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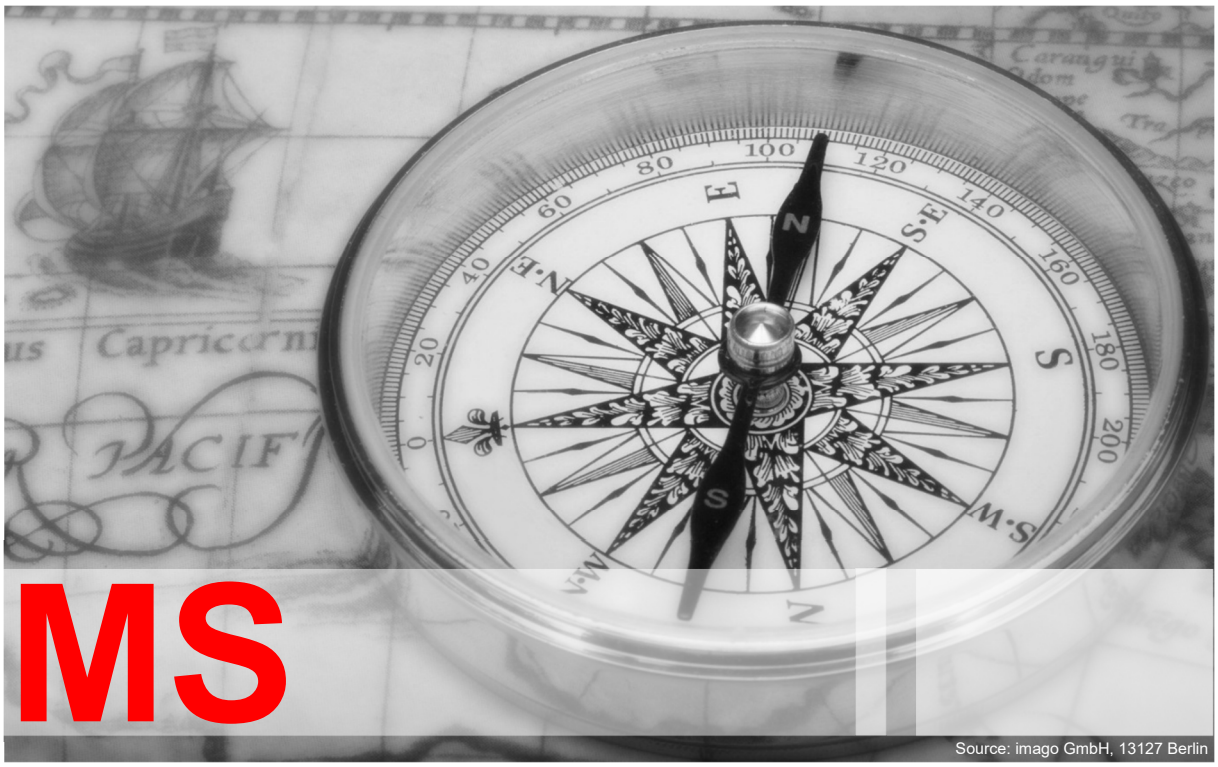
Federal Office of Civil Aviation FOCA
Safety Division - Flight Operations

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- and SPO-Operator
Valid from	25.01.2022
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Log of Revision

Date	Issue	Revision	Prepared by	Highlight of Revision
18.06.2013	1	0	BAZL, TP2-C04	• First Issue
28.04.2015	1	1	SBFL	• Chapter 3.X partly amended
14.06.2016	1	2	SBFF	• Cover Page: FOCA division identification amended
09.11.2017	1	3	SBFF	• 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 «Accountable Manager (ACM)» amended for 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.
21.12.2021	1	4	SBFF	• Regulation references updated • Links and List of Abbreviations updated • Term «Change Management» to «MoC» • Integration Part-CAMO • Main changes in chapters: - Ch. 3.4 System of Amendmet and Revision - Ch. 3.5 Changes / Elements requiring prior approval - Ch. 3.6 Changes / Elements not requiring prior approval - Ch. 3.9.2 The complexity of an Organisation - Ch. 3.12 Flexibility provision - Ch. 3.13 Alternative Means of Compliance - Ch. 3.15 Access and Power of Authorities - (Ch. 4.1 Org. Structure) - Ch. 4.2 Personnel Requirements - Ch. 4.4.2 Safety Manager - Ch. 4.4.3 Compliance Monitoring Manager - Ch. 5.1 Safety Policy - Ch. 5.3 Management of Change - Ch. 6.1 Reporting- and Feedback System - Ch. 6.2 Occurrence Reporting (typing error)

				- Ch. 7.1 Compliance Monitoring Functions and Programme - (Ch. 7.2 Audit and Inspections) - Ch. 7.4 Findings and Corrective- and Preventive Actions - Ch. 7.5 Classification of Findings - Ch. 9.1 Contracting and Monitoring of Contractors - Ch. 9.2 Leasing / Use of Aircraft listed on an AOC for non-commercial and SPO - Ch. 10 Record Keeping - Ch. 12.1 Emergency Response Planning

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	1	10.10.2017
Appendix FSTD to FOCA GM/INFO «CL Management System» – Supplementary Provisions for FSTD Qualification Certificate Holders» (attached to the end of this document)	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

List of Abbreviations

LoA ISS1 / REV4 / 21.12.2021

The following abbreviations are within this GM/INFO:

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

Abbreviation	Definition
EFB	Electronic Flight Bag
ENR	Enroute
ERP	Emergency Response Planning
ETOPS	Extended Range Operations with two Engine Aeroplanes
EU	European Union
FC	Flight Crew
FCL	Flight Crew Licensing
FDM	Flight Data Monitoring
FDR	Flight Data Recorder
FFP	FSTD Focal Point
FFS	Full Flight Simulator
FOCA	Federal Office of Civil Aviation
FSO	Flight Safety Officer
FSTD	Flight Simulation Training Device
FTE	Full Time Equivalent
FTL	Flight and Duty Time Limitation
GAR	Green-Amber-Red Model
GEN	General
GM	Guidance Material
HAeMC	Head of Aero Medical Centre
HEMS	Helicopter Emergency Medical Service
HF	Human Factors
HHO	Helicopter Hoist Operations
HoA	Highlights of latest Amendment
HT	Head of Training (ATO)
ICAO	International Civil Aviation Organisation
ISS	Issue
JAA	Joint Aviation Authorities
LAPL	Light Aircraft Pilot Licence
LECR	List of Effective Certification Leaflet Chapters and Reference Boxes
LoC	List of Effective Chapters
LoP	List of Effective Pages
LoR	Log of Revision
LoR	List of Revisions
LVO	Low Visibility Operation
MEL	Minimum Equipment List
MLR	Manuals, Logs and Records
MMEL	Master Minimum Equipment List
MoC	Management of Change
MOE	Maintenance Organisation Exposition
MOP	Method of Procedure
Mount.	Mountainous
MRO	Maintenance/Repair and Overhaul
MS	Management System
NCC	Non-Commercial Air Operations with Complex Motor-Powered Aircraft
NMR	Notification of Manual Revision
No.	Number
NOTAM	Notice to Airman
NP	Nominated Person
NPA	Notice of Proposed Amendment
NPCA	Nominated Person Continuing Airworthiness Managment
NPCT	Nominated Person Crew Training
NPFO	Nominated Person Flight Operations
NPGO	Nominated Person Ground Operations
NVIS	Night Vision Imaging Systems
OD	Operational Directive
OM	Operations Manual
OM A	Operations Manual Part A, General / Basic
OM B	Operations Manual Part B, Aircraft Operating Matters
OM C	Operations Manual Part C, Route, Role, Area and Aerodrome,

Abbreviation	Definition
	Operating Site Instructions and Information
OM D	Training
OMM	Organisation's Management Manual
ORA	Organisation Requirements Air Crew
ORO	Organisation Requirements Air Operations
Para.	Paragraph
PBN	Performance Based Navigation
PPL	Private Pilot Licence
PRA	Proposed Revision / Amendment Form
PTO	Pilot Training Organisation
QTG	Qualification Test Guide
RA	Risk Assessment
RB	Reference Box
Ref.	Reference
REGA	(Rettungsflugwacht Garde Aérienne or Guardia Area) Swiss Air Rescue
REV	Revision
SAG	Safety Action Group
SCMM	Safety Management and Compliance Monitoring Manual
SE	Safety Experts
SEC	Security
SM	Safety Manager
SMM	Safety Management Manual
SMS	Safety Management System
SOP	Standard Operating Procedures
SoR	State of Register
SPO	Specialised Operations
SPA	Single Pilot Aeroplane
SPI	Safety Performance Indicator
SPL	Sailplane Pilot Licence
SRB	Safety Review Board
TC	Third Country
TKI	Theoretical Knowledge Instructor (ATO)
TM	Training Manual
ToC	Table of Content

Table of Contents (ToC)

ToC ISS1 / REV4 / 21.12.2021

0 Introduction

Ch. 0.0 ISS1 / REV0 / 18.06.2013

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 / REV4 / 21.12.2021

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 other organisations than Approved Training Organisations, Air Operators and CAMOs (note: For stand-alone CAMOs there is a specific template «Anybody's CAME» prepared by FOCA).

0.2 Scope

Ch. 0.2 ISS1 / REV4 / 21.12.2021

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 the required data/content. 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 / REV4 / 21.12.2021

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
CAMO	Continuing Airwortiness Management Organisation	(EU) No 1321/2014
could	This term expresses a possibility.	http://oxforddictionaries.com/definition/english/could
FSTD Qualification Certificate holder only	The word *only* 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 (EU) 2018/1139	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 «*air*-operator», wheras the term «operator» 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 / REV4 / 21.12.2021

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

Legal Reference	Issue	Subject
Basic Regulation (EU) 2018/1139	04.07.2018	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; Annex V: Part-CC; Annex VI: Part-ARA; Annex VII: Part-ORA; Annex VIII: Part-DTO
Commission Regulation (EU) 1321/2014	17.12.2014	Regulation on the continuing airworthiness of aircraft and aeronautical products, parts and appliances, and on the approval of organisations and personnel involved in these tasks Annex I: Part-M; Annex II: Part-145; Annex III: Part-66; Annex IV: Part-147; Annex Va: Part-T; Annex Vb: Part-ML; Annex Vc: Part-CAMO; Annex Vd: Part-CAO
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

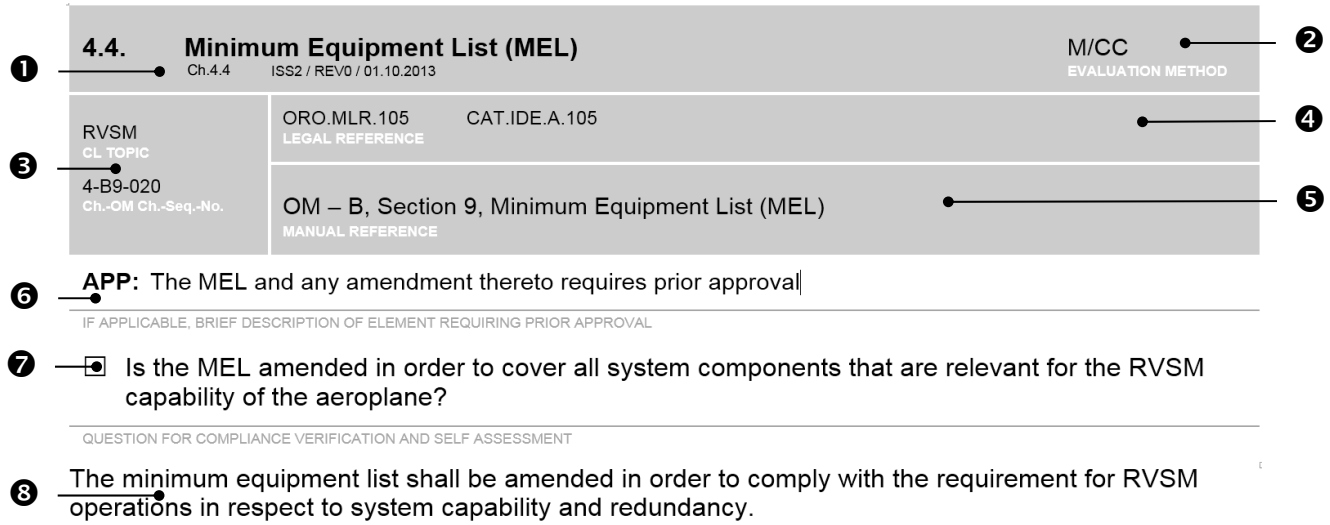
documentation of all Management System key processes, including a process for making personnel aware of their responsibilities and the procedure for amending this documentation.

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 / REV4 / 21.12.2021

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:



❶	Title – subject description of the Reference Box (RB) including revision status
❷	FOCA evaluation method (based on most stringent legislation, i.e. the one for AOC holders)
❸	FOCA / Topic Reference Number which may be used as identification in addition to interlink between this leaflet and the Document Evaluation Report (non-compliance 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.
❹	Associated legal reference and/ or reference to other relevant publications including information on formal Acceptance (ACC) or Approval (APP) where applicable.
❺	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.
❻	If the legal provision requires a formal approval, a short description of the content of this approval is provided.
❼	Questions for self-assessment and compliance verification.
❽	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 (EU) 2018/1139

Ch. 1.1 ISS1 / REV4 / 21.12.2021

The Basic Regulation (EU) 2018/1139 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: - Annex II; Para. 3ff
Training Organisations and FSTD Qualification Certificate Holders Aero-Medical Centres	Pilot Licensing: - Annex IV; Para. 5ff - Annex IV; Para. 3.3ff
Commercial Operations Non-Commercial Operations of complex motor-powered aircraft	Air Operations: - Annex V; Para. 8ff
Airport Operator	Aerodromes: - Annex VII; Para. 2.2ff
ATM/ANS Service Providers Training Organisations	ATM/ANS and ATC: - Annex VIII; Para. 5ff

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

Implementing Rules considering organisation requirements have been set in force for Air Crew, Air Operations, ATM/ANS and Continuing Airworthiness. The scope of this certification leaftlet does not cover ATM/ANS.

Regulation Air Operations (Annex III: Part-ORO), Regulation Aircrew (Annex VII, Part-ORA) and Regulation Continuing Airworthiness (Annex Vc, Part-CAMO) 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 relevant requirements prescribed in Regulation (EU) 2018/1139 and Regulation (EU) 376/2014 as well as in the delegated and implementing acts adopted on the basis thereof.

(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

Sources:	Regulation Aircrew: Annex VII, Part-ORA, Subpart-GEN.200 Management System Regulation Air Operations: Annex III, Part-ORO, Subpart-GEN.200 Management system Regulation Continuing Airworthiness; Annex Vc, Part-CAMO, Section A, CAMO.A.200

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.

(c) Where the organisation holds one or more additional organisation certificates within the scope of Regulation (EU) 2018/1139 and its delegated and implementing acts, the management system may be integrated with that required under the additional certificate(s) held.

