controlling	Monitoring of effectiveness of implementation	Management Evaluation Tool	SRB

Safety Reviews

• Safety Reviews are actually a trend monitoring of the overall safety development of the organisation. With the Safety Review the actual performance of the organisation in relation to the targeted performance objectives is compared. This data should be reflected in the Management Review.

Safety Surveys

• Safety Surveys examine particular procedures of a specific operation, problem areas or bottlenecks in the daily operation. Safety surveys may be conducted with questionnaires or confidential interviews. Since surveys are subjective, verification may be needed before corrective action.

(ICAO DOC 9859, 2008, 9.6.14)

Internal Safety Investigation

 Internal Safety Investigations include occurrences and events that are not required to be investigated or reported to the State. For example: frequency congestion (ATC), ramp vehicle operation (aerodrome). Nevertheless, they could have a safety and also a financial impact. (ICAO DOC 9859, 2008, 9.6.15)

Example Process Internal Safety Investigation

Step	Remark	ΤοοΙ	Responsibility
Decision to launch an Investigation	Put together investigation team.		AM/SM
Activity planning	 Define and breakdown the activities Define the investigation needs	Project management tool	SAG
Data collection	 Collect Data about the event. Possible sources: Physical examination, documentation and files, interviews, observation of actions, simulations, expert consultancy, safety database. 	• Tool xy	SAG
Scenario identification	Identify and reconstruct the scenario.	Risk Assessment form	SAG
Scenario analyses	 Analyse the facts, determine the causes and identify the associated hazards. Integrate all investigation elements. 	 Just culture process Reason model	SAG/SM
Risk Assessment	Determine risk level and assess risk acceptability	Risk Assessment tool	SAG/SM
Correction/prevention	Determine corrective and preventive action	Risk assessment form	SAG/SM
Safety communication	Communicate the result of the investigation to all involved	• E-Mail	SM
Controlling	Check effectiveness of mitigation action	Management evaluation	SM
Completion of the investigation	Close and archive file		SM

(EHEST SAFETY MANUAL TOOLKIT, 2012, S. 49/50)

6 Reporting Scheme

Ch. 6 ISS1 / REV3 / 09.11.2017

6.1 Repor	ting- and Feedback System		M/CC EVALUATION METHOD
MS CL TOPIC	ORO.GEN.160 ORO.GEN.200 ICAO SMM, Doc. 9859 LEGAL REFERENCE	ORA.GEN.160 ORA.GEN.200 (EU) 996/2010 / (EU) 2015/1018	(EU) 376/2014
6-OMM07-005 CL ChOM ChSeqNo.	OMM, Chapter 7.X «Reporting an MANUAL REFERENCE	d Feedback System»	

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

- \Box Is a reporting system defined?
- □ Is a Feedback process integrated within the Reporting System?

□ Is there a statement that the overall purpose of the reporting scheme is to improve safety performance and not attribute blame?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

- As a main concept, the processing of reporting shall be defined in the OMM and specific reporting procedures including sample of forms as required by the organisation and its terms of approval, shall be detailed and presented in the relevant manual. Reporting procedures are to be established for the relevant personnel for easy use and access. However, duplications should be avoided.
- Reporting schemes are an essential part of the overall monitoring function. With the aim to
 improve aviation safety. And additionally, increase product quality, efficiency, job satisfaction
 and adding value. The introductory text should mention, that the overall purpose of a reporting
 scheme is to use reported information to improve the level of safety performance of the
 organisation and not to attribute blame.
- The following reporting are subject to the Reporting and Feedback System:
 - Mandatory reporting;
 - Voluntary reporting;
 - Anonymous reporting; and
 - Hazard reporting.
 - A Reporting- and Feedback System shall contain the following essential elements:
 - Possibility and means to report;
 - Analysis and assessment of the implications;
 - Definition of the any necessary action;
 - Implementation of corrective and preventive action;
 - Feedback to the reporter;
 - Monitoring of effectiveness of corrective and preventive actions;
 - Specific retaining and archiving system;
 - Promulgation of relevant information so that other persons and organisations may learn from them.

- Reporting processes are to be defined for easy use and access. The following information shall be provided:
 - What is to be reported / What are the reportable circumstances/issues;
 - Who has to report;
 - What resources/means should be used for reporting / What kind of forms have to be used;
 - Which are the relevant addresses and contacts;
 - What are the different time frames for submission (dispatch provisions).
- In other words, who is responsible to file which form/means to which address within which time

6.2 Occur	rence Reporting	M/CC / M/IN
Ch. 6.2	ISS1 / REV3 / 09.11.2017	EVALUATION METHOD
MS CL TOPIC 6-OMM07-010 CL ChOM ChSeqNo.	ORO.GEN.160 ORO.GEN.200 ORA.GEN.160 ORA.GEN.200 ICAO SMM, Doc. 9859 (EU) No 996/2010 / (EU) 2015/1018 LEGAL REFERENCE OMMM, Chapter 7.X «Occurrence Reporting» MANUAL REFERENCE	(EU) 376/2014

General:

- □ Is there a link to the occurrence reporting procedures as required by the specific organisation?
- □ Is there a possibility to report anonymous and confidential?
- □ Is there a reference to the <u>reporting portal</u> www.aviationreporting.eu «Aviation Safety Reporting» of the EU for mandatory occurrence reporting and, desirably, for voluntary reporting ?
- □ Do the procedures ensure that any occurrence, serious incident and accident are reported by the organisation to FOCA and, in case of serious incident or accident, to the SUST?
- □ Do the procedures include defined time frames for each reporting step and stipulate that reports shall be made available to the competent authority as soon as possible, but latest within 72 hours if the individual is directly reporting to the authority? If the individual is reporting to an organisation the report shall be submitted within 72 hours to the organisation and within another 72 hours from the organisation to the authority. Are specific forms provided as required by the organisation and its terms of approval?
- □ Are the reports processed as defined in the Reporting and Feedback System?
- Do the procedures ensure, that the corrective and the preventive actions to avoid similar occurrences in the future, are reported to the competent authority?
- □ Are all occurrence reports retained and stored regardless of their significance?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

- By the introduction of Regulation (EU) No 376/2014 on reporting, analysis and follow-up of occurrences in civil aviation, a list of occurrences to be mandatorily reported has been drawn up which is found in Regulation (EU) No 2015/1018.
- The EU has established a <u>reporting portal</u> which shall be used for the mandatory reporting and may be used for voluntary reporting (the system automatically transfers reports in due time to the applicable competent authority – FOCA, for Swiss organsisations/reporters).
- Reference is made to the <u>FOCA website</u> regarding implementation of (EU) No 376/2014.

Note: For specific reporting requirements as relevant to the organisation and its terms of approval, please refer to the applicable regulation and provisions

- The introductory text is to include that:
 - all persons involved in civil aviation are to report any occurrence endangering or potentially endangering safety of operation;
 - the procedures are to ensure that knowledge of relevant incidents and accidents is disseminated, so that other persons and organisations may learn from them;
 - the reporting scheme is complementary to the normal day-to-day procedures and «control» systems and is not intended to duplicate or supersede any of them.
- Occurrence reports shall be processed as defined in the Reporting- and Feedback System. Additionally, they should include:
 - Reporting-Forms as required by the kind of occurrence as stipulated by the regulation and provisions for the organisation and its terms of approval;
 - An assessment of the safety implications of each relevant incident and accident, including previous similar occurrences, so that any necessary action can be initiated;
 - Notification of the competent authority within 72 hours for individuals or 144 hours for organisations of identifying the occurrence to which the report relates to. Immediate notification is required in case of a serious incident or accident;
 - Notification to internal and external parties involved and/or interested;
 - Implementation of corrective and preventive action to avoid similar occurrences in the future. Measures taken shall be reported to the competent authority.
- If the organisation identifies an actual or potential safety risk as a result of its analysis, it shall transmit to the authority within 30 days from the date of the notification of the occurrence by the reporter:
 - the preliminary results of the analysis performed; and
 - the final results of the analysis as soon as they are available and, in principle, no later than three months from the date of notification of the occurrence.

Example of a follow-up process for handling occurrence reports

Step	Task	Tool	Responsibility
Data Input	Collect and sort	Specific reporting means - internal reporting tool xy (for internal reporting) - reporting portal (EU) (for external reporting)	anyone
Initial Analysis	Evaluate and classify data	Reporting means	SM
Notification	Employees shall report occurrences at the latest within 72 hours to their organisation, which itself has to report within another 72 hours to FOCA.	Reporting Procedures as relevant to the case Refer Manual XX, Chapter XY	NP of the area concerned
Hazard Identification	Identify Hazard	Hazard Identification Form, Refer XX	SM
Risk Assessment	Assess the Risk Transfer to Risk portfolio	Risk Assessment Tool, Refer XX Risk Portfolio	SM
Tolerability Assessment	Check tolerability	Tolerability Matrix, Refer XX	SM
Mitigation	Define corrective action and preventive measures		SM and NP of the area concerned
Notification	If an actual or potential safety risk is identified, the organisation shall transmit to FOCA the preliminary results of an analysis performed within 30 days and the final results within three months.	Communication means	SM and NP of the area concerned
Feedback	Provide the sender of the report with a feedback	Form XY	SM
Information	Notification of internal and external parties involved and/or interested	Reporting schemes of external parties and/or Means as adequate to the case including investigation documentation or parts thereof	SM
Implementation	Implement corrective action and preventive measures		NP of the area concerned
Monitor	Monitor the effectiveness	Risk Portfolio	SM

7 Compliance Management (CM)

Ch. 7 ISS1 / REV3 / 09.11.2017

7.1 Comp Ch. 7.1	liance Monitoring Function and Programme	M/CC / IN EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 ORA.FSTD.100 LEGAL REFERENCE	
7-OMM05-005 CL ChOM ChSeqNo.	OMM, Chapter 5.X «Compliance Monitoring Programme» MANUAL REFERENCE	

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

General:

- □ Is the organisational set-up of the Compliance Monitoring adequate to the size, complexity and activity of the organisation?
- □ Is the scope of the Compliance Monitoring appropriate to the complexity and activity of the organisation?
- □ Are the elements of the Compliance Monitoring Programme complete?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

- The Compliance Monitoring is the function, that monitors the compliance of the organisation with all relevant requirements and standards, including those of the Safety Management. The verification of the compliance is mainly conducted through the audit- and inspection processes.
- The Compliance Monitoring Function is managed by the Compliance Monitoring Manager.
- Organisational set-up:
 - The basic structure of the organisational set-up of the Compliance Monitoring Function shall be tailored to the size, complexity and activity of the organisation. The set-up should be defined and illustrated within the organisational structure of the organisation. This means possible multiple functions/positions? For management functions, different levels and sophistication of tools and means used for the Compliance Monitoring.
- The Compliance Monitoring Programme shall include, as a minimum:
 - Audit and inspection procedures including related documents (e.g. audit/inspection report);
 - Scope and area of audit and inspection, including related checklist;
 - The schedule for the programme (e.g. audit-schedule);
 - Follow-up and corrective action procedures;
 - Feedback to the Accountable Manager;
 - Record and archiving system;
 - Compliance Monitoring Training.
- The Compliance Monitoring Programme shall be properly implemented, maintained and continuously reviewed and improved.
- It is strongly recommended, that the Compliance Monitoring Programme requires, that all aspects of the organisation are reviewed periodically, within a defined cycle;

- Scope to be monitored:
 - As a minimum, the organisation should monitor compliance with the procedures they have designed, and where appropriate, monitor:
 - privileges of the organisation and the scope of activities / terms of approval(s), authorisation(s) or declaration(s);
 - o management system procedures including those of the safety management.
 - o manuals, logs and records;
 - o training standards.

