



**Australian Government**

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**Civil Aviation Safety Authority**

**CASA**  
**Surveillance Manual**

Version 2.2: February 2014

## Version 2.2: August 2014

This is an internal CASA policy manual. It contains guidance material intended to assist CASA officers and delegates in carrying out their regulatory responsibilities and may be made available to the public for information purposes only.

Since this is an uncontrolled version of the manual which will not be updated by CASA, it should not be relied upon for any regulatory purpose. The current manual can be viewed at any time via CASA's website at [www.casa.gov.au](http://www.casa.gov.au). You should always refer to the applicable provisions of the Civil Aviation Act, Civil Aviation Regulations and the Civil Aviation Orders, rather than this manual, to ascertain the requirements of, and the obligations imposed by or under, the civil aviation legislation.

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# CASA Surveillance Manual

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### Foreword

As a Commonwealth government authority, CASA must ensure that its decision-making processes are effective, fair, timely, transparent, consistent, properly documented and otherwise in accordance with the requirements of the law.

Most of the regulatory decisions CASA makes are such that conformity with authoritative policy and established procedures will be conducive to the achievement of these outcomes. From time to time, however, decision-makers will encounter situations in which the strict application of policy, in the making of a decision involving the exercise of discretion, would not be appropriate. Indeed, in some cases, the inflexible application of policy may itself be unlawful.

This preface and the following Introduction, explains the way in which the policy and processes set out in this manual are to be used by all CASA's personnel when making decisions in the performance of their functions, the exercise of their powers and the discharge of their duties. It also explains the processes to be followed if it appears that a departure from policy is necessary or appropriate.

#### ***Mandatory use of policy and procedure manuals***

This manual is one of the set of manuals and other documents which comprise CASA's authorised document set. The authorised document set contains the policy, processes and procedures with which CASA personnel are expected to comply when performing assigned tasks. All CASA personnel are required to have regard to the policies set out in this manual. Except as described in the Introduction, CASA decision-makers should not depart from these policies, processes and procedures.



John F. McCormick  
Director of Aviation Safety

## Introduction

### *Regulatory decision making*

Where the legislation provides for one, and only one decision—the “correct” decision—is the only decision open to CASA. However, most of the decisions CASA makes involve the exercise of discretion. In such cases, there may well be more than one acceptable or correct decision. In these cases, the law requires that CASA makes the “preferable” decision, that is, the most appropriate decision, having regard to the overriding interests of safety and the obligation to be fair.

In all such cases, CASA is bound to act in accordance with the applicable rules of administrative law. These rules govern how CASA arrives at the ‘preferable’ decision in any given case. Adherence to these rules is a requirement, not an option. Decisions and actions taken in contravention of these rules are unlawful, unenforceable, and in most cases invalid. CASA is legally accountable for the decisions it makes, and CASA decision-makers are obliged to avoid the appearance, as much as the reality, of unlawful decision-making.

Sound and lawful regulatory decision-making is generally governed by the 10 rules of administrative law summarised below. Adherence to these rules is essential to CASA’s obligations of accountability and good governance.

1. **Natural Justice** (Procedural Fairness)
  - **Hearing Rule.** Persons affected by CASA’s decisions have a right to be heard. To be meaningful, the hearing rule normally requires that CASA provides persons with notice (usually in advance) that a particular decision is going to be taken, and the reasons for the decision CASA proposes to take. Without notice and a statement of reasons, there may be little point to providing a person with an opportunity to be heard.
  - **Rule Against Bias.** Decision-makers should not have a **personal** or **pecuniary interest** in the outcome of their decisions. Neither may decision-makers prejudice (or **pre-determine**) matters in respect of which they are called upon to make a decision.
2. A decision-maker must not act for **improper purposes**. Even if the purposes for which a particular decision are lawful, the decision may only be taken for the purposes specifically authorised by the law under which the decision has been taken.
3. A decision-maker must not take any **irrelevant considerations** into account in coming to a decision.
4. A decision-maker must take all **relevant considerations** into account in coming to a decision.

**Note:** Applicable Policy is Always a Relevant Consideration.

5. A decision-maker must act on the basis of **evidence**, not mere supposition or speculation.
6. A decision-maker must not formulate requirements in **vague** or **uncertain terms**.
7. A decision-maker must not **inflexibly apply policy** (although departures from policy will normally need to be justified).

8. A decision-maker must not **act under dictation** (although this does not preclude adherence to formal directions, compliance with lawful conditions in relation to the process by which a decision is taken or the obligation to consult in the process of considering a decision).
9. A decision-maker must decide the matter within a **reasonable time**.
10. A decision maker must not act in a way that is manifestly **unreasonable**. A decision must not be so unreasonable that no reasonable person would make such a decision.

**Note:** The meaning and application of these principles, and related considerations of administrative law, are covered more fully in the induction and orientation training undertaken by all CASA employees. Any questions in relation to these matters should be referred to the Legal Services Division.

### *Departure from authorised policy*

Adherence to CASA's authorised policies will almost always produce an appropriate decision. As said, however, from time to time there will be circumstances in which the strict application of policy may not result in the "preferable" decision. In these cases it may be appropriate (and possibly necessary) to depart from otherwise applicable policy.

Any departure from policy must be justified in order to ensure that it:

- Is genuinely necessary in the interests of fairness
- Does not inappropriately compromise the need for consistent decision-making; and, of course
- Is not in conflict with the interests of safety.

Without fettering a decision-maker's discretion, it is therefore expected that appropriate consultation will occur before a decision is made that is not the product of the policies and processes set out in this manual. The prescribed consultation process is described below.

### *Consultation process*

#### **Decision-maker's responsibilities**

When a decision-maker believes there is a need to depart from policy he or she is expected to consult with his or her direct supervisor. This process should be initiated in writing:

- Setting out the pertinent facts and circumstances
- Identifying the provisions of the policy normally applicable
- Stating why the application of that policy would not result in the making of the "preferable" decision in the circumstances to hand
- Specifying the approach the decision-maker believes is more likely to result in a "preferable" decision.

### Supervisor's Responsibilities

In considering a consultative referral, the decision-maker's supervisor should:

- Advise the decision-maker as to whether his or her assessment of the relevant considerations appears to be complete and correct
- If, in the opinion of the supervisor, the circumstances do not warrant a departure from policy, provide the decision-maker with written advice and guidance as to how the decision might more properly be approached within the current policy framework

**Note:** Reliance on relevant precedent is a sound basis on which to ground such an opinion. It may also be helpful to seek advice from peers, superiors and/or CASA's Legal Services Division.

- If, in the opinion of the supervisor, a departure from policy is warranted, the supervisor should ensure the policy sponsor (normally the relevant Executive Manager) is advised of:
  - i. The intention to depart from the otherwise applicable policy
  - ii. The alternative approach the decision-maker will be taking to the matter.

**The supervisor should ensure that a full written record of these actions is made and maintained.**

**Note:** In no case may the terms of decision be dictated to a delegate authorised to exercise discretionary decision-making powers.

If a decision-maker's supervisor or the policy sponsor is not satisfied that the decision the decision-maker intends to make is the correct or preferable decision in all the circumstances, responsibility for that decision should be assumed by, or assigned to, another authorised delegate in accordance with appropriate processes and procedures.

### Policy sponsor's responsibilities

If the policy sponsor concurs in the proposed departure from policy, he or she should ensure the decision-maker is advised accordingly as soon as possible.

If the policy sponsor does not believe the proposed departure from policy is warranted, he or she should:

- Advise the supervisor accordingly
- Assume responsibility for the decision
- Ensure that the decision-maker and any person affected by the decision (for which the policy sponsor has assumed responsibility) is advised accordingly

- Make the decision in a manner consistent with the applicable policy.

**The policy sponsor should ensure that a full written record of these actions is made and maintained.**

Nothing in these processes should be interpreted or applied so as to dictate the terms of the decision to be made by a decision-maker authorised to make discretionary decisions under the civil aviation legislation, or to delay unreasonably the making of such decisions.

### *Revisions to policies and manuals*

As a result of experience in applying policies and procedures, users will form views as to accuracy, relevance and applicability of the content.

CASA personnel are required to provide recommendations for revisions to policies and processes in this or any other manual should they become aware of shortcomings. In this way the policies and manuals will be continually improved and remain relevant to the tasks being undertaken.

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**Note:** The Revision History shows the most recent amendment (Version 2.2) first. Scroll down the table to view details of previous amendment information. Version 2.2 revisions are highlighted throughout the manual marked with 'Change Bars' in the outside columns indicating where a revision or a deletion (marked "D") has been made.

### VERSION 2.2

Version	Date	Chapter	Section / Details
2.2	February 2014	Chapter 1	<i>1.5.2 Manual Amendment</i> Updated name of Form 1305 "CASA Surveillance Framework ..." to align with forms review change
			<i>1.6 List of Terms – Aircraft Survey Report (ASR).</i> Amended to more clearly define ASRs as CAR 38 Direction
			<i>1.6 List of Terms – Authorisation Holder</i> Amended to maintain consistency
			<i>1.6 List of Terms – Control Effectiveness Review</i> Added as new definition
			<i>1.6 List of Terms – Management System Model (MSM)</i> Amended – deleted 'compliance breach' and replaced with 'non-compliance'
			<i>1.6 List of Terms – Risk based surveillance</i> Amended – add concept of using risk-based surveillance as a way of prioritising surveillance activities
			<i>1.6 List of Terms – Risk management</i> Deleted definition
			<i>1.6 List of Terms – System risk</i> Amended with reference to a (particular) risk being present in "every" authorisation holder's system being removed
2.2	February 2014	Chapter 2	<i>2.3 CASA's Surveillance Policy</i> Added ISO 9001:2008 Quality management systems to list of standards guiding surveillance program
			<i>2.7 Surveillance Scheduling</i> Deleted second sentence in section. Sentence unnecessary

Version	Date	Chapter	Section / Details
			<p><i>2.8 Internal Assurance Program</i></p> <p>Various minor amendments related to the detail of work to be completed as part of the internal assurance program</p>
2.2	February 2014	Chapter 3	<p><i>3.3.3 Using the MSM</i></p> <p>Various deletions and amendments to more accurately reflect the use of the MSM in the surveillance process, including deletion of “while on site” when assessing systems risks, reference to risks assessed when recording results and replacing “poor” with “inadequate” when describing the reporting process</p>
			<p><i>3.4 Systems and Elements</i></p> <p>Added new content to clarify the requirement that all systems and elements must be assessed in a timely manner taking into consideration the size and complexity of the organisation being surveilled</p>
			<p><i>3.5.1 Level 1 Surveillance Events</i></p> <p>Added new content to clarify the requirement that all systems and elements must be assessed in a timely manner taking into consideration the size and complexity of the organisation being surveilled</p>
			<p><i>3.6 Entry Control Events as Surveillance</i></p> <p>Deleted section</p>
			<p><i>3.6 Authorisation Holder Performance Indicator (AHPI)</i></p> <p><i>3.6.1 Oversight posture</i></p> <p>Reference numbering (and all subsequent numbers) amended with deletion of 3.6</p>
			<p><i>3.7 Systems Risk Analysis</i></p> <p>Amended title to “Systems Risk” and reference number</p>
2.2	February 2014	Chapter 4	<p><i>4.2.4.1 Level 1 Surveillance Events</i></p> <p>Added new content to clarify the requirement that all systems and elements must be assessed in a timely manner taking into consideration the size and complexity of the organisation being surveilled</p>

			<p><b>4.2.5.1 PROCESS – Conduct assessment</b></p> <ul style="list-style-type: none"> <li>Added new note to clarify process detailing changed requirements for formal discussion and recording of such discussions</li> <li>Added new note to clarify process detailing the need for AHPI assessors to take a conservative approach when scoring and if assessor does not have sufficient information on an operation, the highest score should be assigned to the factor</li> </ul> <p><b>4.2.5.2 GUIDANCE – Conduct assessment</b> <i>Authorisation management team meeting outputs</i></p> <ul style="list-style-type: none"> <li>Added new guidance content detailing changed requirements for formal discussion and recording of such discussions</li> <li>Added new guidance content detailing the need for AHPI assessors to take a conservative approach when scoring and if assessor does not have sufficient information on an operation, the highest score should be assigned to the factor</li> <li>Deleted note recommending discussions should be divided across team meetings held in the month</li> </ul> <p><b>4.2.5.2 GUIDANCE Conduct assessment – Assessment considerations</b></p> <p>In examples of factors to be included in assessment, replaced ‘poorly’ mitigated systems risks with ‘inadequately’ mitigated system risks</p> <p><b>4.2.5.2 GUIDANCE Conduct assessment – Assessment process – evaluating factors using word pictures with AHPI tool and Surveillance decision</b></p> <p>Removed reference to saving the AHPI summary results to TRIM</p> <p><b>4.2.5.2 GUIDANCE – Conduct assessment: Propose a SR</b></p> <ul style="list-style-type: none"> <li>Added new in-text note to highlight the requirement to select systems and elements in defining the scope for a proposed surveillance and referencing the Sky Sentinel Surveillance Scoping Aid. Note also clarifies the requirement that all systems and elements must be assessed in a timely manner taking into consideration the size and complexity of the organisation being assessed</li> </ul>
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		<p><b>4.4.4.2 PROCESS – Prepare for Level 1 surveillance event</b>                  New note added clarifying process (a) requiring one month’s notice be given to an authorisation holder prior to a surveillance event</p>
		<p><b>4.4.4.2 GUIDANCE – Prepare for Level 1 surveillance event</b></p> <ul style="list-style-type: none"> <li>• New guidance content clarifying requirement for one month’s notice being given to an authorisation holder prior to a surveillance event</li> <li>• Amended fourth paragraph to better reflect the activity being carried out at this stage</li> <li>• Amended the seventh paragraph updating the content to include ‘control effectiveness’</li> </ul>
		<p><b>4.5.1 Purpose (Conduct Surveillance Event)</b>                  Reference to ‘systems risk assessment’ changed to ‘control effectiveness review’</p>
		<p><b>4.5.6.1 PROCESS – Conduct surveillance</b>                  Process (a) amended to reflect the fact that evidence is gathered to determine control effectiveness</p>
		<p><b>4.5.7.1 PROCESS – Conduct process verification</b>                  Process (c) amended to more accurately reflect the activity being described.</p>
		<p><b>4.6.1 Purpose (Surveillance Event Reporting)</b>                  Reference to ‘analysis of the systems risks’ changed to now refer to control effectiveness review</p>
		<p><b>4.6.3 Processes (Develop Level 1 Surveillance Report)</b>                  Process step amended to incorporate ‘Review control effectiveness’</p>
		<p><b>4.6.5 Systems risk analysis</b>  <b>4.6.5.1 PROCESS Systems risk analysis</b>  <b>4.6.5.2 GUIDANCE Systems risk analysis</b>                  Section and sub-section titles amended to ‘Control effectiveness review’ with various wording changes in the process and a rewrite of the guidance content to better reflect the activity being carried out at this stage</p>

		<p><b>4.6.6 Surveillance findings</b> Deleted last sentence. Requirement for statement now obsolete following system change in Sky Sentinel</p>
		<p><b>4.6.11.2 GUIDANCE – Write findings (Observations)</b> Section rewritten to better define the purpose of an Observation and when it should be issued.</p>
		<p><b>4.6.12 Surveillance reporting</b> References to the timeframe to produce and issue a Surveillance Report clarified</p>
		<p><b>4.6.12.1 PROCESS (Develop Level 1 Surveillance Report)</b> <b>4.6.12.2 GUIDANCE (Develop Level 1 Surveillance Report)</b> Process step (2a) note and guidance content amended to incorporate ‘control effectiveness review’</p>
		<p><b>4.6.13.1 (Process 6 - Note)</b> Amended wording of note from “... Surveillance Report should not ...” to “.. Surveillance Report need not ... unless there is a particular reason to do so.”</p>
		<p><b>4.6.14 Accountabilities – Surveillance Event reporting</b> Accountabilities amended to change from reference to ‘risk reassessment’ to ‘follow-up control effectiveness review’</p>
		<p><b>4.7.4 Findings management</b> Sentence relating to SSO gathering statistics on NCNs and ASRs to present to CASA executive through Safety Review Committee (SRC) deleted</p>
		<p><b>4.7.4.1 PROCESS – Receive response</b> <b>4.7.4.2 GUIDANCE – Receive response</b> Added new process step and guidance section to support new Sky Sentinel functionality in managing an NCN that allows for resetting new due dates and recording information as received.</p>
		<p><b>4.7.4.2 GUIDANCE – Receive response</b> Added text to remind inspectors of the parameters in which they and controlling office managers have discretion</p>

			<p><i>4.7.5.2 GUIDANCE – Assess response (Response rejected)</i> Deleted reference to the Form 1291 – NCN Rejection Letter being generated out of Sky Sentinel</p> <p><i>4.7.6.1 PROCESS – Acquit an NCN</i> Various updates to process and inclusion of requirement to select appropriate MSM Component in Sky Sentinel for data capture and reporting purposes</p> <p><i>4.7.6.3 GUIDANCE – Acquit and close an NCN</i></p> <ul style="list-style-type: none"> <li>• Management of NCN – Acquittal (First sentence) Section reference number and title added to bracketed reference to add clarity</li> <li>• Added new paragraph to match content added to the process (4.7.6.1) particularly relating to the requirement to select appropriate MSM Component in Sky Sentinel for data capture and reporting purposes</li> </ul> <p><i>4.7.10 Follow-up control effectiveness review</i> <i>4.7.10.1 PROCESS – Follow-up control effectiveness review</i> <i>4.7.10.2 GUIDANCE – Follow-up control effectiveness review</i> Section and sub-section titles amended to 'Follow-up control effectiveness review', with various wording changes in the process and guidance content to better reflect the activity being carried out at this stage in line with new content in 4.6.5 Control effectiveness review</p>
			<p><i>4.7.14 Accountabilities – Update System Information</i> Accountability amended to change from reference to '(risk) reassessment' to 'follow-up control effectiveness review'</p>
2.2	February 2014	Chapter 5	Nil
2.2	February 2014	Annex 1	<p><i>2. Maintenance of Recency and Confidence</i> Redrafted section including change of section title to 'Maintenance of Competency and Currency'</p>

Version	Date	Chapter	Section / Details
			<p><i>6.1 Findings – Titling</i> Section reinstated (with modifications) from Version 2.0 to provide guidance on protocols for correct titling of findings. Subsequent section numbering amended accordingly</p>
			<p><i>6.2 Findings – Correct regulatory reference</i> Deleted reference to “examples below” in bullet points relating to abbreviation for regulatory referencing which had been deleted from CSM in V2.1</p>
			<p><i>6.3 Systems risk – Question development</i> Amended wording with ‘effectiveness’ added after ‘risk control’ in first sentence and first bullet point amended by replacing ‘risk assessment’ with ‘control effectiveness’</p>
			<p><i>6.4 Systems risk – Question technique</i> Amended wording by replacing ‘poorly’ with ‘inadequately’ as well as other wording changes in the last paragraph to appropriate reflect the correct terminology</p>
			<p><i>6.5 Systems risk – Completing risk assessment</i> Amended wording by replacing ‘risk mitigation’ with ‘control effectiveness review’ in two separate locations with the wording of the note at the end of section also amended accordingly</p>
			<p><i>6.5.1 Method for using word pictures</i> Deleted qualifying text in each column i.e. Fully Effective, Mainly Effective etc</p>
			<p><i>7. NCN Guidelines</i> Amended in various places to bring the guide in line with amendments previously made to Annex 1 Section 6</p>
			<p><i>11. Occurrence Management</i> References throughout section to the “Direct Entry” page for recording surveillance events in Sky Sentinel changed to reflect new functionality in Sky Sentinel (now <i>Direction Entry Event – Approve without normal process function</i>)</p>

# CASA Surveillance Manual

## Revision History

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Version	Date	Chapter	Section / Details
2.2	February 2014	Annex 2	<p>1. <i>Specific Guidelines: ATEL/RADNAV Service Providers</i></p> <p>1.1 <i>Overview</i></p> <p>Delete reference to Entry Control as Surveillance Guide in list</p>
			<p>3. <i>Systems &amp; Elements</i></p> <ul style="list-style-type: none"> <li>Deleted reference to accessing list of associated risks. Function no longer available in Sky Sentinel</li> <li>Deleted bracketed text in second paragraph referring to implementation as part of Phase 3 of CSM</li> </ul>
			<p>3.1 <i>Health Check</i></p> <ul style="list-style-type: none"> <li>Changed reference to the mandatory elements being published to the "CASA intranet" to "CASA website"</li> <li>Deleted second paragraph – not relevant</li> </ul>
			<p>5. <i>Entry Control as a Surveillance Event</i></p> <p>Deleted section with subsequent section numbering changed</p>
2.2	February 2014	Annex 3	<p>1. <i>Specific Guidelines: AOC Holders –</i></p> <p>1.1 <i>Overview</i></p> <ul style="list-style-type: none"> <li>Reference to CAR 206 being the legislative coverage relating to AOCs deleted and replaced with "... (AOC) issued under Section 27 of the Act ..."</li> <li>Delete reference to Entry Control as Surveillance Guide in list</li> </ul>
			<p>3. <i>Systems &amp; Elements</i></p> <ul style="list-style-type: none"> <li>Deleted reference to accessing list of associated risks. Function no longer available in Sky Sentinel</li> <li>Deleted bracketed text in second paragraph referring to implementation as part of Phase 3 of CSM</li> </ul>
			<p>3.1 <i>Health Check</i></p> <ul style="list-style-type: none"> <li>Changed reference to the mandatory elements being published to the "CASA intranet" to "CASA website"</li> <li>Deleted second paragraph – not relevant</li> </ul>



# CASA Surveillance Manual

## Revision History

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Version	Date	Chapter	Section / Details
			<p><i>5. Entry Control as a Surveillance Event</i> Deleted section with subsequent section numbering changed</p>
2.2	February 2014	Annex 4	<p><i>1. Specific Guidelines: ATS Providers</i> <i>1.1 Overview</i> Delete reference to Entry Control as Surveillance Guide in list</p>
			<p><i>3. Systems &amp; Elements</i></p> <ul style="list-style-type: none"> <li>Deleted reference to accessing list of associated risks. Function no longer available in Sky Sentinel</li> <li>Deleted bracketed text in second paragraph referring to implementation as part of Phase 3 of CSM</li> </ul>
			<p><i>3.1 Health Check</i></p> <ul style="list-style-type: none"> <li>Changed reference to the mandatory elements being published to the "CASA intranet" to "CASA website"</li> <li>Deleted second paragraph – not relevant</li> </ul>
			<p><i>5. Entry Control as a Surveillance Event</i> Deleted section with subsequent section numbering changed</p>
2.2	February 2014	Annex 5	<p><i>1. Specific Guidelines: AMO</i> <i>1.1 Overview</i> Delete reference to Entry Control as Surveillance Guide in list</p>
			<p><i>3. Systems &amp; Elements</i></p> <ul style="list-style-type: none"> <li>Deleted reference to accessing list of associated risks. Function no longer available in Sky Sentinel</li> <li>Deleted bracketed text in second paragraph referring to implementation as part of Phase 3 of CSM</li> </ul>
			<p><i>3.1 Health Check</i></p> <ul style="list-style-type: none"> <li>Changed reference to the mandatory elements being published to the "CASA intranet" to "CASA website"</li> <li>Deleted second paragraph – not relevant</li> </ul>

# CASA Surveillance Manual

## Revision History

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Version	Date	Chapter	Section / Details
			<p><i>5. Entry Control as a Surveillance Event</i> Deleted section with subsequent section numbering changed</p>
2.2	February 2014	Annex 6	<p><i>1. Specific Guidelines: ARFFS Providers</i> <i>1.1 Overview</i> Delete reference to Entry Control as Surveillance Guide in list</p>
			<p><i>3. Systems &amp; Elements</i></p> <ul style="list-style-type: none"> <li>Deleted reference to accessing list of associated risks. Function no longer available in Sky Sentinel</li> <li>Deleted bracketed text in second paragraph referring to implementation as part of Phase 3 of CSM</li> </ul>
			<p><i>3.1 Health Check</i></p> <ul style="list-style-type: none"> <li>Changed reference to the mandatory elements being published to the "CASA intranet" to "CASA website"</li> <li>Deleted second paragraph – not relevant</li> </ul>
			<p><i>5. Entry Control as a Surveillance Event</i> Deleted section with subsequent section numbering changed</p>
2.2	February 2014	Annex 7	<p>Annex title (and sub-titles throughout annex) amended subsequent to inclusion of CASR Subpart 21J and amendments to System/Element structure</p>
			<p><i>1.1 Overview</i></p> <ul style="list-style-type: none"> <li>Amended content with inclusion of CASR Subpart 21J</li> <li>Delete reference to Entry Control as Surveillance Guide in list</li> </ul>
			<p><i>3.1 CAR 30 Design COA and CASR Subpart 21.J Approved Design Organisations</i></p> <ul style="list-style-type: none"> <li>Section replaced – Systems/elements structure revised</li> <li>Deletion of bracketed text in second paragraph referring to implementation as part of Phase 3 of CSM</li> <li>Deleted reference to accessing list of associated risks. Function no longer available in Sky Sentinel 4.0</li> </ul>