(d) Notwithstanding point (c), for air carriers licensed in accordance with Regulation (EC) No 1008/2008 (AOC holders), the management system provided for in this Annex shall be an integrated part of the operator's management system.

(e) 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). A cross reference should be included.

Sources (a) and (b):	Regulation Aircrew, GM1 ORA.GEN.200(a)(5) Management System Regulation Air Operations, GM1 ORO.GEN.200(a)(5) Management System
Sources (c) and (d):	Regulation Continuing Airworthiness, CAMO.A.200
Source (e):	Regulation Aircrew, AMC1 ORA.GEN.200(a)(5) Management System

1.3 Elements of the Management System requiring Approval

Ch. 1.3 ISS1 / REV4 / 21.12.2021

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», except for SPO Authorisation holders, where such an element would touch the Authorisation (ref. to chapter 0.3 «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

For AOC, ATO, AeMC:

*(2) **any of the elements of the operator's management system as required in ORA.GEN.200(a)(1) and (a)(2) / ORO.GEN.200(a)(1) and (a)(2)** shall require **prior approval** by the competent authority.*

For CAMO:

(2) changes to personnel nominated in accordance with points (a)(3) to (a)(5) and (b)(2) of point CAMO.A.305;

(3) changes to the reporting lines between the personnel nominated in accordance with points (a)(3) to (a)(5) and (b)(2) of point CAMO.A.305, and the accountable manager;

(4) the procedure as regards changes not requiring prior approval (ref. to last line in box)

(b) For any changes requiring prior approval in accordance with Regulation (EU) 2018/1139 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 (EU) 2018/1139 and its Implementing Rules and to amend, if necessary, the operator / organisation 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/CAMO.B.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).

- referred to in point (b) of point CAMO.A.115 and approved by the competent authority in accordance with point (h) of point CAMO.B.310.

Source:	ORO.GEN.130(a)(2), ORA.GEN.130(a)(2), ORO.GEN.200(a)(1) and (a)(2), ORA.GEN.200(a)(1) and (a)(2), CAMO.A.130, CAMO.A.305

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. Responsibitliy 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 / REV4 / 21.12.2021

During the implementation of a Management System the complexity of the organisation must be considered. Details are found in the Annexes of the respective regulations. E.g. for Air Operations: AMC1 ORO.GEN.200(b) ‘Management system – size, nature and complexity of the activity’, or for Aircrew: AMC1 ORA.GEN.200(b) ‘Management system – size, nature and complexity of the activity’ or for CAMO: CAMO.A.200 (b) ‘size of the organisation and the nature and complexity of its activities’.

Also refer to chapter 3.9.2 where these paragraphs and further notes are stipulated.

Note: The requirements for non-complex organisations are lower than those for complex organisations; E.g. for Air Operators and ATOs: A non-complex organisation does not need a SRB, nor is safety measurement / SPIs required (find more information to safety management in chapter 5).

2 The Management System and its Documentation

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)

Ch. 2.2.1 ISS1 / REV4 / 21.12.2021

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). Also the newly introduced requirements on Management Systems to the Regulation Continued Airworhtiness (herein for CAMO so far) have followed a very close structure. This allows 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 / REV4 / 21.12.2021

As stated in the Basic Regulation (EU) 2018/1139, the organisation must implement and maintain a Management System 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

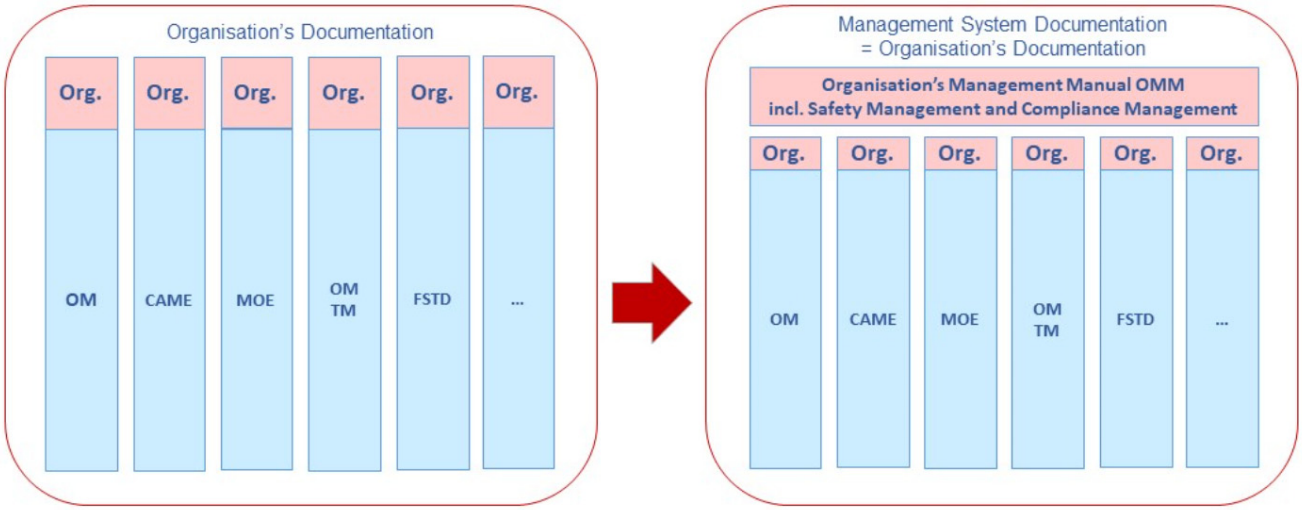
The Management System Documentation consists of the whole set of documents / manuals, which are maintained in an organisation (Organisation's Documentation).

2.4 The Possibility to develop an Organisation's Management Manual

Ch. 2.4 ISS1 / REV4 / 21.12.2021

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. OM, TM, CAME, MOE, 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 / REV4 / 21.12.2021

The AMC and GM to Regulation Air Operations, Annex III: Part-ORO; to Regulation Aircrew, Annex VII: Part-ORA and to Regulation Continuing Airworthiness, Annex Vc: Part-CAMO 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 not impose a separate 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 organisational decision.

An integrated management system enables 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 / REV4 / 21.12.2021

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

Regulation Air Operations, Annex III: Part-ORO; Regulation Aircrew, Annex VII: Part-ORA and Regulation Continiung Airworthiness, Annex Vc: Part-CAMO 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 demand a specific structure of the manuals.

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**	**Tool**	**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 → What must be done?
- Responsibility → Who does it?
- Remarks → 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 / REV4 / 21.12.2021

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 operators doing high risk SPO)
  - Approved Training Organisations → *ATO*
  - Approved Training Organisations providing training for the CPL, MPL AND ATPL and the associated ratings and certificates → *ATO CPL, MPL AND ATPL*
  - Approved Training Organisations providing training only for the LAPL, PPL, SPL and BPL and the associated ratings and certificates → *ATO LAPL, PPL, SPL and BPL*
  - FSTD Qualification Certificate Holders → *FSTD*
  - Aero Medical Centres → *AeMC*
  - Continuing Airworthiness Management Organisation → *CAMO*

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

3 Organisational Elements and Requirements

Ch. 3 ISS1 / REV4 / 21.12.2021

3.1 Format of Manual and Documents

Ch. 3.1 ISS1 / REV4 / 21.12.2021

M/CC
EVALUATION METHOD

MS CL TOPIC	ORO.GEN.200 ORO.MLR.100 ORA.GEN.200 ORA.ATO.130 CAMO.A.200 CAMO.A.300 LEGAL REFERENCE
3-OMM0-005 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 0 «Manual System and Record of Edition/Revisions» MANUAL REFERENCE

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 following points as well as the questions for self-assessment and compliance verification above have been drawn up for paper based manuals. They should be adapted to the nature of electronic manuals as appropriate. Also see the ‘Note’ below.
- 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 should be separated by dividers;
  - Each chapter should 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 should 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

Example of Record of Revisions

- 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 (if applicable):

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:

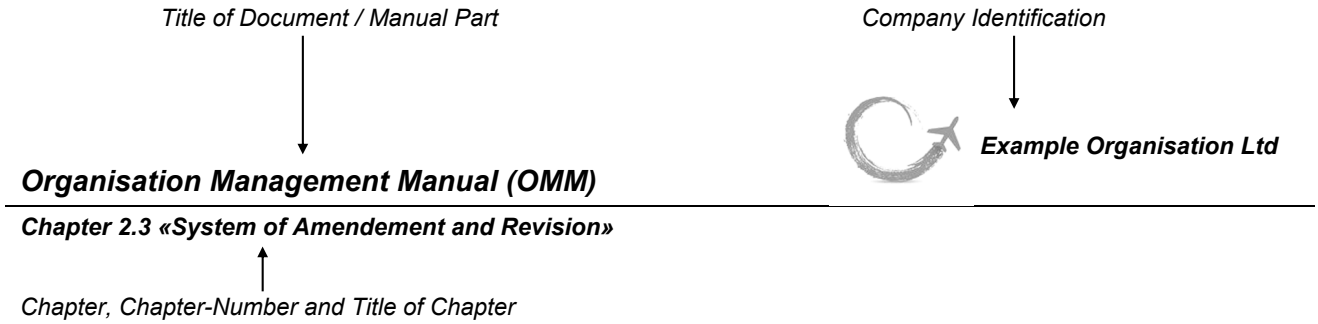
Chapter	*Edition No*	*Revision No*	*Effective Date*
1.1	*1*	*0*	*dd.mm.yy*
1.1.1	*1*	*2*	*dd.mm.yy*
1.2	*1*	*1*	*dd.mm.yy*
…			

- 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



- Footer

3.2 Electronic Data Processing (EDP)

Ch. 3.2 ISS1 / REV0 / 18.06.2013

M/CC
EVALUATION METHOD

MS CL TOPIC	ORO.MLR.100 FOCA Requirement LEGAL REFERENCE
3-OMM0-010 CL Ch.-OM Ch.-Seq.-No.	Complete Manual System and Company Documentation; and OMM, Chapter 2.X «Organisation Documentation, System of Amendment and Revision» MANUAL REFERENCE

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	**Structure of the Management System Documentation** Ch. 3.3 ISS1 / REV4 / 21.12.2021	M/CC EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORO.AOC.100 ORO.MLR.100 ORA.GEN.200 ORA.ATO.130 CAMO.A.200 CAMO.A.300 LEGAL REFERENCE	
3-OMM02-015 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 2.X «Structure of the Organisation's Documentation / Management System» MANUAL REFERENCE	

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.

Example of an overview

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 continuing airworthiness management personnel and the subcontracted CAMO.*
…	…	…

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 Organisation Management Manual (OMM)

Ch. 3.3.1 ISS1 / REV4 / 21.12.2021

M/CC
EVALUATION METHOD

MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 CAMO.A.200 LEGAL REFERENCE
3-OMM02-020 CL Ch.-OM Ch.-Seq.-No.	Complete Manual System and Organisation Documentation; and OMM, Chapter 2.X «Organisation Documentation, System of Amendment and Revision» MANUAL REFERENCE

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 consideration to ANNEX VII of Regulation Air Crew: Part ORA, Annex III of Regulation Air Operations: Part ORO and Annex Vc of Regulation Continuing Airworthiness: Part-CAMO - 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 Overview – Basic Structure of an Organisation's Management Manual

Ch. 3.3.2 ISS1 / REV4 / 21.12.2021 EVALUATION METHOD

MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 CAMO.A.200 LEGAL REFERENCE
3-OMMToC-025 CL Ch.-OM Ch.-Seq.-No.	Organisations Management Manual Structure MANUAL REFERENCE

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) (including temporary Revisons – if applicable)
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
2	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
3	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 • Management of Change • Safety Board (SRB) • Safety Action Group (SAG) • Safety Performance Monitoring and Measurement • Safety Promotion • Safety –Studies, -Reviews, -Surveys and Investigation

5	Compliance Management	• Compliance Monitoring Programme • Audits and Inspections • Auditors and Inspectors • Findings, Corrective- and Preventive Actions • Classification of Findings
6	Management Evaluation	• Management Evaluation • Continuous Improvement
7	Reporting Scheme	• Reporting- and Feedback System • Occurrence Reporting
8	Emergency Response Planning	• Objectives and Scope • Concept and Planning
9	Management System Training	• Management System Basic Training • Management System Advanced Training • Management System Continuous Training
10	Record Keeping	• Record Keeping and Archiving
11	Contracting and Leasing	• Contracting and Monitoring of Contractors • 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 System of Amendment and Revision Ch. 3.4 ISS1 / REV4 / 21.12.2021	M/CC EVALUATION METHOD

MS CL TOPIC	ORO.GEN.130 ORO.SPO.115 LEGAL REFERENCE	ORO.MLR.100 CAMO.A.130	ORO.GEN.130 ORO.MLR.100	ORA.GEN.130 CAMO.A.300	ORA.GEN.200
3-OMM02-030 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 2.X «System of Amendment of Manuals» MANUAL REFERENCE				

APP: For AOC holders, AeMCs, ATOs and CAMOs 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 / CAMO:

☐ 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 / SPO

☐ Is there a statement that handwritten revisions/amendments are not permitted except in situations requiring immediate revisions/amendment in the interest of safety?

AOC holders / CAMOs:

☐ 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 idealy 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

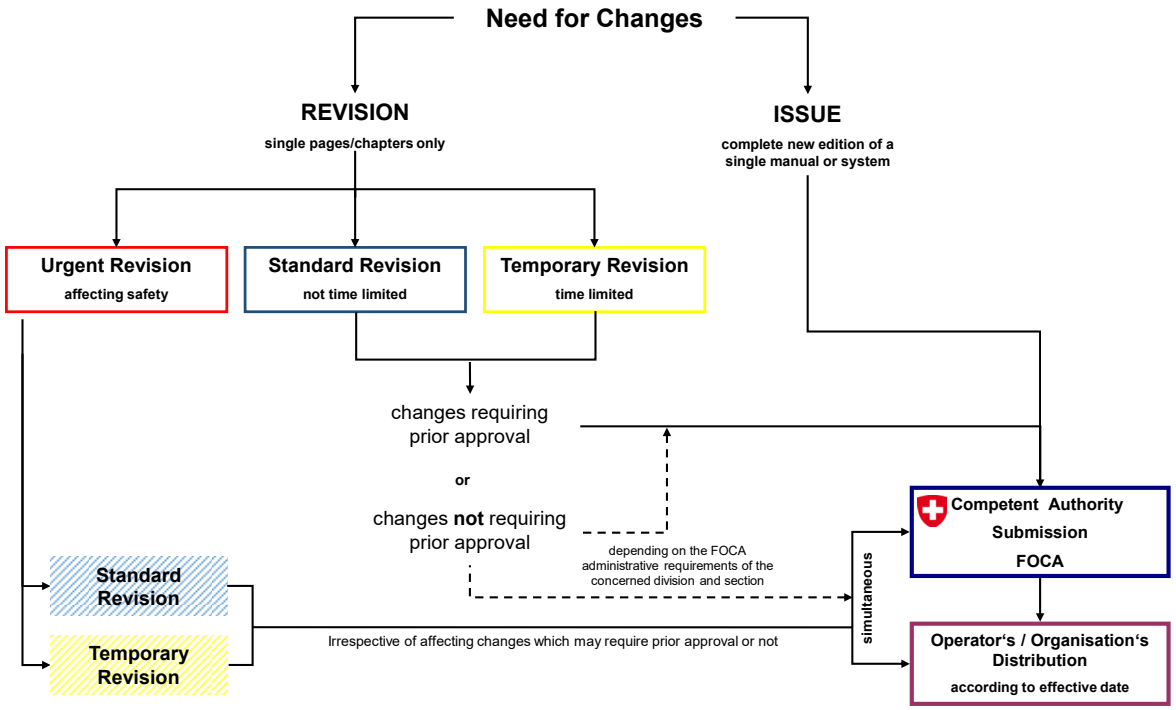
  Time limited changes or amendments, published additionally to the revision in effect.