ATO LAPL, PPL, SPL and BPL

• Such organisations, if applying the organisational review concept, may verify compliance by using the organisational review checklist which is referred to in chapter 11.1 «Management Evaluation» for further guidance on the organisational review.

7.2	Audit a	ISS1/REV3/09.11.2017	M/CC / IN EVALUATION METHOD
MS CL TOPIC		ORO.GEN.200 ORA.GEN.200 ORA.FSTD.100 LEGAL REFERENCE	
7-OMM05-010 CL ChOM ChSeqNo.		OMM, Chapter 5.X «Audits and Inspections» MANUAL REFERENCE	

General:

- □ Is there a procedure for planning and scheduling the programme of audits?
- Does the audit procedure include the verification of practical samples?
- □ Is there a procedure for planning and scheduling the programme of inspections?
- □ Are the audit- and inspections scopes / areas specifically defined?
- □ Is there an audit plan or audit plans covering the relevant elements and audit-scopes?
- □ Do the audits also focus on the integrity of the organisation's management system including safety management?
- □ Does the audit and inspection procedure include the reporting, as well as the follow-up and corrective actions?
- Are audit- and inspection reports available? Do they provide all relevant information? Is a sample provided?
- Does the audit and inspection procedure include the supervision of the implementation of corrective actions and the monitoring of their effectiveness?
- □ Are the audit- and inspection processes applied, practiced and effective?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

Note: For ATO LAPL, PPL, SPL and BPL, if applying the organisational review concept, may perform audits and inspections by the organisational review checklist. Refer to chapter 11 «Management Review» for further guidance on the organisational review.

General

- Definition and Explanation:
 - **«Audit»** means a systematic, independent and documented process for obtaining evidence and evaluating it objectively to determine the extent to which requirements are complied to.
 - **«Inspection**» means an independent documented conformity evaluation by observation and judgement, accompanied, as appropriate by measurement, testing or gauging, in order to verify compliance with applicable requirements.
 - While internal audits are often thought of as a test or «grading» of an organisation's activities, they are an essential tool for safety assurance. They help managers in charge of activities supporting the delivery of services, to control that once safety risk controls have been implemented they continue to perform and are effective in maintaining continued operational safety.
 - Audits should go beyond just checking compliance with regulatory requirements and conformance with the organisation's standards. The auditor should assess whether the procedures in use are appropriate and whether there are any work practices that could have unforeseen safety consequences.

- There is no need to categorise audits according to the focus of the audit (e.g. safety audit, compliance audit etc.)
- Audit- and Inspection Procedures:
 - Audit- and Inspection procedures shall contain the following essential steps:
 - 1. Planning;
 - 2. Preparation;
 - 3. Execution;
 - 4. Reporting;
 - 5. Initiation of action;
 - 6. Monitoring of implementation of measures; and
 - 7. Monitoring of effectiveness.
 - In accordance with the compliance monitoring, the scope and area of audit and inspection shall be defined.
 - The procedure should include, that follow-up events are scheduled, when necessary, to verify that corrective actions were carried out and that they were effective.
 - To ensure flexibility for recording audits/inspections performed and for scheduling additional events, the plan should be maintained as a separate document or file.
 - The Inspections procedure should consider ad-hoc inspections.
- Audit Schedule and Plan:
 - The audit scopes are to be defined in the «Audit Plan». Whatever the plan is named and designed, the basics of an Audit Plan are:
 - o Listing of all audit scopes, as required by the compliance monitoring;
 - o Reference to checklists, records and means used for the audit;
 - Date of the audit and scheduled duration;
 - o Auditor by name.
 - The schedule of audits should be flexible and allow unscheduled audits when trends are identified.
 - To ensure that all aspects of the organisation are reviewed periodically, it is strongly recommended to specify an interval between audits, covering the same scope and focus. Ideally, all aspects should be reviewed within a period of 12 consecutive months. The organisation may increase the frequency up to 24 months. However, it is unlikely, that an interval between audits greater than 24 months is effective.
- Inspection Plan:
 - Areas to be inspected should be defined in an «Inspection Plan» and include a schedule of inspections to be carried out in a year. Whatever the plan is named and designed, the major elements of an Inspection Plan are:
 - o Listing of all subject area, as required by the compliance monitoring;
 - Topic to be inspected;
 - Period/frequency;
 - Checklists, records and means used to inspect the concerned topic;
 - Responsible function for the subject to be inspected.

- Audit and Inspection Report Format:
 - The audit report means a written evaluation by the auditor of the results of the audit.
 - The inspection report means a written evaluation by the inspector of the result of the inspection.
 - Audit and Report forms may be combined.
 - Template for report forms may include the following key information:
 - o Report identification and reference system;
 - Audit summary;
 - o Assignment to the defined category of the scope/area;
 - Finding and level of finding; or
 - observation;
 - o Corrective action and prioritised list of measures with suggested timeline; or
 - recommendation;
 - o Signatures.

Air Operators (Complex Operator)

- Air Operators should monitor compliance with the operational procedures they have designed to ensure safe operations, airworthy aircraft and the serviceability of both operational and safety equipment.
- Typical **audits** scopes are, as applicable:
 - operational procedures;
 - flight safety procedures;
 - operational control and supervision;
 - aircraft performance;
 - all weather operations;
 - communication and navigational equipment and practices;
 - mass, balance and aircraft loading;
 - instruments and safety equipment;
 - ground operations;
 - flight and duty time limitations, rest requirements, and scheduling;
 - aircraft maintenance/operations interface;
 - use of the MEL;
 - flight crew;
 - cabin crew;
 - dangerous goods;
 - security.
- Typical areas for **inspections** are, as applicable:
 - actual flight operations;
 - ground de-icing/anti-icing;
 - flight support services;
 - load control;
 - technical standards.

ATO CPL, MPL and ATPL

- ATOs should monitor compliance with the training and operations manuals they have designed to ensure safe and efficient training:
- Typical **audit** scopes are, as applicable:
 - training procedures;
 - flight safety;
 - flight and duty time limitations, rest requirements and scheduling;
 - aircraft maintenance/operations interface.
- Typical areas for **inspections** are:
 - facilities;
 - actual flight and ground training;

ATO LAPL, PPL, SPL and BPL

• If applying the organisational review concept, the organisational review checklist should cover at least the items as stipulated in GM2 ORA.GEN.200(c). Refer to chapter 11.1 «Management Evaluation» for further guidance on the organisational review.

FSTD

- Typical subject areas for inspections are:
 - actual FSTD operation;
 - maintenance;
 - verification of technical standards through QTG reruns, fly-outs, etc.;
 - FSTD safety features
- As a minimum, FSTD Qualification Certificate Holders shall have the following **audit** scopes:
 - organisation;
 - plans and objectives;
 - maintenance procedures;
 - FSTD qualification level;
 - supervision;
 - FSTD technical status;
 - manuals, logs and records;
 - defect deferral;
 - personnel training;
 - aircraft modifications;
 - FSTD configuration management.
- FSTD Compliance Monitoring audits and inspections may be documented on the «Compliance Monitoring Checklist» based on «COMPLIANCE MONITORING ASSESSMENT FOR ORGANISATIONS OPERATING FSTDs» as stipulated and illustrated in GM2 ORA.FSTD.100.
- For detailed inspection programmes covering the FSTD operation, qualification and maintenance procedures refer also to «Appendix FSTD».

Example of an Audit plan

				Year XY											
Scope of Audit	Department	Auditor	Tool	January	February	March	April	May	June	July	August	September	October	November	December
Safety Management	Safety Manager	A. Sample	Checklist XX			Х					Х				
Operational Control	Dispatch	T.Airspeed	Checklist XX					X							
Mass & Balance	Flight Operations	A. Heavy	Checklist XX					X							
Anti- / De-Icing	Ground Operations	P. Snow	Checklist XX	X											Х
Subcontractor XY	Line Maintenance	Y. Screw							X						
FSTD technical status	FSTD	T. Visual	Checklist XX										x		

Example Audit Report

Date of Audit: Scope of Audit: Department audit Auditee: Auditors:	ied:					
			List	t of Findings		
Legal Reference	Ref. Manual	Finding	Class of Finding	Required Action	Responsible	Due date
ORO.GEN.160	OMM chapter xx	Occurrence Reporting: The organisation does not have any process for occurrence reporting and does not send any OR to FOCA.	2	Establish Occurrence Process within the company and inform the employees about the procedure accordingly	ΑΜ	DD.MM.YYYY

Air Operator (Non-Complex Operator)

• Compliance monitoring audits and inspections may be documented on a «Compliance Monitoring Checklist», and any findings recorded in a «Non-compliance Report». As stipulated and illustrated by the GM3 ORO.GEN.200(a)(6), the following example may be used for this purpose:

Year:		1	
Subject	Date Checked	Checked by	Comments / Non-compliance Report No.
Flight Operations			
Aircraft checklists checked for accuracy and validity			
Minimum five flight plans checked and verified for proper and correct information			
Flight planning facilities checked for updated manuals, documents and access to relevant flight information			
Incident reports evaluated and reported to the appropriate competent authority			
Ground Handling			
Contracts with ground handling organisations established and valid, if applicable			
Instructions regarding fuelling and de-icing issued, if applicable			
Instructions regarding dangerous goods issued and known by all relevant personnel, if applicable			
Mass and Balance			
Min. five load sheets checked and verified for proper and correct information, if applicable			
Aircraft fleet checked for valid weight check, if applicable			
Minimum one check per aircraft of correct loading and distribution, if applicable			
Training			
Training records updated and accurate			
All pilot licenses checked for currentness, correct ratings and valid medical check			
All pilots received recurrent training			
Training facilities & Instructors approved			
All pilots received daily inspection (DI) training			
Documentation			
All issues of operations manual (OM) checked for correct amendment status			
AOC checked for validity and appropriate operations specifications			
Aviation requirements applicable and updated			
Crew flight and duty time record updated, if applicable			

Compliance Monitoring Checklist Year:				
Subject	Date Checked	Checked by	Comments / Non-compliance Report No.	
Flight documents record checked and updated				
Compliance monitoring records checked and updated				
Safety Management				
Safety Manager is appointed and qualified				
The safety policy is communicated and includes a commitment towards achieving the highest safety standards, signed by the Accountable Manager				
There are documented management organisational diagrams and job descriptions for all personnel				
The organisation has a reporting system to captures errors, hazards and near misses that is simple to use and accessible to all personnel				
The organisation has proactively identified all the major hazards and assessed the risks related to its current activities				
Investigations establish causal / contributing factors (why it happened, not just what happened)				
The safety reporting system provides feedback to the reporting person of any actions taken (or not taken) and, where appropriate, to the rest of the organisation				
There is a structured process for the management of risk that includes the assessment of risk associated with identified hazards, expressed in terms of severity and probability				

Non-Compliance Report Number:					
To Compliance Monitoring	Manager	Reported by:	Date:		
Cataran	Flight Operations	Ground Handling	Mass and Balance		
Category	🗌 Training	Documentation	□ Other		
Description:			Reference:		
Level of Finding:					
Root-cause of non-complian	ice:				
Suggested correction:					
Compliance Monitoring Man	ager:				
Corrective action require	ed	Corrective action not req	Corrective action not required		
Responsible person:		Time limitation:			
Corrective action:		Reference:			
Signature responsible person:		Date:			
Compliance Monitoring Man	ager:				
Correction and correctiv	e action verified	Report closed			
Signature Compliance Monit	toring Manager:		Date:		

7.3	Audito Ch. 7.3	ISS1 / REV3 / 09.11.2017	M/CC / M/IN EVALUATION METHOD
MS CL TOPIC		ORO.GEN.200 ORA.GEN.200 ORA.FSTD.100 LEGAL REFERENCE	
7-OMM05- CL ChOM Ch		OMM Chapter 5.X «Auditors and Inspectors» MANUAL REFERENCE	

General:

□ Is it ensured that inspections and audits are carried out by personnel not responsible for the function, procedure or products being audited?