Version	Date	Chapter	Section / Details
			<p><i>3.2 Design Approval Authorised Persons for CASR 21.095, 21.006A, 21.007, 21.009 and Subpart 21.M</i></p> <p>Deleted reference to accessing list of associated risks. Function no longer available in Sky Sentinel 4.0</p> <p><i>3.3 Health Check</i></p> <ul style="list-style-type: none"> <li>Amended reference to the mandatory elements being published to the "CASA intranet" to "CASA website"</li> <li>Deleted second paragraph – not relevant</li> </ul> <p><i>4. Surveillance Currency Guide: Design Certificate Holders and Auth Persons for Design Approval</i></p> <p>Heading in second part of table amended to reflect inclusion of CASR Subpart 21J</p> <p><i>5. Entry Control as a Surveillance Event</i></p> <p>Deleted section with subsequent section numbering changed</p> <p><i>5. Information Sources</i></p> <p>Added two additional sources</p>
2.2	February 2014	Annex 8	<p><i>1. Specific Guidelines: Certified and Registered Aerodromes</i></p> <p><i>1.1 Overview</i></p> <p>Delete reference to Entry Control as Surveillance Guide in list</p> <p><i>3. Systems &amp; Elements</i></p> <ul style="list-style-type: none"> <li>Deleted reference to accessing list of associated risks. Function no longer available in Sky Sentinel</li> <li>Deleted bracketed text in second paragraph referring to implementation as part of Phase 3 of CSM</li> </ul> <p><i>3.1 Health Check</i></p> <ul style="list-style-type: none"> <li>Changed reference to the mandatory elements being published to the "CASA intranet" to "CASA website"</li> <li>Deleted second paragraph – not relevant</li> </ul>

# CASA Surveillance Manual

## Revision History

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Version	Date	Chapter	Section / Details
			<p><i>5. Entry Control as a Surveillance Event</i> Deleted section with subsequent section numbering changed</p>
2.2	February 2014	Annex 9	<p><i>1. Specific Guidelines: Dangerous Goods – Non-AOC Holders</i> <i>1.1 Overview</i> Delete reference to Entry Control as Surveillance Guide in list</p>
			<p><i>3. Systems &amp; Elements</i></p> <ul style="list-style-type: none"> <li>Deleted reference to accessing list of associated risks. Function no longer available in Sky Sentinel</li> <li>Deleted bracketed text in second paragraph referring to implementation as part of Phase 3 of CSM</li> <li>Number of elements in first sentence corrected to 'six'</li> </ul>
			<p><i>3.1 Health Check</i></p> <ul style="list-style-type: none"> <li>Changed reference to the mandatory elements being published to the "CASA intranet" to "CASA website"</li> <li>Deleted second paragraph – not relevant</li> </ul>
			<p><i>5. Entry Control as a Surveillance Event</i> Deleted section with subsequent section numbering changed</p>
2.2	February 2014	Annex 10	<p><i>1. Specific Guidelines: delegation and Authorised Persons Authorisation Holders</i> <i>1.1 Overview</i></p> <ul style="list-style-type: none"> <li>Incorporated requirement for Delegate Management Bch to capture any interactions with oversighting office in Sky Sentinel</li> <li>Delete reference to Entry Control as Surveillance Guide in list</li> </ul>
			<p><i>3. Systems &amp; Elements</i></p> <ul style="list-style-type: none"> <li>Deleted reference to accessing list of associated risks. Function no longer available in Sky Sentinel</li> <li>Deleted bracketed text in second paragraph referring to implementation as part of Phase 3 of CSM</li> </ul>

Version	Date	Chapter	Section / Details
			<p><i>3.1 Health Check</i></p> <ul style="list-style-type: none"> <li>Changed reference to the mandatory elements being published to the “CASA intranet” to “CASA website”</li> <li>Deleted second paragraph – not relevant</li> </ul> <p><i>5. Entry Control as a Surveillance Event</i> Deleted section with subsequent section numbering changed</p>
2.2	February 2014	Annex 11	<p><i>5. Entry Control as a Surveillance Event</i> Deleted section with subsequent section numbering changed</p>
2.2	February 2014	Annex 12	<p><i>1. Specific Guidelines: instrument Flight Procedure Design Authorisation Holders</i></p> <p><i>1.1 Overview</i> Delete reference to Entry Control as Surveillance Guide in list</p> <p><i>3. Systems &amp; Elements</i></p> <ul style="list-style-type: none"> <li>Deleted reference to accessing list of associated risks. Function no longer available in Sky Sentinel</li> <li>Deleted bracketed text in second paragraph referring to implementation as part of Phase 3 of CSM</li> </ul> <p><i>3.1 Health Check</i></p> <ul style="list-style-type: none"> <li>Changed reference to the mandatory elements being published to the “CASA intranet” to “CASA website”</li> <li>Deleted second paragraph – not relevant</li> </ul> <p><i>5. Entry Control as a Surveillance Event</i> Deleted section with subsequent section numbering changed</p>
2.2	February 2014	Annex 13	<p><i>1. Specific Guidelines: Manufacturing Organisations</i></p> <p><i>1.1 Overview</i> Deleted reference to Entry Control as Surveillance Guide in list</p>

Version	Date	Chapter	Section / Details
			<p><b>3. Systems &amp; Elements</b></p> <ul style="list-style-type: none"> <li>Deleted reference to accessing list of associated risks. Function no longer available in Sky Sentinel</li> <li>Deleted bracketed text in second paragraph referring to implementation as part of Phase 3 of CSM</li> </ul> <p><b>3.1 Health Check</b></p> <ul style="list-style-type: none"> <li>Changed reference to the mandatory elements being published to the "CASA intranet" to "CASA website"</li> <li>Deleted second paragraph – not relevant</li> </ul> <p><b>5. Entry Control as a Surveillance Event</b> Deleted section with subsequent section numbering changed</p>
2.2	February 2014	Annex 14	<p><b>5. Entry Control as a Surveillance Event</b> Delete reference to Entry Control as Surveillance Guide in list</p>
2.2	February 2014	Annex 15	<p><b>1. Specific Guidelines: Training Organisations (Excluding Flying Training)</b></p> <p><b>1.1 Overview</b> Deleted reference to Entry Control as Surveillance Guide in list</p> <p><b>3. Systems &amp; Elements</b></p> <ul style="list-style-type: none"> <li>Deleted reference to accessing list of associated risks. Function no longer available in Sky Sentinel</li> <li>Deleted bracketed text in second paragraph referring to implementation as part of Phase 3 of CSM</li> </ul> <p><b>3.1 Health Check</b></p> <ul style="list-style-type: none"> <li>Changed reference to the mandatory elements being published to the "CASA intranet" to "CASA website"</li> <li>Deleted second paragraph – not relevant</li> </ul> <p><b>5. Entry Control as a Surveillance Event</b> Deleted section with subsequent section numbering changed</p>

# CASA Surveillance Manual

## Revision History

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Version	Date	Chapter	Section / Details
2.2	February 2014	Annex 16	<p>1. <i>Specific Guidelines: Training Organisations (Excluding Flying Training)</i></p> <p>1.1 <i>Overview</i></p> <p>Deleted reference to Entry Control as Surveillance Guide in list</p> <p>3. <i>Systems &amp; Elements</i></p> <ul style="list-style-type: none"> <li>Deleted reference to accessing list of associated risks. Function no longer available in Sky Sentinel</li> <li>Deleted bracketed text in second paragraph referring to implementation as part of Phase 3 of CSM</li> </ul> <p>3.1 <i>Health Check</i></p> <ul style="list-style-type: none"> <li>Changed reference to the mandatory elements being published to the "CASA intranet" to "CASA website"</li> <li>Deleted second paragraph – not relevant</li> </ul> <p>5. <i>Entry Control as a Surveillance Event</i></p> <p>Deleted section with subsequent section numbering changed</p>

### VERSION 2.1

Version	Date	Chapter	Section / Details
2.1	August 2013	General	Watermark indicating “Uncontrolled when printed” added to all pages alerting users that the single source for the current version of the CSM is the electronic documents accessed via CASA websites
		Chapter 1 - Introduction	<i>Section 1.1 Introduction</i> Clarifies the use of the word ‘must’ throughout the manual
			<i>Section 1.6 List of Terms</i> Definition of ‘Health Check’ expanded to conform with relevant manual content
			<i>Section 1.6 List of Terms</i> Minor amendment made to the definition of ‘Observation’ to more correctly reflect the intent of the CSM
		Chapter 4 – Surveillance	<i>Section 4.5.12 Level 1 Surveillance event – exit meetings</i> Note detailing action to be taken when authorisation holder submits a written proposal or action plan is amended
			<i>Section 4.6.7 Writing compliance findings procedures (Level 1 and 2 surveillance types)</i> Clarifies the requirement that findings forms part of the Surveillance Report associated with the event
			<i>Section 4.6.8 Non-Compliance Notice (Process and Guidance sections)</i> New note clarifies the requirements when citing a Civil Aviation Order (CAO) or a Manual of Standards (MOS) when issuing an NCN
			<i>Section 4.6.8.2 GUIDANCE – Write findings (NCN)</i> Clarifies the requirement that an NCN must be associated with a surveillance event when recorded in Sky Sentinel
			<i>Section 4.6.9.2 GUIDANCE – Issuance and acquittal of Safety Alerts</i> Clarifies the requirement that a Safety Alert must be associated with a surveillance event when recorded in Sky Sentinel
			<i>Section 4.6.10.3 GUIDANCE – ASRs</i> Clarifies the requirement that an ASR must be associated with a surveillance event when recorded in Sky Sentinel



Version	Date	Chapter	Section / Details
			<i>Section 4.6.11.2 GUIDANCE – Write findings (Observations)</i> Clarifies the requirement that an Observation must be associated with a surveillance event when recorded in Sky Sentinel
			<i>Section 4.7.5.2 GUIDANCE – Assess response</i> New note added clarifying the expectations of an authorisation holder in providing details of the root cause and corrective action to be taken in responding to an NCN and the reason CASA requires this detail in the response
			<i>Section 4.7.6.3 GUIDANCE – Acquit and close an NCN</i> New note added regarding the restriction on acquitting an NCN relating to the same activity that is subject to current Coordinated Enforcement action
			<i>4.7.8 Request for extension (Process and Guidance sections)</i> Process amended and new note added detailing the changed requirement that requests for extensions beyond six months must be referred to the Controlling Office Manager to decide if the matter should be referred to Coordinated Enforcement Process
			<i>Section 4.7.9 Transition to enforcement (Process and Guidance sections)</i> Incorporates new associated processes for new Sky Sentinel functionality that allows for an Enforcement Flag at the time the Coordinated Enforcement referral form is submitted
		<b>Chapter 5 – Information Capture and Access</b>	<i>Section 5.3 Ongoing Information Capture and Sharing</i> Heading title amended to incorporate 'Capture' and new content added to reinforce need to capture all relevant information and reasoning for decisions made
		<b>Annex 1</b>	<i>Section 2.1 Higher Duties</i> New sub-section added to Section 2. Maintenance of recency and Confidence clarifying roles and responsibilities relating to surveillance when an officer is acting in higher duties
			<i>Section 6.1 Findings Titling</i> Section deleted

# CASA Surveillance Manual

## Revision History

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Version	Date	Chapter	Section / Details
			<p><i>Section 6.2 NCN/Safety Alert – Correct Regulatory Reference</i></p> <ul style="list-style-type: none"> <li>Section title and content amended to recognise that the requirements outlined in the section apply to all findings, not only NCNs and Safety Alerts</li> <li>Regulatory referencing examples deleted and replaced with a new note and link to the <i>CASA Writing Style Manual</i></li> </ul>
			<p><i>Section 6.3 Systems Risk – Question Titling</i> Section deleted</p>
			<p><i>Section 11 Occurrence Management</i> Section replaced with new section in line with <i>Temporary Management Instruction 2013-003</i></p>
		<p><b>Annex 2</b> <b>Annex 3</b> <b>Annex 4</b> <b>Annex 5</b> <b>Annex 6</b> <b>Annex 7</b> <b>Annex 8</b> <b>Annex 9</b> <b>Annex 12</b> <b>Annex 13</b> <b>Annex 15</b> <b>Annex 16</b></p>	<p><i>Section 3 Systems &amp; Elements:</i> New prompts included incorporating Drug and Alcohol Management Plan (DAMP) surveillance</p>
		<b>Annexes 2 to16</b>	<p><i>Section 3.1 Health Check</i></p> <ul style="list-style-type: none"> <li>Schedules of Health Check Mandatory Elements removed from annexes and published separately in CASA intranet</li> <li>Clarifies that Health Checks should cover no more than four systems risks across the mandated elements</li> </ul>

# CASA Surveillance Manual

## Revision History

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

### VERSION 2.0

Version	Date	Chapter	Section / Details
2.0	February 2013	<b>Chapter 1 – Introduction</b>	<p><i>Section 1.5 List of Terms</i> Amended definitions:</p> <ul style="list-style-type: none"> <li>• Authorisation Holder Assessment</li> <li>• Authorisation Holder Performance Indicator (AHPI)</li> <li>• Management System Model (MSM)</li> <li>• Operational Check</li> <li>• Oversight Posture</li> <li>• Safety history</li> </ul> <p>New definitions:</p> <ul style="list-style-type: none"> <li>• Post-authorisation review</li> <li>• Risk-based surveillance</li> <li>• Systems risk</li> <li>• Systems risk history</li> <li>• Systems Risk Indicator</li> <li>• Systems Risk Profile</li> </ul>
		<b>Chapter 2 – CASA Approach to Surveillance</b>	<p><i>Section 2.6 Systems and Risk-based Approach to Surveillance</i> – Provides expanded definition of Risk-based surveillance</p>
		<b>Chapter 3 – Methodology</b>	<p><i>Section 3.3.3 Using the MSM</i> – Incorporates systems risk into MSM including new content on:</p> <ul style="list-style-type: none"> <li>• Assessing systems risks on site</li> <li>• Recording systems risks results</li> <li>• Reporting poor risk findings</li> </ul>
			<p><i>Section 3.5.1.2 Health Checks</i> – Expands the description of the purpose and focus of Health Checks</p>
			<p><i>Section 3.8 Systems Risk Analysis</i> – New section added new content on Systems Risk Profile and Systems Risk History</p>
		<b>Chapter 4 – Surveillance</b>	<p><i>Section 4.1.2 Systems and Risk-based Surveillance</i> – Provides expanded definition of Risk-based surveillance</p>
			<p><i>Section 4.2.1 Purpose (Authorisation Holder Assessment)</i> – Incorporates new systems risk concepts</p>

Version	Date	Chapter	Section / Details
			<i>Section 4.2.4.1 Level 1 – Surveillance event</i> – Expands the description of the purpose and focus of Health Checks
			<i>Section 4.2.5 Conduct Assessment</i> – Incorporates systems risk considerations into the assessment process with extensive new guidance on: <ul style="list-style-type: none"> <li>• Assessment of Systems Risk Profile</li> <li>• Assessment of Systems Risk History</li> <li>• Assessment of time since last Level 1 surveillance event</li> </ul>
			<i>Section 4.4.4 Surveillance Preparation</i> – Incorporates new systems risk concepts into the process and guidance, including scoping the surveillance events to systems risks and selecting/devising aligned questions
			<i>Section 4.5.1 Purpose (Conduct Surveillance Event)</i> – Incorporates new systems risk concepts and expanded description for Level 2 Surveillance Events
			<i>Section 4.5.6 Level 1 Surveillance event – Conduct Surveillance</i> – Incorporates new systems risk concepts
			<i>Section 4.5.7 Level 1 Surveillance event – Process Verification Procedure</i> – Incorporates new systems risk concepts – Incorporates new systems risk concepts
			<i>Section 4.5.12 Level 1 Surveillance Event – Exit Meetings</i> – New note added detailing expectations on initiating the Coordinated Enforcement Process (CEP) when authorisation holder suggests written proposals/Action plans to rectify issues discussed during the surveillance
			<i>4.6.5 Systems Risk Analysis</i> – New section provides the process and guidance for the analysis of surveillance evidence and assessment of systems risks after completion of a surveillance event
			<i>4.6.11 Observations</i> – Incorporates new systems risk concepts and the changed focus on Observations with the introduction of risk-based surveillance

Version	Date	Chapter	Section / Details
			<i>4.6.12 Surveillance Reporting</i> – Incorporates new systems risk concepts
			<i>4.7.8 Request for Extension</i> – Changed process and guidance added detailing expectations on initiating the Coordinated Enforcement Process (CEP) when an authorisation holder submits an Action plans to support the request for extension
			<i>4.7.9 Transition to Enforcement</i> – Expanded guidance provided
			<i>4.7.10 Systems Risk Reassessment</i> – New section provides the process and guidance for the reassessment of particular risks where it is considered that, based on new post-surveillance data, a change in the risk level is likely
		<b>Chapter 5 – Information Capture and Access</b>	<i>Section 5.2.1 Safety Information</i> – Changed information on access to safety information and support
		<b>Annex 1 – Surveillance Standards and Protocols</b>	<i>Section 3. Protocols for Conducting Inspections and Investigations</i> – Additional instruction provided on power to conduct an inspection
			<i>Section 6.3 Systems Risk – Question Titling</i> – New systems risk content
			<i>Section 6.4 Systems Risk – Question Development</i> – New systems risk content
			<i>Section 6.5 Systems Risk – Questioning Technique</i> – New systems risk content
			<i>Section 6.6 Systems Risk – Completing Risk Assessment</i> – New systems risk content
			<i>Section 6.6.1 Method for using word pictures</i> – Provides full schedule of risk control word pictures aligning to Likelihood-Consequence and each MSM attribute
			<i>Section 9. Observation Guidelines</i> – New section provides details on completing an Observation particularly in the context of the applying Observations to highlight heightened risk
			<i>Section 11.4 Accessing Information (Occurrence Management)</i> – Changed information on access to safety information and support
		<b>Annexes 2 to 16</b>	Minor amendments to incorporate systems risk concepts

# CASA Surveillance Manual

## Revision History

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

### VERSION 1.1

Version	Date	Chapter	Section / Details
1.1	November 2012	<b>Chapter 1 – Introduction</b>	<i>Section 1.5</i> – New definitions added
			<i>Section 1.6</i> – Section title changes from List of Acronyms to Abbreviations
		<b>Chapter 3 – Methodology</b>	<i>Section 3.2</i> – Six step diagram amended to better illustrate how the surveillance process operates
			<i>Section 3.7.2</i> – Description of the “active” posture amended with it now described as a “higher priority” rather than “additional” surveillance
		<b>Chapter 4 – Surveillance</b>	<i>Section 4.2.1</i> – “Findings history” added to the considerations when assessing the necessity to conduct surveillance
			<i>Section 4.2.4.2</i> – The term ‘Unscheduled surveillance’ deleted with a note added highlighting that any urgent or emergent surveillance events, not assigned through the normal processes, can be recorded as either a Level 1 or Level 2 surveillance event
			<i>Section 4.2.4.2</i> – Authorisation management team leader reports to SPR group on all Level 2 surveillance events conducted in the previous period
			<i>Section 4.2.5.2</i> – Recognition that the AHPI tool is not applicable to all authorisation types
			<i>Section 4.2.5.2</i> – Evaluation of AHPI must be conducted as a team to remove any possible of subjectivity in assessment
			<i>Section 4.2.5.2</i> – Level 2 surveillance events can be approved by authorisation management team leader
			<i>Section 4.2.5.2</i> – Authorisation management team leader to note in Sky Sentinel any non-recommended Surveillance Requests and why it is not being recommended with the SPR group able to override recommendation
			<i>Section 4.3.5.2</i> – SPR group takes into account surveillance events conducted in previous month and approved Level 2 surveillance events for the coming period
			<i>Section 4.4.4.4</i> – New guidance added on preparing for a Level 2 surveillance event

Version	Date	Chapter	Section / Details
			<i>Section 4.5.6.2</i> – Expanded guidance on evidence
			<i>Section 4.6.8.1</i> – The Controlling Office Manager to inform the Executive Manager, Legal Services Division when the Safety Alert is issued
			<i>Section 4.6.9</i> – ASRs added to CSM. New processes and guidance added with separate processes for Code A and Code B & C ASRs
			<i>Section 4.6.10.2</i> – Purpose statement for Observations amended
			<i>Section 4.6.12.1</i> – In circumstances where authorisation management team leader is also the surveillance lead, Level 2 surveillance reports must be approved by the Controlling Office Manager
			<i>Section 4.7.5.1</i> – Process step to note causal factor in Sky Sentinel deleted as Sky Sentinel does not have the functionality to record such detail
			<i>Section 4.7.5.2</i> – An authorisation holder must respond to a NCN in 21 days rather than the NCN being acquitted in 28 days
			<i>Section 4.7.5.2</i> – The response to an NCN to include the remedial action, root cause analysis and corrective action to be undertaken, implemented and evidence satisfying the issuing inspector
			<i>Section 4.7.6.1</i> – Process steps around recording verification and acquitting NCNs amended
		<b>Chapter 5 – Information Capture and Access</b>	<i>Section 5.2.1</i> – Information provided in the Information Requests section detailing the services provided by SSO in supporting the surveillance process has been removed and replaced by a section relating to accessing information in the Safety Information Gateway
		<b>Annex 1 – Surveillance Standards and Protocols</b>	Annex title changed to “Surveillance Standards and Protocols”
			<i>Section 3</i> – Rights of Inspectors section amended and retitled “Protocols for conducting inspections and investigations”

# CASA Surveillance Manual

## Revision History

Approved by the Deputy Director of Aviation Safety    Version 2.2: February 2014

Version	Date	Chapter	Section / Details
			<i>Section 7</i> – Note in NCN Guidelines expanded to specify that only one breach can be shown per NCN
			<i>Section 8</i> – New guidelines added for completing an ASR
			<i>Section 10</i> – New Occurrence Management section added detailing the process to be followed to determine whether there has been a potential safety issue or regulatory breach after review of safety occurrence data
		<b>Annexes 2 to 16</b>	New annexes added expanding the scope of the CSM to cover all parts of CASA with annexes aligning to individual authorisation holder types or groups of authorisation holders

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# CASA Surveillance Manual

## Revision History

Approved by the Deputy Director of Aviation Safety    Version 2.2: February 2014

### VERSION 1.0

Version	Date	Chapter	Section / Details
1.0	July 2012	All	Initial issue

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### 1.1 Introduction

The CASA Surveillance Manual (CSM) sets out the policy and procedures to be followed when conducting surveillance on civil aviation authorisation holders (authorisation holders). It also sets out the policy and procedures to be followed when conducting surveillance on persons or organisations who are not authorisation holders, namely:

- Non-Air Operator's Certificate (AOC) holders for Dangerous Goods surveillance – see Annex 9
- Recreational Aviation Administration Organisations (RAAO) – see Annex 14.

In this respect, and for the purposes of this manual only, a reference in this manual to an authorisation holder will include the above persons or organisations who are not authorisation holders.

The CSM is applicable to all aspects of surveillance conducted by CASA providing a single, documented process for surveillance.

This manual reflects surveillance management concepts, policies and procedures that allow for the prioritisation of surveillance activities on the basis of potential risk and also to determine what areas of system risk should be addressed in a surveillance event. Sky Sentinel, the approved IT surveillance management tool, embodies these concepts and allows CASA to apply a holistic system and risk management approach to planning, conducting, analysing, monitoring and reporting surveillance across the Australian aviation industry.

Occasionally the word 'must' is used in this manual when the action is deemed to be critical. CASA does not intend for the use of such language to add to, interpret or relieve a duty imposed by the civil aviation legislation.

### 1.2 Manual's Purpose

The CSM contains the policy, processes, procedures and guidance materials necessary for CASA personnel conducting surveillance of the aviation industry when carrying out the Authority's regulatory responsibilities.

The manual is structured in the following way:

- Chapter 1 – Introduction
- Chapter 2 – CASA approach to surveillance
- Chapter 3 – Methodology
- Chapter 4 – Surveillance
- Chapter 5 – Information Capture and Access

The manual is a resource to be referred to by staff at all levels, as required. For elaboration on any of the matters contained in the manual, please contact the Manager, Safety Systems Office (SSO), Office of the Director of Aviation Safety, via email to [SafetySystems@casa.gov.au](mailto:SafetySystems@casa.gov.au)

### 1.3 Manual Objectives

The objectives of this manual are to provide:

- an understanding of CASA's surveillance of the aviation industry
- an understanding of CASA's systems and risk-based surveillance approach
- a description of the roles and responsibilities of CASA staff in conducting surveillance
- guidance and procedures for the surveillance model based on a six step process which includes:
  - authorisation holder assessment
  - surveillance priority review
  - surveillance event preparation
  - conduct surveillance event
  - surveillance event reporting
  - update system information.