  Temporary Revisions are to be cancelled after expiration or if no longer valid, appropriate or applicable. Temporary revisions are ideally issued in yellow. The start and end date of the temporary revision should be indicated on each page;

Note: Temporary Revisions are not applicable for CAMO.

- 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	Content	Format	Content Owner								
				ACM	SM	CMM	NP FO	NP CT	NP GO	NP CA	SECO	…
Management System	*CMM*	*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*			
		…										
OM B Type A	*NPFO*	*Operating Procedures*					*X*					
OM B Type B	*NPFO*	*Operating Procedures*					*X*					
OM C	*NPFO*	*Route and Aerodrome*					*X*					
OM D	*NPCT*	*Flight Crew Training*						*X*				
		Cabin Crew Training						*X*				
		Management System Training				*X*						
		Security Training									*X*	
		…										
CAME	*NPCA*	*CAME Procedures*								*X*		
….												

Example Revision/Amendment Process AOC Holders

Step	***Remarks***	***Tool***	***Responsibility***
Monitoring and Change Identification	• *Collection of suggestions and discrepancies* • *Findings, corrective and preventive actions* • *Changes in relevant standards and Requirements* • *Management of Change* • *…*	• *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* • *ATO:* *Initial: Form 105/PRA/Compliance List;* *Revision: PRA* *Change of nominated persons (only): Form 105*	*Nominated Person of the department/Division*

Step	*Remarks*	*Tool*	*Responsibility*
	FOCA at least 20 days (10 days for ATO) before the date of the proposed change • *in case of unforeseen changes: inform FOCA at the earliest opportunity*	• *AOC/SPO/CAMO: Form 44.20/Form 44.22/PRA/Compliance List For a change of nominated persons include Form 4/CV/written resume* • *Proposed revision/ amendment/ manual/document* • *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* • *PRA/Compliance List* • *revised/amended/ manual/document/pages* – …	*Nominated Person of the department/Division*
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*	• *Revision/Amendment* • *Letter of Revision*	*Document user*

Step	***Remarks***	***Tool***	***Responsibility***
	• *send the signed Letter of Revision to the document owner*		
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 Changes / Elements requiring prior Approval

Ch. 3.5 ISS1 / REV4 / 21.12.2021

M/CC
EVALUATION METHOD

MS CL TOPIC	ORO.GEN.130 ORA.GEN.130 ARO.GEN.330 CAMO.A.130 CAMO.A.305 LEGAL REFERENCE
3-OMM02-035 Ch.-OM Ch.-Seq.-No.	OMM, Chapter 2.X «Changes / Elements requiring prior Approval» MANUAL REFERENCE

APP: For AOC holders, AeMCs and ATOs any of the elements of the operator's/organisation's management system shall require prior approval by the competent authority; and

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

APP: For AOC holders and ATOs any changes to the accountable manager specified in ORO.GEN.210(a) / ORA.GEN.210(a) and (b).

APP: For SPO Authorisation holders the changes affecting the scope of the authorisation operations shall require prior approval.

APP: For CAMO changes that affect the scope of the certificate or the terms of approval of the organisation.

APP: For CAMO changes to personnel nominated in accordance with points (a)(3) to (a)(5) and (b)(2) of point CAMO.A.305.

APP: Changes to the reporting lines between the personnel nominated in accordance with points (a)(3) to (a)(5) and (b)(2) of point CAMO.A.305, and the accountable manager.

IF APPLICABLE, BRIEF DESCRIPTION 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 reference to the «Compliance List» or «List of Acceptance and Approvals»?

☐ Does the amendment procedure consider that the application needs to be submitted before any changes take place?

☐ 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 (10 days for ATO) 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 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 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 (10 days for ATO) before the date of the proposed change.

3.6 Changes / Elements NOT requiring prior Approval

Ch. 3.6 ISS1 / REV4 / 21.12.2021

M/CC
EVALUATION METHOD

MS CL TOPIC	ORO.GEN.130 ORA.GEN.130 ARO.GEN.310 ARA.GEN.310 CAMO.A.130 LEGAL REFERENCE
3-OMM02-040 Ch.-OM Ch.-Seq.-No.	OMM, Chapter 2.X «Changes / Elements not requirement prior Approval» MANUAL REFERENCE

APP: For AOC holders, AeMCs, ATOs and CAMO 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.

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

- 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 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 «Proposed Revision / Amendment Form (PRA)»;
- 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;
  - the general compliance statement and safety policy; and
- the ACM’s and the respective nominated person’s releases of the revision/amendment.

3.7	**Document Control of external / foreign Documents**	M/CC
	Ch. 3.7 ISS1 / REV4 / 21.12.2021	EVALUATION METHOD

MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 CAMO.A.200 LEGAL REFERENCE
3-OMM02-045 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 2.X «Control of external / foreign Documents» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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 (EU) 2018/1139	*04.07.2018*	*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;* *Annex V : Part-CC ; Annex VI : Part-ARA ; Annex VII : Part-ORA; Annex VIII : Part-DTO*	*…*
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*	*Safety Manager*
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*	*…*
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*	
Commission Regulation (EU) 1321/2014	*17.12.2014*	*Regulation on the continuing airworthiness of aircraft and aeronautical products, parts and appliances, and on the approval of organisations and personnel involved in these tasks*	*NPCA*
…			

3.8	**Organisational Strategic Planning** Ch. 3.8 ISS1 / REV4 / 21.12.2021	CA EVALUATION METHOD
MS CL TOPIC	Best practice out of strategic management LEGAL REFERENCE	
3-OMM01-050 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 1.X «The Organisation – Vision, Mission, Values and Strategy» MANUAL REFERENCE	

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

☐ 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 (long-term).
- 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.
- Refer to chapter 5.1 «Safety Policy».

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 of Activity

Ch. 3.9.1 ISS1 / REV4 / 21.12.2021

M/CC
EVALUATION METHOD

MS CL TOPIC	ORO.GEN.125 ORO.GEN.200 ORO.AOC.100 ORO.DEC.100 ORA GEN.125 ORA.GEN.200 ORA.AeMC.200 CAMO.A.125 LEGAL REFERENCE
3-OMM01-055 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 1.X «Scope of Activity – *AOC/ATO/AeMC* Certificate *Number*» MANUAL REFERENCE

APP: For AOC holders, AeMCs, ATOs and CAMOs 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, ATOs and CAMOs: 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?

CAMO:

☐ Does the CAMO provide a description of the area of operation, including the types and/or registration of the managed aircraft as well as the scope of work?

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, CAME). As a consequence, a respective

cross-reference from the OMM to the respective manual (e.g. Training Manual, CAME) must be established.

- The approval certificate number or declaration number(s) shall be included in the title of this chapter.

3.9.2

3.9.2 The Complexity of an Organisation Ch. 3.9.2 ISS1 / REV4 / 21.12.2021	M/CC EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 CAMO.A.200 LEGAL REFERENCE
3-OMM01-060 CL Ch.-OM Ch.-Seq.-No.	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 full-time equivalents (FTEs) involved in the activity subject to Regulation (EU)2018/1139 and its Implementing Rules.

Air Operators:

- Organisations with up to 20 FTEs involved in the activity subject to Regulation (EU) 2018/1139 and its Implementing Rules may also be considered complex based on an assessment 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.).

Air Crew Regulation Organisations:

- Organisations with up to 20 FTEs involved in the activity subject to Regulation (EU) 2018/1139 and its Implementing Rules may also be considered complex based on an assessment comprising the following factors:
  - in terms of complexity, the extent and scope of contracted activities subject to the approval;
  - in terms of risk criteria, whether any of the following are present:
    I. operations requiring the following specific approvals: performance based navigation (PBN), low visibility operation (LVO), extended range operations with two-engined aeroplanes (ETOPS), helicopter hoist operation (HHO), helicopter emergency medical service (HEMS), night vision imaging system (NVIS) and dangerous goods (DG);
    II. different types of aircraft used;
    III. the environment (offshore, mountainous area etc.).
- Organisations providing training in the following areas should always be considered as complex:

- full flight simulators; or
- multi-pilot (MP) type rating; or
- zero-flight-time training (ZFTT); or
- complex aircraft; or
- different categories of aircraft; or
- instructor certificates for MP type rating or complex aircraft; or
- two or more aerodromes/operating sites

- The following organisations should always be considered as non-complex:
  - 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	HHO	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

>20FTE	<20FTE	PBN AR	LVO	ETOPS	HHO	HEMS	NVIS	DG	Types	Mount.
-	X	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.

3.10 Relevant legal Requirements and Standards Ch. 3.10 ISS1 / REV4 / 21.12.2021	M/CC EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORO.AOC.100 ORA.GEN.200 CAMO.A.200 LEGAL REFERENCE
3-OMM01-065 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 1.X «Relevant Standards and Requirements» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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** (EU) 2018/1139 of 04/07/2018 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 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** (EU) 2018/1139 of 04/07/2018 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 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** (EU) 2018/1139 of 04/07/2018 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 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** (EU) 2018/1139 of 04/07/2018 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** (EU) 2018/1139 of 04/07/2018 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 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;

3.11 Compliance Statement Ch. 3.11 ISS1 / REV4 / 21.12.2021	M/CC EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORO.AOC.100 ORA.GEN.200 CAMO.A.300 LEGAL REFERENCE
3-OMM01-070 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 1.X «Compliance Statement» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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 Flexibility Provision

Ch. 3.12 ISS1 / REV4 / 21.12.2021

M/CC / M/IN
EVALUATION METHOD

MS CL TOPIC	(EU) 2018/1139, Art. 71 LEGAL REFERENCE
3-OMM01-075 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 1.X «Exemptions» MANUAL REFERENCE

APP: An Exemption from (EU) 2018/1139 (Basic Regulation) and its Implementing Rules requires prior approval by the competent authority

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

☐ Are there provisions related to an exemption?

☐ Is there a statement, that the organisation must not implement an exemption without having received the formal approval?

☐ Does the assessment of exemption include a risk assessment?

☐ Is there a list and brief description of approved Exemptions?

☐ Is the list in conformity with the granted approvals?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

- A Flexibility Provision is an exemption from (EU) 2018/1139 (Basic Regulation) and its Implementing Rules.
- If an organisation needs an exemption with or without limited duration and can provide the same level of safety, the organisation has to provide FOCA with:
  - A written application;
  - A full description of the exemption;
  - The proposed revision/amendment or temporary amendment of the manual system reflecting the exemption; and
  - A documented assessment including risk-assessment, demonstrating that Regulation (EU) 2018/1139 and its Implementing Rules are met.
- FOCA may prescribe conditions under which the organisation may operate during the exemption;
- The organisation must not implement an exemption 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.
- Approved exemptions are to be stated in the management system documentation.
  - They shall be listed in the temporary revision record referencing
    - Legal Reference;
    - Short description;
    - Date of Approval: and
    - a reference to the evidence and documentation of the exemption.

Note: In the case of exemptions according to article 71 alinea 2 the formal approval by FOCA is issued under the reservation of the acceptance of the exemption by the EU-Commission.

3.13 Alternative Means of Compliance (AltMoC)

Ch. 3.1 ISS1 / REV4 / 21.12.2021

M/CC / M/IN
EVALUATION METHOD

MS CL TOPIC	ORO.GEN.120 ORA.GEN.120 CAMO.A.120 LEGAL REFERENCE
3-OMM01-080 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 1.X «Alternative Means of Compliance» MANUAL REFERENCE

APP: For AOC holders, SPO Authorisation holders, AeMCs, ATOs and CAMOs processes related to the handling of Alternative Means of Compliance (AltMoC) require prior approval

APP: For AOC holders, SPO Authorisation holders, AeMCs, ATOs and CAMOs Alternative Means of Compliance (AltMoC) are subject to prior approval by the competent authority

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

General:

☐ Are there provisions related to AltMoCs?

☐ Does the assessment of Alternative Means of Compliance include a demonstration that the Implementing Rules are met?

☐ Does the assessment of AltMoCs include a risk assessment?

☐ Is the list in conformity with any granted approvals?

AOC holders / SPO Authorisation holders / AeMCs / ATOs / CAMOs:

☐ Is there a statement, that the organisation must not implement AltMoCs without having received the formal approval?

☐ Is there a list and brief description of approved AltMoC(s)?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

- Instead of Acceptable Means of Compliance (AMC), Alternative Means of Compliance (AltMoC) may be established to ensure compliance with the Implementing Rules, provided the same level of safety is ensured.
- AOC holders, AeMCs, ATOs and CAMOs must get prior approval for any AltMoC, the SPO Authorisation holder must get prior approval for any AltMoC affecting his authorisation, i.e. the associated SOP and/or RA or any part of the authorisation itself.
- An organisation shall notify the competent authority when it intends to use Alternative Means of Compliance
- AOC holders, AeMCs, ATOs and CAMOs have to provide the competent authority with:
  - An application;
  - A full description of the Alternative Means of Compliance,
  - The proposed revision/amendment of the manual system reflecting the application of the alternative means of compliance; and
  - A documented assessment, demonstrating that Regulation (EU) 2018/1139 and its Implementing Rules are met.
- SPO Authorisation holders, for items affecting their authorisation, have to provide the competent authority with:
  - An application;
  - A full description of the Alternative Means of Compliance and where it is affecting the authorisation, including the proposed revision/amendment of the SOP according to SPO.OP.230; and
  - The associated RA.

In addition (for all):

- 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, ATO and CAMO

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, ATOs and CAMOs

- 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.

3.14 Location, Facilities and Infrastructure Ch. 3.14 ISS1 / REV4 / 21.12.2021	M/CC / M/IN EVALUATION METHOD
MS CL TOPIC	ORO.GEN.215 ORO.AOC.140 ORA.GEN.215 ORA.AeMC.215 ORA.FSTD.115 CAMO.A.215 CAMO.A.300 LEGAL REFERENCE
3-OMM01-085 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 1.X «Location, Facilities, Infrastructure» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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?