□ Do all the auditors and inspectors have relevant knowledge, background and experience as appropriate to the activities being audited or inspected; including knowledge and experience in compliance monitoring?

□ Is there a list of auditors by name and inspectors by function?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

Note: For ATO LAPL, PPL, SPL and BPL, if applying the organisational review concept, the listed items/subjects in this chapter should be considered for the person or group of persons assigned to conduct the organisational review, as referred to in chapter 4.2 «Personnel Requirements». Refer to chapter 11.1 «Management Evaluation» for details on the organisational review.

General

- The Compliance Monitoring Manager may perform all audits and inspections himself/herself or appoint one or more auditors by choosing personnel having the related competence either from within or outside the organisation.
- Inspections and audits should be carried out by personnel <u>not</u> responsible for the function, procedures or products being audited.
- Auditors and inspectors should have and demonstrate relevant knowledge, background and experience as appropriate to the activities being audited or inspected; including knowledge and experience in compliance monitoring.
- If external personnel are used to perform compliance audits or inspections:
 - any such audits or inspections are performed under the responsibility of the Compliance Monitoring Manager; and
 - the organisation remains responsible to ensure that the external personnel have relevant knowledge, background and experience as appropriate to the activities being audited or inspected; including knowledge and experience in compliance monitoring.
 - The organisation retains the ultimate responsibility for the effectiveness of the compliance monitoring function in particular for the effective implementation and follow-up of all corrective actions.
- Auditors are to be listed by name on the audit plan, including their scope of activity.
- On the defined inspection scopes, the function, responsible for the inspection should be named.
- The authority, duties and responsibilities of an auditor should include, as a minimum:
 - conducts audits and inspections in accordance with the defined processes;
 - evaluates safety management issues and procedures;

- evaluates the compliance of the organisation in accordance with the Compliance Monitoring Programme;
- supports the establishment of audit and/or inspection checklist;
- establishes the audit and/or inspection report, as applicable;
- reports findings/deficiencies/concerns identified directly to the CMM/SM or as applicable, in accordance with the audit/inspection processes and provides recommendations for improving the organisation's operations, in terms of both efficient and effective performance;
- refuses an audit / inspection if:
 - not trained and qualified as auditor;
 - not in the position to demonstrate relevant knowledge, background and experience as appropriate to the activities being audited or inspected; and
 - responsible for the function, procedure or product being audited (audit only).

FSTD

• Inspection tasks should be conducted by the FFP and/or appropriate FSTD organisation's personnel such as evaluation pilots or the technicians running the QTG tests.

Name of Auditor Scope of activity Initial training Recurrent training Next recurrent performed performed training due H. Example Management System DD.MM.YYYY DD.MM.YYYY DD.MM:YYYY DD.MM.YYYY T. Shipper FSTD Evaluation Pilot DD.MM.YYYY DD.MM:YYYY aircraft type XY A. Schofield FSTD QTG review DD.MM.YYYY DD.MM.YYYY DD.MM:YYYY aircraft type XY/FNPT MEP D. Riexinger HESLO / HEC DD.MM.YYYY DD.MM.YYYY DD.MM:YYYY

Example List of internal Auditors

7.4 Findi	ngs, Corrective- ISS1 / REV3 / 09.11.2017	and Preventiv	ve Actions		M/CC / IN EVALUATION METHOD
	ORO.GEN.150 ORA.GEN.200 LEGAL REFERENCE	ORO.GEN.155	ORO.GEN.200	ORA.GEN.150	ORA.GEN.155
7-OMM05-020 CL ChOM ChSeqNo.		5.X «Findings, C	orrective- and Pr	eventive Actions	»

General:

- □ Are there provisions and procedures related to the handling of Findings?
- Does the procedure require that a corrective action plan is defined which addresses the effects of non-compliance, as well as its root-cause?
- Does the procedure require that, any safety measures mandated by FOCA are implemented?
- □ Does the procedure require that any relevant mandatory safety information issued by the Agency, including airworthiness directives are implemented?
- Does the procedure require that the implementation of measures and its effectiveness is monitored?

FSTD:

□ Does the process ensure that measures resulting from technical inspections and from competent authority are implemented and their effectiveness is monitored?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

Definition and Explanations

- Findings/non-compliance may either be detected by the operator itself (compliance monitoring) or by FOCA (e.g. Audit).
- Correction is the action to eliminate a detected non-compliance.
- Corrective action is the action to eliminate or mitigate the root cause(s) and prevent reoccurrence of an existing detected non-compliance or other undesirable condition or situation. Proper determination of the root cause is crucial for defining effective corrective actions to prevent reoccurrence.
- Preventive action is the action to eliminate the cause of a potential non-compliance or other undesirable potential situation.
- The corrective action plan defined by the operator should address the effects of the noncompliance, as well as its root cause.
- The handling of findings includes:
 - Identify the root cause of the finding/non-compliance;
 - carrying out Corrective action;
 - implementation of Preventive action;
 - monitoring of its effectiveness.
- In case of findings/non-compliances detected by FOCA:
- Submit the root cause analysis and the action plan for each finding/non-compliance to FOCA; In case of findings/non-compliances detected by FOCA:

- Demonstrate corrective action implementation to the satisfaction of FOCA within a period agreed with FOCA.

General

- The process related to findings should include the following steps:
 - identification of the root cause of the non-compliance;
 - establishment of a corrective action plan;
 - the corrective action;
 - implementation of the preventive action;
 - monitoring of implementation; and
 - monitoring of its effectiveness.
- The steps may be integrated in the audit and inspection process. In such cases, a separate process should be established to ensure, that measures and all other safety information, including airworthiness directives, mandated by third parties (e.g. by FOCA, EASA etc.) are implemented.
- For the monitoring of the implementation of corrective- and preventive action including its effectiveness, the organisation should establish a means to track the follow-up. Such a mean could include:
 - Reference to the case;
 - Brief description of the corrective action to be implemented;
 - Brief description of the preventive action to be implemented,
 - Responsible person, manager or function:
 - Time limit or Deadline:
 - A brief summary of the measures implemented:
 - Statement of status:
 - Signatures.

FSTD

• Results from the technical inspections and from authority evaluations shall be treated according to the above described general process.

Example of a Follow-Up File

Nr.	Ref.	Date	Corrective Action	Preventive Action	Time Limit	Measures Implemented	Status	Name	Sign
01	Inspectio n Report XXX	XX.XX. XX	The battery of the AED is to be replaced	Battery of the AED is to be checked regularly and the life cycle of the battery is to be monitored	XX.XX.XX	Battery replaced Process implemented and responsibilities assigned Control File implemented	closed		
02	FOCA Audit, 03 June 2017, Finding #3	3.6.17	Effectivene ss of corrective actions not verified	CMM informed. All findings's corrective actions of last 24 months will be reviewed.	30.6.17	Additional column in planning tool «Aktionsüberw achung» implemented at CMM station leading to reviews and providing an additional deadline for each item/case.	open		
03									

7.5 Class Ch. 7.5	ification of Findings ISS1/REV3/09.11.2017	CA EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 (EU) 1321/2014 LEGAL REFERENCE	
7-OMM05-025 CL ChOM ChSeqNo.	OMM, Chapter 5.X «Classification of Findings» MANUAL REFERENCE	

□ Is a categorisation established to classify findings according to their severity?

□ Are there time limits allocated for the completion of corrective actions/measures?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

- ANNEX VII to the Regulation on Air Crew, Part ORA and Annex III to the Regulation on Air Operations Part ORO, do not provide guidance material or an acceptable means of compliance for the classification of findings (for the operators/organisation's <u>internal</u> findings). The best practice already experienced for the definition of classification of findings is to apply the standard of Part-M, (EU) No 1321/2014 on the continuing Airworthiness:
 - A level 1 finding is any significant non-compliance with Part-M / Part-145 requirements which lowers the safety standard and seriously hazards flight safety;
 - A level 2 finding is any non-compliance with the Part-M / Part-145 requirements which could lower the safety standard and possibly hazard the flight safety.

Recommendation

- By using the risk-assessment concept, which stipulates the classification of severity and the classification of the likelihood and the evaluation of the risk, the classification of finding levels could be defined as follows:
 - Level 1: Safety is affected and impacts the red zone within the Risk-Matrix:
 - a) no further operation / activity until closure of finding; and
 - b) corresponds to level «unacceptable».
 - Level 2: Safety might be affected and impacts the yellow zone within the Risk-Matrix:
 - a) to be closed within due date (max. 2 months); and
 - b) corresponds to level «tolerable».

8 Flight Data Monitoring

Ch. 8 ISS1 / REV3 / 09.11.2017

8.1 Flight Data Monitoring Programme M/CC / IN NS ISS1 / REV0 / 18.06.2013 ORO.GEN.200 ORO.AOC.130 ICAO SMM, Doc. 9859 S-OMM04-005 LEGAL REFERENCE OMM, Chapter 4.X «Flight Data Monitoring»

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

- □ For aeroplanes with a maximum certified take-off mass of more than 27000 kg is a Flight Data Monitoring (FDM) Programme established and maintained?
- □ Is the FDM Programme integrated in the Management System?
- □ Is there a statement regarding the objectives and scope of the FDM Programme?
- □ Is there a statement indicating that the FDM Programme is proactive and non-punitive?
- Does the FDM System contain adequate safeguards to protect the sources of data?
- □ Is there a procedure to de-identify and prevent disclosure of sensitive flight and crew data?
- □ Is there evidence that the flight data analysts have been trained operating the FDM system and analysing flight data?
- □ Is there a list regarding aircraft registration, corresponding name of the FDM System and contracted service provider?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

- A FDM Programme, sometimes referred to as FDM System or Flight Operations Quality Assurance (FOQA), provides an effective tool for the proactive identification of hazards.
- FDM Programmes generally involve systems that capture flight data, transform the data into an
 appropriate format for analysis, and generate reports and visualisation to assist in assessing the
 data. The level of sophistication of the equipment can vary widely. Typically, the following
 equipment is required for an effective FDM Programme:
 - an on-board device to capture and record flight data;
 - a means to transfer recorded flight data to a ground-based processing station;
 - a ground-based processing station and specialized software to analyse flight data;
- Typically, flight data derived from the FDM Programme is used for:
 - Exceedance detection;
 - Routine measurements;
 - Incident Investigation;
 - Continuing Airworthiness; and
 - Safety and trend analysis.
- FDM Programmes are often viewed as one of the most expensive safety systems in terms of the initial outlay, software agreements and personnel requirements. In reality, they have the potential to save considerable money by reducing the risk of major accidents, improving operating standards, identifying external factors affecting the operation and improving engineering monitoring programmes.