### 1.4 Target Audience

The target audience for the CSM is CASA staff involved in surveillance activities.

### 1.5 Document Control

#### 1.5.1 Manual sponsorship

The Deputy Director of Aviation Safety is the sponsor of the CSM. The Manager SSO is responsible for ensuring the manual is accessible and up to date. For that reason manuals should not be retained or relied upon as a printed version. An electronic version will be maintained on CASA's intranet – CASAConnect at [CASA Surveillance Manual \(CSM\) & Sky Sentinel](#).

#### 1.5.2 Manual amendment

The SSO is responsible for the management and continuous improvement of the CSM. Suggestions for amendments should initially be discussed within work groups/teams and with controlling office management. Formalised requests for amendment should be authorised by the Controlling Office Manager then forwarded to the Manager SSO using the [Form 1305 CASA Surveillance Framework Amendment Submission Form](#) (via email to [SafetySystems@casa.gov.au](mailto:SafetySystems@casa.gov.au)). Suggestions for amendments will be reviewed following which the SSO will advise the proposer of acceptance or rejection, If a proposed amendment is rejected the SSO will provide the proposer with reason for the rejection.

### 1.6 List of Terms

Term	Definition
<b>Acquittal</b>	Decision by CASA accepting that all remedial and corrective actions taken by the authorisation holder to address a surveillance finding satisfactorily resolve the deficiency
<b>Action plan</b>	Means by which an authorisation holder demonstrates to CASA those actions and milestones planned to resolve a process/system deficiency that caused a breach
<b>Aircraft Survey Report (ASR)</b>	Document issued by CASA to the Registered Operator providing notice of a potential or actual aircraft defect and generally in the form of a CAR 38 Direction.
<b>Audit</b>	A comprehensive surveillance event examining an authorisation holder's system(s) including risk control
<b>Authorisation holder</b>	A holder of a Civil Aviation Authorisation as that term is defined in section 3 of the <i>Civil Aviation Act 1988</i> i.e. "an authorisation under this Act or the regulations to undertake a particular activity (whether the authorisation is called an AOC, permission, authority, licence, certificate, rating or endorsement or is known by some other name)"
<b>Authorisation Holder Assessment (AHA)</b>	A consolidation of information to assist an authorisation management team determine the surveillance priority of an authorisation holder
<b>Authorisation holder category</b>	A group of factors within the Authorisation Holder Performance Indicator (AHPI) tool relating to the inherent nature of the authorisation holder's activity and consists of aircraft size and type of operation
<b>Authorisation Holder Performance Indicator (AHPI)</b>	A tool consisting of word pictures used to assess an authorisation holder with the result determining their oversight posture
<b>Authorisation management team</b>	An allocation of inspectorate staff assigned to conduct the aviation safety and regulatory oversight of a number of authorisation holders
<b>Breach</b>	An infraction or violation of a legislative provision
<b>Business day</b>	A day that is not a Saturday, a Sunday or a gazetted public holiday in the relevant location
<b>CASA</b>	Civil Aviation Safety Authority

Term	Definition
<b>Closure (of a Non-Compliance Notice – NCN)</b>	Action taken by CASA to finalise the management of a NCN where finalisation cannot otherwise be achieved
<b>Compliance</b>	Actions or activities carried out that will achieve the requirements of the legislation
<b>Control effectiveness review</b>	A review of evidence associated with a system risk to identify the level of control an authorisation holder has over the risk being reviewed
<b>Controlling office</b>	CASA office or branch responsible for oversight of an authorisation holder
<b>Controlling Office Manager</b>	CASA manager responsible for oversight of an authorisation holder
<b>Corrective action</b>	Action required by an authorisation holder in response to a breach that reduces the potential of recurrence. The action must address the root cause of the deficiency that caused the breach and must include a review to ensure the action is effective
<b>Deficiency</b>	A generic term which covers insufficiencies which may include breaches or something which could simply be done better and may lead to a breach
<b>Element</b>	A part or component of an authorisation holder's systems that either together or alone contributes to the operation of that system
<b>Enforcement</b>	Strategies adopted by CASA to secure compliance with aviation safety standards ( <i>See Chapter 2 – Enforcement Manual</i> )
<b>Evidence</b>	Information, objects, records or statements of fact used to support findings
<b>Factors</b>	An aspect of an authorisation holder relating to a systems risk or group of risks. When grouped and combined they determine the oversight posture associated with that authorisation holder
<b>Finalisation</b>	Step in the surveillance process that gives instructions for follow-up action and/or acquittal of the surveillance findings
<b>Finding</b>	Results of the evaluation of the collected evidence against surveillance event criteria
<b>Follow-up</b>	Action(s) taken by an inspector to conclude issues arising from a surveillance event

Term	Definition
<b>Health Check</b>	A systems-based surveillance event with a limited mandated scope with non-mandated scope items able to be added if capacity and resources allow
<b>Inspection</b>	The act of checking whether a product or process outcome meets requirements
<b>Inspector</b>	Person responsible for conducting, amongst other things, assessments and surveillance
<b>Issuing inspector</b>	An inspector who has issued a finding and who subsequently manages that finding
<b>Latent condition</b>	A condition which exists within an aviation system that is not perceived as harmful, but becomes evident once the system's defences have been breached
<b>Management factors</b>	A group of factors within the AHPI tool relating to the management of safety by an authorisation holder. It consists of factors covering documents and procedures, decision making, assurance, training and communication. These factors have the potential to trigger or contribute to adverse safety outcomes
<b>Management System Model (MSM)</b>	A tool used to assess the effectiveness of an authorisation holder's systems and its ability to manage its safety risks and to determine probable root cause when assessing non-compliance
<b>Non-compliance</b>	Has the same meaning as the term <i>breach</i> and can be used interchangeably
<b>Non-Compliance Notice (NCN)</b>	A document used to notify an authorisation holder of a breach/non-compliance
<b>Observation</b>	A document used to advise an authorisation holder of latent conditions or deficiencies in a system which do not constitute a breach, but have the potential to result in a breach if not addressed and/or to highlight potential areas for improvement in safety performance
<b>Operational and environmental factors</b>	A group of factors within the AHPI tool relating to the operational and environmental aspects of an authorisation holder's systems. They consist of factors on operational complexity, facilities, resources and equipment and geography. These conditions have the potential to trigger or contribute to adverse safety outcomes

Term	Definition
<b>Operational Check</b>	A surveillance event targeted at a specific activity or function used to assure compliance
<b>Organisational factors</b>	A group of factors within the AHPI tool relating to the organisational aspects of an authorisation holder. They consist of factors on executive resources, executive skills and attitudes, organisation maturity and stability and organisational control. These conditions have the potential to trigger or contribute to adverse safety outcomes
<b>Oversight posture</b>	A numeric/colour indicator and the primary outcome of conducting an AHPI determined by calculating the results of responses to word pictures within the AHPI tool in Sky Sentinel. This assessment determines an oversight posture of "Routine", "Enhanced" or "Active"
<b>Post-authorisation review</b>	A review conducted to ensure entry control standards are being maintained and conducted within six to 15 months following the initial issue, depending on the type of authorisation issued
<b>Process verification</b>	Validation of an authorisation holder's procedures to verify the effectiveness of communications and interactions between various interdependent processes. Process verification is part of a systems surveillance and should confirm the 'process in practice' including outputs
<b>Ramp inspection</b>	Inspection of an aircraft, including documentation, equipment and procedures associated with that operation
<b>Remedial action</b>	Immediate action taken by an authorisation holder in response to a finding to address the deficiency that caused the breach, and which will return performance to a compliant state
<b>Remote locations</b>	A place where an authorisation holder conducts activities other than their main location
<b>Response due date</b>	The date by which an authorisation holder is to respond to a NCN
<b>Risk</b>	The effect of uncertainty on objectives
<b>Risk analysis</b>	A systematic process to comprehend the nature of risk and to deduce the level of risk
<b>Risk assessment</b>	Overall process of risk identification, risk analysis and risk evaluation



Term	Definition
<b>Risk based surveillance</b>	A structured process used by CASA in the oversight of authorisation holders and prioritising surveillance activities, focused on their effectiveness in managing systems risks and is a method by which CASA can evaluate that all activities conducted by the authorisation holder are as safe as reasonably practicable
<b>Risk framework</b>	Set of interacting activities and rules for coordinating and directing risk management processes (from ISO Guide 73)
<b>Risk management process</b>	Systematic application of management policies, procedures and practices to the tasks of communication, consulting, establishing the context, identifying, analysing, evaluating, treating, monitoring and reviewing risk
<b>Root cause</b>	The fundamental breakdown or failure of a process or system, which when resolved, prevents a recurrence of the deficiency
<b>Safety Alert</b>	A notification used to raise an immediate safety concern regarding a serious legislative breach by an authorisation holder. Issued in conjunction with a NCN and/or an ASR. The issue of a Safety Alert is also one of the triggers that initiates the Coordinated Enforcement Process (CEP)
<b>Safety history</b>	A group of factors within the AHPI tool relating to the safety performance of an authorisation holder consisting of factors regarding regulatory history, safety occurrences and other safety issues
<b>Service Difficulty Report (SDR)</b>	A means of collecting information on the major defects in an aircraft and equipment
<b>Sky Sentinel</b>	Surveillance management IT tool
<b>Surveillance</b>	Oversight of authorisation holders performed by CASA pursuant to <i>section 9(1)(f) of the Civil Aviation Act 1988</i>
<b>Surveillance event</b>	Activity by which CASA assesses the safety performance of regulated aviation activities
<b>Surveillance lead</b>	CASA officer with the appropriate technical background and knowledge who is responsible for leading a surveillance team. The term also applies to a sole inspector conducting a surveillance event
<b>Surveillance Priority Review Group</b>	Controlling office management team that manages the surveillance planning process and plans surveillance activities

Term	Definition
<b>Surveillance team</b>	The team, made up of inspectors that may be drawn from various disciplines, and who have been assigned to conduct a surveillance event. If the surveillance event is conducted by a sole inspector, that inspector assumes all roles and responsibilities for the execution of the surveillance event
<b>System</b>	A group of interrelated processes that are a composite of people, procedures, materials, tools, equipment, facilities and/or software operating in a specific environment to perform a specific task, or achieve a specific purpose
<b>System risk</b>	A risk present in an authorisation holder's system providing a standard against which CASA can measure the authorisation holder's ability to mitigate its safety risks
<b>Systems risk history</b>	A table of an authorisation holder's assessed level of mitigation of the systems risks over time displayed in Sky Sentinel
<b>Systems Risk Indicator (SRI)</b>	A numeric/colour indicator showing the level of assessed mitigated risk calculated from the ten most poorly controlled assessed systems risks
<b>Systems Risk Profile (SRP)</b>	A table of an authorisation holder's most recent mitigated risk results for all assessed systems risks
<b>Systems surveillance</b>	Seeks to assess an authorisation holder's management system and its ability to manage operational risks. To achieve this, safety-related processes are assessed to determine they are operating in accordance with the authorisation holder's documentation and Civil Aviation legislation

### 1.7 Abbreviations

Abbreviation	Description
AHPI	Authorisation Holder Performance Indicator
AIRS	Aviation Industry Regulatory System
AOC	Air Operator's Certificate
ARN	Aviation Reference Number
ASR	Aircraft Survey Report
ATSB	Australian Transport Safety Bureau
BO	SAP BusinessObjects
CAO	Civil Aviation Order
CAR	Civil Aviation Regulations 1988
CASR	Civil Aviation Safety Regulations 1998
CASA	Civil Aviation Safety Authority
CEP	Coordinated Enforcement Process
COA	Certificate of Approval
CSM	CASA Surveillance Manual
ICAO	International Civil Aviation Organisation
MOS	Manual of Standards
MSM	Management System Model
NCN	Non-Compliance Notice
SDR	Service Difficulty Report
SME	Subject Matter Expert
SMS	Safety Management System

Abbreviation	Description
SPR	Surveillance Priority Review
SR	Surveillance Request
SRI	System Risk Indicator
SRP	System Risk Profile
SSI	Safety Systems Inspector
SSO	Safety Systems Office
TRIM	Total Records and Information Management

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### 2.1 Overview

#### 2.1.1 Purpose

This chapter describes the overarching principles for surveillance management within CASA. The chapter details the following:

- CASA's surveillance obligations
- CASA's surveillance policy
- CASA's surveillance objectives
- surveillance program
- systems and risk-based approach to surveillance
- surveillance scheduling
- internal assurance program.

### 2.2 CASA's Surveillance Obligations

#### 2.2.1 The Civil Aviation Act 1988 requirements

CASA's key role is to conduct the safety regulation of civil air operations in Australian territory and the operation of Australian aircraft outside Australian territory. CASA is also responsible for ensuring that Australian-administered airspace is administered and used safely. The requirement for CASA to perform these roles is contained in the Civil Aviation Act 1988 (the Act) and the Air Space Act 2007.

The main objective of the Act is to establish a regulatory framework for maintaining, enhancing and promoting the safety of civil aviation with particular emphasis on preventing aviation accidents and incidents. The Act provides overarching and high level obligations in regards to CASA's safety and safety-related functions.

#### 2.2.2 CASA's functions

CASA's functions are set out in section 9 of the Act. With respect to aviation industry surveillance, the Act relevantly states:

*Section 9:*

- (1) *CASA has the function of conducting the safety regulation of the following, in accordance with this Act and the regulations:*

*by means that include the following:*

*(f) conducting comprehensive aviation industry surveillance, including assessment of safety-related decisions taken by industry management at all levels for their impact on aviation safety.*

CASA encourages the aviation industry to adopt standards higher than the minimum required by regulations.

### 2.3 CASA's Surveillance Policy

The policy is available on the CASA website at:

[http://www.casa.gov.au/wcmswr/\\_assets/main/corporat/policy/notices/DAS-PN021-2010.pdf](http://www.casa.gov.au/wcmswr/_assets/main/corporat/policy/notices/DAS-PN021-2010.pdf)

The policy applies to all CASA personnel engaged in, conducting or managing surveillance activities relating to the aviation industry.

CASA is guided by the following standards to support the Surveillance Program and its commitment to risk management, quality and compliance:

- ISO 31000:2009 Risk Management
- AS 3806:2006 Compliance
- ISO 9001:2008 Quality management systems.

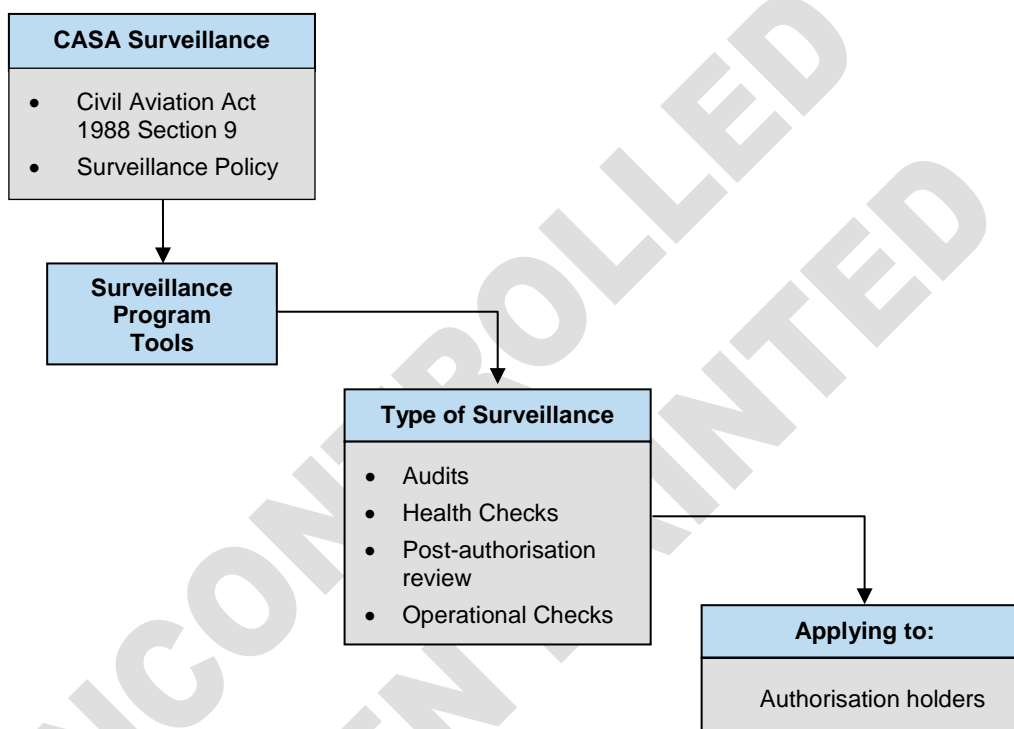
### 2.4 CASA's Surveillance Objectives

Surveillance is the mechanism by which CASA monitors the ongoing safety health and maturity of authorisation holders. Surveillance comprises audits and operational checks involving the examination and testing of systems, sampling of products, and gathering evidence, data, information and intelligence. Surveillance assesses an authorisation holder's ability to manage its safety risks and willingness to comply with applicable legislative obligations.

### 2.4.1 Scope of surveillance obligations

CASA conducts surveillance on all authorisation holders with its principal obligation being to detect and mitigate threats to aviation safety as these manifest themselves in an authorisation holder. To achieve this CASA applies a systems and risk approach and conducts surveillance using this methodology to achieve its goals.

The following diagram provides an overview of CASA's approach to surveillance.



### 2.5 CASA's Surveillance Program

CASA's surveillance program uses a systems and risk-based approach. Surveillance events are recorded and tracked in a supporting IT system and the results analysed, which allows CASA to evaluate the authorisation holder's safety performance. The Surveillance Program is dynamic, regularly reviewed and updated, taking the following issues into consideration:

- significant changes that could affect an authorisation holder, including changes to management or organisational structure, policy, technology; special projects; changes to authorisation holder's service providers; global and/or local threats and regulatory requirements
- application of the authorisation holder's Safety Management System (SMS) where applicable
- results of previously conducted surveillance and/or investigations
- surveillance resource requirements

- the authorisation holder's willingness and ability to identify and control its aviation safety-related risks.

### 2.6 Systems and Risk-based Approach to Surveillance

CASA's systems and risk-based surveillance approach aims to encourage the development of authorisation holders' systems and to encourage and guide the aviation industry to fully understand their responsibility for safety. This is achieved by highlighting the following to industry management:

- management's responsibility for safety as specified in the civil aviation legislation
- deficiencies in existing safety systems with regard to applicable civil aviation legislation
- areas where the authorisation holder should be doing more to reduce the potential for deficiencies.

Risk-based surveillance adopts a structured process, as detailed in this manual, and is used by CASA in its oversight of authorisation holders and prioritisation of its surveillance activities based on authorisation holders' risk profiles. It focuses on an authorisation holder's effectiveness in managing its systems risks and enables targeted surveillance of high-risk areas of an authorisation holder's systems. It is also a method by which CASA can evaluate that all activities conducted by an authorisation holder are as safe as reasonably practicable.

Generally, CASA must not dictate how an authorisation holder should resolve, or reduce the potential for, deficiencies. This, however, does not preclude a surveillance team from advising how CASA considers a problem should be fixed where it is appropriate to do so. The authorisation holder must be responsible for identifying the cause of the system deficiency, areas of inadequate safety risk mitigation (identified during surveillance) and implement the necessary changes. The authorisation holder should internally verify changes implemented and CASA should verify the effectiveness of these changes during future surveillance. CASA may provide assistance to an authorisation holder by highlighting the appropriate guidance material with necessary explanation.

### 2.7 Surveillance Scheduling

CASA's surveillance program scheduling is driven by the risk to safety posed by authorisation holders and is based on an assessment of a number of factors. These factors include the assessment of an authorisation holder's safety performance, taking into account assessment factors indicated by the Authorisation Holder Performance Indicator (AHPI), time since the last surveillance event and risks specific to each authorisation holder. Based on this consolidated information, CASA has the ability to prioritise surveillance activities commensurate with resources available.

External intelligence gathered by or provided to CASA may also determine a requirement for additional surveillance.



CASA's IT surveillance management tool, Sky Sentinel, supports the analysis of the output of these activities to inform the subsequent surveillance schedule.

### 2.8 Internal Assurance Program

The objective of the program of internal assurance activity in connection with the CSM is to provide assurance to CASA:

- that standards required in the CSM are maintained by users
- that CSM processes are adhered to in all applicable surveillance activity
- there is standardisation and consistency across the organisation.

The program of internal assurance will focus on process, standards and manual content. The internal assurance work will:

- where possible be coordinated in liaison with the Governance Systems Branch to ensure alignment with the Internal Audit Program
- be co-ordinated through the SSO
- involve reviews of a sample of authorisation holder Surveillance Reports, including the issue and management of surveillance findings (Non-Compliance Notices, Aircraft Survey Reports, Observations and Safety Alerts, etc.)
- ensure all continuous improvement elements and amendment requests raised have been assessed for suitability for inclusion and captured for future revisions
- include an annual review to ensure the CSM content meets CASA's surveillance objectives which will be achieved through the Continuous Improvement process.

Wherever practicable the internal assurance processes will be closely aligned with the authorisation holder surveillance processes documented in the CSM.

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## 3.1 Overview

### 3.1.1 Purpose

The purpose of this chapter is to describe CASA's approach to surveillance of aviation authorisation holders throughout Australia's aviation industry. This chapter describes CASA's surveillance methodology, including:

- Surveillance framework overview
- Management System Model
- types of surveillance
- authorisation holder assessment
- systems risks.

### 3.1.2 Context

Section 9(1)(f) of the *Civil Aviation Act 1988* states that one of CASA's functions is to conduct "comprehensive aviation industry surveillance, including assessment of safety-related decisions taken by industry management at all levels for the impact on aviation safety".

### 3.1.3 References



*Civil Aviation Act (1988)*

*Civil Aviation Regulations (1988)*

*Civil Aviation Safety Regulations (1998)*

*Civil Aviation Orders*

### 3.2 Surveillance Framework

The Surveillance Framework is a standardised method of effectively applying data-driven, risk-based principles to the conduct of surveillance. The CASA Surveillance Framework is a continuous process, looping from Authorisation Holder Assessment through to Update System Information, which incorporates finalisation of a surveillance event.

The Surveillance Framework employs a six step process. These processes are briefly described in the following section and illustrated in the diagram below.



#### 3.2.1 Authorisation Holder Assessment (Assess)

The purpose of this process is for the authorisation management team to assess all available information relating to an authorisation holder’s activities. This assessment allows for the identification of areas of concern and the development of proposals for surveillance to be considered in the surveillance priority review process. The output from this process step is the Surveillance Request (SR).

For more information, see Section 4.2 – Authorisation Holder Assessment.

#### 3.2.2 Surveillance Priority Review (Review)

The purpose of this process is to review and consider recommendations for surveillance contained in SRs submitted by authorisation management teams. This is also the forum for reviewing completed surveillance and managing findings (NCNs, Safety Alert, ASRs etc). Outputs from this process step are the approval or non-approval of SRs and the update of surveillance plans.

For more information, see Section 4.3 – Surveillance Priority Review.

#### 3.2.3 Surveillance Event Preparation (Prepare)

The purpose of this process is to develop the strategies, schedules and work plans for surveillance events, including resources, timetable, etc. The output of this process is a detailed surveillance plan that outlines the approved scope and ensures the assignment of appropriate resources to a surveillance event.

For more information, see Section 4.4 – Surveillance Event Preparation.

#### 3.2.4 Conduct Surveillance Event (Conduct)

The purpose of this process is to conduct the appropriate level of surveillance. The outcome of this process is the completion of an approved surveillance event, including collecting, collating and evaluating all relevant information.

For more information, see Section 4.5 – Conduct Surveillance Event.

#### 3.2.5 Surveillance Event Reporting (Report)

The purpose of this process is to compile a report based on objective evidence gathered during the surveillance event. This includes deficiencies identified in regard to compliance and/or safety performance. The output of this process is a system risk assessment, findings (NCNs, Safety Alerts, ASRs etc) raised as applicable and the Surveillance Report, which forms part of the official record of an authorisation holder's performance. Based on the report, CASA will determine any necessary interventions.

For more information, see Section 4.6 – Surveillance Event Reporting.

#### 3.2.6 Update System Information (Update)

The purpose of this process is to collect and validate a wide variety of information to inform the authorisation holder assessment phase. The output from this process step is an information package to enable analysis. This process also includes the management of surveillance findings, including the acquittal of NCNs and response to Observations etc.

The IT system is updated to include the results of any surveillance event and there is also a wide variety of information that may be entered such as intelligence etc.