ATO

☐ Are appropriate flight operations accommodation (facilities) available?

☐ Are appropriate facilities for theoretical knowledge instruction available if applicable?

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
- **CAMO,** refer to AMC1 CAMO.A.215

3.15 Access and Power of Authorities Ch. 3.15 ISS1 / REV4 / 21.12.2021	M/CC EVALUATION METHOD
MS CL TOPIC	ORO.GEN.140 ORA.GEN.140 CAMO.A.140 LEGAL REFERENCE
3-OMM01-090 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 1.X «Power of Authorities» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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 (EU) 2018/1139 and its Implementing Acts, 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/subcontracted 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 aircraft operated in accordance with the AOC 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 ATOs 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
For CAMOs only a) applies

4 Organisation, Lines of Responsibilities and Accountabilities

Ch. 4 ISS1 / REV4 / 21.12.2021

4.1 Organisational Structure – General Concept

Ch. 4.1 ISS1 / REV3 / 09.11.2017

M/CC
EVALUATION METHOD

MS CL TOPIC	ORO.GEN.200 ORO.GEN.210 ORO.AOC.135 ORA.GEN.200 ORA.GEN.210 ORA.AeMC.210 CAMO.A.200 CAMO.A.305 LEGAL REFERENCE
4-OMM03-005 CL Ch.-OM Ch.-Seq.-No.	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:

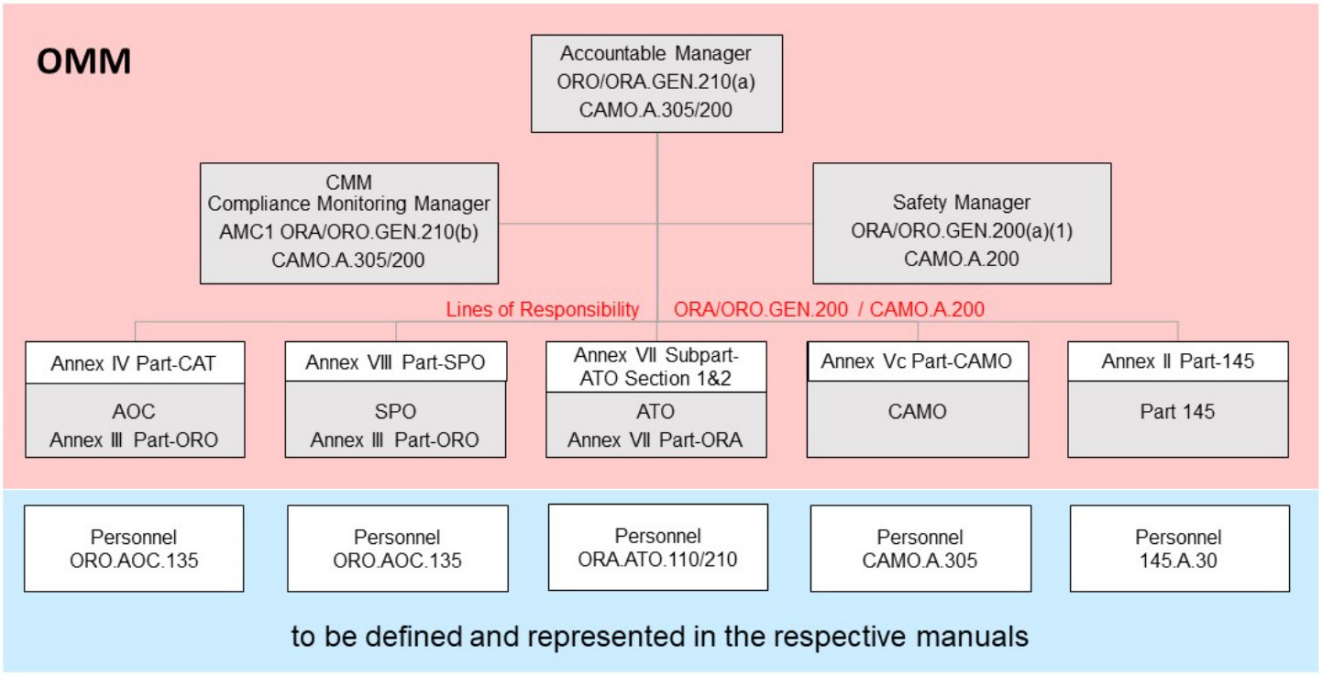
☐ Is a Safety Review Board (SRB) designated?

☐ 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.
- The Safety Review Board (SRB) (relevant for complex organisations) 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 Personnel Requirements Ch. 4.2 ISS1 / REV4 / 21.12.2021					M/CC EVALUATION METHOD
MS CL TOPIC	ORA.GEN.200 ORA.ATO.210 LEGAL REFERENCE	ORA.GEN.210 ORA.AeMC.210	ORO.AOC.135 ARA.GEN.330	ORA.ATO.110 CAMO.A.200	ARO.GEN.330 CAMO.A.305
4-OMM03-010 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 3.X «Organisational Structure»; and OMM, Chapter 3.X. «Management Personnel – Name and Contacts» MANUAL REFERENCE				

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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 (EU) 1321/2014.
- 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.

Note: NCC Operator only needs an ACM, SM and CMM; There are no further specifications on how other duties (as e.g. flight operations, crew training, etc.) are to be assigned.

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.

CAMO

- Additionally, if the CAMO has the privilege to issue Airworthiness Review Certificates it shall employ Airworthiness Review Staff

Note: Reference is made to FOCA GM/INFO «Nomination of Management Personnel».

4.3 Management Personnel – Name and Contacts

Ch. 4.3 ISS1 / REV4 / 21.12.2021

CA
EVALUATION METHOD

MS CL TOPIC	ORO.GEN.200 ORO.GEN.210 ORO.AOC.135 ORA.GEN.200 ORA.ATO.110 ORA.ATO.210 ORA.ATO.110 ORA.AeMC.210 CAMO.A.200 CAMO.A.305 LEGAL REFERENCE
4-OMM03-015 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 3.X. «Management Personnel – Name and Contacts» OM A, Chapter 1.X. «List of Management Personnel» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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*** ***Name of Deputy***	***Contact details***
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*** ***Name of Deputy***	***Contact details***
ATO		
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 Holder		
FSTD Focal Point (FFP)	*Refer to XXX chapter xx*	
….		
AeMC		
Head of AeMC (HAeMC)	*Refer to XXX chapter xx*	
CAMO		
Cont. Airworthiness NPCA	*Refer to XXX chapter xx*	
ARS …	*Refer to XXX chapter xx*	
…		

4.4	**Duties, Responsibilities and Accountabilities – Concept**	M/CC
	Ch. 4.4 ISS1 / REV4 / 21.12.2021	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	ORA.GEN.200 CAMO.A.200	ORA.ATO.110 CAMO.A.305
4-OMM03-020 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 3.X «Duties, Responsibilities and Accountabilities» MANUAL REFERENCE				

APP: The accountability of management personnel requires prior approval.

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING 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, CAMO 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 GM/INFO CL provides guidelines, requirements and explanations concerning duties, responsibilities and accountabilities for ACM, CMM, SM, SAG, SRB only.

4.4.1 Accountable Manager (ACM)

Ch. 4.4.1 ISS1 / REV4 / 21.12.2021

M/CC
EVALUATION METHOD

MS CL TOPIC	ORO.GEN.200 ORA.ATO.210 CAMO.A.200	ORO.GEN.210 ORA.ATO.110 CAMO.A.305	ORO.AOC.135 ORA.AeMC.210	ORO.GEN.200 ORA.ATO.210	ORO.GEN.210 ORA.ATO.110
	LEGAL REFERENCE				
4-OMM03-025 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 3.X «Accountable Manager» MANUAL REFERENCE				

APP: For AOC holders, AeMCs, ATOs and CAMOs 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;
    - provide necessary human and financial resources for its implementation; and
    - establish safety objectives and performance standards
    - 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.

4.4.2 Safety Manager (SM)

Ch. 4.4.2 ISS1 / REV4 / 21.12.2021

M/CC
EVALUATION METHOD

MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 CAMO.A.200 LEGAL REFERENCE
4-OMM03-030 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 3.X «Safety Manager» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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.

Note: If more than one person is designated for the safety management function, the accountable manager should identify the person who acts as the unique focal point (i.e. the 'safety manager').

4.4.3 Compliance Monitoring Manager (CMM)

Ch. 4.4.3 ISS1 / REV4 / 21.12.2021

M/CC
EVALUATION METHOD

MS CL TOPIC 4-OMM03-035 CL Ch.-OM Ch.-Seq.-No.	ORO.GEN.200 ORA.GEN.200 ORO.GEN.210 ORA.GEN.210 ORO.AOC.135 ORA.ATO.110 ORA.ATO.210 ORA.AeMC.210 CAMO.A.200 CAMO.A.305 LEGAL REFERENCE OMM, Chapter 3.X «Compliance Monitoring Manager» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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.

Note: If more than one person is designated for the compliance monitoring function, the accountable manager should identify the person who acts as the unique focal point (i.e. the 'compliance monitoring manager').

5 Safety Management

Ch. 5 ISS1 / REV3 / 09.11.2017

5.1 Safety Policy

Ch. 5.1 ISS1 / REV4 / 21.12.2021

M/CC
EVALUATION METHOD

MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 CAMO.A.200 LEGAL REFERENCE
5-OMM04-005 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 1.X «Safety Policy»; **or** OMM, Chapter 4.X «Safety Policy» MANUAL REFERENCE

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.

Air Operators and ATOs

- As a minimum the Safety Policy 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;

  <u>additional</u> for complex Air Operators and ATOs
  - 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

CAMO

- As a minimum the Safety Policy should include commitment:

- to comply with all applicable legislation, to meet all the applicable requirements, and adopt practices to improve safety standard;
- to provide the necessary resources for the implementation of the safety policy;
- to apply HF principles; and
- to enforce safety as a primary responsibility of all managers; and
- to apply 'just culture' principles to internal safety reporting and the investigation of occurrences and, in particular, not to make available or use the information on occurrences:
  - to attribute blame or liability to front line staff or other persons for actions, omissions or decisions taken by them that are commensurate with their experience and training; or
  - for any purpose other than the maintenance or improvement of aviation safety.

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 Air Operator complex

We are committed to ensure the safest operation possible following the applicable standards and regulations and by taking care of people and equipment.

The safety standard of the operation should be the concern of all employees at any level within our organisation.

Ressources to fulfil the tasks necessary to achieve our goals are carefully allocated and regularly reviewed for appropriateness; Safety as being a primary responsibility of all employees is enforced.

We exclusively support a non-blame/just culture for reports of occurrences which would not have been detected otherwise. Reporting must be done only to improve safety. Therefore we will not initiate disciplinary action against any employee who discloses an occurrence involving safety. However occurrences with elements of gross neglicence, intentional violations or criminal acts are exempted from the above statement and will not be tolerated.

Distribution of safety documents to sources outside of of our company 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 / 21.12.2021.

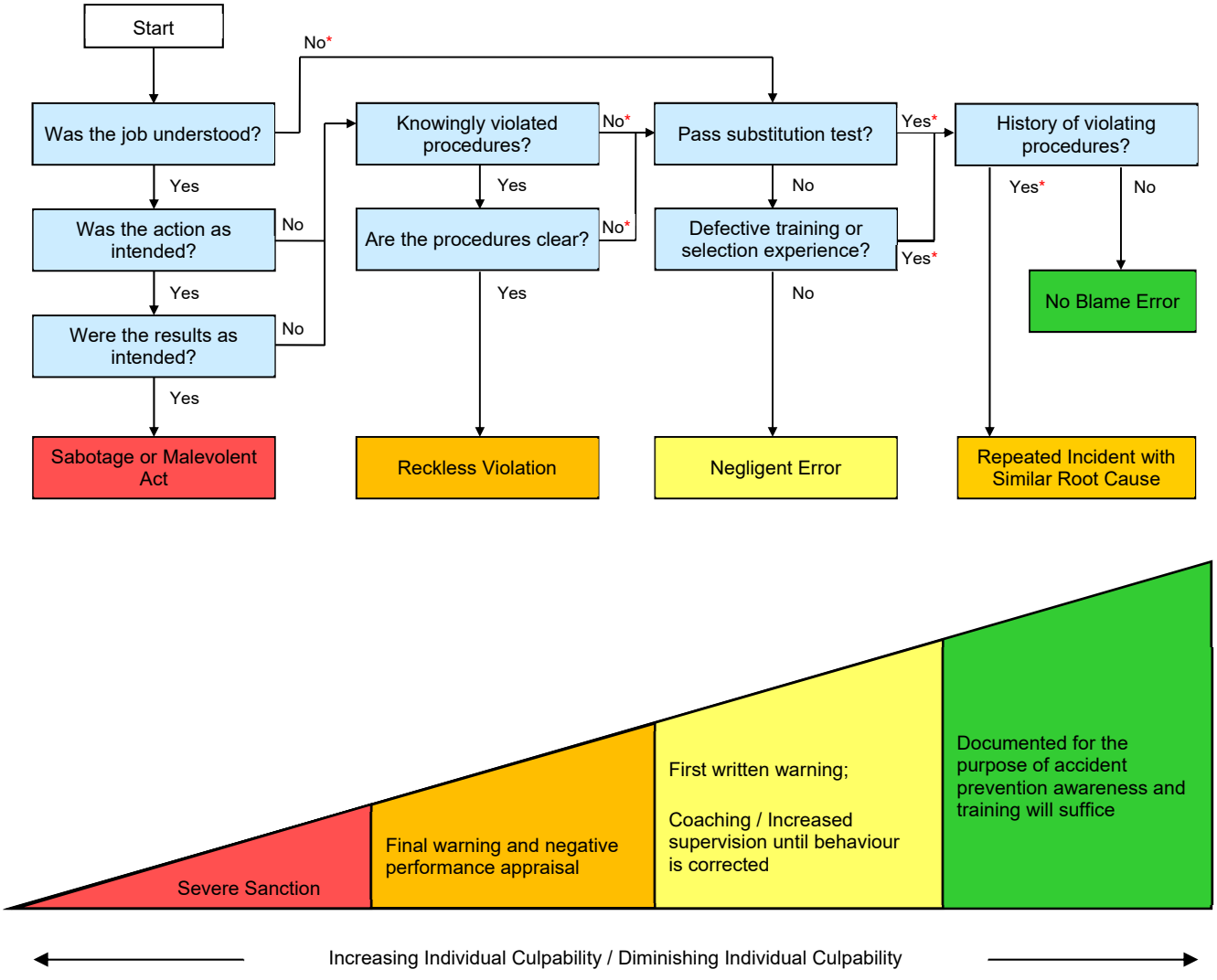
Safety Culture

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 Hazard Identification and Risk Management Ch. 5.2 ISS1 / REV4 / 21.12.2021	M/CC EVALUATION METHOD
MS CL TOPIC	ORO.GEN 120 ORO.GEN.200 ORO.GEN.205 ORA.GEN.120 ORA.GEN.200 ORA.GEN.205 CAMO.A.200 LEGAL REFERENCE
5-OMM04-010 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 4.X «Hazard Identification and Risk Management» MANUAL REFERENCE

APP: For AOC holders, AeMCs, ATOs and CAMOs 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 reactive, proactive and predictive 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 predictive approach captures the system performance in real-time to identify potential problems, it characterises a mature system.