Implementing a FDM Programme

- The following steps are required to implement a FDM Programme:
 - Definition of objectives and scope;
 - Implementation of pilot association agreements;
 - Establishment and verification of operational and data protection procedures;
 - Installation of on-board and ground-based equipment;
 - Selection and training of dedicated and experienced personnel to operate the programme;
 - Flight Crew information regarding operational and data protection procedures;
 - Notification to internal and external parties involved and/or interested.
- As a minimum the FDM Programme shall include, either:
 - a systematic download and analysis of electronically recorded aircraft flight data; or
 - a systematic acquisition, correlation and analysis of flight information derived from a combination of some or all of the following sources:
 - aircraft FDR readouts;
 - confidential flight and cabin crew operational safety reports;
 - flight and cabin crew interviews;
 - quality assurance findings;
 - flight and cabin crew evaluation reports;
 - aircraft engineering and maintenance reports.
- FDM Analysis Techniques shall compromise the following:
 - Exceedance detection: searching for deviations from aircraft flight manual limits and SOPs;
 - Flight Data measurement: a set of defined parameters and their tolerances;
 - Statistics: a series of data collected to support and generate rate information and trend analysis.
- Evaluation of a Flight Data Monitoring Service Provider:

Some aircraft manufacturers actively support FDM Programmes for their aircraft. They provide packages including tools and software, handbooks to support their FDM methods, procedures, and additional assistance for implementing the FDM Programme. Additionally, there are third party Flight Data Monitoring Service Providers which tailor their services to the required standards and specification of the operator. Depending on the scope and size of the operator it is recommended to outsource the complex ground-based processing to a third party provider in order to minimise installation, training and software license costs. This recommendation is especially to consider for small and low cycle operators. Other operators may choose to implement a fully-fledged in-house FDM Programme. Ideally, there should be a list stipulating the aircraft registration, corresponding name of the FDM System and contracted service provider.

• De-identification of sensitive Flight and Crew Data:

The procedure to prevent disclosure of sensitive flight data or crew identity shall be written in a document and signed by all parties such airline management, flight crew member representatives nominated either by the union or the flight crew themselves. This procedure shall, as a minimum, define:

- the objective and scope of the FDM programme;
- a data access and security policy that should restrict access to information to nonspecifically authorised persons;
- the method to obtain identified or de-identified flight crew feedback;
- the data retention policy and accountability including the measures to ensure the security of the data;
- the criteria and procedure under which an advisory briefing or remedial training should take place;

- the conditions under which the confidentiality may be withdrawn for reasons of gross negligence or significant continuing safety concern;
- the participation of flight crew member representative(s) in the assessment of the data, the action and review process and the consideration of recommendations; and
- the policy for publishing the findings resulting from FDM.

9 Contracting and Leasing

Ch. 9 ISS1 / REV3 / 09.11.2017

9.1 Contracting and Monitoring of Contractors M/CC / IN NS ISS1 / REV0 / 18.06.2013 ORO.GEN.205 ORO.GEN.200 ORA.GEN.200 ORA.GEN.200 OPS Directive OD O-004 MS ORA FSTD.100 LEGAL REFERENCE URA FSTD.100 <td

OMM, Chapter 11, «Contracting and Monitoring of Contractors»

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

- Does the introductory text include a statement, indicating that the organisation ultimately remains responsible for the products or services provided by the contractor?
- □ Is a process defined which ensures, that the contracted or purchased services and/or products do conform to the applicable requirements and, where applicable, that the contractor holds the required certificates and approvals?
- Does the process include the verification of the contractor's compliance with the defined philosophies, policies, procedures and requirements of the organisation?
- □ Does the process include the verification of the contractor's facilities and resources and show the competence of the contractor to execute the contracted tasks?
- □ Is there a list, containing the contracted products or services including contact details of the contractor?
- Does FOCA have access to the contracted organisation in order to determine compliance with the applicable requirements?
- Does the organisation have a written agreement with the contractor?
- □ Are the contracted activities clearly defined?
- □ Is it assured, that the contracted activities are subject to compliance monitoring and safety management?
- Depending on the product/service provided, is it assured that contractors are trained on the defined philosophies, policies, procedures and requirements of the organisation?
- □ Are contractors, if applicable, provided with the organisation's documentation or parts thereof?
- Does the process provide details on actions to be taken, should a contractor product or service fall below requirements initiation and monitoring of corrective / preventive actions?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

- The operator shall ensure that when contracting or purchasing any part of its activity, the contracted or purchased service or product conforms to the applicable requirements.
- Contracted activities include all activities within the organisation's scope of approval that are performed by another organisation either itself certified to carry out such activity or if not certified, working under the organisation's terms approval.
- The ultimate responsibility for contracted products or services provided by external organisations always remains with the organisation.

- Activities performed by contractors may have an impact on safety. Therefore, the contracted safety related activities need to be addressed through the organisation's safety management and compliance monitoring programme:
 - As part of the safety management, a risk analysis is to be carried out on any newly contracted activity as part of the change management process. If corrective and/or preventive actions need to be implemented, they are to be submitted in writing to the contractors. Effective application of these measures need to be checked and monitored
 - As part of the compliance monitoring programme, the organisation ensures that the contracted organisation has the necessary certificate, authorisations and approvals where required, and has the resources and competence to undertake the task. Compliance with applicable regulations, organisation defined philosophies, policies, procedures and requirements are to be verified and monitored.
- Contractors are to be supplied with the organisation's documentation or parts thereof as applicable. Depending on the product or service provided, contractors are to be trained on the organisation's defined philosophies, policies, procedures and requirements. This in particular concerns contracted organisations providing training and checking

Air Operators

- An Operator may contract certain activities to external organisations, typical areas are:
 - Ground de-icing/anti-icing
 - Ground handling (refer also to FOCA Ops Directive OD O-004)
 - Flight support
 - Training
 - Manual preparation

AOC Holders / SPO Authorisation holders

 When any part of its activity is contracted to an organisation that is not itself certified or authorised in accordance with Part-ORO to carry out such activity, the contracted organisation shall work under the approval of the operator. The contracting organisation shall ensure that the competent authority is given access to the contracted organisation, to determine continued compliance with the applicable requirements.

FSTD

• All requirements that an organisation is expected to meet are equally applicable to its subcontractor. The organisation has to ensure that the subcontractor complies with its compliance management.

Example of a list containing contracted activities

Product / Service	Contractor	Agreement	Customer Number		
Flight Planning Performance Calculation	Sample Company Ltd. 123, Aerodromestreet	Yes	CN-123-321-456		
	Aerodrome Example 54321 Specimen				
Organisation Documentation Publication	Print Company Ltd 987, Editingstreet 54321 Specimen	Yes	658-DP-857		
Recruitment of Personnel	Consultant Company Ltd	Yes	None		
Route-and Aerodrome Instructions and Information	Refer to OM C, Chapter 1.X «Subscription to Commercially Produced Manual System»				
Training	Refer OM D, Chapter 1.2 «Contracted Training Facilities»				

Audit and Inspections	Refer to OMM, Chapter X.X «Audit and Inspections»
Base- and Line Maintenance	Refer to CAME, Part 5 «Contracted Maintenance»
Continuing Airworthiness Management Tasks	Refer to CAME, Part 5 «Continuing Airworthiness Management Tasks»

Example process for the evaluation of contractors

Step	Remarks	ΤοοΙ	Responsibility
Definition of requirements and needs	 define the product, service, activity or task to be contracted specify the criteria for safety and quality and the standard of performance define the standards of performance establish budget and cap on costs 	Contractor evaluation checklist	Project team
Offer	Request firm offer including evidences of certificates, authorisations and approvals	Offer documentation	Project team Contractor
Release	Release and approval of offer, conditions, budget and cap on costs	Project documentation	ACM
Evaluation	 Verify that the contractor holds the required certificates, authorisations and approvals Verify the adequacy of the facilities and equipment as well as the availability of resources Check the need to supply the contractor with organisation documentation or parts thereof Verify the need to train the contractor on defined organisations philosophies, policies, procedures and requirements 	Contractor evaluation checklist	Project team
Safety Impact	Decide whether risk assessment is necessary	Risk assessment tool Supplier risk analysis	Project team
Compliance Check	Decide whether a detailed audit is required	Contractor Evaluation Audit Checklist	Auditor
Decision and Closing	Decide upon suitability, adequacy and acceptability	Project documentation	ACM
Request Contract	Issue of contracts	Contract	Contractor
Contract review	 Evaluate contract, verify that the contracted activity, product or service is clearly defined Verify costs 	Contract	Project team
Sign contract	Signing of contracts by the responsible function and Accountable Manager	Contract	ACM

• If there is a need for action, the preventive or corrective measure is submitted to the contractor in written form. To monitor the implementation, the corrective measure is tracked on the list of pending items.

• * In case of negative trends, the relevant nominated person in collaboration with the Compliance Monitoring Manager decides about the necessity for the conduction of a contractor inspection/audit

Example for the continuous monitoring of contractors

Service/Product/Activity	Monitoring	Frequency	Responsibility
Training	 ensuring the validity of necessary certificates, authorisations and approvals 	According to the validity of the individual certificates, authorisations and approvals	NPCT
	inspection/audit of training provided	Acc. to risk assessment	NPCT
	 analysis of trainee's feedback report treatment of feedback according to feedback & reporting 	Each training OM D, Chapter «XY»	NPCT
Maintenance	supervision of maintenance according to continuing airworthiness management exposition CAME	-	CAM
Fuelling	 fuel check according to OM A, Chapter 8.2 Occurrence report in case of occurrences 	-	Pilot
	risk assessment	Supplier Risk Assessment	NPGO
	audit* of fuel providers	Acc. to risk assessment	
Ground Handling	• supervision of ground handling activities according to OM A, Chapter 8.2	Each flight	Flight Crew
	sample checks (inspections) by crew based on checklist provided by dispatch		Dispatch / Flight Crew
	risk assessment	Supplier Risk Assessment	NPGO
	• audit*	Acc. to risk assessment	
	•		
De-/Anti-Icing	 Monitoring by crew according to OM A, Chapter 8.2 Occurrence report in case of occurrences 	-	Commander
	risk assessment	Supplier Risk Assessment	NPGO
	audit* of de-/anti-icing providers	Acc. to risk assessment	
Flight Support	•		
Navigation Data Providers	Availability of Letter of Acceptance		CAM
	Occurrence report in case of occurrences		Commander
Flight Performance Data	Comparison of delivered product with order		NPGO
Provider	Occurrence report in case of occurrences		Commander
Providers of data for take-off	Comparison of delivered product with order		NPGO
performance calculation	Occurrence report in case of occurrences		Pilot
Flight Operations / Wet lease	•		
Dry lease of FSTD	Check qualification of FSTDDaily check	Before use after dry lease	NPCT
Maintenance of FSTD	 ensuring the validity of necessary approval/qualification) 	According to the validity of the individual certificates, authorisations and approvals	СММ

Service/Product/Activity	Monitoring	Frequency	Responsibility
	verification of service report of provider	each report	
	check of function as release to service	before release to service	
FSTD engineering services	as a minimum an incoming inspection is required	before release to service	FFP
FSTD Manual preparation	Verification of completeness, conformity & compliance with respective requirements	each service	FFP
FSTD Navigation Data	check-up-date	Current within 3 months (28 days for aerodrome competence trng!)	FFP
FSTD Spare Parts	Provision and validity of certificate of spare part during the arrival of part	each delivery	FFP
	Check of function of spare part after installation / fitting	each installation	FFP
	•		

9.2 Leas	ing ISS1 / REV3 / 09.11.2017	M/CC EVALUATION METHOD		
MS CL TOPIC	ORO.AOC.110 ORO.AOC.115 ORO.SPO.100			
9-OMM11-010 CL ChOM ChSeqNo				

APP: Any lease agreement concerning aircraft used by an AOC holder is subject to prior approval by FOCA.