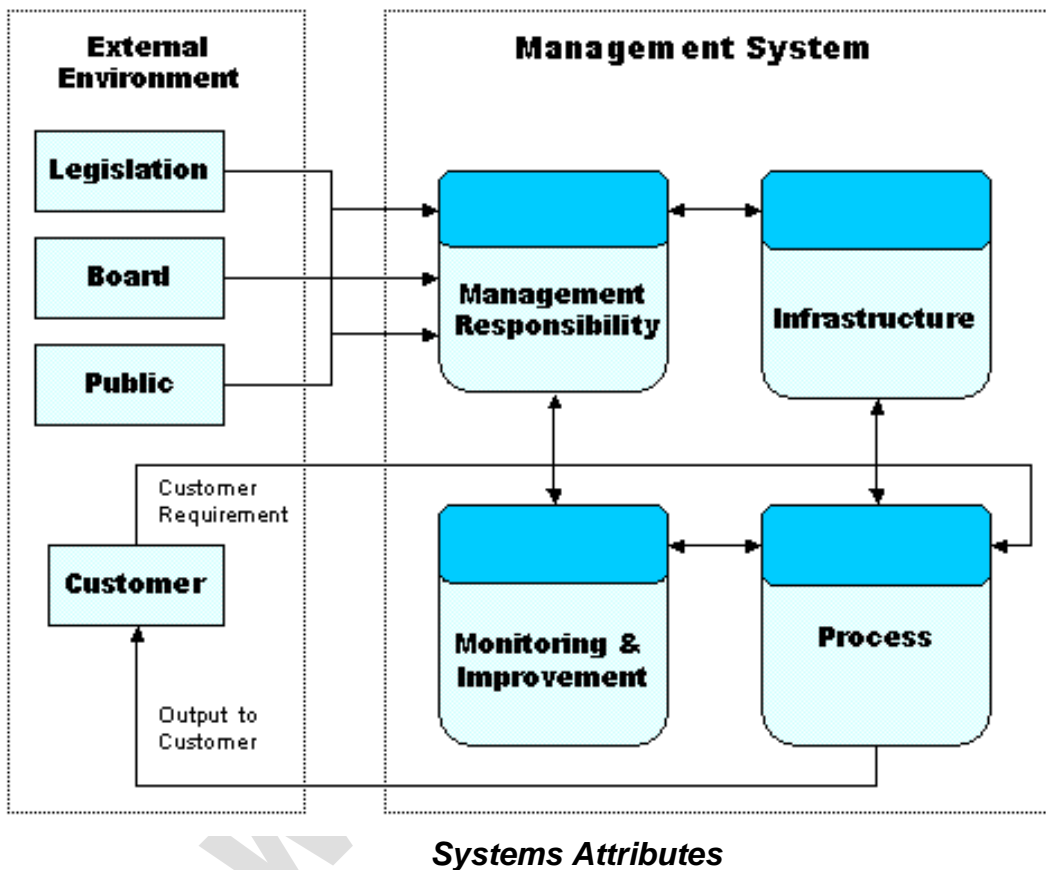
For more information, see Section 4.7 – Update System Information.

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### 3.3 Management System Model

The Management System Model (MSM) serves as a tool to assess an authorisation holder against four related areas of responsibility (systems attributes). An authorisation holder’s systems risks can be assessed using the systems attributes.

The following figure, Systems Attributes, shows the external environment influences, including legislation, the company board (or other factors influencing management), and interactions with the public and customer requirements. The four systems attributes operate within the organisation to provide effective control.



The MSM systems attributes are broken down into 12 components to assist in assessment. Some of the components are further broken down into sub-components to facilitate a more detailed evaluation.

The following table shows the systems attributes and the components/sub-components.

#### 3.3.1 System Attributes

Systems attributes	Components	Sub-components
Management responsibility	Management commitment	Policy
		Responsibility and authority
		Nominated management representative
	Planning	Objectives and safety/quality planning
		Internal communication and consultation
		Hazard identification and risk management
	Management review	N/A
Infrastructure	Facilities	N/A
	Tools, equipment and materials	N/A
	Data, information and records	N/A
	Personnel	N/A
Process in practice	Process in practice	N/A
Monitoring and improvement	Internal audit	N/A
	Internal reporting	N/A
	Investigation	N/A
	Remedial and Corrective action	Remedial action
Corrective action		



**NOTE:** Given organisation size, these attributes may not be documented formally; however, the principles will apply in the management of any organisation with an expectation that industry best practice is applied.

The following sections detail the individual systems attributes.



#### 3.3.1.1 Management responsibility

Management responsibility ensures responsibilities and authority are defined for the processes and that management have ensured the processes - those for organisational functioning and also those for monitoring and improving these - are adequately designed and implemented. Management responsibility consists of:

- management commitment
- planning
- management review.

#### Management commitment

- **Policy:** Senior management should develop and communicate policy and ensure its dissemination to all levels of the organisation. Safety/Quality Policy should include a clear declaration of commitment to safety/quality; ensure compliance with legislation; and ensure adequate knowledge, skills and safety awareness at all levels of the organisation. Safety policy should include, at a minimum:
  - a clear declaration of commitment and objectives
  - a means of setting safety and regular review of safety performance
  - clear statements of responsibility applying to every department or functional area in the organisation
  - a means for ensuring compliance with regulations
  - a means for ensuring adequate management knowledge and skills at all levels.
- **Responsibility and authority:** Management should ensure that responsibilities<sup>1</sup> and authorities<sup>2</sup> of personnel are appropriately defined and communicated within the organisation by:
  - clearly documenting them
  - effectively using monitoring tools (internal audits etc) to verify the position holders' and staff understanding of their responsibilities and authorities
  - creating a climate in which the position holders can effectively discharge their responsibility and authority.
- **Nominated management representative:** A management representative (could be more than one or a team of people with a person in charge for a larger organisation) should be appointed and given the responsibility and authority for:

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<sup>1</sup> Responsibility: Means this person is responsible for the effective performance of the process and/or the quality/safety outcomes of the process.

<sup>2</sup> Authority: This person has the legitimate power to establish a process and/or modify the process.

- ensuring processes needed for the safety/quality management system are established, implemented and maintained
- communicating with various divisions/groups/sections of the organisation to obtain inputs on how the safety management system is working
- forming/calling a workgroup together to analyse problems and develop corrective actions
- reporting to senior management on the performance of the safety/quality management system and any need for improvement
- ensuring the promotion of safety/quality awareness throughout the organisation
- following up on corrective actions required to ensure they are completed within allocated time periods.

#### Planning

Effective planning should support the 'Management commitment'. Through effective planning, business processes are designed and implemented to meet assigned objectives, including any post-implementation reviews to ensure effective implementation. Planning should ensure objectives are established for the various functions and levels within the organisation. The processes developed should include:

- **Performance of functions:** Action required for the various functions to be performed
- **Tracking and alerting:** Processes for tracking and alerting to ensure checks and actions are carried out in time
- **Internal communication and consultation:** Appropriate processes should be established for:
  - staff reporting systems
  - feedback loops for providing acknowledgement to staff
  - staff/team meetings
  - means of providing safety information to staff.
- **Hazard identification and risk management:** Hazard identification and risk management should be undertaken, at a minimum:
  - During implementation of the management system and then at regular intervals
  - When major operational changes are planned (*also see Change management below*)
  - If the organisation is undergoing rapid change, such as growth and expansion, offering new services, decreasing existing services, or introducing new equipment or procedures (*see Change management below*)
  - When key personnel change (*see Change management below*).

- **Change management:** Processes to ensure the integrity of the system is maintained when handling changes such as:
  - changes to operations
  - contingencies like absence of a position holder
  - introduction of new aircraft or equipment
  - introduction of new processes and procedures
  - growth in number of resources of aircraft, staff, equipment etc
  - induction of new staff
  - change in operating environment
  - change in key personnel
  - introduction of new routes.

#### Management review

Management review includes a periodic review process for evaluating the effectiveness of the 'Monitoring and improvement' system.

#### 3.3.1.2 Infrastructure

Infrastructure must be in place, including the various controls, to continuously ensure the updating and suitability in supporting the operation. Infrastructure includes four components:

- facilities
- tools, equipment and materials
- data, information and records
- personnel.

**Facilities:** Facilities include all buildings and workshop facilities required for the satisfactory performance of activities authorised.

**Tools, equipment and materials:** Includes all tools, hardware, software, materials and equipment to perform authorised activities.

**Data, information and records:** Data and information includes documented policies and procedures, manufacturer's data etc, either in written or pictorial form in hard copy or electronic system. Records provide evidence of performance and/or completion of tasks. Organisational policy and procedures should be established for effective control of data, information and records.

**Personnel:** Personnel are qualified, trained and competent to perform the processes in support of authorised activities.

#### 3.3.1.3 Process in practice

Process in practice assesses:

- compliance
- the effectiveness of policies and procedures in supporting the processes
- the level of implementation of the policies and procedures
- the adequacy of infrastructure and its effective use in supporting the processes
- the clear identification and workings of the interrelationships and interdependencies between various processes.

To function effectively, an organisation has to identify and manage numerous linked processes:

- **Interdependent processes:** Often outputs from one process form the input to the next process
- **Process interfaces:** There may be interactions between the authorisation holder's processes and those provided by external providers. The external providers might be under the same management or externally contracted to the organisation.

CASA's surveillance methods view these processes to assess the effectiveness and the interdependencies and interactions between them. Its aim is to assess how well resources are used and managed to bring about safety/quality outcomes.

When evaluating a process inspectors will assess the following:

- How well is the process set up?
- Is the infrastructure for the process adequate?
- How well does the infrastructure support the process used?
- Competence of staff involved in the process
- How effectively the procedures used for a particular process translate into compliance and system effectiveness?
- How well do staff understand the procedures used in the process?
- How well do they comply with the procedures?
- Do staff resort to informal practices for completion of the task?
- Where there are interdependent processes, how well does one support the other and contribute to safe quality outcomes?
- Where there are process interfaces, how well does the authorisation holder identify and manage them?

#### 3.3.1.4 Monitoring and improvement

This is the attribute that is at the centre of a safety/quality system. It focuses on finding problems within the system through internal surveillance, provides system feedback, including latent conditions through internal reporting, finds causal factors through investigation and takes action to remedy the problems, eradicate the causes and remove the potential for reoccurrence through remedial and corrective actions.

As a result of reviewing and testing a number of processes, an overall assessment of the monitoring and improvement systems can be made. Monitoring and improvement includes four components:

- internal audit
- internal reporting
- investigations
- remedial and corrective action.

#### Internal audit

Internal audit (where required) must be supported by senior management commitment in terms of an audit policy. The policy should clearly define the need, how often a scheduled/routine audit is to be carried out, other occasions on which an internal audit will be used (like post-implementation of a new process or verifying effectiveness of corrective or improvement actions), and conditions under which an audit may be postponed. An audit schedule must be in place and if the whole organisation is to be covered in a number of audits over a period of time, the coverage of each audit. The audits should preferably follow a process verification method, and should not only aim to uncover errors in technical areas, but also those in the development of policy and procedures.

#### Internal reporting

Internal reporting (where required) must be supported by management policy and should aim to create a supportive atmosphere to encourage reporting of incidents, errors, defects (not only technical defects but also defects in policies and procedures) and serve as a means of identifying process and system deficiencies.

Organisations can do many things to improve their staff's ability to provide feedback on whether processes comply with legislation and how processes and systems are functioning. Some simple methods of ensuring staff are familiar with, and function in accordance with legislation, include:

- providing references in (or after) a policy, or in their procedures, to the part of legislation it is trying to address, and encouraging staff to understand what is required in the legislation and speak up if they find the policy/procedure does not provide the outcome required.
- staff education on legislative requirements (including expected outcomes) or discussion on legislative changes in staff meetings used to improve awareness.

#### Investigation

Investigation includes internal systems used to investigate and arrive at root causes of problems identified by:

- internal audits
- external audits
- internal reporting or by any other means.

The term 'investigation' used here should not be confused with Commonwealth Investigations carried out by Investigators appointed under Part IIIA of the Act.

#### Remedial and corrective action

- **Remedial action:** Immediate action taken by an authorisation holder in response to a finding to address the deficiency that caused the breach, and which will return performance to a compliant state. For example, the action would quarantine a non-conforming product; take immediate action to make a defective process safe, or some other measure to reduce the risk.
- **Corrective action:** Action required by an authorisation holder in response to a breach that reduces the potential of recurrence. The action must address the root cause of the deficiency that caused the breach and must include a review to ensure the action is effective.

#### 3.3.2 Verifying processes using MSM

It is important to consider the following when verifying a process (this is not exhaustive):

- Do the authorisation holder's processes help achieve compliance with relevant legislation?
- Are the authorisation holder's processes sufficient to address known safety risks?
- Are the procedures describing and supporting the process adequate for the performance of the process and to achieve the safety outcomes?
- Are the procedures being complied with? If not, why not?
- Have the interdependencies and interactions with other processes been identified and are they working effectively across all systems?
- The adequacy of the available infrastructure and how it supports the process.
- How does the authorisation holder monitor the performance of the process and make improvements?
- Has the organisation assigned a responsible and competent person to ensure the process remains adequate and current?
- Is there a competent person who has the appropriate authority to change the process?
- Are the people involved competent and adequately trained?
- Have the materials provided for the process come from an appropriately controlled source?

- Does the process achieve the intended outcome(s)?

When deficiency is found, additional questions should be asked to assist in determining the causal factors.

#### 3.3.3 Using the MSM

The MSM is used during the surveillance process in five ways:

- preparing for surveillance
- questioning while on site
- assessing systems risk
- during the reporting phase when recording systems risk assessment results
- when acquitting a NCN by considering whether the authorisation holder's response addresses the root cause.

**Preparing for surveillance:** The first use of the MSM is during surveillance preparation. This involves reviewing the authorisation holder's documentation in light of the MSM. In reviewing the systems the authorisation holder must have in place, the systems are considered in light of the four attributes and 12 components of effective systems. These attributes and components drive the surveillance questions and the prompts used by the inspectors on site.

**Questioning on site:** While on site during process verification, surveillance questions must be balanced across the four attributes.

**Assessing systems risks:** During the assessment of a systems risk the surveillance questions must be framed around the four attributes to determine the degree each attribute contributes to the mitigation of the risk.

**Recording systems risk results:** During the reporting phase the evidence obtained is used to determine the level of risk mitigation applied to the risk by the authorisation holder. Using the evidence collected the user populates the risk calculator in Sky Sentinel using word pictures associated with the MSM attributes. Each control selection varies from "No Control" to "Full Control".

**Reporting risk findings:** Comments associated with inadequate systems risk mitigation are to be contained in the report Executive Summary. An Observation must also be raised to formally indicate to the authorisation holder that an area of its systems is at enhanced risk. The content of the report and Observation must not specifically state the actual CASA system risk that has been assessed, but rather it should clearly reference the particular element of the authorisation holder's system that was found to be exposed to heightened risk factors.

**Acquitting a NCN:** An authorisation holder's response to a NCN is assessed against whether they have corrected the breach and addressed the deficiencies leading to the breach and not just simply fixed the immediate problem detected during surveillance. The issuing inspector completes the MSM system attribute table in Sky Sentinel identifying the system failure based on the authorisation holder's root cause analysis.

## 3.4 Systems and Elements

Systems-based surveillance puts the focus on the system by:

- understanding all of the elements of the system
- focusing on how the elements integrate
- determining whether the system is complete or missing key components
- determining how well the authorisation holder is managing its safety risks
- determining whether the system achieves all compliance requirements
- determining how the system and its elements interact with other systems.

The MSM is CASA's tool for understanding a system and what makes the system safe. The MSM describes what must be present in any system for that system to be safe and effective.

The aim of a common set of system and element descriptions is to be able to build up the surveillance picture over time on the same authorisation type and then to compare the data on an individual authorisation holder against all other authorisation holders within that authorisation type. Data can then be compared across all authorisation types to identify specific systems and elements that may be breaking down and the possible causes (*see the relevant technical annex*).

Taking into consideration the size and complexity of an individual authorisation holder's operation, all systems and elements must be assessed in a timely manner. As not all system risks are applicable to all authorisation holders, an inspector's judgement should be used in identifying the most appropriate system risks for which the effectiveness of an authorisation holder's control is to be assessed using the Sky Sentinel Surveillance Scoping Aid to inform this decision.



## 3.5 Types of Surveillance

### 3.5.1 Level 1 – Surveillance event

This level of surveillance is a structured, forward-planned, larger-type, surveillance event and covers:

1. Systems Audits
2. Health Checks
3. Post-authorisation Reviews.

#### 3.5.1.1 Systems Audits

A Systems Audit is an audit based on a defined scope developed to take into account the specific activities conducted by an authorisation holder ensuring their compliance with regulations and the use of effective control of risks associated with the activities surveilled.

In the majority of cases these surveillance events will be conducted by a multi-disciplinary team over multiple days.

#### 3.5.1.2 Health Checks

This type of surveillance event is a reduced version of a systems audit and is usually of a shorter duration. The scope for a Health Check is based on a mandatory set of elements and/or systems risks set annually by the SSO on the basis of identified or emerging risks. There is also capacity for an authorisation management team to include elective elements and systems risks based on the particular authorisation holder's profile or industry sector. However, these elective elements and systems risks cannot replace or impact on the surveillance team's ability to complete the set mandatory scope.

A Health Check allows CASA to focus on specified areas of an authorisation holder's activities and to determine whether there is sufficient evidence to provide CASA with confidence in the holder's ability to remain compliant and to effectively control the risks associated with its aviation activity. If a Health Check does not provide CASA with a satisfactory level of confidence in the authorisation holder's compliance status, consideration must be given to undertaking a more detailed systems audit.

#### 3.5.1.3 Post-authorisation Reviews

Once an initial authorisation has been issued, a post-authorisation review must be conducted to ensure entry control standards are being maintained. Depending on the type of authorisation issued, a post-authorisation review must be conducted within six to 15 months following the initial issue. The scope of this type of surveillance must be based on the authorisation issued.



**NOTE:** *In instances where no actual authorisation is issued by CASA, but where CASA retains an oversight obligation for the particular aviation industry sector, surveillance of these individuals or organisations may also apply to the extent that it is appropriate to do so and, where it is not inconsistent with the specific guidelines, included in the annexes relevant to these groups. In some instances, where there is no authorisation held, there may be no express legal right – other than in situations where there is a legally supported agency agreement – to conduct surveillance, issue NCNs or require compliance with those NCNs. A Post-authorisation Review (or surveillance of a similar nature) may not be applicable to this group. In all instances where surveillance is proposed in relation to these non-authorisation holders, advice should be sought from the Executive Manager, Legal Services Division prior to initiating the surveillance process.*

All Level 1 surveillance events may include the following activities:

- notification to the authorisation holder
- a structured surveillance event timetable
- an entry meeting
- regular contact with the authorisation holder representative during the surveillance event, as required
- an exit meeting.

Taking into consideration the size and complexity of an individual authorisation holder's operation, all systems and elements must be assessed in a timely manner. As not all system risks are applicable to all authorisation holders, an inspector's judgement should be used in identifying the most appropriate system risks for which the effectiveness of an authorisation holder's control is to be assessed using the Sky Sentinel Surveillance Scoping Aid to inform this decision.

#### 3.5.2 Level 2 – Surveillance event

##### 3.5.2.1 Operational Checks

This type of surveillance event relates to less formal interactions with authorisation holders. They are significantly shorter in duration, are generally compliance assessments that do not include a formal system risk assessment and are usually scheduled through the normal surveillance planning and approval process based on identified areas of concern by an authorisation management team.

Level 2 surveillance events would include activities like:

- Ramp checks
- Site inspections
- En-route checks
- Manual reviews
- Key personnel interviews.



**NOTE:** *Surveillance events not assigned through the normal planning and approval process can be initiated (Level 1 or Level 2) based on immediate safety concerns or emerging risk and may include:*

- *requests from the senior executive management group*
- *critical safety imperatives, eg volcanic ash*
- *on-site, out of scope observations eg location specific.*

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## 3.6 Authorisation Holder Performance Indicator (AHPI)

The AHPI tool is a questionnaire-based tool consisting of a number of factors. These factors are associated with organisational characteristics and performance commonly thought to affect or relate to safety performance.

The design of the tool is based on the Reason Model of accident causation, safety management systems and commonly identified risk factors, which exist at organisational and operational levels. Each factor is rated on a scale using word pictures – the most appropriate word picture determines the score to be attributed to that factor.

The tool is applicable to the majority of sectors of the aviation industry. Guidance within the tool provides context on how the tool is applied to specific industry sectors.

The Sky Sentinel tool uses authorisation holder performance indicator scores to determine CASA's oversight posture toward an authorisation holder.

As part of the acceptance of a new authorisation, the completion of an assessment using the AHPI tool is required as soon as practicable after the initial issue of the authorisation.

Where the entry control process was carried out by persons not involved in the ongoing management of the authorisation, these persons must be involved in the completion of the first AHPI.

### 3.6.1 Oversight posture

The output from the AHPI tool in Sky Sentinel determines the oversight posture which is one of the key considerations in assessing surveillance scheduling priorities.

There are three levels to the oversight posture:

- **Routine:** no specific concern with respect to this authorisation holder exists
- **Enhanced:** a general level of concern exists
- **Active:** specific concern exists to a level requiring a significant level of surveillance activity and/or other intervention strategies (such as enforcement or certificate conditions).

## 3.7 Systems Risk

### 3.7.1 System Risk Profile (SRP)

The SRP is a table of the most recent mitigated risk results for all assessed risks for an individual authorisation holder with full details of the risk assessments displayed in Sky Sentinel. When conducting an assessment of an authorisation holder, particular attention must be given to the composition of the SRP. The SRP provides a direct insight into an authorisation holder's ability to manage its systems risks.

The SRP is also represented as a numeric/colour indicator, the System Risk Indicator (SRI). The SRI shows the level of assessed mitigated risk (Extreme/High/Medium/Low) and is calculated from the ten most poorly controlled systems risks from all assessed risks in the SRP. It is displayed on the Authorisation Holder Assessment (AHA) page in Sky Sentinel as well as in other review pages.

The SRI score should be interpreted as follows:

- a red (Extreme Risk) SRI score indicates that considerable and significant system risk issues exist within the authorisation holder's systems demanding close attention
- an orange (High Risk) SRI score indicates that a number of system risks within the authorisation holder's systems are being poorly managed and require attention in the medium term
- a yellow (Medium Risk) SRI score indicates that, for the most part, the authorisation holder has control over its system risks
- a green (Low Risk) SRI score indicates that the authorisation holder has effective control over its system risks.

### 3.7.2 Systems risk history

Sky Sentinel stores the results of all system risk assessments for authorisation holders. The systems risk history for a particular authorisation holder displays a table providing the details of all systems risk assessments that have been conducted over time. The table details a description of the risk, the unmitigated and mitigated scores as well the surveillance date, surveillance lead's name and the element that aligns to the risk. Over time this information builds to provide a comprehensive picture of the authorisation holder's risk history, an important consideration in deciding whether a surveillance request should be for recommended.

### 3.8 Additional Surveillance for Elevated Oversight Postures and Heightened Risk Indications

Surveillance should be considered for all “enhanced” and is mandatory for “active” authorisation holders. This surveillance is to be targeted at the issues, concerns and occurrences that have led to the elevated oversight posture.

The following guidelines have been developed for planning this additional activity. These guidelines are general due to the variety of situations that may result in an authorisation holder being classified as either “enhanced” or “active”.

**Enhanced:** For authorisation holders classified as being in need of an “enhanced” posture, additional surveillance should be considered. Particular attention should be given to the authorisation holder’s SRP and the systems risk history results. This may consist of a Level 1 surveillance event and/or a Level 2 surveillance event targeted at those factors that have led to the elevated oversight posture classification.

Where high-scoring factors relate to system deficiencies, a systems-based Level 1 surveillance event should be considered. Where operational factors are more prominent, a Level 2 surveillance event may be more appropriate and should be carried out to gauge the effectiveness of an authorisation holder’s systems in response to these concerns.

**Active:** For authorisation holders assessed as “active”, a higher priority must be applied when scheduling such surveillance taking into account any other intervention strategies employed in response to the authorisation holder’s performance.

As an authorisation holder assessed as “active” may also be subject to enforcement action, surveillance activities must include verification that any enforcement-related condition is being met. The level and type of surveillance activity must be commensurate with these strategies (see the [Enforcement Manual](#) in relation to process or contact the Senior Adviser, Enforcement Policy and Practice or the Manager, Legal Branch).

## 4.1 Overview

### 4.1.1 Introduction

This chapter describes CASA's systems and risk-based approach to surveillance of authorisation holders and the methods for all surveillance event types which support the continuous performance monitoring process. The objective of this chapter is to ensure standardised, efficient and consistent monitoring of all authorisation holders.