  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

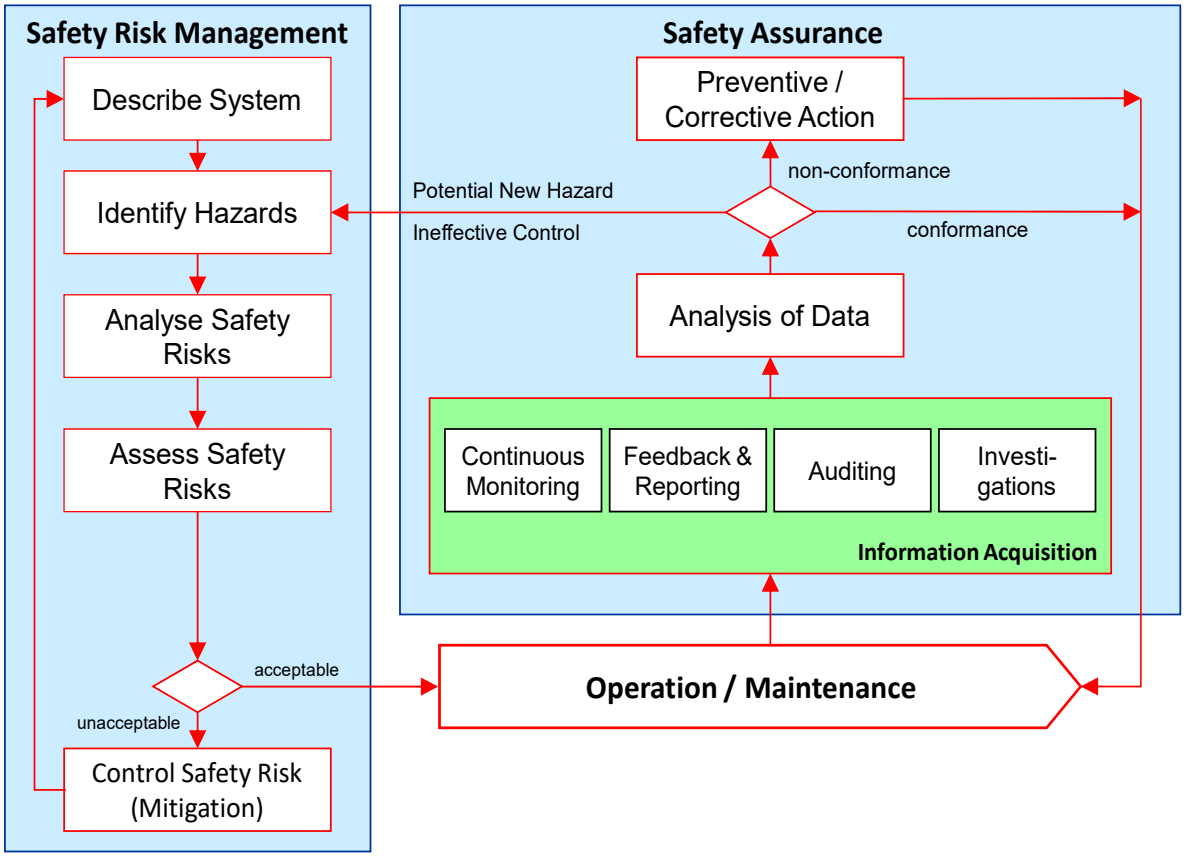
- Definitions of hazard and risk

  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

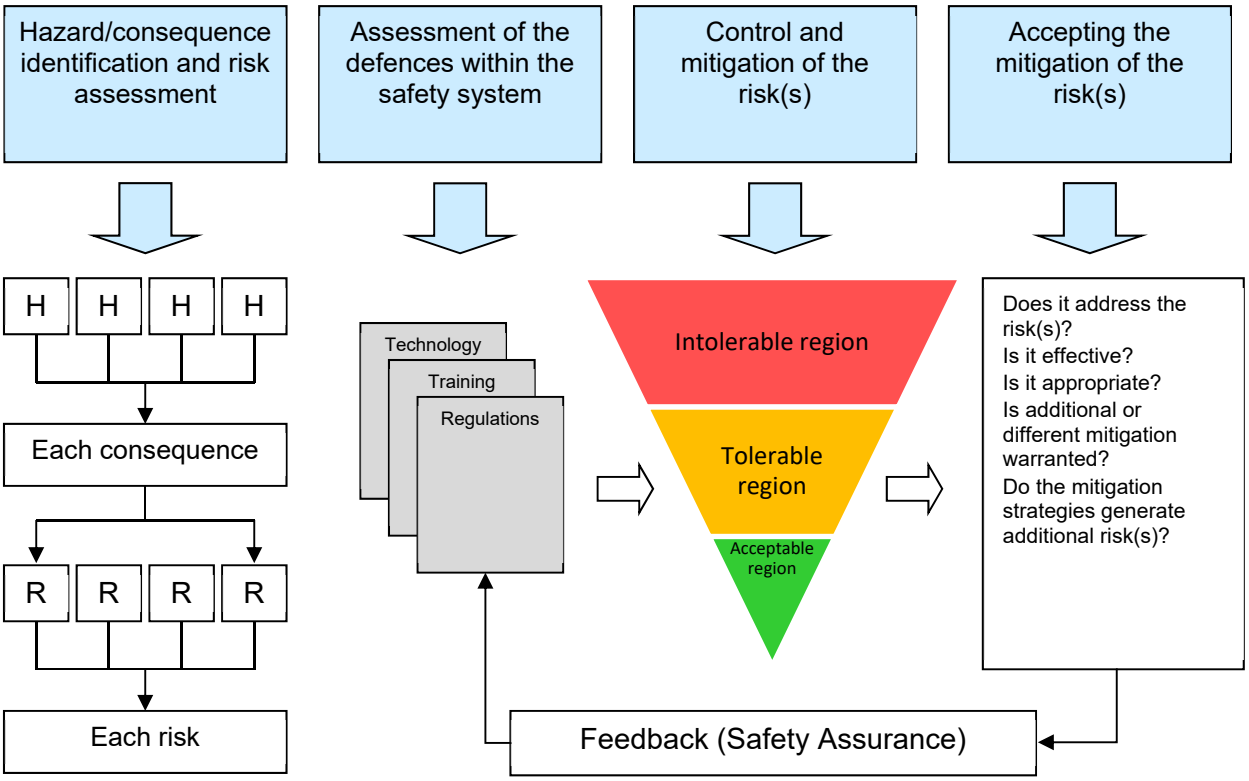
  The Risk-Management and Safety Assurance activities are both very important elements, refer to the following scheme:



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. Human 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 required)*	
7. Information Provider:	*Date/Signature*

8. Initial Hazard / Risk Ranking / 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)*	✓
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. Action:***	***Responsible:***	***Due Date:***
	1.		
	2.		
	3.		

11. Approval of Accountable Manager:	*Date/Signature*

Example: Probability Classification

Probability Classification	***Definition***	
Frequent 5	***Qualitative***	*Likely to occur many times (has occurred frequently)*
	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}*
Occasional 4	***Qualitative***	*Likely to occur sometime (has occurred infrequently)*
	Qualitative (System/Fleet)	*May occur once during total operational life of the system*
	Quantitative	*Probability of occurrence per operational hour is between 1×10^{-3} to 1×10^{-5}*
Remote 3	***Qualitative***	*Unlikely but possible to occur (has occurred rarely)*
	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 1×10^{-5} to 1×10^{-7}*
Improbable 2	***Qualitative***	*Very unlikely to occur (not known to have occurred)*
	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 $1x10^{-9}$*
Extremely improbable 1	***Qualitative***	*Almost inconceivable that the event will occur*
	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 Classification	Severity Indicators			
	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 one 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.

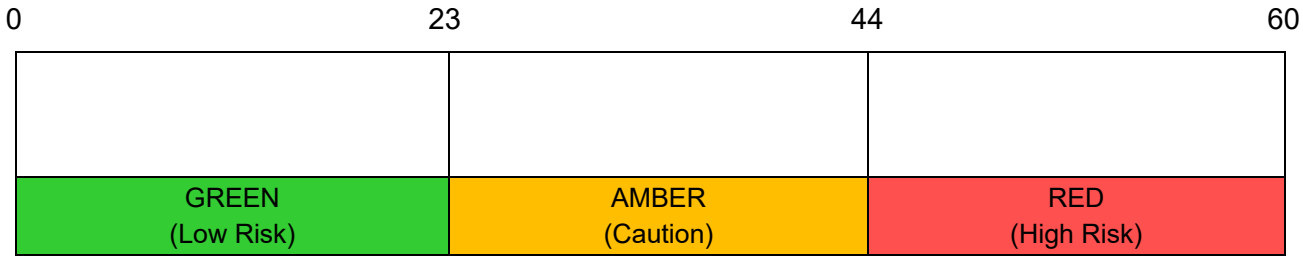
Workflow:

1. 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, Communication, Cohesiveness, Changes to the crew.*	*Identify Hazards in the area Team Selection and assess the relevant Risk.*	*Assign a Risk Value from 0 to 10.*
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

Before a mission starts consider each operational area:

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	*Is 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)			*4.5*			

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 Management of Change (MoC) Ch. 5.3 ISS1 / REV4 / 21.12.2021	M/CA EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 CAMO.A.200 LEGAL REFERENCE
5-OMM04-015 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 4.X «Management of Change» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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 aircraft;
  - evaluation of new stations;
  - definition of alternative means of compliance;
  - organisational changes with regard to safety responsibilities;
  - change of a nominated person;
  - change in organizational structure;
  - changes within the scope of activity;
  - implementation of new or modification of infrastructure, equipment and tools;
  - implementation or changes in operational matters;
  - implementation or changes in the organisations documentation and/or means of publication;
  - changes in training documentation/-procedures or -equipment (e.g. implementation of new or modification of FSTDs);
  - changes in legislation and the corresponding procedures in applicable operations manuals / expositions;
  - any kind of projects with safety relevance.

ATO LAPL, PPL, SPL and BPL

- If applying the organisational review concept, management of change may 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 Safety Review Board (SRB) Ch. 5.4 ISS1 / REV4 / 21.12.2021	CA EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 CAMO.A.200 LEGAL REFERENCE
5-OMM04-020 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 4.X «Safety Review Board (SRB)» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

Complex Organisation and CAMO:

☐ 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 and CAMO

- 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:
    - safety performance against the safety policy and objectives;
    - that any safety action is taken in a timely manner; and
    - 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.

5.5	**Safety Action Group (SAG)**	CA
	Ch. 5.5 ISS1 / REV4 / 21.12.2021	EVALUATION METHOD

MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 CAMO.A.200 LEGAL REFERENCE
5-OMM04-025 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 4.X.X «Safety Action Group (SAG)» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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 Safety Review Board (SRB) and the SAG may be combined.

5.6	Safety Performance Monitoring and Measurement Ch. 5.6 ISS1 / REV4 / 21.12.2021	M/CC EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 CAMO.A.200 LEGAL REFERENCE	
5-OMM04-030 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 4.X «Safety Performance monitoring and measurement» MANUAL REFERENCE	

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

Complex Organisation and CAMO:

- ☐ 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:
  - **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 is** 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 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 vs. 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

Item	***Objective***	***Year XXXX***											
		1	***2***	***3***	***4***	***5***	***6***	***7***	***8***	***9***	***10***	***11***	***12***
		1st Quarter			***2nd Quarter***			***3rd Quarter***			***4th Quarter***		
		1st Half						***2nd 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 Promotion and Communication Ch. 5.7 ISS1 / REV4 / 21.12.2021	CA / IN EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 CAMO.A.200 LEGAL REFERENCE
5-OMM04-035 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 4.X «Safety Promotion» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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

Tool	***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 / REV4 / 21.12.2021	M/CC EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 CAMO.A.200 LEGAL REFERENCE
5-OMM04-040 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 4.X «Safety- Studies, -Reviews, -Surveys, -Investigation» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

Complex Organisation and CAMO:

☐ 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….).

Example Safety Study Procedure

Step	***Remark***	***Tool***	***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 procedures or processes related to a specific operation. Safety surveys may involve the use of checklists, questionnaires and informal confidential interviews. Safety surveys generally provide qualitative information. This may require validation via data collection to determine if corrective action is required. Nonetheless, surveys may provide an inexpensive and valuable source of safety information.

(ICAO DOC 9859, 2018, FOURTH EDITION)

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.

Example Process Internal Safety Investigation

Step	***Remark***	***Tool***	***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 Reporting- and Feedback System

Ch. 6.1 ISS1 / REV4 / 21.12.2021

M/CC
EVALUATION METHOD

MS CL TOPIC	ORO.GEN.160 CAMO.A.160	ORO.GEN.200 CAMO.A.200	ORA.GEN.160 (EU) 2015/1018	ORA.GEN.200 EU) 996/2010	(EU) 376/2014 ICAO SMM, Doc. 9859
	LEGAL REFERENCE				
6-OMM07-005 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 7.X «Reporting and Feedback System» MANUAL REFERENCE				

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

☐ 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;
  - Be easy in use and access to the reporting system;
  - Analysis and assessment of the implications;
  - Definition of 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 Occurrence Reporting

Ch. 6.2 ISS1 / REV3 / 09.11.2017

M/CC / M/IN
EVALUATION METHOD

MS CL TOPIC 6-OMM07-010 CL Ch.-OM Ch.-Seq.-No.	ORO.GEN.160 ICAO SMM, Doc. 9859 LEGAL REFERENCE	ORO.GEN.200 (EU) No 996/2010	ORA.GEN.160 (EU) 2015/1018	ORA.GEN.200 CAMO.A.200	(EU) 376/2014
	OMM, Chapter 7.X «Occurrence Reporting» MANUAL REFERENCE				

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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 reporting portal 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 a 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 reporting portal 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 organisations/reporters).
- Reference is made to the FOCA website 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 / REV4 / 21.12.2021

7.1 Compliance Monitoring Function and Programme

Ch. 7.1 ISS1 / REV4 / 21.12.2021

M/CC / IN
EVALUATION METHOD

MS CL TOPIC 7-OMM05-005 CL Ch.-OM Ch.-Seq.-No.	ORO.GEN.200	ORA.GEN.200	ORA.FSTD.100	CAMO.A.200	FCL.310
	FCL.515 LEGAL REFERENCE	FCL.615	FCL.835		
	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 independent 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 may be assigned to fulfil the task of Compliance Monitoring. However, there is only one single person assigned as Compliance Monitoring Manager towards the competent authority (refer to chapter 4.2).
- 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 (ideally 12 months. Extendable to 24 months – see under ‘CAMO’ further down)

- 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);
    - management system procedures and manuals including those of the safety management.
    - compliance with the applicable regulatory requirements and standards, as well as any additional requirements as established by the organisation;
    - manuals, logs and records;
    - training standards;
    - any outsourced activities for compliance with the contract
  - Additionally for Air Operator:
    - activities of the organisation carried out under the supervision of the nominated persons
  - Additionally for ATOs:
    - Adherence to the learning subjects and learning objectives

CAMO

- The standard cycle is 12 months. It may be extended to 24 months if there are no safety related findings, subject to a risk assessment and agreement by the competent authority (ref. AMC2 CAMO.A.200(a)(6)(f)).