APP: Any lease agreement concerning aircraft used by a SPO operator is subject to prior approval by FOCA if the aircraft originates from a third country operator or is registered in a third country.

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

AOC holders / SPO:

- □ Is there a process describing how to handle lease agreements?
- □ Is there a description that ensures that the operator of the lease-in aircraft is not subject to an operating ban?
- □ Is the documentation of the application exhaustive in relation to the respective lease arrangement?
- □ Is there a processes describing how equal level of safety is reached for third country operators?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

AOC holder

Any lease-in:

A certified operator shall only wet lease-in an aircraft from an operator that is not subject to an operating ban according to (EC) No 2111/2005 (Black List).

List of airlines banned within the EU - Transport

Furthermore, FOCA should be provided with the following information:

- Aircraft type, registration and serial number;
- Name and address of registered owner;
- Copy of valid CoA;
- Copy of the lease agreement or description of the lease provisions, without financial arrangements;
- Duration of the lease;
- In case of wet lease-in a copy of the AOC of the third country operator and the areas of operation.

The above mentioned information should be accompanied by a statement signed by the lessee that the parties to the lease agreement fully understand their respective responsibilities under the applicable regulation.

Wet lease-in:

The applicant of the wet lease-in of an aircraft of a third country operator shall demonstrate to FOCA that:

- The third country operator holds a valid AOC according to ICAO Annex 6;
- The safety standards with regard to continuing airworthiness and air operations are equivalent to the applicable European standard;
- The Aircraft has a standard CoA according to ICAO Annex 8.

If an operator is not intending to apply EU safety requirements for air operations and continuing airworthiness when wet leasing-in an aircraft registered in a third country, it should demonstrate that the standards are equivalent to:

- c) Annex IV (Part-CAT);
- d) Part-ORO:
 - (1) ORO.GEN.110 and Section 2 of Subpart GEN;
 - (2) ORO.MLR, excluding ORO.MLR.105;
 - (3) ORO.FC;
 - (4) ORO.CC, excluding ORO.CC.200 and ORO.CC.210(a);
 - (5) ORO.TC;
 - (6) ORO.FTL, including related CS-FTL; and
 - (7) ORO.SEC;
- e) Annex V (Part-SPA) if applicable;
- f) For continuing airworthiness management of the third country operator, Part-M Subpart-B, Subpart-C and Subpart-G, excluding M.A.707, and M.A.710;
- g) For the maintenance organisation used by the third country operator during the lease period: Part-145 and
- h) The operator shall provide FOCA with a full description of the flight time limitation schemes, operating procedures and safety assessment demonstrating compliance with the safety objectives set out in points b) (1)-(6).

Short term wet lease-in:

In anticipation of an operational need the operator may enter into a framework agreement with more than one third country operator provided that:

- The third country operator holds a valid AOC issued in accordance with ICAO Annex 6;
- The safety standards of the third county operator with regard to continuing airworthiness and air operations are equivalent to the applicable requirements established by Regulation (EC) No 2042/2003 and 965/2012; and
- The aircraft has a standard CoA issued in accordance with ICAO Annex 8;
- The third country operators should be placed in a list maintained by the lessee.

Dry lease-in:

The applicant of the dry lease-in of an aircraft from a third country shall demonstrate to FOCA that:

- An operational need has been identified and cannot be satisfied through an aircraft registered in the EU;
- The duration of the dry lease-in does not exceed seven months in any 12 consecutive months period;
- Compliance with the applicable EU regulations with regard to continuing airworthiness and air operationsis ensured;
- The Aircraft must be equipped with Annex IV Part-CAT, repectively Annex VIII Part-SPO, as applicable (→ subpart IDE).

Dry lease-out:

The application for a dry lease-out of an aircraft shall be accompanied by copies of the intended lease agreement or description of the lease provisions, except financial arrangements, and all other relevant documentation.

Wet lease-out:

Prior to the wet lease-out of an aircraft, the operator shall notify FOCA and provide the following information:

- Aircraft type, registration and serial number;
- Name and address of the lessee;
- Copy of the lease agreement or description of the lease provisions, without financial arrangements; and
- The duration of the lease agreement.
- AOC holder

SPO

Wet lease-in:

The applicant of the wet lease-in of an aircraft of a third country operator shall demonstrate to FOCA that:

- The duration of the wet lease-in does not exceed seven months in any 12 consecutive month period;
- The safety standards with regard to continuing airworthiness and air operations are equivalent to the applicable Community standard;
- The Aircraft has a standard CoA according to ICAO Annex 8.

If an operator is not intending to apply EU safety requirements for air operations and continuing airworthiness when wet leasing-in an aircraft registered in a third country, it should demonstrate that the standards are equivalent to:

- a) Annex VIII (Part-SPO);
- b) Part-ORO:
 - (1) ORO.GEN.110 and Section 2 of Subpart GEN;
 - (2) ORO.MLR, excluding ORO.MLR.105;
 - (3) ORO.FC;
- c) Annex V (Part-SPA) if applicable;
- d) For continuing airworthiness management of the third country operator, Part-M Subpart-B, Subpart-C and Subpart-G, excluding M.A.707, and M.A.710;
- e) For the maintenance organisation used by the third country operator during the lease period: Part-145 and
- f) The operator shall provide FOCA with a full description of the operating procedures and safety assessment demonstrating compliance with the requirements and safety objectives set out in points b) (1)-(3).

Dry lease-in:

Refer to «AOC Dry lease-in» above.

9.3	Code-S	Share Agreement ISS1/REV0/18.06.2013	M/CC EVALUATION METHOD
		ORO.AOC.115 LEGAL REFERENCE	
9-OMM11-015 CL ChOM ChSeqNo.		OMM, Chapter 11.X «Code-Share Agreement»; or	
		OM A, Chapter 13.X «Code-Share» MANUAL REFERENCE	

AOC holders:

- □ Is an audit programme in place that shows how the operator verifies the compliance of ICAO standards when entering code-share agreements with third country operators?
- □ Is there a process that assures that a renewal audit of third country code-share operator is performed within 24 consecutive months?
- □ Is a process in place which assures that FOCA receives an audit compliance statement demonstrating that the third country operator meets all applicable safety standards?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

AOC holders

- Operators should establish a code-share audit programme for monitoring continuous compliance of the third country operator with the applicable ICAO standard. The third country operator should be audited at periods not exceeding 24 months (for renewal date refer to AMC1 ORO.AOC 115 (b)). The audit programme should include:
 - The audit methodology (audit report + compliance statements);
 - Details of the specific operational areas to audit;
 - Criteria for defining satisfactory audit results;
 - A system for reporting and correcting findings;
 - A continuous monitoring system;
 - Auditor qualification and authorisation; and
 - The frequency of audits
- After closure of all findings identified during the audit, the EU operator should submit an audit compliance statement to FOCA demonstrating that the third country operator meets all the applicable safety standards.
- The initial audit and/or the continuous monitoring may be performed by a third party provider on behalf of the EU operator. In any case, the use of a third party provider does not exempt the EU operator form its responsibility under ORO.AOC.115.
- The EU operator should maintain a list of the third country code-share operators monitored by the third party provider.

10 Record Keeping

Ch. 10 ISS1 / REV1 / 18.06.2013

10.1 Record Keeping and Archiving Ch. 10.1 ISS1 / REV0 / 28.04.2015				M/CC EVALUATION METHOD	
MS CL TOPIC	ORO.GEN.220 ORA.FSTD.240 LEGAL REFERENCE	ORA.GEN.220 ORA.AeMC.220	ORO.GEN.200	ORA.GEN.200	ORO.MLR.115
10-OMM10-005 CL ChOM ChSeqNo.	OMM, Chapter	10.X «Record Ke	eping and Archiv	ving»	

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

General:

- Does the organisation have a system of record that allows storage and reliable traceability?
- □ Are all records accessible and available?
- □ Is specified how the records are kept (Hardcopies or Software)?
- \Box Are the records safeguarded?
- □ Are the retention periods defined?
- □ Is a list available with all necessary documents and their retention periods?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

- The organisation shall establish a system of record that allows storage and reliable traceability of all its activities. The format should be specified in the organisation procedure and shall be stored in a manner that ensures protection from damage, alteration and theft.
- A record keeping includes the following cycle:
 - Create storage;
 - Maintain and monitor storage;
 - End of storage period destroy or archive file/record.
- The record-keeping system should ensure that the records are always accessible and traceable throughout the retention period. The retention period starts when the record has been created. Computer system should have at least:
 - one backup system which should be updated within 24 hours of any new entry;
 - safeguarded against access by unauthorised personnel;
 - a minimum storage period of five years unless otherwise specified in the respective subpart

All computer hardware used to ensure data backup should be stored in a different location from the one containing the working data. Special care should be taken when hard- or software changes take place making sure that all data continues to be accessible.

• Microfilming or optical storage of records may be carried out at any time. The record should be as legible as the original record and remain so for the required retention period.

General

Example for management system related records

Document	Responsibility	Type of Storage	Place of Storage	Storage Period	Follow-up
Data evaluation of managers	ACM	EDP	P:///MgmtEval	5 years	-
SPI-Reports				5 years	
Management evaluation report	ACM	EDP	P:///MgmtEval	5 years	
Individual feedback reports				5 years	archive
Audit Plan					
Audit reports	CMM	Hard Copy	Audit Folder	5 years	scan&destroy
List of inspections performed	Nominated Persons	Electronically	P:///Inspections	5 years	
Employees Introduction programme				5 years	
Attendance records of Management System and Safety Management related training				5 years	
List of pending items	СММ	EDP	P:///CorrActions	5 years	
Report monitoring tool				5 years	
Company Risk Assessment	ACM			5 years	
Project Risk Assessment	Project Manager			5 years	scan&destroy
Investigation results				5 years	archive
Flight Data Monitoring analysis reports				5 years	
Results from Studies, Surveys, Reviews	SM			5 years	
				5 years	

Note: The Federal Act on the Amendment of the Swiss Civil Code, Part Five «The Code of Obligation» may have different or more restrictive provisions related to record-keeping and associated storage periods.