### 4.1.2 Systems and risk-based surveillance

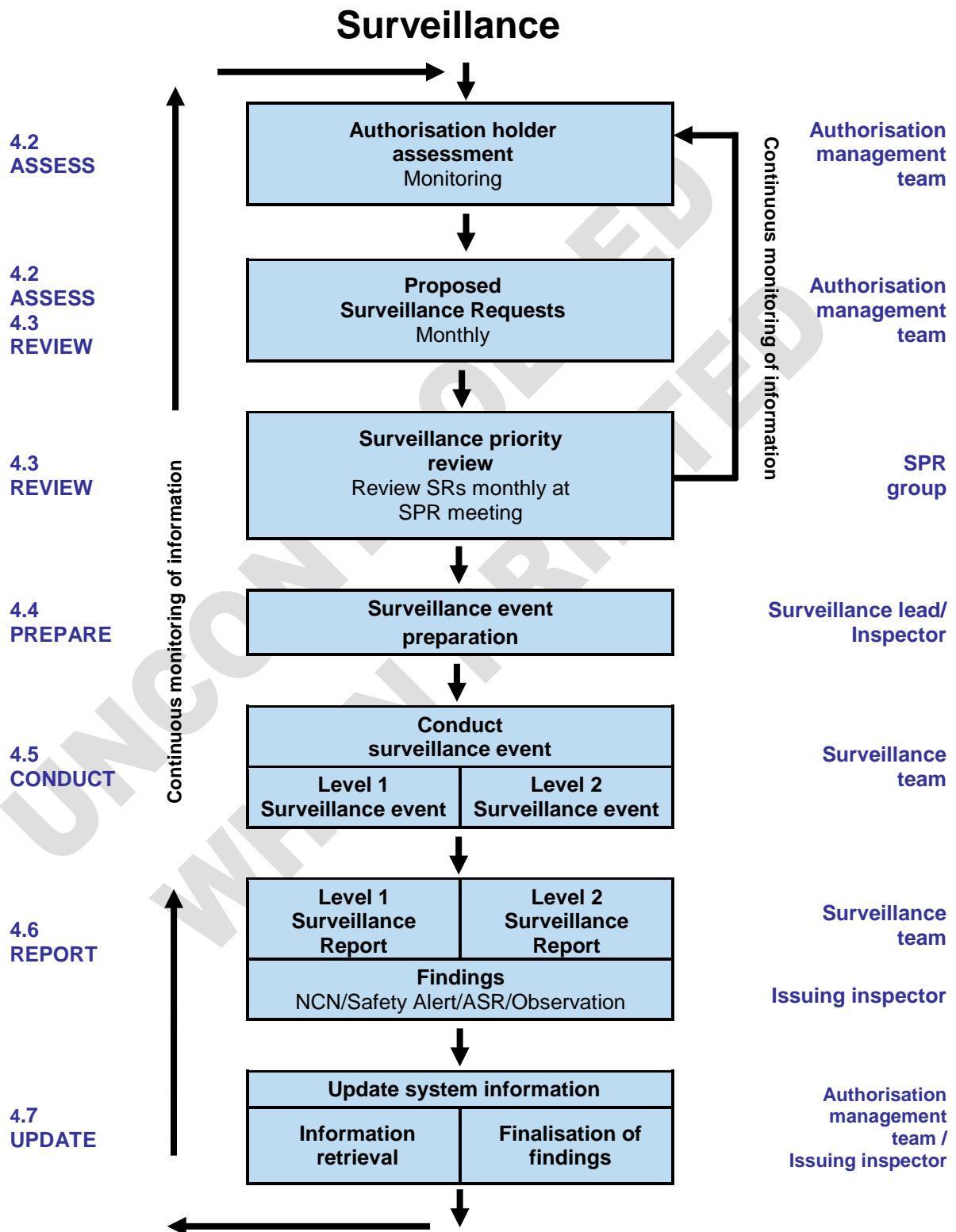
Systems and risk-based surveillance seeks to assess an authorisation holder's management system and its ability to identify and keep operational risks as low as reasonably practicable while ensuring compliance with Australian aviation legislation is maintained. Risk-based surveillance adopts a structured process and is used by CASA in its oversight of authorisation holders and prioritisation of its surveillance activities based on authorisation holders' risk profiles. It focuses on an authorisation holder's effectiveness in managing its systems risks and enables targeted surveillance of high-risk areas of an authorisation holder's systems.

Safety-related processes are assessed to determine if they are functioning in accordance with the authorisation holder's documented systems and any applicable civil aviation legislation.

The systems and risk-based surveillance approach focuses authorisation holder's attention on its safety obligations by providing a visible and understandable analysis and evaluation of the authorisation holder's systems and the safety risks that exist in these systems with specific emphasis on safety outcomes.

#### 4.1.3 Surveillance process

The diagram below provides a high-level view of the surveillance process as well as the associated chapter sections and primary responsibilities for each phase.





## 4.2 Authorisation Holder Assessment

### 4.2.1 Purpose

The assessment process assists the authorisation management team to identify where potential areas of concern may exist in an authorisation holder's activities. Surveillance actions are then proposed to examine the areas of concern.

The Authorisation Holder Assessment is an assessment of the apparent risk to safety presented by an authorisation holder and is completed by taking into account the following information, most of which is presented in the Sky Sentinel:

- oversight posture result from the AHPI tool
- authorisation holder Systems Risk Profile (SRP)
- authorisation holder systems risk history
- time since the last surveillance event, particularly the last Level 1 event
- date of the last AHPI assessment
- findings history
- intelligence relating to concerns/issues raised by the authorisation management team
- ESIR reports
- any additional information/data that may influence the apparent risk of the authorisation holder.

On completion of the assessment process, the authorisation management team makes recommendations for surveillance and safety actions in preparation for the monthly meeting of the SPR group. These recommendations are recorded in Sky Sentinel using the SR function.

### 4.2.2 Reference

The following material is applicable to the Authorisation Holder Assessment phase:



**Handbook**

*Sky Sentinel User Guide*

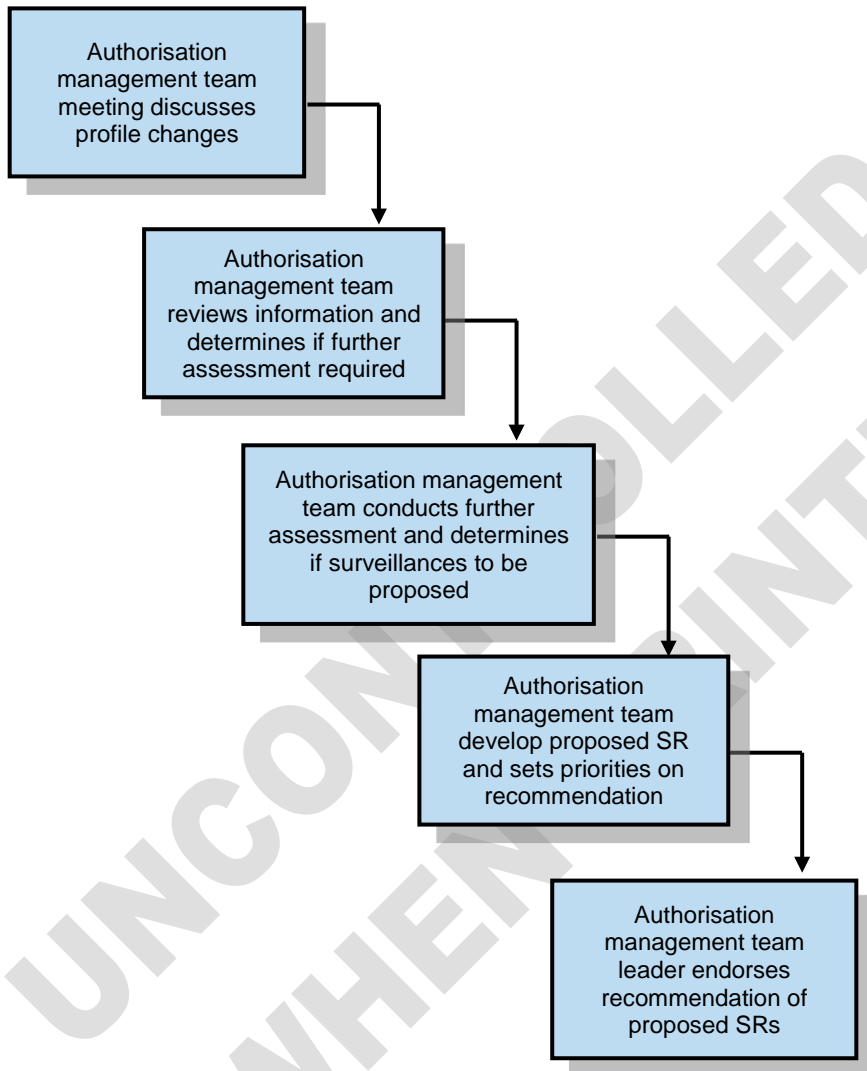
**Annex**

*Authorisation Holder Performance Indicators (refer to relevant technical annex)*

#### 4.2.3 Process

**Note:** Detailed process maps are available online on the CASA intranet.

#### Assess authorisation holder



#### 4.2.4 Type of surveillance

##### 4.2.4.1 Level 1 – Surveillance event

###### Level 1 – Surveillance event

This level of surveillance is a structured, forward-planned, larger-type, surveillance event and covers:

- Systems audits
- Health Checks
- Post-authorisation reviews.

###### Systems audits

A systems audit is an audit based on a defined scope developed to take into account the specific activities conducted by an authorisation holder ensuring their compliance with regulations and the use of effective control of risks associated with the activities surveilled. The control of risks is assessed against the systems risks associated with each system element.

While this type of surveillance event will, in many cases, be conducted by a multi-disciplinary team over multiple days, this may not always be the case as some surveillance events may be conducted by individual inspectors.

###### Health Checks

This type of surveillance event is a reduced version of a systems audit and is usually of a shorter duration. The scope for a Health Check is based on a mandatory set of elements and/or systems risks set annually by the SSO on the basis of identified or emerging risks. There is also capacity for an authorisation management team to include elective elements and/or systems risks based on the particular authorisation holder's profile or industry sector. However, these elective elements and/or systems risks cannot replace or impact on the surveillance team's ability to complete the set mandatory scope.

A Health Check allows CASA to focus on specified areas of an authorisation holder's activities and to determine whether there is sufficient evidence to provide CASA with confidence in the holder's ability to remain compliant and to effectively control the risks associated with its aviation activity. If a Health Check does not provide CASA with a satisfactory level of confidence in the authorisation holder's compliance status, consideration must be given to undertaking a more detailed systems audit.

#### Post-authorisation reviews

Once an initial authorisation has been issued, a post-authorisation review must be conducted to ensure entry control standards are being maintained. Depending on the type of authorisation issued, a post-authorisation review must be conducted within six to 15 months following the initial issue. The scope of this type of surveillance must be based on the authorisation issued.



**NOTE:** *In instances where no actual authorisation is issued by CASA, but where CASA retains an oversight obligation for the particular aviation industry sector, surveillance of these individuals or organisations may also apply to the extent that it is appropriate to do so and, where it is not inconsistent with the specific guidelines, included in the annexes relevant to these groups. In some instances, where there is no authorisation held, there may be no express legal right – other than in situations where there is a legally supported agency agreement – to conduct surveillance, issue NCNs or require compliance with those NCNs. A Post-authorisation Review (or surveillance of a similar nature) may not be applicable to this group. In all instances where surveillance is proposed in relation to these non-authorisation holders, advice should be sought from the Executive Manager, Legal Services Division prior to initiating the surveillance process.*

All Level 1 surveillance events may include the following activities:

- notification to the authorisation holder
- a structured surveillance event timetable
- an entry meeting
- regular contact with the authorisation holder representative during the surveillance event, as required
- an exit meeting.

Taking into consideration the size and complexity of an individual authorisation holder's operation, all systems and elements must be assessed in a timely manner. As not all system risks are applicable to all authorisation holders, an inspector's judgement should be used in identifying the most appropriate system risks for which the effectiveness of an authorisation holder's control is to be assessed using the Sky Sentinel Surveillance Scoping Aid to inform this decision.

#### 4.2.4.2 Level 2 – Surveillance event

##### Operational Checks

This type of surveillance event relates to less formal interactions with authorisation holders and may be in the form of checklist-based compliance and product checks of a specific section of its systems. The operational check frequently is used to verify the process in practice of the system

being assessed. They are significantly shorter in duration and are usually, but not always, scheduled through the normal surveillance planning and approval process based on identified areas of concern by an authorisation management team.

Level 2 surveillance events would include activities like:

- Ramp checks
- Site inspections
- En-route checks
- Manual reviews
- Key personnel interviews
- Requests from the Executive Management group
- Critical safety imperatives, e.g. volcanic ash
- On-site, out-of-scope observations e.g. location specific.



**NOTE:** Surveillance events not assigned through the normal planning and approval process can be initiated (Level 1 or Level 2) based on immediate safety concerns or emerging risk and may include:

- requests from the Executive Management group
- critical safety imperatives, e.g. volcanic ash
- on-site, out of scope observations e.g. location specific.

#### 4.2.5 Conduct assessment

##### 4.2.5.1 PROCESS – Conduct assessment

###### 1. Authorisation management team:

- a) Meets to discuss the current status of assigned authorisation holders (authorisation management team meeting)
- b) Discusses all available information relating to an assigned authorisation holder obtained since the last review

**Note:** All authorisation holders with an AHPI result of “Enhanced” or “Active” must be formally discussed and recorded in Sky Sentinel on a monthly basis. Authorisation holders with an AHPI result of “Routine” (green) must still be discussed on a monthly basis; however there is no requirement to record a formal discussion in Sky Sentinel against these authorisation holders. Authorisation holders with “Routine” AHPI results must still be formally discussed and recorded in Sky Sentinel at least once every six months.

For identified authorisation holders where information indicates some change has occurred or an area of concern has arisen:

- c) Considers a range of factors in deciding on whether to propose a surveillance event, including the systems risk profile and history, the time since the last Level 1 surveillance event, the date the last AHPI was conducted, the oversight posture assessment, the findings history and any additional relevant surveillance intelligence
- d) If required, conducts a new oversight posture assessment on the authorisation holder using the AHPI tool in Sky Sentinel (if relevant to the particular authorisation type being assessed), evaluating each factor individually against its associated word pictures supported by information collected in relation to the authorisation holder

**Note:** *In completing the oversight posture assessment, a conservative approach should be taken with assessors erring on the higher side in scoring if any uncertainty exists. Additionally, in circumstances where assessors do not have sufficient information about a particular aspect of an authorisation holder's operation, the highest score should be assigned to the factor. Team members should record who undertook the assessment by noting this in the 'comments' field in Sky Sentinel.*

- e) Determines if a surveillance event is to be proposed for the authorisation holder based on all considerations
- f) Produces a SR within Sky Sentinel for identified authorisation holders prior to the monthly SPR meeting

**Note:** *A SR can be proposed without conducting an oversight posture assessment using the AHPI tool. While it is not a requirement that an oversight posture assessment be completed before proposing a surveillance event, it may assist in identifying the surveillance areas of concern.*

- g) Enters proposed details in the SR of resources to be applied, scheduled surveillance date(s), including time for writing reports, surveillance level as well as comments on the surveillance scope
- h) Contributes to the prioritisation process in deciding on the final recommendations on SRs to be proposed to the SPR group for approval.

#### 2. Authorisation management team leader:

- a) Endorses the authorisation management team's recommendations on proposing SRs, including the appropriateness of the proposed scope and confirms resource availability by noting Sky Sentinel accordingly
- b) Ensures justifications for decisions made on all proposed SRs (whether recommended or not recommended) are captured in Sky Sentinel
- c) Ensures recommended SRs are available in Sky Sentinel at least three days prior to the scheduled monthly SPR meeting
- d) Approves Level 2 surveillance events
- e) Reports on all Level 2 surveillance events conducted in the previous period and approved Level 2 surveillance events for tabling at the SPR meeting.

**Note:** *Consideration should be given to seeking assistance from other technical subject matter experts (SMEs) in conducting the assessment.*

#### 4.2.5.2 GUIDANCE – Conduct assessment

This assessment process is the heart of the authorisation management team system. It is an ongoing process that occurs through the management/oversight of an authorisation holder or like groups of authorisation holders and involves more than just matching information obtained to a word picture.

The assessment phase of the authorisation holder review process identifies potential underlying systemic deficiencies within the authorisation holder's systems and subsystems and specifies proposed actions where necessary.

#### Authorisation management team meeting outputs

Authorisation management teams meet with the following outputs being the primary focus of these meetings:

- **Discuss current status**

The authorisation management team, as a group, discuss the assigned authorisation holders' current status focusing on any known changes to an authorisation holder's operation.

All authorisation holders with an AHPI result of "Enhanced" or "Active" must be formally discussed and recorded in Sky Sentinel on a monthly basis. Authorisation holders with an AHPI result of "Routine" (green) must still be discussed on a monthly basis, however there is no requirement to record a formal discussion in Sky Sentinel against these authorisation holders. Authorisation holders with "Routine" AHPI results must still be formally discussed and recorded in Sky Sentinel at least once every six months.

Information relevant to surveillance considerations of an authorisation holder should be recorded in the "Log a General Comment" field on the *Authorisation Holder – Current Results* page in Sky Sentinel so they can be viewed by the authorisation management team during the monthly discussion.

- **Complete an oversight posture assessment using AHPI tool**

*For authorisation holders where an operational change has been identified and an oversight posture can be applied to the relevant authorisation type, an oversight posture assessment using the AHPI tool is completed within the meeting (if not completed prior to the meeting) to assess if the authorisation holder's overall profile has changed and whether a SR should be proposed. This allows the entire team to contribute to the assessment. In completing the oversight posture assessment, a conservative approach should be taken with assessors erring on the higher side in scoring if any uncertainty exists. Additionally, in circumstances where assessors do not have sufficient information about a particular aspect of an authorisation holder's operation, the highest score should be assigned to the factor.*

Oversight posture assessments using the AHPI tool are completed individually for each authorisation holder being considered. Authorisation management team members may do this at one sitting, or return more than once to review previously gathered data and the definitions of the factors within the tool. (See *Assessment process – Evaluating factors using word pictures within AHPI tool* section below for more detail.)

**D |** *Note: To ensure all authorisation holders are appropriately monitored, an oversight posture assessment using the AHPI tool must be completed **at least every six months** for each authorisation holder.*

#### Assessment considerations

The factors that could be considered in assessing an authorisation holder are extremely broad. While this consideration will be left to the professional judgement of authorisation management teams, some examples of factors that could be included in an assessment are:

- triggers requiring additional assessment, e.g. intelligence of concern regarding the performance of the authorisation holder
- inadequately mitigated authorisation holder systems risks
- previous surveillance and entry control history, such as NCNs, Observations, entry control changes to personnel, routes and aircraft and refusals to issue certificates
- other safety information, such as assigned surveillance event team member comments
- organisational changes
- current enforcement action
- conditions listed on or against the authorisation
- any previous or planned Regulatory Services tasks
- variation to authorisation holder's permission(s) requested
- change of financial situation, ownership or other significant changes.

#### Assessment process – evaluating factors using word pictures within AHPI tool

To assist in making an informed decision on whether a surveillance event should be proposed, the authorisation management team must evaluate each factor against a set of word pictures using the AHPI tool within Sky Sentinel to determine the oversight posture. The assessment criteria for each factor are included in the relevant technical annex.

When evaluating an authorisation holder, the authorisation management team considers the word picture that best describes the authorisation holder's current status in relation to the specific factor being assessed.

***Note:** The evaluation of the oversight posture must be conducted as a team to remove any possible subjectivity in the assessment.*

Completed oversight posture results are compared to pre-determined elevated oversight posture profiles, which have been developed to allow quick determination of the posture to be applied. Details of the oversight posture and history can be found on the Authorisation Holder Assessment History page in Sky Sentinel.

**D |**





**Note:** *Authorisation holder assessment is a continuous process. The process remains constantly active and may also initiate the SPR process. The initiation of the authorisation holder assessment is routinely triggered by completion of an update to the authorisation holder's profile information and/or information relating to the aviation system in which the authorisation holder operates.*

#### Assessment of Systems Risk Profile (SRP)

The SRP is a table of the most recent mitigated risk results for all assessed risks for an individual authorisation holder with full details of the risk assessments displayed in Sky Sentinel. When conducting an assessment of an authorisation holder, particular attention must be given to the composition of the SRP. The SRP provides a direct insight into an authorisation holder's ability to manage its systems risks.

The SRP is also represented as a numeric/colour indicator, the System Risk Indicator (SRI). The SRI shows the level of assessed mitigated risk (Extreme/High/Medium/Low) and is calculated from the ten most poorly controlled systems risks from all assessed risks in the SRP. It is displayed on the Authorisation Holder Assessment (AHA) page in Sky Sentinel as well as in other review pages.

The SRI score should be interpreted as follows:

- a red (Extreme Risk) SRI score indicates that considerable and significant system risk issues exist within the authorisation holder's systems demanding close attention
- an orange (High Risk) SRI score indicates that a number of system risks within the authorisation holder's systems are being poorly managed and require attention in the medium term
- a yellow (Medium Risk) SRI score indicates that, for the most part, the authorisation holder has control over its system risks
- a green (Low Risk) SRI score indicates that the authorisation holder has effective control over its system risks.



**Note:** *It should be kept in mind that the SRI is an indicator only and, as such, when an assessment is being done the authorisation holder's SRP must be referred to. This ensures a more holistic picture of risk control effectiveness in relation to the systems risks being assessed.*

#### Assessment of systems risk history

Sky Sentinel stores the results of all system risk assessments for an authorisation holder. The systems risk history for a particular authorisation holder displays a table providing the details of all systems risk assessments that have been conducted over time. The table details a description of the risk, the unmitigated and mitigated scores as well the surveillance date, surveillance lead's name and the element that aligns to the risk. Over time this information builds to provide a comprehensive picture of the authorisation holder's risk history, an important consideration in deciding whether a surveillance request should be for recommended.

#### Assessment of time since last Level 1 surveillance event

Over time, without physically verified evidence derived from a comprehensive Level 1 surveillance, CASA's ability to determine if an authorisation holder is able to maintain an acceptable level of compliance and maintain robust systems that are capable of combatting identified and latent safety risks progressively diminishes. As such, the time since the last Level 1 surveillance event is an important consideration.

#### Surveillance decision

When an authorisation management team is considering their surveillance proposals they must include all available information, not only the oversight posture results. The following additional factors must also be considered:

- open Non-Compliance Notices
- System Risk Profile (SRP), i.e. current systems risk results in Sky Sentinel
- systems risk history in Sky Sentinel
- time since the last Level 1 and Level 2 surveillance events
- date of the last oversight posture assessment using the AHPI tool
- the oversight posture history details (refer to the Authorisation Assessment Performance Indicator History page in Sky Sentinel)
- findings history.



**NOTE:** *In weighing up these considerations in deciding whether a surveillance event should be proposed for a particular authorisation holder, there is an expectation that the professional judgement of authorisation management teams is applied on a case-by-case basis.*

*It is also important to remember that the "oversight posture result" is likely to be more recent as it is assessed at least every six months, whereas, the "Systems Risk Indicator", which is taken from the "Systems Risk Profile", is more static, as a change to this score is driven solely by Level 1 surveillance events which will usually exceed the six monthly timeframe.*

#### Propose a SR

Following the authorisation management team's discussion of all assigned authorisation holders and, where required, an assessment completed for authorisation holders that have experienced a change to its operation, a decision is made on what, if any, surveillance should be proposed over the next reporting period. If there is agreement within the authorisation management team (endorsed by the authorisation management team leader) that a surveillance event is justified, a SR is completed within Sky Sentinel.

A SR is specific to an activity or business, e.g. operational check – en-route inspection of the authorisation holder.

An authorisation management team member should not wait until the formal team meetings to propose a surveillance event, but should complete a SR as soon as the potential concern is identified.

A SR includes details of the surveillance scope, proposed dates and timeframes (allowing sufficient time to prepare for the surveillance event and write-up the Surveillance Report), the make-up of the surveillance team to be assigned and the proposed surveillance level with appropriate comments to justify the surveillance event.

**NOTE:** *If a Level 1 surveillance event is to be proposed, the scope of the proposed event must be defined in Sky Sentinel by selecting the appropriate systems and elements as well as by specifying the system risks to be covered. Use the Sky Sentinel Surveillance Scoping Aid as a reference to show the system risks for which the effectiveness of an authorisation holder's control has been assessed. Additionally, taking into consideration the size and complexity of an individual authorisation holder's operation, all systems and elements must be assessed in a timely manner.*

Depending on individual circumstances relating to the current assessment and the results of previous surveillance events, an authorisation management team may propose either a Level 1 or Level 2 surveillance.

When compiling a proposed SR, particularly in assigning surveillance team members, it should be kept in mind that a surveillance event may be conducted by a sole inspector who has the appropriate qualifications, technical background and knowledge. In addition, where a SR requires SME input from outside the authorisation management team, i.e. other technical specialisations or disciplines that may assist or able to provide support, e.g. Cabin Safety, Dangerous Goods, Alcohol and Other Drugs, Ground Operations, Airways and Aerodromes and/or Manufacturing, the requirement for this input must be discussed with the team leader/manager of the relevant technical area prior to the SR being recommended to the SPR group.



**Note:** *If an urgent need for surveillance arises for a Level 1 surveillance event outside the normal planning and review cycle it can be authorised by the Controlling Office Manager without going through the SPR group. If resourcing the urgent surveillance becomes an issue a request for support from other offices should be sent via the Controlling Office Manager (See Section 4.3.6 – Prioritisation of Surveillance Activities).*

#### Prioritisation, review and recommendation

The SRs proposed by an authorisation management team will accumulate over the assessment period and will need to be consolidated and prioritised prior to the monthly SPR group meeting.