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 and Inspections Ch. 7.2 ISS1 / REV4 / 21.12.2021				M/CC / IN EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 LEGAL REFERENCE	ORA.GEN.200	ORA.FSTD.100	GM1 to Annex Vc
7-OMM05-010 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 5.X «Audits and Inspections» MANUAL REFERENCE			

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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 with.
  - «**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:
    - Listing of all audit scopes, as required by the compliance monitoring;
    - Reference to checklists, records and means used for the audit;
    - Date of the audit and scheduled duration;
    - 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 (refer to chapter 7.1). 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:
    - 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:
    - Report identification and reference system;
    - Audit summary;
    - Assignment to the defined category of the scope/area;
    - Finding and level of finding; or
    - observation;
    - Corrective action and prioritised list of measures with suggested timeline; or
    - recommendation;
    - 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 **audit** 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 and continuing airworthiness management;
  - 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.

Source: GM2 ORO.GEN.200(a)(6) & CAW

ATO complex

- 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;
  - technical standards;
  - 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».

CAMO

- The CAW Regulation does not explicitely distinguish between audits and inspections. The task should be done in congruence to the organisations definitions.

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*			*X*					*X*				
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*											*X*
Subcontractor XY	*Line Maintenance*	*Y. Screw*							*X*						
FSTD technical status	*FSTD*	*T. Visual*	*Checklist XX*										*X*		
CAMO (if own CAMO)	*CAM*	*I. Airworthy*	*Checklist XX*							*X*					
….															

Example Audit Report

Date of Audit: Scope of Audit: Department audited: Auditee: Auditors:

List 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*	*AM*	*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:

Compliance Monitoring Checklist ***Year:***			
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. The list is kept up to date			
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			

<table>
<tr><td colspan="3">Non-Compliance Report</td><td>Number:</td></tr>
<tr><td colspan="2">To Compliance Monitoring Manager</td><td>Reported by:</td><td>Date:</td></tr>
<tr><td rowspan="2">Category</td><td>☐ Flight Operations</td><td>☐ Ground Handling</td><td>☐ Mass and Balance</td></tr>
<tr><td>☐ Training</td><td>☐ Documentation</td><td>☐ Other</td></tr>
<tr><td colspan="3">Description:</td><td>Reference:</td></tr>
<tr><td colspan="4">Level of Finding:</td></tr>
<tr><td colspan="4">Root-cause of non-compliance:</td></tr>
<tr><td colspan="4">Suggested correction:</td></tr>
<tr><td colspan="4">Compliance Monitoring Manager:
☐ Corrective action required ☐ Corrective action not required</td></tr>
<tr><td colspan="2">Responsible person:</td><td colspan="2">Time limitation:</td></tr>
<tr><td colspan="2">Corrective action:</td><td colspan="2">Reference:</td></tr>
<tr><td colspan="2">Signature responsible person:</td><td colspan="2">Date:</td></tr>
<tr><td colspan="4">Compliance Monitoring Manager:
☐ Correction and corrective action verified ☐ Report closed</td></tr>
<tr><td colspan="3">Signature Compliance Monitoring Manager:</td><td>Date:</td></tr>
</table>

7.3 Auditors and Inspectors Ch. 7.3 ISS1 / REV4 / 21.12.2021	M/CC / M/IN EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 ORA.FSTD.100 CAMO.A.200 LEGAL REFERENCE
7-OMM05-015 CL Ch.-OM Ch.-Seq.-No.	OMM Chapter 5.X «Auditors and Inspectors» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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 not 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.

Example List of internal Auditors

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

7.4 Findings, Corrective- and Preventive Actions Ch. 7.4 ISS1 / REV4 / 21.12.2021	M/CC / IN EVALUATION METHOD

MS CL TOPIC	ORO.GEN.150 ORO.GEN.155 ORO.GEN.200 ORA.GEN.150 ORA.GEN.155 ORA.GEN.200 ARO.GEN.350 ARA.GEN.350 CAMO.A.150 LEGAL REFERENCE
7-OMM05-020 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 5.X «Findings, Corrective- and Preventive Actions» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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's inspections/evaluations 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).
- A «non-compliance» describes detected facts and circumstances which do not comply with rules and regulations associated to a certification or authorisation or to a submitted declaration.

  A «non-compliance» observed as part of a certification task such as a proof reading of an operator manual before issuing an approval or during initial certification is addressed by the term «Non-compliance» and should not be linked to a rectification due date. So-called non-compliances are documented mainly in document evaluation reports (DER).
- A «Finding» in the context of oversight describes a non-compliance with the applicable regulations based on which a certificate or authorization was issued or a declaration was received.

  A «non-compliance which was discovered during an audit or inspection shall be addressed by the term «Finding».
- An «Observation» describes an issue which is not directly safety critical and which does not constitute a violation against applicable regulations but which may become safety critical in the future or when considered in a broader way. An Observation may also be raised to indicate poor practice according industry standard. The term Observation may be used during audits and inspections as well as during document evaluations.
- The «Root Cause» defines the most underlying cause(s) of any non-compliance that can reasonably be identified and which requires to be controlled and fixed by the organisation. When corrected, it will prevent or significantly reduce the likelihood of the problem's reoccurrence.

- After receipt of notification of findings, the operator shall identify the root cause(s) of the non-compliance of each finding.
- The Inspector must be satisfied that the root cause(s) identified and the corrective actions taken are adequate to correct the non-compliance and to prevent the re-occurrence.

- «Correction» is the action to eliminate a detected finding/non-compliance.
- «Corrective action» is the action to eliminate or mitigate the root cause(s) and prevent reoccurrence of an existing detected finding/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 finding/non-compliance or other undesirable potential situation.
- The «corrective action plan» defined by the operator should address the effects of the finding/non-compliance, as well as its root cause.
  - The organisation should always produce a CAP for internal control of rectification.
  - The CAP must be submitted to FOCA in any case, even if no extension of the due date is requested.
  - An agreed corrective action plan is always required to extend the formal corrective action implementation period (finding due date).
  - The CAP must be agreed with the competent authority before the “CAP due date”. The inspector must be satisfied that the corrective action plan and it`s corrective actions are adequate to correct the noncompliance and to prevent the re-occurrence.
- 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 the organisation must:
  - submit the root cause analysis and the action plan for each finding/non-compliance to FOCA;
  - demonstrate corrective action implementation to the satisfaction of FOCA within a period agreed with FOCA.

General

- The process related to findings (at least for FOCA 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 inspections/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	*Inspection 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*	*Effectiveness 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 «Aktionsüberwachung» implemented at CMM station leading to reviews and providing an additional deadline for each item/case.*	*open*		
03	…								

7.5	**Classification of Findings** Ch. 7.5 ISS1 / REV4 / 21.12.2021	CA EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 CAMO.A.200 LEGAL REFERENCE	
7-OMM05-025 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 5.X «Classification of Findings» MANUAL REFERENCE	

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

☐ 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 organisation's internal findings
  It is recommended to treat internal findings the same way as FOCA findings.

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. 3 months); and
  b) corresponds to level «tolerable».

8 Flight Data Monitoring

Ch. 8 ISS1 / REV3 / 09.11.2017

8.1 Flight Data Monitoring Programme

Ch. 8.1 ISS1 / REV0 / 18.06.2013

M/CC / IN
EVALUATION METHOD

MS CL TOPIC	ORA.GEN.200 ORO.GEN.200 ORO.AOC.130 ICAO SMM, Doc. 9859 LEGAL REFERENCE
8-OMM04-005 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 4.X «Flight Data Monitoring» MANUAL REFERENCE

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 non-specifically 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 / REV4 / 21.12.2021

9.1 Contracting and Monitoring of Contractors

Ch. 9.1 ISS1 / REV4 / 21.12.2021

M/CC / IN
EVALUATION METHOD

MS CL TOPIC	ORO.GEN.205 ORA.GEN.205 ORO.GEN.200 ORA.GEN.200 ORA FSTD.100 CAMO.A.205 LEGAL REFERENCE
9-OMM11-005 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 11, «Contracting and Monitoring of Contractors» MANUAL REFERENCE

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 organisation 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 (under the CAW regulation this qualifies as a «contractor») or if not certified, working under the organisation's terms approval (under the CAW regulation this qualifies as a «subcontractor»).
- The ultimate responsibility for contracted products or services provided by external organisations always remains with the organisation (according to the CAW regulation this applies for subcontracted services).

- 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 management of change 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
  - Flight support
  - Training
  - Manual preparation

AOC Holders / SPO Authorisation holders / ATOs

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

CAMO

- When any part of its activity is subcontracted to an organisation, that organisation shall work under the approval of the operator/organisation. The contracting operator/organisation shall ensure that the competent authority is given access to the subcontracted organisation, to determine continued compliance with the applicable requirements

FSTD

- All requirements that an organisation is expected to meet are equally applicable to its sub-contractor. 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* *Aerodrome Example* *54321 Specimen*	*Yes*	*CN-123-321-456*
Organisation Documentation Publication	*Print Company Ltd* *987, Editingstreet*	*Yes*	*658-DP-857*

	54321 Specimen		
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***	***Tool***	***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*	*-*	*NPCA*
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*	*…*	*NPCA*
	• *Occurrence report in case of occurrences*	*…*	*Commander*
Flight Performance Data Provider	• *Comparison of delivered product with order*	*…*	*NPGO*
	• *Occurrence report in case of occurrences*	*…*	*Commander*
Providers of data for take-off performance calculation	• *Comparison of delivered product with order*	*…*	*NPGO*
	• *Occurrence report in case of occurrences*	*…*	*Pilot*
Flight Operations / Wet lease	• *…*	*…*	*…*
Dry lease of FSTD	• *Check qualification of FSTD* • *Daily 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*	*CMM*

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 Leasing / Use of aircraft listed on an AOC for non-commercial operations and specialised operations

M/CC

Ch. 9.2 ISS1 / REV4 / 21.12.2021 EVALUATION METHOD

	ORO.AOC.110 ORO.AOC.115 ORO.SPO.100 ORO.GEN.310 LEGAL REFERENCE
MS CL TOPIC 9-OMM11-010 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 11.X «Leasing»; **or** OM A, Chapter 13.X «Leasing» OMM, Chapter 11.X «Use of aircraft listed on an AOC for non-commercial operations and specialised operations for less than 30 days»; **or** OM A, Chapter 8.7x «Use of aircraft listed on an AOC for non-commercial operations and specialised operations for less than 30 days» MANUAL REFERENCE

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.

APP: Any rent-out of an aircraft listed on an AOC to another operator for non-commercial and specialised operations is subject to prior approval by FOCA for the AOC holder.

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?

If aircraft listed on the AOC are rented-out to another operator for non-commercial operations and specialised operations:

☐ Is there a process describing the necessary procedures?

☐ Has a contract been established between the lessor and the lessee in accordance with the procedures?

QUESTION FOR COMPLIANCE VERIFICATION AND SELF ASSESSMENT

AOC holders / SPO / (ATO)

The term leasing applies for any aircraft «movement» from an AOC to another AOC. Moving an aircraft from a SPO declaration to another SPO declaration is not called leasing, unless the SPO operator *leases*-in an aircraft that is registered in a third country (TCO). Refer to GM/INFO «Operational leasing and codeshare agreemtens for commercial operations».

- For AOC registered aircraft there is an option to be used for a period not exceeding 30 days for non-commercial and specialised operations (SPO) without having to be removed from the AOC. Refer to GM/INFO «ORO.GEN.310 Mixed Operations». If the lessee of such an aircraft is an ATO reference ist also made to GM/INFO «CL Operations and Training Manual»
- Reference is made to the List of airlines banned within the EU - Transport for verification of operating bans

9.3 Code-Share Agreement Ch. 9.3 ISS1 / REV0 / 18.06.2013	M/CC EVALUATION METHOD
MS CL TOPIC	ORO.AOC.115 LEGAL REFERENCE
9-OMM11-015 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 11.X «Code-Share Agreement»; **or** OM A, Chapter 13.X «Code-Share» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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 / REV4 / 21.12.2021

10.1 Record Keeping and Archiving

Ch. 10.1 ISS1 / REV4 / 21.12.2021

M/CC
EVALUATION METHOD

MS CL TOPIC	ORO.GEN.220	ORA.GEN.220	ORO.GEN.200	ORA.GEN.200	ORO.MLR.115
	ORA.FSTD.240	ORA.AeMC.220	CAMO.A.220		
	LEGAL REFERENCE				
10-OMM10-005 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 10.X «Record Keeping and Archiving» MANUAL REFERENCE				

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)?

☐ 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	*CMM*	*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 / Tech Log	*NPCA*		*…*	*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*	*…*
If own CAMO, for ARS: License and qualifications	*NPCA*	*…*	*…*	*…*	*…*
Training/qualification records of other personnel for whom a training				*Last two training records*	

programme is required					

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

ATO

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	*CTKI*	*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 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*
…	…	…	…	…	…

CAMO

- List of CAMO records to be kept:

Document / Record	Media	Location	State / Retention Period	Responsibility
Date of the entry, total time and flight cycles as applicable for aircraft, engine(s) and/or propeller(s)	*as applicable*	*as applicable*	*Current* *When the aircraft has been withdrawn from service plus 12 months*	*NPCA*
Mass and balance report	…	…	*Current* *When the aircraft has been withdrawn from service plus 12 months*	…
Status of: *1. ADs* *2. modifications and repairs;* *3. compliance with the AMP;* 4. *deferred maintenance tasks and defects rectification.*	…	…	*Current* *When the aircraft has been withdrawn from service plus 12 months*	…

Document / Record	***Media***	***Location***	***State / Retention Period***	***Responsibility***
Status of: *1. life-limited parts* *2. time-controlled components*	…	…	*Current* *When the aircraft has been withdrawn from service plus 12 months*	…
ATL system covering the 36 months period prior to the last entry,	…	…	*36 months*	…
CRS and detailed maintenance records covering a period not shorter than 36 months	…	…	*Until superseded by new records equivalent in scope and detail but min 36 months*	…
In-service history record for each life-limited part	…	…	*Current* *When the aircraft has been withdrawn from service plus 12 months*	…
Data specific to certain components	…	…	*Until superseded by new records equivalent in scope and detail but min 36 months*	…
Continuing airworthiness management task records	…	…	*Until 3 years after the responsibility for the aircraft has been permanently transferred to another person or organisation.*	…
Airworthiness Review Records	…	…	*Until 3 years after the responsibility for the aircraft has been permanently transferred to another person or organisation.*	…
Management system, contracting and subcontracting records	…	…	*At least 5 years*	…
Personnel records	…	…	*Shall be retained until 3 years after the person has left the organisation*	…
…	…	…	…	…

11 Management Evaluation and Continuous Improvement

Ch. 11 ISS1 / REV4 / 21.12.2021

11.1 Management Evaluation

Ch. 11.1 ISS1 / REV4 / 21.12.2021

M/CC
EVALUATION METHOD

MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 ORA.FSTD.100 CAMO.A.200 LEGAL REFERENCE
11-OMM06-005 CL Ch.-OM Ch.-Seq.-No.	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 Appendix 02 to FOCA GM/INFO «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.