Air Operators

List of record keeping «preparation and execution of flight»

Document	Responsibility	Type of storage	Place of storage	Storage period	Follow-up
Operational Flight plan	NPFO	Hardcopy	Dispatch P:///flightOps	3 Months	scan/destroy
Route-specific notices (NOTAMs, weather)	NPGO	EDP	P:///flightOps	3 Months	-
Mass&balance				3 months	
NOTOC	NPFO	Hardcopy	Dispatch	3 months	destroy
Journey log	CAM			3 months	
Flight reports				3 months	
Records of duty, flight duty and rest periods	NPFO Concerned crew member	EDP	Office NPFO P:///flightOps Crew member individual and private file	15 calendar months from the date of the last relevant entry	archive

List «personnel records to be stored»

Document	Responsibility	Type of Storage	Place of Storage	Storage period	Follow-up
Flight crew licence	NPCT	Copy and EDP	Office NPCT P:///Training	As long as the crew member is exercising the privileges of the licence for the aircraft operator	archive
Cabin crew attestation	CCC	Copy and EDP	Office NPCT P:///CabinCrew	As long as the crew member is exercising the privileges of the licence for the aircraft operator	archive
Crew member training, checking and qualifications	NPCT	Copy and EDP	Office NPCT P:///Training	3 years	archive
Records on Crew member recent experience				15 months	
Crew member route and aerodrome/ tasks and area of competence, as appropriate				3 years	
Dangerous goods training				3 years	
Training/qualification records of other personnel for whom a training programme is required				Last two training records	

The operator shall maintain all training, checking and qualifications of each crew member, and make the records available, <u>on request</u> by the crew member.

ATO Complex Organisation

The following record shall be kept for a period of at least 3 years after the completion of the training:

Document	Responsibility	Type of Storage	Place of Storage	Storage period	Follow-up
Details of ground training	СТКІ	File folder	Office CTKI T:///Training	3 years	scan and destroy
Details on flight training	CGI	File Folder	Office CTKI T:///Training	3 years	scan and destroy
Details on simulator training				3 years	
Progress reports from instructors				3 years	
Details on Ground examinations				3 years	scan and archive
Information on licences				3 years	
Associated Ratings				3 years	
Certificates of student				3 years	Scan and archive
Medical incl. expiry date				3 years	Scan and archive

ATO Non-Complex

ATO LAPL, PPL, SPL and BPL: The details of ground, flight and flight instruction by using FSTD given to a specific individual student and the detailed progress reports from instructors may be kept also in a student's progress card. This progress card should contain all the exercises of the training syllabus. The instructor should sign this card if a certain exercise has been completed or a specific assessment has been conducted.

FSTD

- The holder of a FSTD qualification certificate shall keep records of:
 - All documents describing and providing the initial qualification basis and level of the FSTD for the duration of the FSTD's lifetime.
 - Any recurrent document and reports related to each FSTD and to compliance monitoring activities for a period of at least 5 years.
- List of FSTD records to be kept:

Document	Responsibility	Type of Storage	Place of Storage	Storage period	Follow-up
Configuration Control records	FFP	Hardcopy File folder	Office FFP T:///FSTD	lifetime of FSTD	scan&archive
Fly-out reports	FFP			5 years	
Maintenance job cards				5 years	
Master QTG		Hardcopy File folder	Office FFP T:///FSTD	lifetime of FSTD	scan&archive
Qualification certificate of initial evaluation		Hardcopy File folder	Office FFP T:///FSTD	lifetime of FSTD	scan&archive
initial evaluation report		Hardcopy File folder	Office FFP	lifetime of FSTD	archive
QTG run records		Hardcopy File folder	Office FFP	5 years	scan&destroy

Document	Responsibility	Type of Storage	Place of Storage	Storage period	Follow-up
recurrent evaluation reports				lifetime of FSTD	
Qualification Certificate(s)				lifetime of FSTD	
reports of internal functions and subjective testing				5 years	
technical log		Hardcopy File folder		lifetime of FSTD	scan&archive
CMS report				5 years	
evaluation programme				5 years	
				5 years	

AeMC

The AeMC shall:

- maintain records with details of medical examinations and assessments performed for the issue, revalidation or renewal of medical certificates and their results, for a minimum period of 10 years after the last examination date; and
- keep all medical records in a way that ensures that medical confidentiality is respected at all times.

Document	Responsibility	Type of Storage	Place of Storage	Storage period	Follow-up
Details and results from medical examinations & assessments for issue, revalidation or renewal of med. certificates	Head of AeMC	File Folder	Office XY	10 years	scan&archive

11 Management Evaluation and Continuous Improvement

Ch. 11 ISS1 / REV3 / 09.11.2017

11.1 Manag	Jement Evaluation ISS1 / REV3 / 09.11.2017	M/CC EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 ORA.FSTD.100 LEGAL REFERENCE	
11-OMM06-005 CL ChOM ChSeqNo.	OMM, Chapter 6.X «Management Evaluation» MANUAL REFERENCE	

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

Complex Organisation:

- □ Are the Safety Performance (see Ch. 4) Indicators integrated in the Management Evaluation?
- □ Is the Management Evaluation performed on a regular basis?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

AOC holders / NCC or SPO / ATO CPL, MPL and ATPL / AeMC / FSTD

- The Management Evaluation is a comprehensive and systematic review by the management to evaluate the overall effectiveness of the organisation including the management system in regard to its policies, processes and barriers. The main function is controlling and mitigating risks over the whole organisation (including corporate risk, finance...). Performance Indicators from all departments are reported. This process is of utmost importance for the steering of the organisation.
- As explained in Chapter 4 of this document, it is important that targets are defined and communicated (not only Safety Targets). The management has then to decide which Performance Indicators are only reviewed and communicated within the concerned division and which SPI's are reviewed and communicated to the top Management and Board of Directors on a regular basis.

ATO LAPL, PPL, SPL and BPL – Organisational Review

• An ATO providing training only for the LAPL, PPL, SPL or BPL and the associated ratings or certificates, may accomplish safety risk management and compliance monitoring by the **«organisational review»**.

The organisational review provides a new possibility to perform safety and risk management as well as compliance management, simply said, by using a checklist in compliance with GM2 ORA.GEN.200(c).

The primary objective of the organisational review is to enable the organisation to ensure that its management system remains effective by verifying that:

- it has continually identified its aviation safety hazards;
- it has effectively mitigated the associated risks; and
- it monitors compliance with the applicable requirements.

The organisational review consists of:

- a programme with the associated checklists covering the required review items;
- a **schedule** for the the different checklist items. Each item has to be checked at least once within any **12 month** period.

FOCA has developed and published a template specifically addressing and covering the
organisational review concept for an ATOs entitled to apply such concept. Refer to <u>Appendix 02</u>
to FOCA CL «Management System» - GM/INFO «Organisation Management Manual (OMM)»,
«Organisational Review (OR)», as per «List of effective Appendices» at the beginning of this
document.

Note: A Management System documentation is still required to cover the identification of safety hazard, mitigate associated risk and to verify compliance with the applicable requirements;

FSTD

• The ARINC-433 standard provides comprehensive guidance on Management evaluation for FSTD Organisations.

Area	ltem	Objective	Year	·XXXX										
			1	2	3	4	5	6	7	8	9	10	11	12
			15	st Quar	ter	2 ⁿ	^d Quar	ter	3'	^d Quar	ter	4 th Quarter		ter
					1 st	Half					2 nd	Half		
Finance	Cash ratio	>40%												
	Quick ratio	>80												
	Current ratio	100%												
	Cash burn rate	>60 days												
	Cash flow ratio	>10%												
	Equity ratio	>40%												
Marketing	Return on sales													
	Return on invested capital													
Safety	Risk value	3.5	4	4	4.5	4.2	3.8	3.4	3.3	3.2	3.1	2.8	2.8	2.8
	Risk ratio													
Maint.	Reliability ratio													
FSTD	Availability	99%	99	92	98	100	100	99						
	closed defects		2	8										
	open discrepancies	5	3	10	9									

Example of indicators for the Management Evaluation

11.2	Contin Ch. 11.2	ISS1/REV3/09.11.2017	M/CC EVALUATION METHOD
MS CL TOPIC		ORO.GEN.200 ORA.GEN.200 LEGAL REFERENCE	
11-OMM06-010 CL ChOM ChSeqNo.		OMM, Chapter 6.X «Continuous Improvement» MANUAL REFERENCE	

Complex Organisation:

- □ Is a process defined which addresses proactive and reactive evaluation of facilities, equipment, documentation and procedures?
- □ Is a process defined on how results out of evaluations are used to improve the system?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

AOC holders / NCC or SPO / ATO CPL, MPL and ATPL / AeMC / FSTD

- The organisation should continuously seek to improve its safety performance. Continuous Improvement should be achieved through:
 - (1) Proactive and reactive evaluations of facilities, equipment, documentation and procedures through audits and surveys;
 - (2) Proactive evaluation of individuals' performance to verify the fulfilment of their safety mitigation of risk; and
 - (3) Reactive evaluation in order to verify the effectiveness of the system for control and mitigation of risk.
- There are different means of how the organisations performance can be improved and the effectiveness increased. The Safety Manager should provide a report on safety performance on how safety is managed. These results should then be reported to the management via management evaluation, (refer also to management evaluation). The data derives from:
 - Safety Reviews
 - Safety Studies
 - Safety Surveys
 - Internal Safety Investigations
 - Audits and Inspections(refer to audit and inspection)
 - Other...

ATO LAPL, PPL, SPL and BPL

If applying the organisational review concept, continuous improvments may be covered by the
organisational review checklist which is referred to in chapter 11.1 «Management Evaluation»
giving further guidance on the organisational review.

12 Emergency Response Planning

Ch. 12 ISS1 / REV0 / 18.06.2013

12.1 Emer Ch. 12.1	rgency Response Planning ISS1 / REV0 / 18.06.2013	CA EVALUATION METHOD
MS CL TOPIC	ORA.GEN.200 ORO.GEN.200 LEGAL REFERENCE	
12-OMM08-005 CL ChOM ChSeqNo.	OMM, Chapter 8.X «Objectives and Scope» OMM, Chapter 8.X «Concept and Planning» MANUAL REFERENCE	

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

General:

- □ Is there a statement regarding the scope and objectives of the Emergency Response Planning (ERP) concept?
- □ Is there a documented process ensuring an orderly and safe transition from normal to emergency operations and return to normal operations?
- Does the ERP concept outline a communication and notification plan, including communication and notification to the authorities and the emergency response team?
- □ Are the composition, role and contact details of the emergency response team defined?
- □ Are guidelines and initial response procedures for the emergency response team members defined so that the initial tasks may be performed correctly?
- □ Are the actions to be taken by the organisation or specified individuals in an emergency defined?
- □ Is the initial set-up of required facilities such as the Crisis Management Centre defined?
- □ Is there a procedure regarding restrictions of crew scheduling after a serious incident or accident?
- □ Is there a procedure regarding safeguarding and retaining of relevant data and records such as FDR and CVR recordings, training and checking results, technical records, flight planning documents?
- □ Is there a documented process on how to notify the REGA Operations Centre, including relevant numbers and contact details?

Complex Organisation:

- □ Is the ERP concept integrated in the Organisation's Management System?
- □ Is the ERP concept ensuring safe continuation of the operations during the emergency?
- □ Is the ERP concept coordinated with the Emergency Response Plan of other organisations such as the home base airport or code share partners?
- Does the ERP concept address a public health emergency or pandemic as well?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

- An Emergency Response Plan outlines systematically and in writing what should be done after an accident or aviation crisis and who is responsible for each action.
- The term Emergency Response Plan may be also known by different terms such as Contingency Plan, Crisis Management Plan, Continuing Airworthiness Support Plan, etc.