As such, a prioritisation of proposed SRs should be conducted, ideally during the last authorisation management team meeting prior to the monthly SPR group meeting. This prioritisation should be considered by the authorisation management team as a group. By undertaking this process as a

team all members are able to provide input into the decision-making process ensuring all SRs recommended to the monthly SPR group meeting for approval are justified and achievable. These SRs will be known as recommended SRs pending approval at the monthly SPR meeting.

During the prioritisation process all proposed surveillance must be considered and any decision not to recommend a SR that had been previously proposed must have the justification for the decision recorded in Sky Sentinel with the SR to be again reviewed during the following month, if required.

Following completion of this prioritisation process the authorisation management team leader has responsibility for marking all recommended SRs in Sky Sentinel formally endorsing the authorisation management team's recommendation and confirming that appropriate resources are available to undertake all proposed surveillance events.

This prioritisation, review and recommendation process must be completed no later than three working days prior to the scheduled SPR meeting.

Level 2 surveillance events can be approved by the authorisation management team leader at any time.

A summary schedule of SRs is produced in Sky Sentinel providing the SPR group a list of the Surveillance Requests awaiting consideration detailing the surveillance lead, the surveillance start date and scope for use in the surveillance priority review and approval process.

**Note:** The Sky Sentinel summary schedule page – Surveillance Requests Awaiting Approval – contains all pending Surveillance Requests, whether recommended or not recommended by the authorisation management team leader. The non-recommended Surveillance Requests must contain an explanation (in the comments section of Sky Sentinel) as to the reason the request has not been recommended. The SPR group may override this recommendation and decide to proceed with the surveillance event.

#### 4.2.6 Accountabilities – Authorisation holder assessment

Position	Accountabilities
Authorisation management team leader	<ul style="list-style-type: none"><li>• Ensure the relevant assigned authorisation holders are discussed on a monthly basis and those where a change is identified, further assessment is undertaken including updating the oversight posture using the AHPI tool</li><li>• Assess proposed SR</li><li>• Confirm all resourcing, scheduling and scoping issues for recommended proposed SRs</li><li>• Ensure all proposed Level 1 SRs are reviewed and recommended in Sky Sentinel at least three working days prior to the monthly SPR meeting</li><li>• Approve Level 2 surveillance events</li></ul>

Position	Accountabilities
	<ul style="list-style-type: none"><li>• Report from Sky Sentinel all non-recommended SRs and approved Level 2 surveillance events for tabling at the SPR meeting</li><li>• Advise authorisation management team of the outcome of the proposed SRs</li></ul>
<b>Authorisation management team</b>	<ul style="list-style-type: none"><li>• Participate in the regular meetings</li><li>• Collect all relevant information in regards to the authorisation holders being assessed</li><li>• Actively participate in team discussions of assigned authorisation holders</li><li>• Contribute technical expertise in applying the AHPI tool for assigned authorisation holders</li><li>• Participate in the development of proposed SR for consideration at the monthly SPR meeting</li><li>• Input details of estimated resources, schedule and scope into the SR development process</li><li>• Actively participate in the prioritisation process in the authorisation management recommendations for surveillance to the SPR group</li></ul>

## 4.3 Surveillance Priority Review

### 4.3.1 Purpose

This section provides an overview of the SPR process. The SPR is the management level review of the SRs and the coordinated planning and tasking of surveillance events. The function of the SPR group is to approve or not approve SRs. The group also reviews the planned versus achieved surveillance from the previous month and discusses the management of open findings. The SPR meeting is chaired by the Controlling Office Manager and must include all authorisation management team leaders or representatives, appropriate team members and, where required, subject matter experts (SMEs) including those from disciplines outside the core authorisation management team.

### 4.3.2 References

The following documents are applicable to the SPR phase:

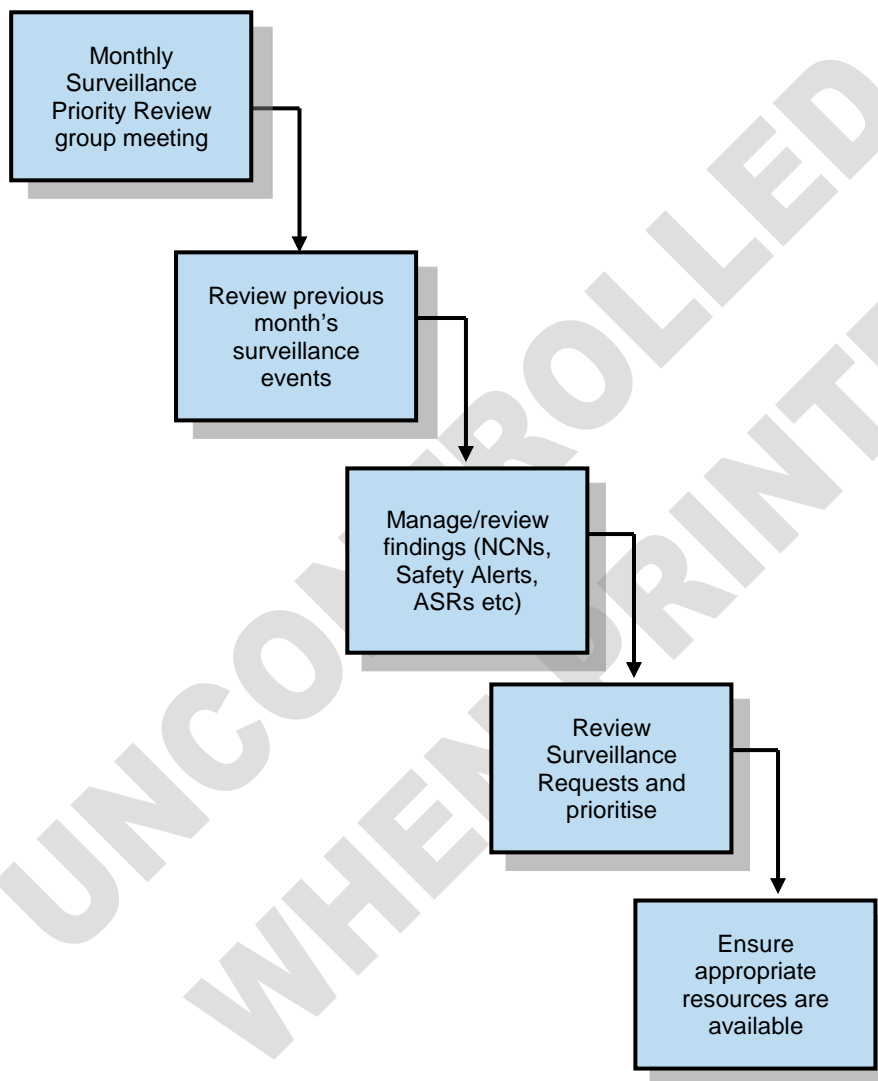


**Handbook** *Sky Sentinel User Guide*

#### 4.3.3 Process

**Note:** Detailed process maps are available online on the CASA intranet.

#### Review Surveillance Requests



#### 4.3.4 Surveillance Priority Review Group

The SPR group meets monthly and manages the surveillance planning process and reviews surveillance activities as well as directs authorisation management teams and/or individual officers to carry out surveillance. It is also responsible for reviewing SRs provided by each authorisation management team and/or individual officers.

The SPR group also ensures that appropriate resources are available to conduct the approved surveillance and review the planned versus achieved results of the previous month's approved surveillance activity.

The group must also review and discuss the current status of all open NCNs to ensure they are being effectively managed.

##### 4.3.4.1 SPR group membership

The SPR group is appointed and chaired by the Controlling Office Manager and must include:

- all authorisation management team leaders
- invited team members
- subject matter experts (where required).

**Note:** Any absence from the group must be backfilled by an appropriate replacement.

Where necessary a subject matter expert (e.g. Alcohol and Other Drugs, Dangerous Goods Inspector, Performance Engineer or Cabin Safety Inspector) may also be requested to temporarily join the SPR group by the Controlling Office Manager to assist in the assessment of SRs.

##### 4.3.4.2 SPR group coordination and communication

Given the likelihood of periods of extended travel by individual inspectors, the controlling office SPR group must decide how the team is to communicate and coordinate the activities to ensure continuity.

##### 4.3.4.3 SPR meetings

The primary activities of the SPR meeting are detailed as follows:

- monitor approved surveillance events from the previous month, tracking the achieved versus planned
- review outstanding surveillance findings – NCNs, Safety Alerts, Observations etc.
- evaluate surveillance recommendations from a whole-of-office perspective, recording decisions about SRs in Sky Sentinel as approved or not approved.



#### 4.3.4.4 *SPR meeting chair*

The Controlling Office Manager acts as the SPR meeting chair. In periods of absence, the Controlling Office Manager must appoint an alternative chairperson to act in this role. The chair is responsible for managing the oversight of authorisation management teams and ensuring a comprehensive review of SRs is undertaken by the SPR group.

#### 4.3.5 SR review process

##### 4.3.5.1 *PROCESS – Review of SR*

###### 1. **SPR group:**

- a) Reviews completed surveillance events for the previous month
- b) Reviews and discusses management of open findings, i.e. NCNs, Safety Alerts, ASRs etc
- c) Reviews the SR identifying concerns/deficiencies about the authorisation holder
- d) Considers authorisation management team recommendations on the proposed surveillance activity
- e) Approves or does not approve SRs for the next period, noting Sky Sentinel accordingly, with approval or reasons for not approving
- f) Records all decisions for future reference in Sky Sentinel as well as in TRIM including any minutes taken and the summary reports of non-recommended and non-approved SRs.

###### 2. **Authorisation management team leader:**

- a) Reports on all Level 2 surveillance events conducted in the previous period
- b) Expands on, or comments on, as required, particular NCNs, Observation and SRs etc, to the SPR group. (Reports can be generated at any time from Sky Sentinel to determine overdue NCNs.)

##### 4.3.5.2 *GUIDANCE – Review of SR*

This process begins when the authorisation management team develops the proposed SRs for the SPR group in Sky Sentinel. This process continues throughout the year as changes occur within an authorisation holder's activity.

#### **Review of a SR**

The SPR group accesses the SR for each authorisation holder via Sky Sentinel. The SR contains recommendations from the authorisation management team regarding proposed surveillance activity of an authorisation holder (scope). The SPR group will also consider any additional

intelligence or requests given from the Executive and/or the SSO. As part of this review, consideration is taken of the previous month's surveillance events conducted, and approved Level 2 surveillance events for the coming period.

#### Approval of a SR

If the SPR group supports the conclusions contained in the SR, the SR is approved in Sky Sentinel and a notification email is sent to the surveillance team. The authorisation management team leader is responsible for notifying the applicable team members that the SR has been reviewed and accepted via Sky Sentinel.

#### Non-approval of a SR

If the SPR group does not support the recommendations contained in the SR the decision is noted accordingly in Sky Sentinel. Instructions will then be issued to the authorisation management team leader to review specific information and provide an amended SR by a nominated date. The authorisation management team leader then notifies team members that the SR has been reviewed and has not been accepted.

Examples of why a SR may not be approved could include:

- higher priorities within the office
- other tasks are directed
- deficiencies in the SR
- insufficient information
- unsupported conclusions
- new intelligence received that needs to be considered.

#### 4.3.6 Prioritisation of surveillance activities

##### 4.3.6.1 PROCESS – Prioritisation of surveillance activities

- 1. Authorisation management team:** Considers all available information and conducts an oversight posture assessment using the AHPI tool if information to hand indicates an authorisation holder is experiencing change or if potential issues are identified.
- 2. Authorisation management team leader or Controlling Office Manager:** Immediately acts on the identified potential issues and the associated risks.
- 3. SPR group:**
  - a) Determines if any surveillance reprioritisation is necessary when oversight or external information identifies concerns
  - b) Considers using alternative resources to assist in surveillance activities.

#### 4.3.6.2 GUIDANCE – Prioritisation of surveillance activities

An authorisation management team must obtain and continually monitor information for their assigned authorisation holders, i.e. experiencing growth, financial distress, personnel reductions, labour unrest, system risk data and other organisational changes or challenges. When a potential safety concern is identified the Controlling Office Manager or authorisation management team leader should consider conducting an oversight posture assessment using the AHPI tool.

If identified issues and associated risks require a surveillance event to be conducted before the SPR meeting, the Controlling Office Manager is responsible for approving or not approving the proposed surveillance event. Any approved activity is to be reported and recorded during the subsequent monthly SPR meeting.

If surveillance reprioritising is appropriate to focus additional resources in an area of concern, the authorisation management team must determine which risks within the authorisation holder's operation are related to the area of concern. The SPR group can reprioritise oversight for the entire authorisation holder's operation or for selected systems factors or indicators (i.e. either the surveillance timeline or the content/elements may change).

Consideration of entry control changes can also be a reason for reprioritisation of the surveillance plan, i.e. postponement of a surveillance event due to assessment of a variation request.

If an urgent surveillance event cannot be conducted due to resource limitations, a request for support from other offices should be sent via the Controlling Office Manager.

#### 4.3.7 Surveillance priority review reporting

Surveillance priority review reporting for the management of authorisation holders is generated in Sky Sentinel using information from approved SRs and findings pages. This reporting information can be reviewed by the SPR group on a monthly basis at the SPR meeting or at any time.

The reporting consolidates all proposed surveillance events allowing for a clear understanding of resource commitments in a dynamic format. This reporting recognises the need for authorisation management teams to conduct ongoing intelligence reviews throughout the year on significant changes to the authorisation holder's operation to determine if surveillance activities need to be reprioritised and make those recommendations through a SR.

To ensure the usefulness of this reporting information as a planning tool, when entering information into Sky Sentinel, include the assigned personnel, scope and proposed dates for the surveillance event.



**NOTE:** See the *Sky Sentinel User Guide* for details on scheduling, viewing and editing surveillance events using Sky Sentinel.

#### 4.3.8 Accountabilities – Surveillance Priority Review

Position	Accountabilities
<b>Controlling Office Manager</b>	<b>Ensure:</b> <ul style="list-style-type: none"> <li>• Authorisation management teams provide SRs to the SPR group on a monthly basis</li> <li>• SPR group members act in accordance with the provisions of this manual</li> <li>• SPR group members attend meetings as a matter of priority</li> <li>• Provisions are in place to enable the SPR group to operate during the absence of SPR group core members</li> <li>• Recommendations in SRs are accepted or rejected</li> <li>• Other recommended tasks, e.g. requests from Senior Management Group and SSO, are considered in SPR meetings</li> <li>• Review planned versus achieved surveillance</li> <li>• Manage open NCNs</li> </ul>
<b>SPR Group Members</b>	<b>Ensure:</b> <ul style="list-style-type: none"> <li>• All meetings are attended as a matter of priority</li> <li>• Actions are in accordance with the provisions of this manual</li> <li>• A suitably qualified person is appointed to act in the role during periods of absence</li> </ul>
<b>Authorisation management team leader</b>	<b>Ensure:</b> <ul style="list-style-type: none"> <li>• SR is provided to the SPR group prior to all SPR meetings (at least 3 working days)</li> <li>• Feedback is provided to authorisation management team members regarding the status of the SR</li> <li>• Actions are in accordance with the provisions of this manual, the SPR group and authorisation management team procedures</li> </ul>
<b>Technical or Nominated Coordinator</b>	<b>Ensure:</b> <ul style="list-style-type: none"> <li>• Minutes are recorded, distributed and filed for each SPR meeting</li> <li>• Relevant files are maintained</li> </ul>

## 4.4 Surveillance Event Preparation

### 4.4.1 Purpose

This section describes the procedures for the development of a structured surveillance event plan for an authorisation holder, scoped in accordance with SPR group direction.

The requirements will vary according to the particular surveillance event type, the outputs of the surveillance priority review process and the availability of necessary resources. This process also includes, where appropriate, coordination of the intended surveillance with the authorisation holder.

Thorough preparation before a surveillance event will:

- establish the basis for conducting a successful surveillance event
- confirm surveillance event scope
- develop a surveillance worksheet
- define and plan surveillance team activities
- provide a defined structure, including timing, to enable the surveillance team to meet its objectives.

### 4.4.2 References

The following material is applicable to the Surveillance Event Preparation phase:



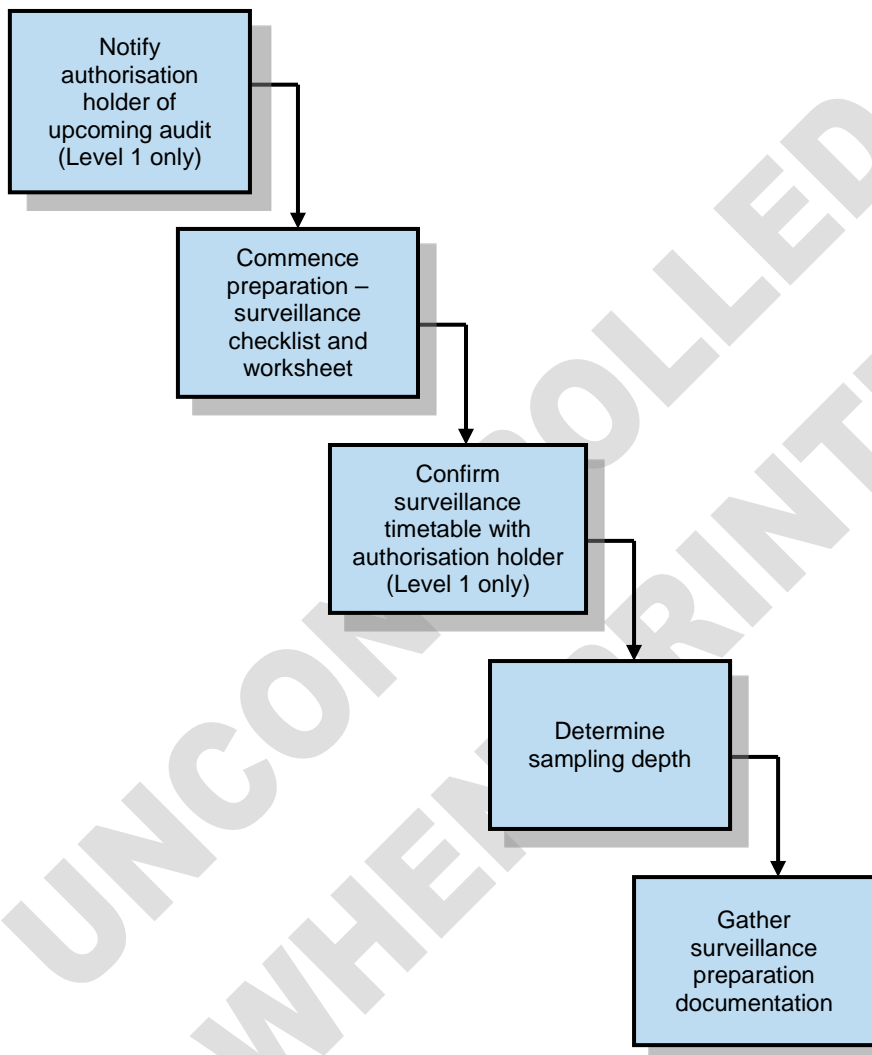
<b>Handbook</b>	<i>Sky Sentinel User Guide</i>
<b>Reports</b>	<i>Systems &amp; Elements</i> (refer to relevant technical annex) Previous surveillance reports Authorisation holder documentation
<b>Forms</b>	<i>Form 1189 – Surveillance Planning and Scoping form</i> <i>Form 1290 – Surveillance Event Timetable</i> <i>Form 1297 – Surveillance Checklist*</i> <i>Form 1304 – Surveillance Notification Letter*</i> <i>Form 1308 – Surveillance Worksheet*</i>

\* **Generated in Sky Sentinel**

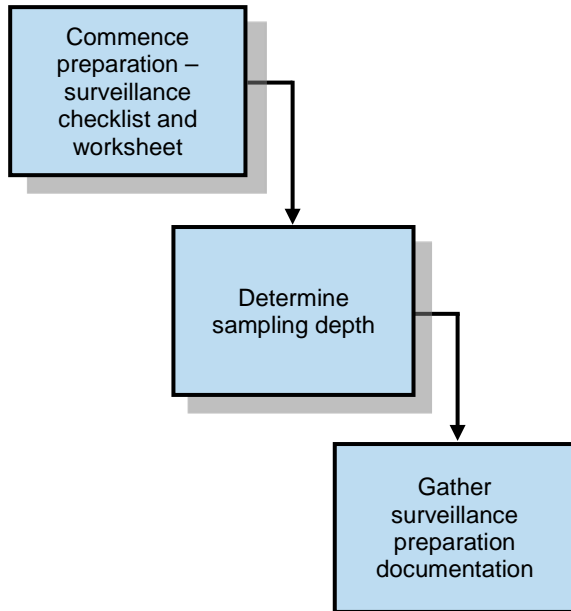
#### 4.4.3 Process

**Note:** Detailed process maps are available online on the CASA intranet.

#### Prepare for Level 1 surveillance event



**Prepare for Level 2 surveillance event**



#### 4.4.4 Surveillance preparation

##### 4.4.4.1 PROCESS – Prepare for Level 1 surveillance event

###### 1. Surveillance lead or inspector:

- a) Forwards *Notification of Surveillance Letter* (Form 1304) to the authorisation holder at least one month prior to the scheduled surveillance event (Level 1 only)

**Note:** While one month's notice should be given to the authorisation holder whenever possible, if circumstances do not allow this notification period, the notification period may be reduced as appropriate with the authorisation management team leader's approval.

- b) Prepares a *Surveillance Checklist* (Form 1297)
- c) Develops a *Surveillance Worksheet* (Form 1308) capturing all relevant information, whether it formed part of the original surveillance scoping or not
- d) Assigns elements/systems risks to be assessed
- e) Determines the depth of sampling required to verify each system.

###### 2. Data entry staff/Technical administration staff: May provide reports and assistance to support the preparation.

##### 4.4.4.2 GUIDANCE – Prepare for Level 1 surveillance event

Surveillance event preparation would generally commence at least one month prior to the planned surveillance, with notification of the surveillance event to the authorisation holder. This notification period may be reduced as appropriate with the authorisation management team leader's approval.

Preparation may occur during team briefings where the entry meeting agenda is set and the surveillance event scope is reviewed or, in the case of smaller organisational surveillance, an individual inspector may prepare without holding formal meetings. Data entry/technical administration staff may provide reports and assistance to support the preparation process.

The *Surveillance Checklist* aids in preparing for a surveillance event. The surveillance lead is responsible for ensuring all items on the checklist have been completed as applicable to the surveillance event type.

The *Surveillance Worksheet* is developed during preparation and is used to assist the inspector in conducting the surveillance. It contains the key questions needed to be asked in relation to the systems risks scheduled for assessment and a location to record the associated evidence and guidance material. All relevant information, whether it formed part of the original surveillance event scoping or not, should be recorded on the worksheet.

To develop a *Surveillance Worksheet*, the inspector will need to review a number of documents such as the authorisation holder's systems risk history (Sky Sentinel), organisational policy and procedures manuals and identify specific areas and risks to be assessed or reviewed as identified in the *Surveillance Checklist*. The *Surveillance Worksheet* is used to note areas of potential system vulnerability, lists the systems risks key questions required to ensure the risks are assessed correctly and may be used in conjunction with the applicable entry control checklists.



The scope and depth of each surveillance event will vary depending on the information, data and history known about the authorisation holder (See Form 1189 – [Surveillance Planning and Scoping form](#)).

During the preparation stage inspectors must create worksheets containing the systems risks assigned to them with sufficient key questions to ensure that evidence is obtained to enable a reliable assessment of the effectiveness of the controls mitigating those systems risks. Sky Sentinel contains a library of questions related to systems risks from which the inspector is able to select. Sky Sentinel also provides the ability to create and store questions written by the inspector whenever there are no appropriate questions available to be selected in the library.

During this stage the surveillance lead and inspectors should determine the depth of sampling required to verify each system. For example, where history indicates an authorisation holder has adequate systems and sound safety risk control, a small sampling may be sufficient to confirm the situation has not changed. However, where history indicates recurring problems with a system, or poor safety risk control, a greater level of sampling would be appropriate.

#### 4.4.4.3 PROCESS – Prepare for Level 2 surveillance event

**Surveillance lead or inspector:**

- a) Prepares a [Surveillance Checklist \(Form 1297\)](#)
- b) Develops a [Surveillance Worksheet \(Form 1308\)](#) capturing all relevant information, whether it formed part of the original surveillance scoping or not
- c) Determines the depth of sampling required to verify each system
- d) Gather any relevant documentation needed to support the surveillance event.

#### 4.4.4.4 GUIDANCE – Prepare for Level 2 surveillance event

A Level 2 surveillance event is typically a less comprehensive and shorter in duration than a Level 1 event. Prior notification to the authorisation holder is not normally required and will usually only involve an individual inspector. However, the inspector must still prepare a [Surveillance Checklist](#) ensuring all items on the checklist have been completed as applicable to the particular surveillance event type.