Example of indicators for the Management Evaluation

Area	*Item*	*Objective*	*Year XXXX*											
			1	*2*	*3*	*4*	*5*	*6*	*7*	*8*	*9*	*10*	*11*	*12*
			1st Quarter			*2nd Quarter*			*3rd Quarter*			*4th Quarter*		
			1st Half						2nd 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*	*…*	*…*	*…*						
	…													

11.2 Continuous Improvement Ch. 11.2 ISS1 / REV4 / 21.12.2021	M/CC EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 CAMO.A.200 LEGAL REFERENCE
11-OMM06-010 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 6.X «Continuous Improvement» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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 / REV4 / 21.12.2021

12.1 Emergency Response Planning

Ch. 12.1 ISS1 / REV4 / 21.12.2021

CA
EVALUATION METHOD

MS CL TOPIC	ORA.GEN.200 ORO.GEN.200 CAMO.A.200 LEGAL REFERENCE
12-OMM08-005 CL Ch.-OM Ch.-Seq.-No.	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 (as well as to limiting/freezing the access to such records to preserve the status as per when the event happened)?
- ☐ 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

Step	*Who / Responsibility*	*Means of Notification / Forms*	*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*
3	*Manager Emergency Response Planning* *Or* *Next available Person according to the Composition, Role and Contact Details of the Emergency Response Team. Proceed according to order number.*	*Phone*	*REGA is coordinating all matters on behalf of SUST:* *-Phone (within CH: 1414* *-Phone (intern.): +41 333 333 333* *SUST* *Schweizerische Unfalluntersuchungstelle* *Aéropôle 1* *CH-1530 Payerne* *And* *NAA of the country where the emergency took place. Refer to the AIP of the State concerned.* *And* *Federal Office of Civil Aviation (FOCA)* *Safety Risk Management* *CH-3003 Bern*	*Immediately*

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	*NP Continuing Airworthiness*	*…*	*…*	*...*
6	*…*	*…*	*…*	*...*
…	*…*	*…*	*…*	*...*

Example for Initial Emergency Response Guidelines and Procedures

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*	*NPCA*	*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 / REV4 / 21.12.2021

13.1 General Requirements

Ch. 13.1 ISS1 / REV4 / 21.12.2021

M/CC
EVALUATION METHOD

MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 ORO.GEN.210 ORA.GEN.210 CAMO.A.305 LEGAL REFERENCE
13-OMM09-005 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 9 «Management System Training» MANUAL REFERENCE

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.

13.2 Basic Training – All Employees

Ch. 13.2 ISS1 / REV4 / 21.12.2021

M/CC
EVALUATION METHOD

MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 ORO.GEN.210 ORA.GEN.210 CAMO.A.305 LEGAL REFERENCE
13-OMM09-010 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 9.X «Management System Basic Training» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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

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 defined for his function and is proficient to perform the respective duty*	*NPFO*
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*	*CMM*

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:
    - Conversion Course Changing Operator; and
    - 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.

ATO

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

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.

13.3 Advanced Training – Management Personnel, Auditors and Inspectors

M/CC
EVALUATION METHOD

Ch. 13.3 ISS1 / REV4 / 21.12.2021

MS CL TOPIC	ORO.GEN.200 ORA.GEN.200 ORO.GEN.210 ORA.GEN.210 CAMO.A.305 LEGAL REFERENCE
13-OMM09-015 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 9.X «Management System Advanced Training» MANUAL REFERENCE

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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*					*Is qualified and skilled to implement and maintain an effective Safety Management*

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*				*Is qualified and skilled to implement and maintain an effective Compliance Monitoring Management*
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 «management of change», 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* • *Management of Change* • *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 management of change, 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.*	*CM*
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, management of change 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 emergency response team according to the*	…

Training Subject		***Standard of Performance***	***Instructor***
		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 Continuous Management System Training Ch. 13.4 ISS1 / REV4 / 21.12.2021					CA / IN EVALUATION METHOD
MS CL TOPIC	ORO.GEN.200 LEGAL REFERENCE	ORA.GEN.200	ORO.GEN.210	ORA.GEN.210	CAMO.A.305
13-OMM09-020 CL Ch.-OM Ch.-Seq.-No.	OMM, Chapter 9.X «Management System Continuous Training» MANUAL REFERENCE				

IF APPLICABLE, BRIEF DESCRIPTION OF ELEMENT REQUIRING PRIOR APPROVAL

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 maintaining and improving 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 systematic 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:
    - Recurrent Training; and
    - Refresher Training.

ATO

- 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

Schweizerische Eidgenossenschaft
Confédération suisse
Confederazione Svizzera
Confederaziun svizra

Swiss Confederation

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

Federal Office of Civil Aviation FOCA

Appendix FSTD to CL "Management System"

Supplementary Provisions

Supplementary provisions and requirements in addition to the "CL Management System" specific for Flight Simulation Training Device (FSTD) Qualification Certificate Holders

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Log of Revision (LoR)

Date	Issue	Revision	Highlight of Revision
13.08.2013	1	0	First Issue

List of Effective Pages

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03	1 / 0	13.08.2013
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Table of Contents (ToC)

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List of Abbreviations

In addition to the list of abbreviation provided in the CL MS, the following abbreviations are within this Appendix:

Abbreviation	Definition	Abbreviation	Definition
A/C	Aircraft	HW	Hardware
acc.	According	IBM	International Business Machines
ATA	Air Transport Association	ID#	Simulator Identification Number
Auto	Automatic	IOS	Instructor Operating Station
COMM	Communication	OPS/Ops	Operations
Cond.	Condition	Oxy	Oxygen
DOF	Degrees of Freedom	PIL	Pilot
e.g.	exempli gratia – for example	Press.	Pressurisation
FFS	Full Flight Simulator	PRD	Primary Reference Document
FNPT	Flight and Navigation Procedures Trainer	QRH	Quick Reference Handbook
FoV	Field of View	SW	Software
DLP	Digital Light Processor (beamer)	Tech.	Technical
HOST	Home Station (active duty computer)	VDR	Validation Data Roadmap

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APP 0 Introduction and application of this appendix

This appendix is addressed to Flight Simulation Training Device (FSTD) Qualification Certificate Holders. Therein are supplementary provisions and requirements in addition to the FOCA Certification Leaflet “Management System” (CL MS). It is subject to the terms and conditions of the mentioned CL MS as applicable.

FSTD Qualification Certificate Holders are expected to use this appendix in conjunction with the CL “Management System”.

The following information and provisions given, do not claim to be concluding but are expected to be considered as a minimum, when setting up/verifying the manual(s) for FSTD Operation.

For convenience, the chapters of the CL MS are directly referenced where additional information and substantiation to them is required. For this refer to chapter 1 below.

Where no direct reference to a chapter of the CL MS can be made, but where additional requirements exist, chapter 2 below provides the necessary guidance.

0.1. Definitions

In addition to the terms explained in CL MS, the following terms are within this Appendix:

Term	Definition
FSTD Checker	FSTD organisations’ personnel could for example be the evaluation pilot or the technician running the QTG tests, responsible for a particular device (FSTD).
FSTD Focal Point (FFP)	The primary point of contact in regards to FSTD operation within the organisation as well as for FOCA. This function requires sufficient knowledge of FSTD(s) and the technical standards with which they should comply. Refer to chapter 1.2.1 below.
FSTD Qualification Certificate Holder / FSTD Organisation	An organisation operating FSTD(s) could for example be an ATO, AOC-Holder or a “standalone FSTD operator” (old term).

APP 1 CL MS - Supplementary FSTD Provisions

1.1. CL MS Chapter 3.14 Location, Facilities and Infrastructure

ORA.FSTD.115

Installations

- Establish a list of FSTD(s) operated by your organisation including the installations.
- Describe how you meet the requirements of providing a safe environment for the FSTD users and operators (e.g. maintenance personnel). The procedures must also comply with the local safety and health requirements.
- Describe the relevant material such as safety and installations checklists that are regularly applied (e.g. fire and smoke detection and warning systems checks at least annually, etc.) that apply to all existing features of each FSTD installation. Establish appropriate recordings for these checks.
- Also refer to chapter 2.2. mentioned below.

Example: List of FSTDs operated

Type	***Qualification***	***Specific Installations***
ABC001- CAE Design 5	*FFS Level D, CH-10x*	• *Rheinmetall Defense Electronics - Laser Visual System* • *14 Laser Image Generators* • *Electric Motion 36 inch* • *Hydraulic backup motion with pump assembly located in sep. bay* • *whole computer assembly (incl. HOST) located on top floor, room#0.x* • *electric power connections* • *etc.*
Sample S923 – 1EX	*FNPT-II MEP, CH-32x*	• *Reality View, Evans and Sutherland, Dual Channel Visual System* • *Two Floor Beamers, DLP* • *HOST assembly within IOS enclosure.*
…	…	• *xxx* • *Pneumatic connection at front cabin part, below ctl force motor PIL side, valve restricted pressure of maximum 6 bars*

1.2. CL MS Chapter 4.4 Duties, Responsibilities and Accountabilities

FSTD Focal Point (FFP)

- Describe the FSTD Focal Point's Duties, Responsibilities and Accountabilities taking into account the following:
  - the FFP being the interface between the Authority and the FSTD organisation;
  - the FFP being the interface between instructor and operator;
  - the FFP being the interface between sub-contractor/manufacturer and operator;
  - the FFP managing defect reporting systems, preventative maintenance programmes, spare parts handling, equipment calibration and configuration management of the device;
  - the FFP having the authority to resolve issues and take action;
  - the FFP being responsible for the implementation of corrective actions within his/her field of activity;
  - the FFP being responsible for ensuring that documentation is processed, stored and filed according to the requirements defined in the Organisation's Management Manual;
  - the FFP being responsible for compiling periodical data evaluation and submit it to the appropriate manager for further evaluation.

1.3. CL MS Chapter 5.2 Hazard Identification and Risk Management

- Consider the following examples for FSTD operation:
  - motion runaway;
  - unidentified false software loads (e.g. QTG load; wrong aircraft variant; etc);
  - inappropriate training (e.g. special airport training where the scenery is not adequately qualified; landing crediting on a Full Flight Simulator (FFS) level A; etc);
  - training of individuals with potential to participate in unlawful acts.

1.4. CL MS Chapter 7.2 Audit and Inspections

- It is expected that the Compliance Monitoring Manager (CMM) and the FSTD Focal Point (FFP) engage in a close cooperation of the workload-sharing regarding audits and inspections in the FSTD area. According to the size of the organisation and type of operational setup there might also be several FSTD Checkers involved.
- Tasks need to be clearly appointed and described.

Example audit & inspection steps for the CMM:

Step	***Remarks***	***Tool***	***Responsibility***
Planning & Preparation	• *Planning of QTG Runs, Checks and Fly-outs acc. FOCA evaluation schedule ("quarterly tests")* • *consider former* – *schedule/plan* – *changes in the configuration* – *changes in regulatory requirements* – *changes in the activities* – *trends* • *follow-up audits when necessary* • *assign responsible FSTD Checker(s)*	*internal qualification plan FSTD in cooperation with FFP* *List of FSTD Checkers*	*CMM* *…*

Example audit & inspection for the FFP:

Step	***Remarks***	***Tool***	***Responsibility***
Planning of QTG Runs, Checks and Fly-outs	• *Scheduling of QTG-runs and fly-outs and other quality assurance activities*	*Internal FSTD qualification plan in cooperation with the CMM*	*FFP* *…*
Preparation	• *Study relevant procedures* • *Consider logbook-, maintenance- and HIL-entries, feedback & reporting system, former reports, former actions* • *Consider also safety features, such as emergency stops, emergency lighting, fire protection systems etc.*	*Master QTG* *QTG running procedures* *List of pending items* *Tech. log*	*FSTD Checker* *…*
Execution	• *Establish file folder with quarterly rerun protocols, maintenance reports and internal qualification plan FSTD*	*QTG running procedures* *Master QTG* *Fly-out procedures* *…*	FSTD Checker …
Reporting	• *Storage…* • *Update internal FSTD qualification plan*	*FSTD rerun protocol* *internal FSTD qualification plan* *Tech. log*	*FFP* *CMM*
Initiation of measures	• *According to "Findings, Corrective- and Preventive Actions" Programme (as specified in CL MS chapter 7.4)*	*…*	*…*
Monitoring of implementation	• *According to "Findings, Corrective- and Preventive Actions" Programme (as specified in CL MS chapter 7.4)*	*…*	*…*
Monitoring of effectiveness	• *According to "Findings, Corrective- and Preventive Actions" Programme (as specified in CL MS chapter 7.4)*	*…*	*…*

Example Compliance Monitoring Checklist FSTD operation Non-Complex

Compliance Monitoring Checklist ***Year:***			
Subject	***Date Checked***	***Checked by***	***Comments / Non-compliance Report No.***
FSTD operations			
Software and hardware control procedures are checked for validity/accuracy			
The control of training loads is checked for validity			
Navigation databases are checked for validity to be no older than 3 months			
Simulator operating checklists are checked for validity and accuracy			
A defect deferral list is maintained up-to-date			
Maintenance			
The preventive maintenance plan is up-to-date and traceable in history. Future maintenance slots are planned			
The spare parts handling is documented. Critical spare parts are identified and storage is defined			
The calibration of equipment is controlled. No calibration is older than 5 years or older than the maximum stipulated by the respective manufacturer			
Compliance of contractors is monitored			
Technical Standards			
The quarterly QTG re-runs and fly-outs are performed and documented			
Updates to software models (visual, performance, flight models) are documented and traceable			
The configuration control of the FSTD is maintained and documented			
FSTD Safety Features			
Safety briefing cards/checklists are available and up-to-date			
Check safety briefings have been performed and documented			
The necessary safety checks (hydraulic, electrical emergency shutoffs, fire and smoke detection and warning system, escape ladder, laser visual emergency shutdown) are performed and documented			
Training			
Training records are updated and accurate			
Maintenance personnel have received basic and recurrent training			
FSTD Checkers have received the basic and recurrent training			
FSTD Focal Point has received the basic and recurrent training			

Compliance Monitoring Checklist ***Year:***			
Subject	***Date Checked***	***Checked by***	***Comments / Non-compliance Report No.***
Documentation			
The certificate/re-current evaluation is checked for validity			
Results from technical inspections and from authority evaluations are correctly handled and stored			
Compliance monitoring records are 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, and is signed by the Accountable Manager			
There are documented management organisational diagrams and job descriptions for all personnel			
The organisation has a reporting system to capture errors and hazards 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 on 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			

Example Non-Compliance Report

Non-Compliance Report			***Number:***
To Compliance Monitoring Manager		***Reported by:***	***Date:***
Category	☐ *FSTD Operations*	☐ *Maintenance*	☐ *Technical Standards*
	☐ *FSTD Safety Features*	☐ *Training*	☐ *Documentation*
	☐ *Safety Management*	☐ *Other*	☐ …
Description:		*Reference:*	
Level of Finding:			
Root-cause of non-compliance:			
Suggested correction:			
Compliance Monitoring Manager: ☐ *Corrective action required*		☐ *Corrective action not required*	
Responsible person:		*Time limitation:*	
Corrective action:		*Reference:*	
Signature responsible person:		*Date:*	
Compliance Monitoring Manager: ☐ *Correction and corrective action verified*		☐ *Report closed*	
Signature Compliance Monitoring Manager:		*Date:*	

1.5. CL MS Chapter 7.3 Auditors and Inspectors

FSTD Checkers

- Describe the qualification criteria of the FSTD Checkers by function and assigned FSTD(s) taking into account the following:
- The FSTD Checkers should fulfil at least the following qualification criteria:
  - have knowledge of FSTD requirements and operation
  - be familiar with the company specific audit and device's QTG procedures
  - be qualified in crew training procedures and type rated (current) on the aircraft being simulated (Evaluation Pilot)
- They shall be listed on the appropriate internal Auditors' list.