- Where there is a possibility of an organisation's aviation operations or activities being compromised by other crisis or emergencies originating from external sources such as a public health emergency or a pandemic, these scenarios should also be addressed in the ERP concept.
- The ERP should address all possible and likely scenarios and have appropriate mitigating actions or processes in place so that the organisation, its customers, the public and the industry at large may have a better level of safety assurance as well as service continuity.
- Successful response to an emergency begins with effective planning. An Emergency Response Plan provides the basis for a systemic approach to manage the organisation's affairs in the aftermath of a significant event in the worst case, a major accident.
- Everyone involved in the initial response to a major aviation event will be suffering from some degree of disorientation. Therefore, the Emergency Response Plan should take advantage of the use of checklists. These checklists may form an integral part of the organisation's documentation or the emergency response manual.
- An Emergency Response Plan is a paper indication of intent. Hopefully, much of an ERP will
 never be tested under actual conditions. Nevertheless, comprehensive training is required to
 ensure that the described intentions are backed by operational capabilities. Furthermore,
 regular emergency response drills and exercises are strongly recommended. Some elements of
 the ERP, such as the call-out and communication plan may be tested by desktop exercises.
 Other aspects, such as on-site activities involving other agencies, need to be exercised at
 regular intervals. Such exercises have the advantage of disclosing deficiencies in the plan,
 which can be rectified before an actual emergency. For certain service providers such as
 airports, the periodic testing of the adequacy of the plan and the conduct of full scale
 emergency exercise may be mandatory.

Purpose and Effectiveness of an Emergency Response Plan

- The purpose of an Emergency Response Plan is to ensure:
 - Delegation of the emergency authority;
 - Assignment of emergency responsibilities;
 - Documentation of emergency checklists, procedures and processes;
 - Safe continuation of essential operations, while the crisis is being managed;
 - Proactive identification of all possible emergency events or scenarios and their corresponding mitigation actions;
 - Coordination of emergency response efforts internally and with external parties.
- An effective Emergency Response Plan should:
 - Be Appropriate to the size, nature and complexity of the organisation;
 - Be readily accessible to all relevant personnel and other organisations where applicable;
 - Include checklists and procedures relevant to different or specific emergency situations;
 - Have quick reference contact details of relevant personnel;
 - Be regularly tested through practical exercises involving all relevant departments and personnel of the organisation;
 - Be periodically reviewed and updated when regulations, preconditions or other details change.

Emergency Response Plan Content

- An ERP would normally be documented in the format of a manual and may include the following considerations:
 - **Governing Policies:** The ERP should provide direction for responding to emergencies, based on governing laws and regulations for investigations, agreements with local authorities, company policies and priorities.

- **Organisation:** The ERP should outline management's and key personnel intentions, roles, responsibilities, reporting and communication lines, call-out plan for key personnel, organisational set-up, etc. with respect to the emergency.
- **Notifications:** The ERP should specify who in the organisation should be notified of an emergency, and who will make external notifications and by what means.
- **Go-Team:** Depending on the circumstances, a Go-Team may be dispatched to the accident site to augment local authorities and administer the organisation's interests.
- Additional Assistance: Employees with appropriate training and experience may provide useful support during the preparation and execution of an organisation's ERP. These employees may fulfil different roles such as members of the Crisis Management Centre or the Family Assistance Programme.
- Crisis Management Centre (CMC): The CMC, which is normally in standby mode, should be activated at the organisation's headquarter once the stipulated activation criteria have been met. In addition, a Command Post (CP) may be established at or near the accident site. The ERP should address issues such as round the clock staffing, communication, documentation, checklists and procedures, emergency response equipment, office furnishing and supplies.
- Records: In addition to the organisation's legal requirement to maintain logs of events and activities, the organisation will be required to provide information to a State investigation team. Special emphasis should be given on procedures for the retention of relevant data in safe custody pending their disposition as determined in accordance with ICAO Annex 13. Considered as relevant data are: FDR and CVR records, training and checking results, technical records, and flight planning relevant records.
- Accident Site: After a major accident, representatives from many jurisdictions have legitimate reasons for accessing the site, for example, police, fire-fighters, medics, airport authorities, coroners, State accident investigators and relief agencies (e.g. the Red Cross). Although coordination of the activities of these stakeholders is the responsibility of the State's police and/or investigating authority, the aircraft operator should clarify the following aspects of activity at the accident site: representative at the accident site, management of surviving victims, needs of relatives of victims, handling of human remains and personal property of the deceased, removal and security of the wreckage, preservation of assistance, etc.
- News Media: How the company responds to the media may affect how well the company recovers from the event, minimising reputational damage. The following issues should be thoroughly addressed in a comprehensive ERP: guidance regarding a prepared statement for immediate response to media queries, what information may be released and what information is protected by statute (FDR, CVR and ATC recordings, witness statements, etc.), designated speakers, timing and content of the initial statement, provisions for regular media updates.
- **Formal Investigations:** Guidance for company personnel dealing with State accident investigators and police should be provided in the ERP.
- Family Assistance: The ERP should provide guidance for personnel working in stressful situations. This may include specific duty limits and providing post-critical incident stress counselling. The ERP should also include guidance on the organisation's approach to assist the families of accident victims (crew and passengers post-critical incident stress counselling). A large number of employees will be required to support the organisation's Family Assistance Programme. It is strongly recommended to provide Critical Incident Stress Management (CISM) Training to all employees who are dealing with survivors or family members.
- **Post-Occurrence Review:** Direction should be provided to ensure that, following the emergency, key personnel carry out a full debriefing and record all significant lessons learned. This may result in amendments being made to the ERP and associated checklists and procedures.

Emergency Response Planning Service Provider

- There are third party Emergency Response Service Providers which tailor their services to the required standards and specification of the organisation. Those services may include a crisis management centre, crisis communication, media call centre, family assistance, disaster recovery services, etc.
- Depending on the scope and size of the organisation it might be advisable to outsource the complex, time-consuming and expensive set-up of certain emergency response elements to a third party service provider in order to minimise set-up, training and running costs. This recommendation is especially worth considering for small and low cycle operators. Other operators may choose to implement a fully-fledged Emergency Response Plan. Ideally, there is a list stipulating which emergency response element is contracted to a specific service provider and under which circumstances and criteria those services are activated.

Example for a Statement regarding the Scope and Objectives of the ERP Concept

• ERP Scope:

- The ERP Concept has been designed in order to systematically assist the organisation in handling an Aviation Emergency, Accident or Serious Incident or any other event requiring activation of the Emergency Response Team.
- The Plan provides processes and guidelines to personnel performing essential tasks to ensure continuous operation, emergency handling and full recovery of the organisation, addressing both legal and moral responsibilities.
- **ERP Objectives:** The ERP Concept has been designed in order to fulfil the following objectives:
 - Ensuring an orderly and safe transition from normal to emergency operations and return to normal operations;
 - Outlining a communication and notification plan, including communication and notification to the authorities and the emergency response team;
 - Defining composition, role and contact details of the emergency response team;
 - Providing guidelines and initial response procedures for the emergency response team members so that the initial tasks may be performed correctly;
 - Ensuring the welfare of employees, crew and passengers in a crisis situation.

Example for an Initial	Notification of an Emergency
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Step	Who / Responsibility	<i>Means of</i> <i>Notification / Forms</i>	Notification to / Address	Time Limit
1	Any Flight Crew Member	Radio Communication	Local ATS Frequency or MHz 121.50	Immediately
2	Commander or any person becoming aware of the Emergency	By the most practical mean	Notification of the Emergency Response Team (refer to OMM, Chapter X.X Composition, Role and Contact Details of the Emergency Response Team)	ASAP
	Manager Emergency Response Planning	Phone	REGA is coordinating all matters on behalf of SUST: -Phone (within CH: 1414	Immediately
	Or		-Phone (intern.): +41 333 333 333	
	Next available Person according to the Composition, Role and Contact Details of the Emergency Response		SUST Schweizerische	
	Team. Proceed according to order number.		Unfalluntersuchungstelle Aéropôle 1	
3			CH-1530 Payerne	
			And NAA of the country where the emergency took place. Refer to the AIP of the State concerned.	
			And Endered Office of Civil Aviation	
			Federal Office of Civil Aviation (FOCA)	
			Safety Risk Management CH-3003 Bern	

Example for Composition, Role and Contact Details of the Emergency Response Team

Order	Role	First Name / Family Name	Phone No 1	Phone No 2
1	Manager Emergency Response Planning	James Emery		
2	Deputy Manager Emergency Response Planning	Jim Craven		
3	Accountable Manager	Ana Airflow		
4	NP Flight Operations			
5				
6				

Example for Initial Emergency Response Guidelines and Procedures
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Step	Task	Responsibility	Verify/Check	Tool / Source
1	Verify the seriousness of the Emergency	Manager ERP	Aeroplane/Crew Location. Get additional first hand information.	Communication Means
2	Verify what kind of Emergency	Manager ERP	Accident or serious incident? Persons injured?	Local NAA or local Air Accident Investigation Branch
3	Consider to activate the CMC, Go- Team, Family Assistance, etc.	Manager ERP	Call-out list	OMM or ERP Manual
4	Initial Notification to REGA, SUST, FOCA	Manager ERP	Date, Time, Person	Initial Notification List
5	Collect Passenger Details	Manager ERP	Customer Files	Booking and Reservations Department
6	Collect Flight Documents and Crew Records	NP Flight Operations	Completeness	Dispatch, Outstation, Handling Agent, HR Department
7	Collect Aeroplane Documents	CAM	Completeness	CAMO, MRO
8				
XX	Deactivation of the Emergency Response	ACM	All relevant ERP Tasks completed	OMM or ERP Manual

13 Management System Training

Ch. 13 ISS1 / REV0 / 18.06.2013

13.1 General Requirements

Ch. 13.1	ISS1 / REV0 / 18.06.2013				EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 LEGAL REFERENCE	ORA.GEN.200	ORO.GEN.210	ORA.GEN.210	
13-OMM09-005 CL ChOM ChSeqNo.	OMM, Chapter S) «Management S	System Training	»	

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

General:

- □ Is a Management System Training concept defined?
- Does the concept consider the requirements of all of employee levels and functions?
- Does the concept consider initial and continuous training?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

- All training and checking programmes within an organisation should include training in those aspects of the management system and associated procedures that are relevant to the function and position in question. This means, that the Management System Training is an integral part of the organisation's training programme as required by the relevant requirements and standards for all functions. The concept should consider the requirements of all of employee levels and could be structured as follows:
 - Basic Management System Training for all employees;
 - Advanced Management System Training for management personnel, auditors and inspectors; and
 - Continuous training.
- The Management System Training may consist of classroom instruction, self-study via media (newsletter, flight safety magazines, power point, e-learning, etc.) and has to be specified in the respective syllabus or lesson plans.
- The organisation's Management System Documentation may serve as training handout/documentation.
- Detailed lesson plans as used by the instructors need not be integrated within the organisation's manual system to ensure necessary flexibility for improvements / amendments.

M/CC

	13.2 Basic Training – All Employees M/CC Ch. 13.2 ISS1 / REV0 / 18.06.2013 EVALUATION METHOD					
MS CL TOPIC		ORO.GEN.200 LEGAL REFERENCE	ORA.GEN.200	ORO.GEN.210	ORA.GEN.210	
13-OMM09-010 CL ChOM ChSec		OMM, Chapter S	9.X «Manageme	nt System Basic	Training»	

General:

Does the basic training include all fundamentals of the organisation's management system?

Does the basic training ensure that all employees are aware of their responsibilities?

Air Operations:

□ Is the management system training adequately integrated within the training and checking programme for flight crew and, if applicable, for cabin crew?

ATO:

□ Is the management system training adequately integrated within the staff training programme?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

• A basic training for all employees should be based on the organisation's management system documentation.