The [Surveillance Worksheet](#) may also be used, as guidance material only, to assist the inspector in conducting the surveillance. All relevant information, whether included in the original surveillance event scoping or not, should be recorded on the worksheet.

To develop a [Surveillance Worksheet](#), the inspector will need to review a number of documents such as authorisation holder organisational policy and procedures manuals and identify specific areas to be assessed or reviewed as identified in the [Surveillance Checklist](#). The [Surveillance Worksheet](#) is used to note areas of potential system vulnerability and may be used in conjunction with the applicable entry control checklists.

Systems risks are not assessed during Level 2 surveillance events.

The scope and depth of each surveillance event will vary depending on the information, data and history known about the authorisation holder (Form 1189 – *Surveillance Planning and Scoping form*).

#### 4.4.5 Accountabilities – Surveillance event preparation

Position	Accountabilities
<b>Controlling Office Manager</b>	<ul style="list-style-type: none"><li>• Ensure adequate resources are provided for preparation and, ultimately, for the conduct of the surveillance event</li></ul>
<b>Authorisation management team leader</b>	<ul style="list-style-type: none"><li>• Ensure adequate preparation is carried out by surveillance teams</li><li>• Provide assistance and guidance in the preparation phase</li></ul>
<b>Surveillance lead</b>	<ul style="list-style-type: none"><li>• Ensure surveillance preparation is carried out by the surveillance team and assist surveillance team members where necessary</li><li>• Ensure the surveillance team has the necessary surveillance documentation</li></ul>
<b>Surveillance team member</b>	<ul style="list-style-type: none"><li>• Prepare for the surveillance event</li></ul>

## 4.5 Conduct Surveillance Event

### 4.5.1 Purpose

This section describes the process for assuring the level of the authorisation holder's compliance and for Level 1 surveillance events, its ability to control its safety risks within the scope of the surveillance event.

During a Level 1 surveillance event, an authorisation holder's systems, safety risk control and processes will be critically examined. Evidence is gathered to verify compliance with Civil Aviation legislation and assess the level of control the authorisation holder exercises over its operational safety risks. The effectiveness of authorisation holder's systems will be assessed using a variety of surveillance techniques available to surveillance team members, e.g. documentation review, control effectiveness process, sampling, staff interviews and observation.

During a Level 2 surveillance event, an authorisation holder's processes will be critically examined. Evidence is gathered to verify compliance with Civil Aviation legislation. The effectiveness of authorisation holder's processes will be assessed using a variety of surveillance techniques available to surveillance team members, e.g. documentation review, process sampling using appropriate checklists, staff interviews and observations.

This procedure also describes how to conduct the on-site element of a surveillance event.

### 4.5.2 References

The following materials are applicable to the Conduct Surveillance Event phase:



#### Handbook Manuals

*Sky Sentinel User Guide*  
*Enforcement Manual – Chapter 13*  
*Enforcement Manual – Chapter 14*

#### Forms

*Form 1288 – Surveillance Technical Discipline Summary Form\**  
*Form 1289 – Surveillance Event Record of Conversation\**  
*Form 1290 – Surveillance Event Timetable*  
*Form 1293 – Entry Meeting Agenda Form\**  
*Form 1294 – Entry Meeting Attendance Form\**  
*Form 1295 – Exit Meeting Agenda Form\**  
*Form 1296 – Exit Meeting Attendance Form\**  
*Form 1301 – Surveillance Report\**  
*Form 1308 – Surveillance Worksheet\**

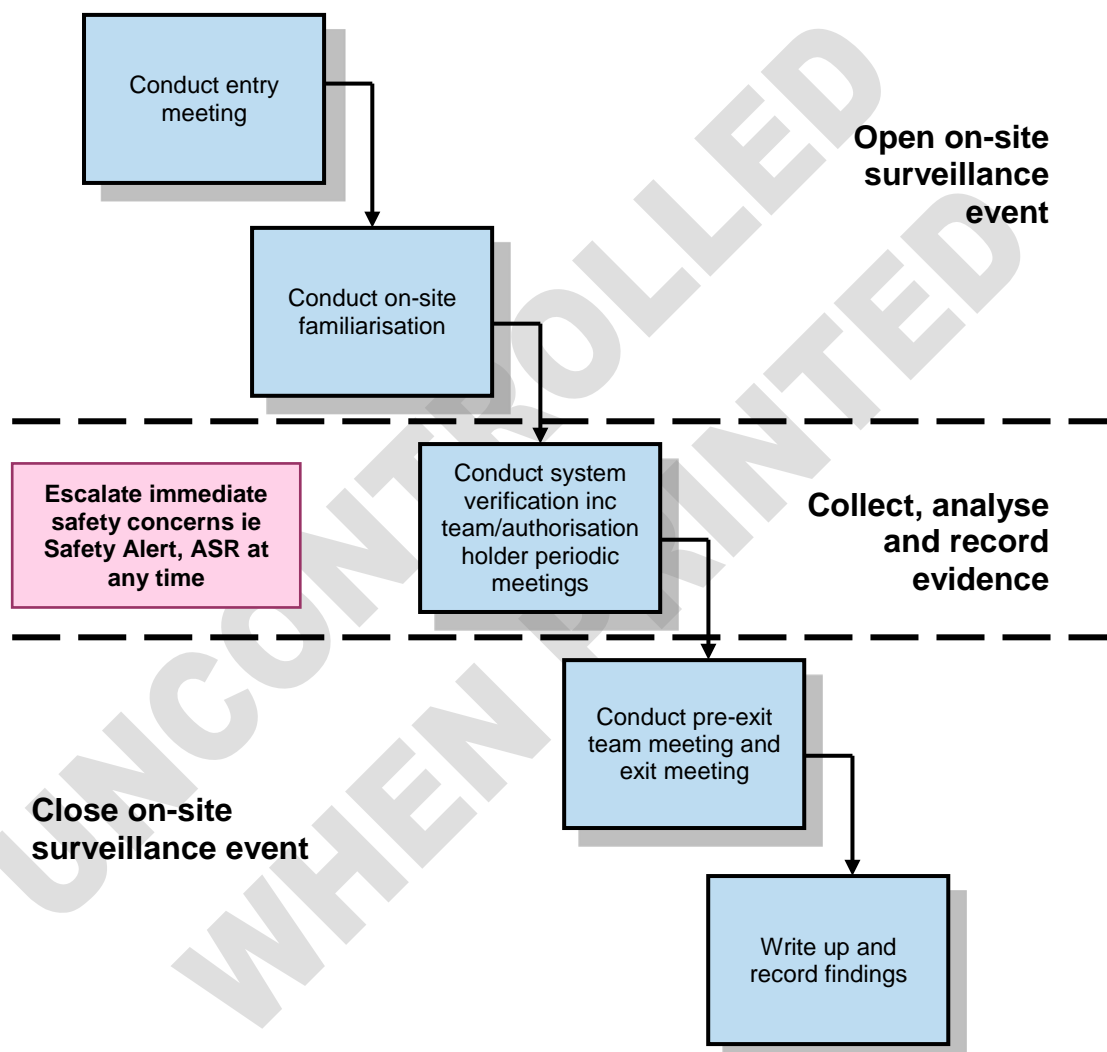
*Operational Check resources, e.g. approved checklists*

**\*Generated in Sky Sentinel**

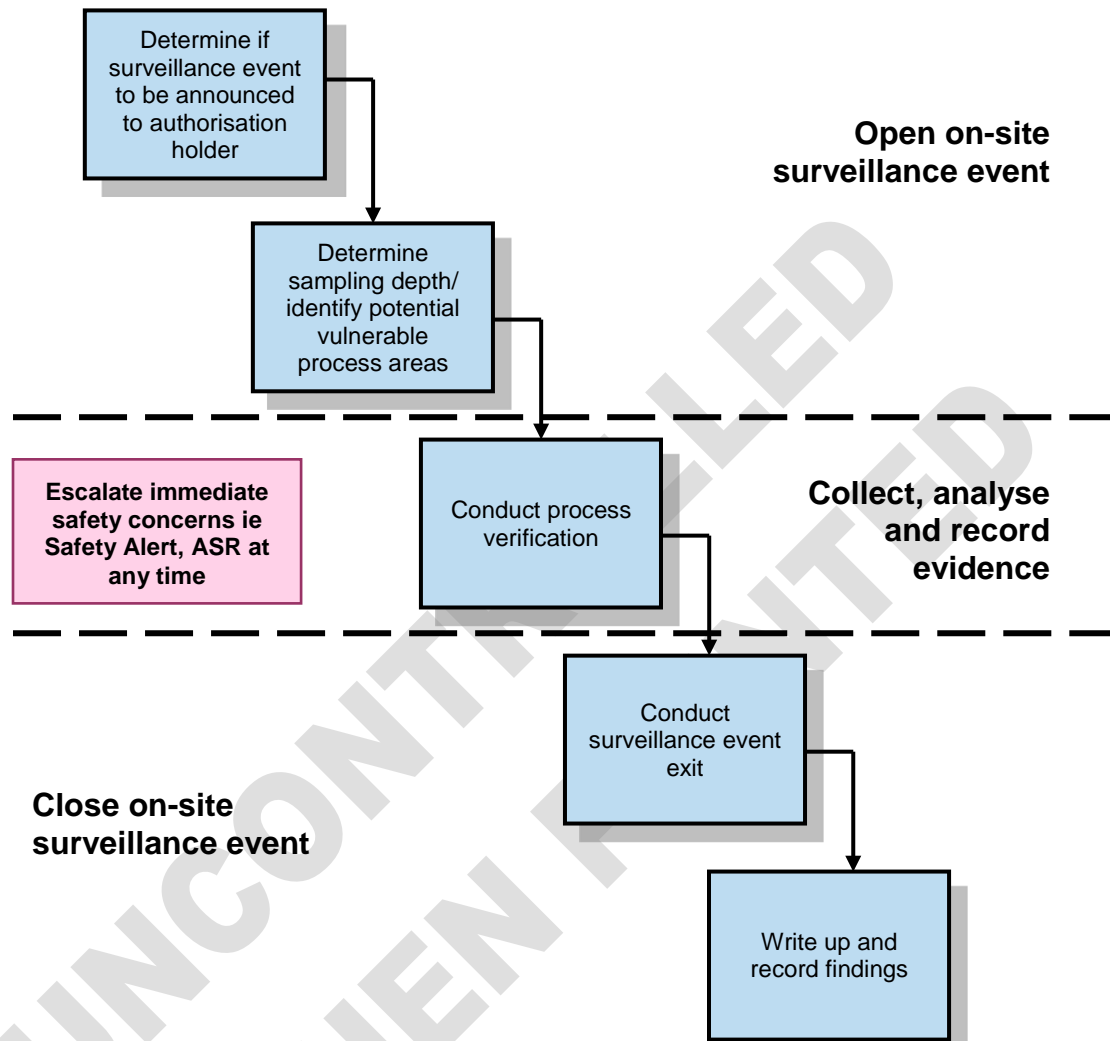
#### 4.5.3 Processes

**Note:** Detailed process maps are available online on the CASA intranet.

#### Level 1 – Surveillance event



Level 2 – Surveillance event



#### 4.5.4 Level 1 Surveillance event – Conduct entry meeting

##### 4.5.4.1 PROCESS – Conduct entry meeting

1. **Entry meeting chair:** Conducts the meeting in accordance with the [Form 1293 – Entry Meeting Agenda Form](#) normally at the authorisation holder's premises.
2. **Surveillance team members:**
  - a) Participate in the entry meeting
  - b) Record all matters of significance discussed during the meeting
  - c) If there are no issues, or if any issues are not discussed, note the minutes accordingly.

##### 4.5.4.2 GUIDANCE – Conduct entry meeting

The entry meeting, if required, will normally be conducted on an authorisation holder's premises, but circumstances may require the use of a CASA office.

The chair (normally the surveillance lead) must conduct the entry meeting in accordance with the *Entry Meeting Agenda* form. The form provides guidance, prompts and space for recording meeting minutes. The completed Form 1293 must be placed on the relevant surveillance file. [Form 1294 – Entry Meeting Attendance Form](#) is also available for use.

The purpose of the entry meeting is to finalise the logistics of the surveillance as well as to clarify the scope, timetable and availability of key personnel. Matters that relate to the subject of the surveillance should not form part of the entry meeting processes, but should be conducted as part of the subsequent surveillance activities.

In order to provide appropriate support to the surveillance team, and if circumstances warrant, consideration should be given to the attendance of the Controlling Office Manager and/or the authorisation management team leader (if they are not already part of the surveillance team) at the entry meeting, particularly if it is a high profile authorisation holder or if the authorisation holder is assessed as having an active or enhanced oversight posture at the time of the surveillance.

#### Recording notes/minutes

The surveillance team must record all matters of significance discussed during a surveillance entry meeting. Matters of significance could include significant changes to the organisation not identified during surveillance preparation that have either taken place or are planned, or due to the non-availability of important organisation position holders. Where issues are identified, a resolution must be agreed and actions recorded. This could be as simple as adjusting the surveillance timetable.

Where no issues were identified during an entry meeting, the minutes should state "Discussed – no issues raised" or if applicable "Not discussed". No agenda items should be left unaddressed on the [Form 1293 – Entry Meeting Agenda Form](#).

**Note:** It is imperative that good notes are recorded using the surveillance worksheets during the conduct of the surveillance. These notes must be scanned and stored in TRIM for future reference by inspectors and/or enforcement. (See [Chapter 14 – Enforcement Manual](#) for further advice on note taking.)

#### 4.5.5 Level 1 Surveillance event – Onsite familiarisation procedure

##### 4.5.5.1 PROCESS – Conduct onsite familiarisation

###### Surveillance team:

- a) Carries out a tour of the authorisation holder's facility if unfamiliar with the authorisation holder's operation
- b) Identifies any changes to the authorisation holder's authorised activities since the last surveillance event
- c) Updates the [Surveillance Worksheet \(Form 1308\)](#) for any areas requiring special attention, where appropriate
- d) Confirms authorisation holder escort where required.

##### 4.5.5.2 GUIDANCE – Conduct onsite familiarisation

If the surveillance team is not familiar with the authorisation holder, an informal on-site familiarisation tour will assist in developing a rapport with the authorisation holder and obtaining a general appreciation of their activities. All health and safety matters need to be addressed at this time, including identifying the location of emergency exits and assembly areas, etc.

#### 4.5.6 Level 1 Surveillance event – Conduct surveillance

##### 4.5.6.1 PROCESS – Conduct surveillance

###### 1. Surveillance team members:

- a) Gathers evidence to determine the level of effectiveness of control for each system risk assessed
- a) Gathers objective evidence to support surveillance findings
- b) Records all evidence collected during the conduct of the surveillance in the [Surveillance Worksheet \(Form 1308\)](#)
- c) Keeps the surveillance lead and team informed.

###### 2. Surveillance lead:

- a) Leads and assists the surveillance team
- b) Chairs the relevant briefings and entry/exit meetings

- c) Escalates issues to the appropriate authorisation management team leader
- d) Keeps the authorisation management team leader and other surveillance team members progressively informed.

**Note:** *If the surveillance event is conducted by a sole inspector, that inspector assumes all roles and responsibilities for the execution of the surveillance event, i.e. surveillance team member and surveillance lead.*

#### 3. Authorisation management team leader:

- a) Provides assistance and advice to the surveillance lead and surveillance team members
- b) Escalates issues, where required, to the Controlling Office Manager.

#### 4.5.6.2 GUIDANCE – Conduct surveillance

Evidence is collected while conducting a surveillance event with relevant information recorded in the *Surveillance Worksheet* (Form 1308) to support the final surveillance findings.

Evidence must be:

- objective
- obtained with the knowledge of the authorisation holder where it is located on the premises of authorisation holder
- verified for correctness, completeness and indicated as a true copy where applicable
- recorded accurately and concisely
- collected in a manner that will aid in writing the Surveillance Report and associated findings.

Evidence includes:

- oral evidence – record date, time, details of conversation on the [Surveillance Worksheet \(Form 1308\)](#) or [Surveillance Event Record of Conversation \(Form 1289\)](#)
- notes taken during any surveillance event
- documents sighted during the surveillance event – always reference the document and page numbers
- copies of documents and records (**Note:** Where possible ensure documents are certified by the person making the copy and have the person who has custody of the original document counter sign the copies.)
- photographs (record time, date, place and photographer on worksheet)
- video recordings (record time, date, place and video operator on worksheet)
- physical evidence such as original document, records or defective parts.

**Note:** *Evidence may be tested in the Administrative Appeals Tribunal, the Federal Court or a criminal court should enforcement action be initiated.*





**NOTE:** More details about collecting evidence can be found in [Chapter 13 of the Enforcement Manual](#). Evidence of a serious contravention, including copies of documents and relevant photographs, must be obtained during the surveillance.

#### 4.5.7 Level 1 Surveillance event – Process verification procedure

##### 4.5.7.1 PROCESS – Conduct process verification

###### Surveillance team:

- a) Asks the authorisation holder to walk through the processes that have been nominated as part of the surveillance scope, i.e. use 'show me' to verify the process (All levels of an authorisation holder's operation should be considered in sampling.)
- b) Confirms and verifies that supporting infrastructure is appropriate and in place
- c) Examines the effectiveness of the controls mitigating the systems risks being reviewed through well considered questioning applying MSM attributes
- d) Records responses on the *Surveillance Worksheet* (Form 1308) identifying personnel interviewed
- e) Compares actual process against documented procedures
- f) Determines what systems risks and/or processes have failed to be adequately controlled and continues questioning in that direction irrespective of what had previously been prepared on the *Surveillance Worksheet*. If outside the surveillance scope, it must be recorded accordingly
- g) Verifies that the authorisation holder has adequate mechanisms in place to achieve monitoring and improvement system attributes, ideally considered across a number of processes
- h) Confirms and adjusts the level of sampling required to verify the process
- i) Validates safety concerns with the authorisation holder to ensure all aspects of the issue are covered before concluding process verification (Verification may be covered at a periodic meeting with the authorisation holder.)
- j) Collects or records results of sampling, including what was sampled and how many, on the [Surveillance Worksheet](#)
- k) Records the results of the verification process in the comments section of the *Surveillance Worksheet*.

##### 4.5.7.2 GUIDANCE – Conduct process verification

During verification inspectors should actively confirm the 'process in practice' including outputs.

All levels of an authorisation holder's operation should be considered in sampling.



**Note:** While the responsibility for conducting root cause analysis on documented findings rests with the authorisation holder, the issuing inspector should conduct a basic or rudimentary root cause analysis for themselves so that when assessing the response from the authorisation holder the inspector can ensure the authorisation holder has focused on the most appropriate area to rectify the true root cause of the identified deficiency.

#### 4.5.8 Level 1 Surveillance event – Periodic meetings

When surveillance extends for more than one day, periodic meetings should be convened with the surveillance team and the authorisation holder.

#### 4.5.9 Level 1 Surveillance event – Periodic meetings (Team coordination meeting)

##### 4.5.9.1 PROCESS – Conduct team coordination meeting

###### Surveillance team:

- a) Discusses safety concerns, e.g. Safety Alerts (see Section 4.6.9 – Safety Alerts), and systems safety aspects with the authorisation management team and Controlling Office Manager.

**Note:** Remember that all Safety Alerts will need to be referred to the Coordinated Enforcement Process (CEP) through the Controlling Office Manager.

- b) Discusses any immediate safety concerns to be raised with the authorisation holder, such as Safety Alerts
- c) Agrees on any information that needs to be presented to the authorisation holder prior to the exit meeting
- d) Identifies any additional information required to substantiate a possible deficiency
- e) Shares any information gathered
- f) Ensures all information is gathered from staff, including specialist staff who may not be available for the entire surveillance event
- g) Plans the following day's activities based on the above steps and the existing surveillance timetable.

##### 4.5.9.2 GUIDANCE – Conduct team coordination meeting

Surveillance team meetings are designed for surveillance events where there is more than one inspector. These meetings should take the form of a debriefing to allow members of the surveillance team to exchange information and discuss findings.

#### 4.5.10 Level 1 Surveillance event – Periodic meetings (Authorisation holder progress meeting)

##### 4.5.10.1 PROCESS – Conduct authorisation holder progress meeting

###### Surveillance team:

- a) Raises any immediate safety concerns (Safety Alerts, serious system safety aspects) with the authorisation holder after consultation with the authorisation management team leader and the Controlling Office Manager

**Note:** *By immediately raising safety concerns this may enable the authorisation holder to review and take appropriate remedial action. However, the surveillance team's primary focus should be on the surveillance as scoped and not on the authorisation holder's immediate rectification of the safety concerns.*

- b) Raises any issues with the authorisation holder to check and clarify

**Note:** *When checking and clarifying any issues raised, an authorisation holder may present additional information to be considered before findings are formally issued, however, all evidence should still be recorded.*

- c) Discusses all matters that have been covered to date
- d) Advises any changes to the surveillance direction and/or duration.

##### 4.5.10.2 GUIDANCE – Conduct authorisation holder progress meeting

The purpose of these meetings is to provide communication between the surveillance team and the authorisation holder. On a periodic basis, ideally daily, the surveillance team should discuss their findings or unresolved issues/enquiries with the authorisation holder.

#### 4.5.11 Level 1 Surveillance event – Pre-exit team meetings

##### 4.5.11.1 PROCESS – Conduct pre-exit team meeting

###### Surveillance team:

- a) Assesses all evidence gathered during the surveillance event
- b) Drafts brief findings for the team's final analysis of the surveillance (Consolidate findings against processes that have failed, rather than for individual breaches of the applicable Civil Aviation legislation.)
- c) Ensures a copy of the [Exit Meeting Agenda \(Form 1295\)](#) is available
- d) Discusses results of the surveillance and records individual discipline results on the [Surveillance Technical Discipline Summary \(Form 1288\)](#) to assist when presenting to the authorisation holder at the exit meeting
- e) Discusses the delivery of the exit meeting agenda to ensure a coordinated approach.

#### 4.5.11.2 GUIDANCE – Conduct pre-exit team meeting

The purpose of this meeting is for the surveillance lead and surveillance team members to analyse the results of the surveillance and to determine what will be presented at the exit meeting. The individual discipline results are recorded on the *Surveillance Technical Discipline Summary* (Form 1288). This will be used to assist with presenting the consolidated information to the authorisation holder at the exit meeting as well as being helpful when formulating the Surveillance Report. This meeting is designed for surveillance events where there is more than a single inspector although some of the steps may be applicable for individual inspectors to prepare for the exit meeting.

#### 4.5.12 Level 1 Surveillance event – Exit meetings

##### 4.5.12.1 PROCESS – Conduct exit meeting

1. **Surveillance lead:** Chairs the exit meeting in accordance with the *Exit Meeting Agenda Form* (Form 1295).
2. **Surveillance team members:**
  - a) Participate in the exit meeting
  - b) Present findings at this point, but do not discuss specific potential regulatory breaches or systems risks with the authorisation holder
  - c) Record all matters of significance discussed during the meeting
  - d) If there are no issues, or if any issues are not discussed, notes minutes accordingly.

##### 4.5.12.2 GUIDANCE – Conduct exit meeting

The surveillance lead chairs the exit meeting in accordance with the *Exit Meeting Agenda* (Form 1295). The *Exit Meeting Attendance Form* (Form 1296) is also available for use.

During the exit meeting all results identified during the surveillance event, e.g. potential system and risk control deficiencies, must be brought to the authorisation holder's attention, however, specific findings are formulated and issued after finalisation in conjunction with the final report.

All items listed on the *Exit Meeting Agenda* form must be covered during the exit meeting.

Consideration should be given to the attendance of the Controlling Office Manager and/or the surveillance team leader (if they are not already part of the surveillance team) at the exit meeting, particularly if it is a high profile authorisation holder or the authorisation holder is assessed as active or enhanced oversight posture at the time of the surveillance.



**NOTE:** An authorisation holder may at any time during the surveillance process suggest some form of written proposal, which in this manual is referred to as an Action plan (but may also be referred to by the authorisation holder by various names including recovery program, action management plan etc) to rectify issues. These issues may have been discussed generally during the surveillance event or issues that the authorisation holder may have realise, as a result of conducting the surveillance event, need to be addressed.

Discretion will need to be exercised in relation to the complexity of the matter and whether it is required to be sent to CEP. In all cases where a decision on the facts is made **not** to refer to CEP, the relevant inspector should note the reasons in Sky Sentinel for that decision and confirm their assessment that safety will not be compromised by the delay in the authorisation holder's response. Those reasons will need to address:

- whether the proposed action covers all the issues
- whether the milestones (where there are a number of actions proposed) are realistic and have sufficient detail to be assessable
- while the issues are being addressed, persons are not exposed to a serious safety risk.

(See Section 4.7.8 – Request for Extension of Time) A proposed Action plan should form part of a request for extension of time to complete the action raised in an NCN(s) and will form part of the justification for an extension that will be considered by the Controlling Office.