APP 2 FSTD Qualification, Operation and Maintenance

This chapter provides guidance which does not necessarily have to be reflected in the Organisation Management Manual (OMM) but may be subject to be part of a separate FSTD manual as reflected in the title “Qualification, Operation and Maintenance”. Also refer to CL MS chapter 2.4.

2.1. Day-to-day Procedures / Working Practises

ORA.FSTD.100

For each FSTD a day-to-day procedure (e.g. in form of a checklist) that ensures the overall function of the device according to its specifications & qualification level shall be available. How are these procedures applied and by whom? This needs to be traceable.

The control of training loads per particular customer should be taken into account in the day-to-day procedures.

The defect reporting systems, the defect rectification processes and the tracking mechanisms should be documented in OMM chapter 7 Reporting and Feedback System.

Example daily log checklist for simulator xy:

Step	***Remarks***	***Tool***	***done by… on… (date)***	***done by… on… (date)***	***done by… on… (date)***
Check schedule of device	• *Verify current training load installed; next customer load required; due maintenance required; HIL; etc*	*Internal booking & maintenance planning*	*FSTD Checker …*	*FSTD Checker …*	*FSTD Checker …*
Conduct (particular) daily operation / start / verification checklist	• *Setup device acc. next scheduled session (hardware & software) based on (e.g.) manufacturer’s guidance checklist(s) available* • *Incorporate all items as necessary proven by the past operation as well as any other input* • *…*	*QRH change training load* *Simulator user manual* *Start-up checklist xy* *…*	*FSTD Checker …*	*FSTD Checker …*	*FSTD Checker …*
if necessary:					
Initiation of measure	• *According to “Findings, Corrective- and Preventive Actions” Programme (as specified in CL MS chapter 7.4)* • *inform booking / planning / maintenance immediately*	*…*	*FSTD Checker …*	*FSTD Checker …*	*FSTD Checker …*
Prepare initial settings for scheduled training session	• *Consider customers lesson plan; short notice inputs; instructor briefing*	*IOS manual*	*FSTD Checker …*	*FSTD Checker …*	*FSTD Checker …*
…	• *…*	*…*			

2.2. Safety Briefings before Operation/Training/Maintenance

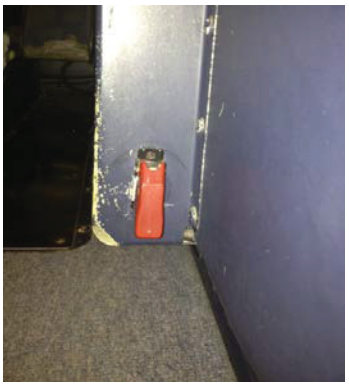
ORA.FSTD.115

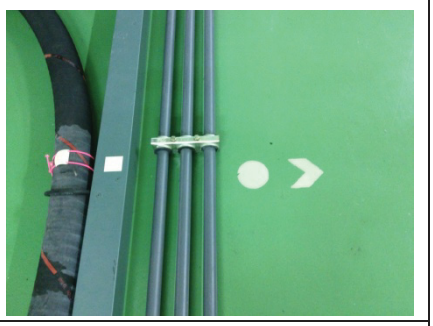
For each FSTD have an appropriate safety and emergency briefing card/booklet available at the briefing room or the simulator bay for example.

Establish the necessary processes to ensure that each person accessing the simulator undergoes the particular briefing(s) for that device.

Such briefings must be recorded and stored.

Example Safety and Emergency checklist for simulator xy:

Subject	***Remarks***	***Pictures***
Emergency shut off switch(es)	• *Location, accessibility and function*	 
Fire extinguisher(s)	• *Location, type(s), accessibility and application*	
Communication & evacuation signals	• *Means of Communication – From external to simulator and vice versa* • *Maintenance call* • *Internal phone(s)* • *Loudspeakers*	

Subject	***Remarks***	***Pictures***
Escape routes	• *Ladder, rope, kick-out-door* • *Exit way with applicable signs* • *Assembly point(s)*	  
Medical and first aid kit *Defibrillator*	• *Location* • *Responsible personnel*	…

2.3. Preventive Maintenance and Spare Parts Handling

ORA.FSTD.100

Each FSTD has its maintenance plan with preventive maintenance as per definition of the manufacturer or at least proven by the past operation.

This should appropriately be integrated into the FSTD operations schedule.

The elements which are subject to preventative maintenance checks must be specified:

- How are they conducted and by whom?
- What spare parts are stored in-house?
- What are critical parts?
- How long are delivery times for those?

Furthermore, the items out of the subchapter “Equipment Calibration” mentioned under 2.4. below should be integrated as appropriate into the maintenance schedule of the particular simulator.

Example Preventive Maintenance checklist for simulator xy:

Step	*Remarks*	*Tool*	*done by… on… (date)*
Open items defects	• *Check and rectify open items* • *According to "Findings, Corrective- and Preventive Actions" Programme (as specified in CL MS chapter 7.4)*	*HIL Tech. Log …*	*FSTD Checker …*
Cleaning	• *clean cockpit and vacuum-clean simulator as well at the back* • *Panels, Clare shield, outside, ramp and underneath*	*…*	*FSTD Checker …*
Oxy Masks	• *Oxy Masks* • *take out the oxygen masks from the box, wear them* • *check that airflow is acceptable* • *check the mask's functionality (harness inflation, over pressure and communication)* • *clean*		*FSTD Checker …*
Seatbelts	• *check for wear* • *check clips for function* • *check tightener(s)*		*FSTD Checker …*
Cockpit – all panels	• *Check for loosened knobs* • *check annunciation lights*		*FSTD Checker …*
…	• *…*		*…*

2.4. Equipment Calibration

ORA.FSTD.100

The FSTD calibration equipment (such as force measurement devices of all kinds – the integrated ones in the FSTD(s) as well (!), photometers, etc.) should be calibrated at least every five years or as indicated by the respective manufacturer.

How are these checks conducted and by whom? This shall be recorded.

Example Overview of calibration equipment and its test intervals:

Tool	*Calibration interval*	*last test date*	*done by…*	*next planned test date*
Multimeters	*12 months*	*DD.MM.YYYY*	*…*	*DD.MM.YYYY*
• *Test procedure specified in the user manual xy at the goods counter centre, simulator accessories* • *Tests must be placarded on inner backside of battery cover – replacements in the simulator accessories* • *Test updates must be requested 1 week in advance at Multimeter Company xy, 8058 Airport City, toll free line 0800 0202020. Service time 2-3 days.*				
Oscilloscopes	*36 months*	*DD.MM.YYYY*	*…*	*DD.MM.YYYY*
• *Test procedure specified in Calibration Equipment QRH goods counter centre, simulator accessories* • *Test updates must be communicated to internal booking & maintenance planning* • *…*				
Photometers	*24 months*	*DD.MM.YYYY*	*…*	*DD.MM.YYYY*
• *Test procedure specified in Calibration Equipment QRH goods counter centre, simulator accessories* • *Test updates must be communicated to internal booking & maintenance planning* • *…*				
Forcemeters	*60 months*	*DD.MM.YYYY*	*…*	*DD.MM.YYYY*
• *Test procedure specified in Calibration Equipment QRH goods counter centre, simulator accessories* • *Test updates must be communicated to internal booking & maintenance planning* • *….*				

2.5. Changes and Modifications including Configuration Management

ORA.FSTD.100; ORA.FSTD.105; ORA.FSTD.110; ORA.FSTD.120; ORA.FSTD.230

Configuration control is a crucial part of an FSTD operation. For each FSTD a configuration control list must be established that, for each system, allows continuous tracking back to the initial qualification (it is a similar process as the VDR thematic for instance).

- Is the FSTD related to a specific aircraft tail number or a common standard?
- The review and associated implementation process for airworthiness directives (ADs) must be described.
- The configuration control list should also serve as a 'differences list' for the FSTD users.
- How are different training loads handled within this system?

Any means considered necessary to assure the continuous integrity of the hardware and software of the qualified FSTD shall be outlined.

Example for Configuration List of Simulator Beech 1900 Airliner xy:

Simulator	*Manufacturer*	*Thales Training & Simulation Inc.*	
	Serial Number	*1-020-EX_FFS_203*	
	Entry into Service	*January YYYY*	
	Motion System	*6 DOF – Hydraulic, Type II*	
	Computer Hardware	*IBM, Rack_6.0*	
Aircraft Systems	*Simulated Aircraft*	*B190 – Beech 1900D Airliner*	
	Simulated Engines	*Pratt and Whitney 67D*	
	Master Aircraft	*HB-ABC*	
	Flight Management System	*Honeywell Release 2A*	
	All Weather Ops	*Category I*	
	GPWS	*Enhanced*	
	TCAS	*7.1*	
Visual System	*Manufacturer*	*Flight Safety International, Vital 10*	
	FoV	*180° x 45°, 3 channel projection, DLP*	
IOS	*Monitors*	*2 CRT fix, 1CRT loose on instructor seat, all touch screens*	
	Printer	*HP Laser printer 8500A, externally hooked at gate*	
Qualification(s)	*Authorities*	*Swiss FOCA*	*/ FAA*
	ID#	*CH-132*	*/ US-334*
	Certification Level	*D, acc. JAR FSTD A*	*/ D, acc. Part 60*
	PRD	*JAR-STD1A*	*/ AC 120-40B*

Configuration by ATA-Chapters:								
ATA Chapter	***System***	***Name***	***HW***	***SW***	***Part number***	***Standard***	***Updated***	***Remarks***
21 Air Cond./Press.	*CPCS*	*Cabin Press. Control System*	*x*		*(150-00-0TAC_23)*	*Version2_1 993*	*DD.MM. YYYY*	*-*
22 Auto Flight	*MCP* *FMGC*	*Mode Control Panel* *Flight Management Guidance Computer*	*x* *x*		*Proline 3_ 33-57_S & 4_22-44_R*	*UE-112* *US-003*	*DD.MM. YYYY*	*-*
23 COMM	*Audio Panel*	*Bendix King*	*x*		*xx_xx …*	*…*	*DD.MM. YYYY*	*temp. replace-ment for servicing*
…							*DD.MM. YYYY*	
…							*DD.MM. YYYY*	

Vital 10 Airport Sceneries:				
ICAO code	***IATA code***	***Name***	***Remark***	***Last update***
LSZH	*ZRH*	*Zurich*	*Certified scene – Low visibility OPS*	*Oct YYYY*
EHAM	*AMS*	*Amsterdam*	*Generic Scene*	*Jan YYYY*
LSZB	*BRN*	*Bern*	*Certified Scene*	*Jan YYYY*
LSGG	*GVA*	*Geneva*	*Certified Scene*	*Dec YYYY*
EDDF	*FRA*	*Frankfurt*	*Generic Scene*	*Dec YYYY*
…	*…*			
…	*…*			

Log of Change:					
Date	***System***	***Description***	***HW***	***SW***	***Remarks***
…					
…					
DD.MM.YYYY	*Visual Vital 10*	*Update LSZB*		*x*	*Latest scenery according work order #305_YYYY. Verified by A. Checker on DD.MM.YYYY*
DD.MM.YYYY	*ATA 23 Audio Panel*	*Exchange part for servicing original by Bendix King*	*x*		*Original sent in 2nd time. Replacement on warranty. Expected delivery by end of Aug YYYY*
DD.MM.YYYY	*ATA Flight Controls*	*Flap Selector gate*	*x*	*x*	*New gate (HW) fitted and software accordingly – FOCA Approval received – see work order #102_YYYY*
…	*…*				

2.6. Recurrent Evaluation by Authority

ORA.FSTD.100

To ensure an efficient recurrent evaluation by the Authority it should be ensured that the following content of the dossier is available for each FSTD:

- type of FSTD and qualification level;
- evaluation agenda, including date of evaluation, name of people involved for the competent authority, contact details for the operator, schedules for the subjective flight profile, QTG rerun and QTG review files;
- FSTD identification, including type of FSTD, manufacturer, registration number, date of entry into service, host computer, visual system, motion system, type of IOS, simulated version(s), and standards of all the aircraft computers, if applicable;
- status of items raised during the last evaluation and date of closure;
- monthly training hours during the past year;
- number of complaints mentioned in the technical log;
- training hours lost;
- availability rate;
- list of FSTD users over the previous 12 months with number of training hours;
- failure tabulation including categorisation of failures (by ATA chapter and Pareto diagram, ARINC classification);
- details of main failures leading to training interruption or multiple occurrences of some failures;
- hardware and/or software updates or changes since last evaluation;
- planned hardware and/or software updates or changes;
- subjective open defect(s);
- airport visual databases including for each visual scene: name of the airport, ATA and ICAO codes, type of visual scene (specific or generic), additional capabilities (snow model, WGS 84 compliance, EGPWS);
- QTG status: including for each QTG test available, the date of run during the past year, any comments, and the status of the tests; and
- results of scheduled internal audits and additional quality inspections since the last evaluation and a summary of actions taken.

End of Appendix FSTD