Training Subject	Level of Training	Standard of Performance	Instructor
The Organisation's Scope of Activity	overview classroom	Knows the organisation, its facility and infrastructure Names the scope of activity	ACM
Organisation's Strategic Planning and Safety Policy	in-depth classroom	Understands the Safety Policy including Objectives and is able to actively apply the elements thereof; Names the organisation's vision, mission, values and strategy	ACM
Organisation's Documentation including System of Amendment and Revision	in-depth classroom	Names the organisation's documentation including manual system and knows the relevant documents, manuals and/or parts as required by his function	NPFO
Organisational Structure, Duties, Responsibilities and Accountabilities	in-depth classroom	Is able to find the defined organisational structures, management personnel including contacts, understands the role and function of the management personnel; Understands and knows the duties and responsibility as	NPFO
		defined for his function and is proficient to perform the respective duty	
Safety Management	overview classroom	Understands and is able to explain the basic principles of the safety management Understands and knows the own role within the safety management	SM
Compliance Management	overview classroom	Understands and is able to explain the basic principles of the compliance management Understands and knows the own role within the compliance management	СММ

• Based on the organisation's management system, the basic training consists of:

Training Subject	Level of Training	Standard of Performance	Instructor
Occurrence Reporting	in-depth classroom	Understands the different types of reporting and is able to report according to the defined reporting procedures Understands and knows the own role within the occurrence reporting system	NPFO
Emergency Response Planning	overview classroom	Is able to find the ERP relevant documentation and knows the different functions within the ERP	NPFO
Management Evaluation and Continuous Improvement	overview classroom	Knows and understands the principles of the management evaluation and continuous improvement	ACM

Air Operations

- For Flight Crew:
 - As a specific training module, the basic management system training shall be integrated within:
 - o Conversion Course Changing Operator; and
 - ^o Conversion Course Changing Operator and Aeroplane Type.
- For Cabin Crew:
 - As a specific training module, the basic management system training shall be integrated within:
 - Aircraft Type Specific Training and Conversion Course;
 - Refresher Training.

ΑΤΟ

- The basic management system training shall be a major part of:
 - Staff/Instructor initial organisation conversion; and

FSTD

- The basic management system training shall be a major part of:
 - initial FSTD Qualification Certificate Holder conversion.

AeMC

- The basic management system training shall be a major part of:
 - initial medical centre conversion.

	3.3 Advanced Training – Management Personnel, Auditors and Inspectors Ch. 13.3 ISS1/REV0/18.06.2013							
MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 ORO.GEN.210 ORA.GEN.210 LEGAL REFERENCE							
13-OMM09-015 CL ChOM ChSeqNo.	OMM, Chapter 9.X «Management System Advanced Training» MANUAL REFERENCE							

General:

- □ Does the advanced training consider the requirements of all of the management personnel levels and functions?
- Does the advanced training ensure that all management personnel are aware of their responsibilities?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

- The advanced management system training shall ensure that the management personnel are able and skilled to establish, implement and maintain an effective management system. Additionally, all management functions, auditors and inspectors involved, shall have detailed and comprehensive knowledge of the organisation's structure, vision, mission and core values, scope of activity, philosophy, policies and procedures. Consequently, the content of the basic management system training shall be the prerequisite for advanced management system training or an integral part.
- Advanced Management System Training, as required by Management Function:

Training Subject	Provider	Accountable Manager	Nominated Persons	Safety Manager	Compliance Monitoring Manager	Auditor	Inspector	FSTD-Focal Point	Standard of Performance
Advanced Management System Training	Internal	x	x	x	x	x	x	x	Gets expertise and comprehensive knowledge of the organisation's management system and associated procedures. Is competent to maintain an effective management system within the organisation. Is skilled to actively promote safety, to analyse and evaluate data for the purpose to identify trends and systematic weaknesses within the organisation and to maintain continuous improvement
Safety Management Training	External: Manual XX, Chapter «Training Provider			x					<i>Is qualified and skilled to implement and maintain an effective Safety Management</i>

Training Subject	Provider	Accountable Manager	Nominated Persons	Safety Manager	Compliance Monitoring Manager	Auditor	Inspector	FSTD-Focal Point	Standard of Performance
Compliance Monitoring Management	External: Manual XX, Chapter «Training Provider»				x				<i>Is qualified and skilled to implement and maintain an effective Compliance Monitoring Management</i>
Audit and Inspection Techniques	External: Manual XX, Chapter «Training Provider»					x	x		Is qualified and skilled to conduct, evaluate and document audits and inspections. Is competent to initiate measures and to monitor its effectiveness
Relevant Standards and Requirements	External: Manual XX, Chapter «Training Provider»		x	x	x			x	Gets expertise and comprehensive knowledge of the relevant standards and requirements. Names the structure, content and is able to find relevant paragraphs. Is skilled to interpret legal paragraphs to ensure legal compliance

• Based on the organisation's management system, the advanced management system training consists of:

Training Subject		Standard of Performance	Instructor
The Organisation and Scope of Activity	 Safety Policy The Organisation – Vision, Mission, Values and Strategy Introduction Scope of Activity Statement of Complexity Relevant Standards and Requirements Compliance Statement Exemption and Derogation Alternative Means of Compliance Locations, Facilities and Infrastructure Power of Authority 	 The Participant shall practically show the ability to create the company's safety policy based on the vision, mission, values and strategy, and to define the scope of activities for the company. Additionally the Participant shall be able to define and/or fully understand the details concerning statement of complexity, relevant standards requirements, compliance statements, exemption and derogation, alternative means of compliance, locations, facilities and infrastructure, and the power of the Authority. 	ACM
Organisation Documentation, System of Amendment and Revision	 Overview of the Organisation Documentation System and Form of Distribution System of Amendment and Revision Changes/Elements requiring prior Approval 	 The Participant shall fully understand the requirement for the organisation's documentation and its structures (including overview), distribution forms, and the control of external/foreign documents. Additionally the system of amendment shall be explained together with the documentation «change management», also identifying items to be or not to be approved prior to the document's publication. 	NPFO

Training Subject		Standard of Performance	Instructor
	 Changes/Elements not requiring prior Approval Control of External/Foreign Documents 	 The Participant shall be able to support and/or lead the organisation's documentation needs and respective processes and document definitions, including changes. 	
Organisational Structure, Duties, Responsibilities and Accountabilities	 Organisational Structure Management Personnel – Name and Contacts Duties, Responsibilities and Accountabilities Accountable Manager Safety Manager Compliance Monitoring Manager 	 The Participant shall know the required/applied organisational structure of the company in detail and shall be able to explain/define duties, responsibilities and accountabilities for the different management functions/posts. 	ACM
Safety Management	 Safety Policy (if not presented at the beginning of the manual) Hazard Identification and Risk Management Flight Data Monitoring Programme Change Management Safety Board (SRB) Safety Action Group (SAG) Safety Performance Monitoring Safety Promotion Safety -Studies, - Reviews, -Surveys and Investigation 	 The Participant shall fully support and enable the company's safety policy and shall be able to define respective changes and policies to international standards. The Participant shall furthermore practice hazard identification and risk management, shall understand the data retrieved from flight data monitoring and shall enable or lead the processes for change management, of the SRB, SAG, safety performance monitoring, and safety studies, reviews and surveys. The Participant shall also actively promote safety within the company and shall know the ways to do this. 	SM
Compliance Management	 Compliance Monitoring Programme Audit and Inspections Auditors and Inspectors Findings, Corrective- and Preventive Actions Classification of Findings 	 The Participant shall actively lead the compliance monitoring programme/processes and shall fully understand respective audit/inspection systems, checklists, finding classifications and resulting corrective and preventive actions. The Participant shall be able to systematically communicate with auditors and inspectors, and, if within the activity scope, shall be able to lead these persons and to enable their important role within the company. 	СМ
Management Evaluation	 Purpose and Scope Process of Management Evaluation Continuous Improvement (optional within FOCA) 	The Participant shall apply the management evaluation process according to the scope of activities, and shall understand it for all management functions. Purpose and scope shall be fully understood/applied, and continuous improvement enabled.	
Occurrence Reporting Scheme	 Reporting- and Feedback System Occurrence Reporting 	 The Participant is able to establish a reporting and feedback system including occurrence reporting and explains data storage and evaluation, including the ways/consequences/influences to the management evaluation, change management and continuous safety improvement. 	
Emergency Response Planning	 Objectives and Scope Concept and Planning	The Participant fully understands the background, requirements, objectives and scope of an emergency response plan and is able to either participate or to lead an	

Training Subject		Standard of Performance	Instructor
		emergency response team according to the role/concepts and planning given in the emergency response plan.	
Management System Training	 Basic Training Advanced Training Continuous Training 	 The Participant explains the concepts for basic and advanced management system training, is able to define objectives of a general or actuality based kind, or, according to the managerial role, practices both types of such training. 	
Record Keeping	Record Keeping and Archiving	The Participant designs a system for record keeping and archiving, respecting all requirements (i.e. storage periods, etc.) and is able to run it smoothly.	
Contracting and Leasing	 Contracting and Monitoring of Contractors Leasing Code-Share Agreement 	 The Participant fully understands the concept of contracting and sub-contracting and the processes required for monitoring (auditing/inspecting). The leasing concepts and contracts are understood and correctly applied, as well as 	
		code-share agreements.	

13.4	CA / IN EVALUATION METHOD				
MS CL TOPIC	ORO.GEN.200 LEGAL REFERENCE	ORA.GEN.200	ORO.GEN.210	ORA.GEN.210	
13-OMM09 CL ChOM CH	OMM, Chapter 9 MANUAL REFERENCE	9.X «Manageme	nt System Contin	uous Training»	

General:

□ Is there a Continuous Management System Training defined?

□ Is the Continuous Management System Training based on a systematic analysis of factual data and results derived from the Safety Management, Compliance Management, Reporting- and Feedback System and Management Evaluation?

Air Operations:

□ Is the Continuous Management System Training adequately integrated within the training and checking programme for flight crew and, if applicable, for cabin crew?

ATO:

□ Is the Continuous Management System Training adequately integrated within the staff training programme?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

General

- The purpose of the Continuous Management System Training is to ensure that the organisation and all employees are continuously <u>maintaining and improving</u> the Standard of Performance regarding all aspects, philosophies, policies and procedures of the management system.
- The Continuous Management System Training should be reviewed periodically for its effectiveness in order to ensure continuing relevance to the organisation.
- Continuous training, mostly named as recurrent training, should be based on a <u>systematic</u> analysis of factual data and results of:
 - Hazard identification and Risk Management;
 - Safety Performance Monitoring;
 - Studies, Investigations, Surveys and Reviews including Management Evaluation;
 - If applicable, Flight Data Monitoring;
 - Audit and Inspections, especially findings, corrective and preventive actions;
 - Reporting and Feedback System.

Air Operations

- For Flight Crew:
 - As a specific training module, the Continuous Management System Training shall be integrated within:
 - Recurrent Training and Checking.

- For Cabin Crew:
 - As a specific training module, the Continuous Management System Training shall be integrated within:
 - o Recurrent Training; and
 - o Refresher Training.

ΑΤΟ

- The Continuous Management System Training shall be a major part of:
 - Instructor Refresher Training.

FSTD

- The Continuous Management System Training shall be a major part of:
 - Annual Review.

AeMC

- The Continuous Management System Training shall be a major part of:
 - Annual Review.

End of Guidance Material / Information