Action plans of a complex nature, and/or where an extension of three months or more is being requested, must be referred, through the Controlling Office Manager, to the CEP for consideration.

For further information on dealing with such proposals see the Enforcement Manual – Chapter 3 at Section 3.5 – Contraventions Identified during an Audit and in Chapter 6 at Section 6.8 – Further Coordinated Enforcement Meeting and Outcomes of Show Cause Conferences.

#### Disclosure at exit meeting

When providing feedback to the authorisation holder at the exit meeting, the surveillance team should not discuss specific potential regulatory breaches. Instead, discuss identified areas of concern, e.g. management of tooling in the maintenance hangar or current training deficiencies and explain the processes needed to be undertaken before any formal findings can be issued. Also, advise the authorisation holder that the Surveillance Report will be produced within a maximum of 20 business days from the date of the exit meeting and, if there are any delays, they will be notified before this time.

The reasons for this approach to disclosure include:

- ensuring the correct category of finding is used

- allowing the opportunity for peer review of surveillance findings prior to release, ensuring standardisation of surveillance findings
- taking the time to consider the most appropriate action to take once the surveillance data has been assessed.

#### Recording notes/minutes

The surveillance team must record all matters of significance discussed during an exit meeting. Where matters of significance are identified they should be appropriately recorded in the exit meeting minutes. (See [Chapter 14 – Enforcement Manual](#) for further advice on note taking.)

Matters of significance could include:

- non-availability of important organisation position holders or documentation during the surveillance event, which were brought to the notice of the authorisation holder
- any problems encountered during the surveillance, e.g. failure to supply documentation
- significant views expressed by the authorisation holder regarding the surveillance
- intended changes or improvement actions as a result of findings from the surveillance event
- points of disagreement between CASA and the authorisation holder, from both points of view, should be recorded in the exit meeting minutes.

Where no issues were identified during an exit meeting, the minutes should state “Discussed – no issues raised” or if applicable “Not discussed”. No agenda items should be left unaddressed on the [Exit Meeting Agenda Form \(Form 1295\)](#).

#### 4.5.13 Level 2 Surveillance event – Operational Check

##### 4.5.13.1 PROCESS – Conduct Level 2 surveillance event

###### Surveillance lead and surveillance team:

- a) Presents CASA identification to the authorisation holder prior to commencing the Operational Check
- b) Confirms and adjusts the level of sampling required to verify the process being surveilled
- c) Carries out sampling to verify the effectiveness of a process
- d) Determines what systems and/or processes have failed and continues questioning in that direction irrespective of what was previously prepared on the *Surveillance Worksheet* and scope
- e) Collects or records results of sampling, including what was sampled and how many, on

the *Surveillance Worksheet (Form 1308)* or relevant *Surveillance Report (Form 1301)*

- f) Records significant points about any interviews and conversations with authorisation holder personnel (*Surveillance Event Record of Conversation – Form 1289*) and results of any verification carried out during the Operational Check
- g) Meets at periodic intervals to compare notes to analyse the results of the Operational Check prior to leaving the premises. (This will be at the discretion of the surveillance team.)

#### 4.5.13.2 GUIDANCE – Conduct Level 2 surveillance event

##### Entry meeting

Operational Checks do not require a formal entry meeting or completion of the entry meeting agenda. However, the surveillance team must present their CASA ID as required under Item 1 of the *Entry Meeting Agenda Form (Form 1293)* and should follow other procedures in the agenda as appropriate.

##### Recording note /minutes

The surveillance team must record all matters of significance discussed during an Operational Check.

##### On-site familiarisation

A formal on-site familiarisation may not be necessary during an Operational Check; however, inspectors should consider hazards, e.g. airside operations and any health and safety matters.

##### Process verification

The surveillance team must record significant points about any interviews and conversations with authorisation holder personnel and results of any verification carried out (*Surveillance Event Record of Conversation – Form 1289*). However, when Operational Checks are used as the verification tool in support of larger surveillance events, it will be necessary to follow the process verification methods as for a systems audit. (See *Section 4.5.7 – Level 1 Surveillance Event – Process Verification Procedure*)

##### Sampling results of a process

Confirm and adjust the level of sampling required to verify the process being surveilled. Collect or record results of sampling, including what was sampled and the number of samples.

##### Periodic meetings

The surveillance team may be required to meet at periodic intervals to compare notes. However, due to the short time periods of an Operational Check, authorisation holder periodic meetings may not be required.

#### Pre-exit team meeting

The purpose of this meeting is for the surveillance lead and the surveillance team members to analyse the results of the Operational Check prior to leaving the premises. This will be at the discretion of the surveillance team. The team should discuss any immediate safety concerns to be raised with the authorisation holder such as Safety Alerts. In the first instance, safety concerns need to be discussed with the authorisation management team leader and Controlling Office Manager as appropriate.

#### Exit meeting

Operational Checks do not require a formal exit meeting and completion of the Exit Meeting Agenda. However, inspectors must follow the procedures in the agenda as appropriate.

#### Recording notes/minutes

The surveillance team must record all matters of significance discussed during an exit meeting, if conducted. Where matters of significance are identified they must be recorded in the exit meeting minutes.

Matters of significance may include:

- problems encountered during the Operational Check
- significant views expressed by the authorisation holder regarding the Operational Check
- intended changes or improvement actions as a result of the Operational Check.



**Note:** *While the responsibility for conducting root cause analysis on documented findings rests with the authorisation holder, the issuing inspector should conduct a basic or rudimentary root cause analysis for themselves so as when assessing the response from the authorisation holder the inspector can ensure that the authorisation holder has focused on the most appropriate area to rectify the true cause of the identified deficiency.*

#### 4.5.14 Discontinuing a surveillance event

##### 4.5.14.1 PROCESS – Discontinue surveillance event

1. **Controlling Office Manager:** Decides if a surveillance event must be ceased or suspended in consultation with the surveillance team.
2. **Surveillance team member:**
  - a) May discontinue a surveillance event in a threatening situation
  - b) Inform the surveillance lead, authorisation management team leader and Controlling Office Manager of this action at the earliest opportunity.



#### 4.5.14.2 GUIDANCE – Discontinue surveillance event

The decision to discontinue any surveillance event must be made by the relevant Controlling Office Manager after consulting with the surveillance team. However, in threatening situations, an individual inspector may cease or suspend a surveillance event at any time. In such an event, the surveillance lead, authorisation management team leader and Controlling Office Manager must be informed at the earliest opportunity.

Events that may prevent a surveillance continuing include:

- the safety of the surveillance team is at risk
- the objective of the surveillance becomes unattainable due to access limitations, hindrance, harassment or aggressive behaviour by the authorisation holder
- non-availability of the authorisation holder key staff or if enforcement action is assessed as being more appropriate.

Prior to discontinuing a surveillance event due to access being denied, an inspector should draw the authorisation holder's attention to *CAR 305 – Access of Authorised Persons*.

CAR 305 states that an authorised person shall have access to any place to which access is necessary for carrying out any powers or functions under the *Civil Aviation Regulations 1988*. It also states that a person must not prevent or hinder access by an authorised person.

An inspector, conducting surveillance, is an authorised person for this purpose.

#### 4.5.15 Accountabilities – Conduct Surveillance Event

Position	Accountabilities
<b>Authorisation management team leader</b>	<ul style="list-style-type: none"><li>• Provide assistance and advice to the surveillance lead and surveillance team members</li><li>• Escalate issues, where required, to Controlling Office Manager</li></ul>
<b>Surveillance lead</b>	<ul style="list-style-type: none"><li>• Lead and assist the surveillance team</li><li>• Chair relevant briefings and meetings</li><li>• Escalate issues to the appropriate authorisation management team leader</li><li>• Keep appropriate authorisation management team leader and other members progressively informed</li></ul>
<b>Surveillance team member</b>	<ul style="list-style-type: none"><li>• Gather objective evidence to support the surveillance findings</li><li>• Keep the surveillance lead and team informed</li></ul>

## 4.6 Surveillance Event Reporting

### 4.6.1 Purpose

This section outlines the format of a standardised official record of an authorisation holder's surveillance. The report details the outcomes of the surveillance event and agreed actions to manage identified deficiencies (if any) and associated risks. Following the conduct of a surveillance event and review of evidence obtained for the system risks for which control effectiveness was assessed, a copy of the Surveillance Report is provided to the authorisation holder to inform them of their current level of compliance and any identified findings. The section also outlines the process for the management of the report and any resultant identified actions.

### 4.6.2 References

The following materials are applicable to the Surveillance Event Reporting phase:



#### Handbook

*Sky Sentinel User Guide*

#### Report

*Systems & Elements* (refer to relevant technical annex)

#### Forms

*Form 1288 – Surveillance Technical Discipline Summary Form*

*Form 1292 – Surveillance Report Covering Letter*

*Form 1298 – Observation\**

*Form 1299 – Non-Compliance Notice\**

*Form 1300 – Safety Alert\**

*Form 1301 – Surveillance Report* (applies to Level 1 and Level 2 surveillance events)\* – (See relevant technical annex)

*Form 1304 – Surveillance Notification Letter*

*Form 1308 – Surveillance Worksheet\**

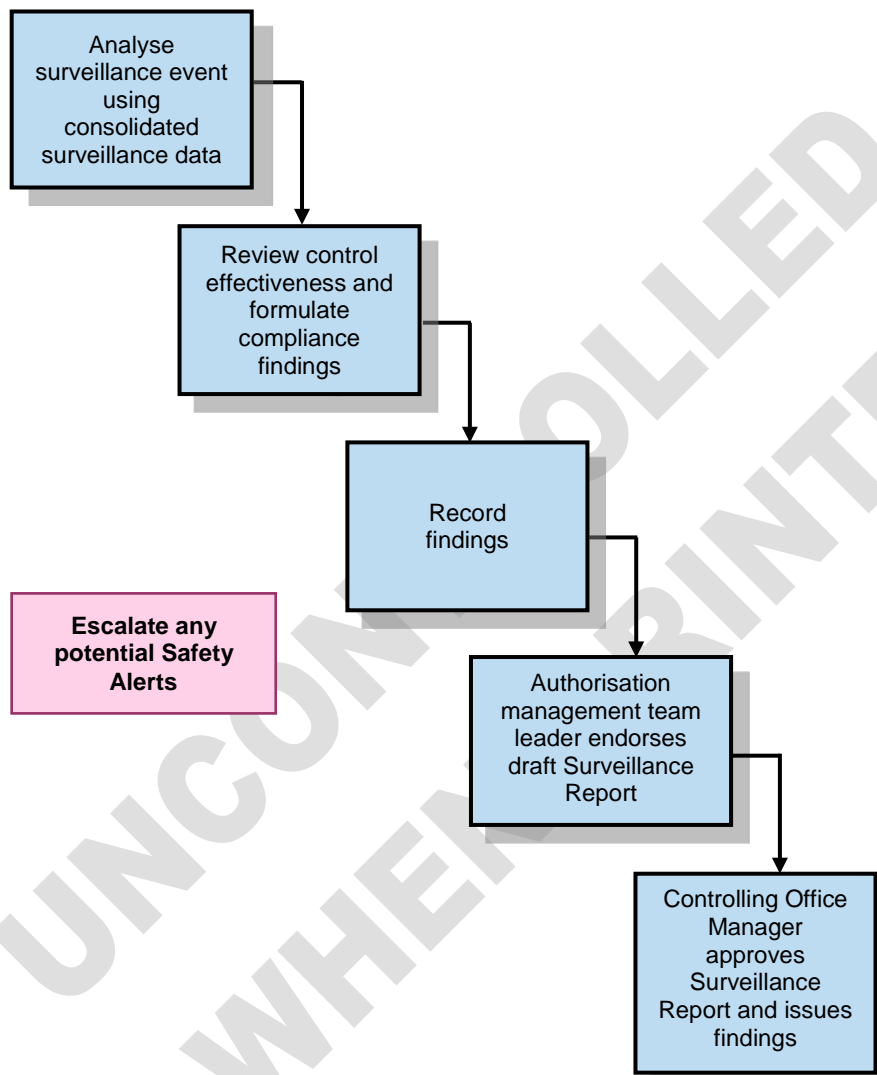
*Operational Check resources, e.g. approved checklists*

**\* Generated in Sky Sentinel**

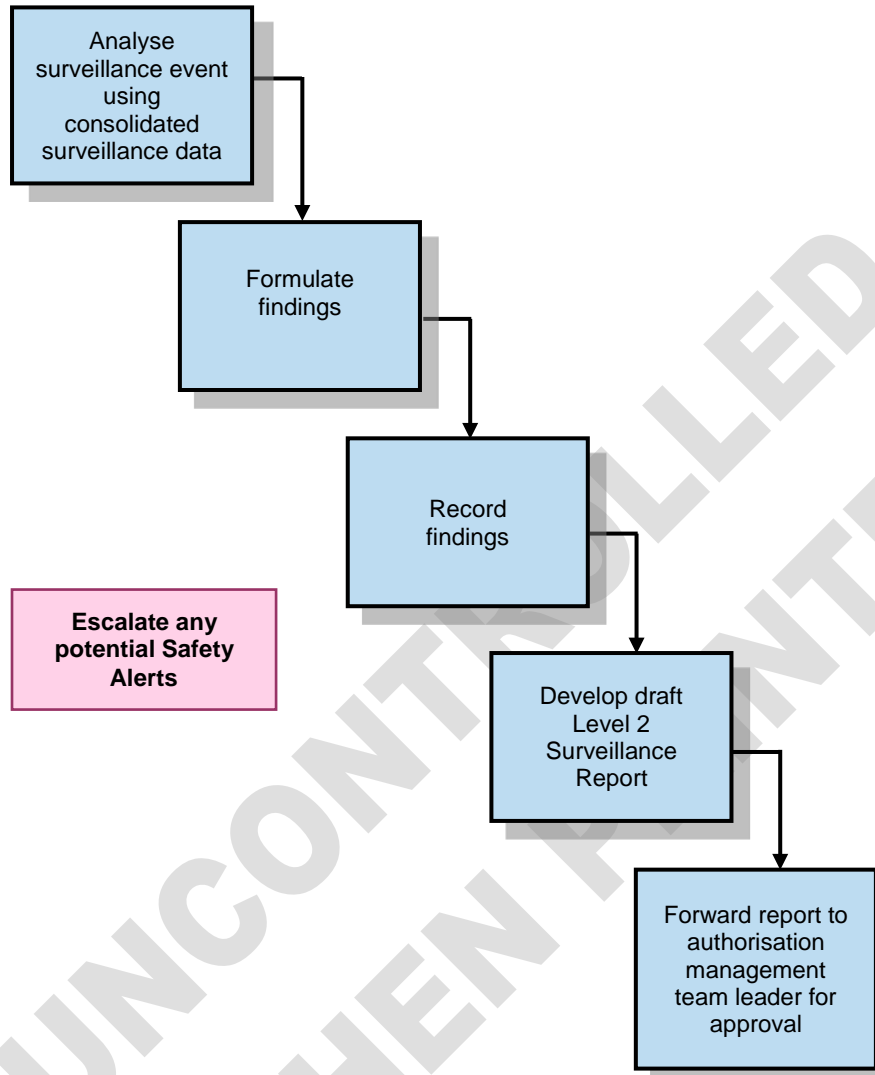
#### 4.6.3 Processes

**Note:** Detailed process maps are available online on the CASA intranet.

#### Develop Level 1 Surveillance Report



**Develop Level 2 Surveillance Report**



#### 4.6.4 Reporting

The Surveillance Report provides an official record of the surveillance event as well as information for CASA's own ongoing analysis and risk management. The role of the report is to give CASA enough information to be satisfied that either an authorisation holder can continue to operate in a safe and effective manner, or is not operating safely and appropriate action should be taken. The report also provides context to the authorisation holder about the findings.

#### 4.6.5 Control effectiveness review

##### 4.6.5.1 PROCESS – Control effectiveness review

###### Surveillance lead or surveillance team member:

- b) Review the evidence (at the level of the MSM attributes) obtained for each system risk for which control effectiveness was assessed
- c) On the basis of the review, determines the level of effectiveness of control each of the MSM attributes contributed to the overall mitigation (control) of the system risk for both likelihood and consequence

**Note:** *Word pictures are provided in Sky Sentinel (shown in Annex 1 – Surveillance Standards and Protocols) to assist in this determination and must be referred in order to ensure standardised results.*

- d) Enters the results into the Mitigation Risk Calculator page in Sky Sentinel
- e) Records any relevant comments on the Mitigated Risk Calculator page

**Note:** *Comments should, as appropriate, reference relevant findings and worksheets associated with the particular system risk being assessed.*

- f) Assesses whether a poorly controlled system risk has resulted in a breach and, if so, raises an NCN against that breach to address compliance aspects (as detailed in Section 4.6.8 – Non-Compliance Notices below)
- g) Considers issuing an Observation to highlight to the authorisation holder and, for the purpose of long-term information capture, system deficiencies, poor operational safety risk control and areas for improvement in safety performance.

**Note:** *Guidance on when an Observation should be written is detailed in Section 4.6.11 – Observation.*

##### 4.6.5.2 GUIDANCE – Control effectiveness review

After returning from the surveillance event and prior to drafting the surveillance report, including any associated findings, team members must consider the evidence obtained from their assigned tasks during the surveillance event.

Using each of the MSM attributes for both likelihood and consequence, the team members review the evidence obtained for each system risk to determine the level of effectiveness of the associated controls. Using the word pictures provided, the team members enter the control

effectiveness score into the Mitigated Risk Calculator in Sky Sentinel for the controls associated with both the likelihood and consequence aspects for the system risk under review.

Where a deficiency in the effectiveness of the control is identified as a regulatory breach, an NCN must be issued. If a deficiency is not the result of a regulatory breach, the issuing of an Observation should be considered (refer to *Section 4.6.11 – Observation*).

**Note:** The word pictures (shown in Annex 1 – Surveillance Standards and Protocols) should be referred to and used to ensure standardisation of results is maintained.

#### 4.6.6 Surveillance findings

A surveillance finding is used to highlight actual and/or potential legislative breaches and may be issued as:

- NCNs
- Safety Alerts
- Aircraft Survey Reports (ASRs)
- Observations.

The surveillance team lead, or surveillance team member, who issues the finding, and who is subsequently responsible for managing that finding, is known as the issuing inspector.



**Note:** When conducting the post-surveillance review and analysis, if the authorisation management team identify repeated breaches of a similar nature from the review of previous surveillance events, the authorisation management team, in conjunction with the Controlling Office Manager, must initiate the CEP. This process is set out in [Chapter 3 of the Enforcement Manual](#). The CEP will provide a forum for discussing alternative options. (For any queries in relation to this process contact the Senior Adviser, Enforcement Policy and Practice.) This does not mean that the matter will necessarily remain with Legal Service Division or produce an enforcement outcome. With the input and discussion as part of the CEP the resulting audit reporting process will be better informed and prepared, irrespective of the outcome of the CEP.

Any Safety Alerts or NCNs raised as a result of the surveillance event by an issuing inspector not based at the controlling office will be forwarded to the controlling office by that issuing inspector for follow-up and appropriate action. However, the responsibility for acquitting any findings issued remains with the issuing inspector.

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#### 4.6.7 Writing compliance findings procedures (Level 1 and 2 surveillance types)

Findings must not be issued to the authorisation holder at the exit meeting. Findings must be included in and form part of the Surveillance Report associated with the event.

All findings must be peer reviewed by either the authorisation management team or surveillance team to identify any potential systemic issues and ensure the requirements for the allocated finding are met, for example:

- Is the finding at the appropriate level, i.e. Observation, NCN, ASR or Safety Alert?
- Is the finding formulated against a Head of Power for legislative breaches?
- Does the finding clearly explain the deficiency identified?

This peer review process in no way questions the expertise of the inspector identifying and issuing the finding, but rather it is a quality check to assure standardisation and consistency in the issuing of findings.

#### 4.6.8 Non-Compliance Notices

##### 4.6.8.1 PROCESS – Write findings (NCNs)

###### 1. Issuing inspector:

- a) Determines the type of finding based on the nature of the issue, e.g. an NCN must be raised for a breach of any civil aviation legislation
- b) Formulates findings using the *Non-Compliance Notice form (Form 1299)* in Sky Sentinel providing sufficient detail to support any possible subsequent enforcement action
- c) Documents the legislative provision that has been breached.

**NOTE:** *If citing a Civil Aviation Order (CAO) or a Manual of Standards (MOS) reference, the NCN must reference the overarching legislation to which the CAO or MOS is linked. While the CAO or MOS reference should be cited for the purpose of clarification, the appropriate section of the Act or appropriate regulation must be cited as evidence of the actual breach. If uncertain about the appropriate head of power the inspector should contact the Legal Branch.*

- ###### 2. Authorisation management team or surveillance team:
- Peer reviews all findings to ensure they meet the NCN requirements prior to issue (Any proposed amendment to an NCN requires notification to, and agreement by, the issuing inspector.)

**Note:** *If a Safety Alert is determined, follow procedures as detailed in Section 4.6.9 Safety Alerts.*

- ###### 3. Authorisation management team leader:
- Takes appropriate action to ensure that standardisation and consistency is maintained.

- ###### 4. Surveillance lead or surveillance team member:

- a) Where the office issuing the finding is not the responsible controlling office, the responsible controlling office can access all documentation via Sky Sentinel for review by the controlling office, authorisation management team leader and Controlling Office Manager. Ensure the responsible controlling office understands that although they did not issue the finding, they are responsible for the management of the finding

**Note:** *The issuing inspector is still responsible for acquittal.*

- b) Ensures all documentation is appropriately filed in TRIM
- c) Ensures the controlling office conducts data entry.

**Note:** *Any activity that requires follow up as a result of surveillance must be clearly documented in Sky Sentinel via the SR function and recorded on the relevant files to ensure matters are not overlooked from one task to another.*

#### 4.6.8.2 GUIDANCE – Write findings (NCNs)

An NCN is issued to an authorisation holder to give written notice of a breach. In most cases, it will be expected that an NCN will be responded to by the authorisation holder within 21 calendar days (see *Section 4.7.5 – Assessment of Response*).

NCNs are issued where, as a result of surveillance, a non-compliance has been detected. Where an immediate safety concern is raised an NCN is issued in conjunction with a Safety Alert and/or an ASR. NCNs must be associated with a surveillance event when recorded in Sky Sentinel.

While an NCN is provided primarily as a notification of a breach, it will generally be issued in circumstances where CASA is satisfied that the authorisation holder has the willingness and the ability to take remedial and corrective action to address the breach. Where CASA is no longer satisfied that the authorisation holder is willing or able to do so (for example, as shown by repeated breaches of the same type or where additional or new information indicates further safety issues) an NCN will still be issued, but the matter must also be referred, through the Controlling Office Manager, for Coordinated Enforcement. (For details of the CEP see [Chapter 3 – Enforcement Manual](#))

CASA sets timeframes for authorisation holders to respond to NCNs, and if the expectation of cooperation is not met, then the CEP should be initiated as per the procedures set down in *Chapter 3 of the Enforcement Manual*.

If the NCN is issued to an authorisation holder, the NCN must be raised against the legal entity holding the certificate.

The breach must be supported by evidence and provide adequate details of the process or system deficiencies, or their inappropriate use, that resulted in the NCN.

All NCNs must document the legislative provision that has been breached (head of power). NCNs must not be issued against advisory material, CAAPs, etc.

**NOTE:** *If citing a Civil Aviation Order (CAO) or a Manual of Standards (MOS) reference, the NCN must reference the overarching legislation to which the CAO or MOS is linked. While the CAO or*



*MOS reference should be cited for the purpose of clarification, the appropriate section of the Act or appropriate regulation must be cited as evidence of the actual breach. If uncertain about the appropriate head of power the inspector should contact the Legal Branch.*

The aim of issuing an NCN is to highlight process or system deficiencies, not to provide consultancy or tell the authorisation holder what to do. It is the authorisation holder's responsibility to investigate and identify the root cause and take corrective action to address the root cause(s).

While the responsibility for conducting root cause analysis on documented findings rests with the authorisation holder, the issuing inspector should form a view regarding the root cause so that when assessing the response from the authorisation holder the inspector can ensure the authorisation holder has focused on the most appropriate area to rectify the true cause of the non-compliance.

Authorisation holders are required to provide a response to CASA regarding the remedial and corrective actions taken for each NCN. Those that fail to provide such a response should be considered for referral for coordinated enforcement. Consequently it is important to write an NCN with sufficient detail to support enforcement action.

The table in *Information Capture Protocols for Findings section (Annex 1)* describes the requirements for recording an NCN.

**Note:** *If the authorisation management team leader issues the NCN, appropriate action needs to be taken to ensure standardisation and consistency is maintained through peer review.*

#### 4.6.9 Safety Alerts

##### 4.6.9.1 PROCESS – Issuance and acquittal of Safety Alerts

1. **Issuing inspector:**
  - a) Consults with the authorisation management team leader and the Controlling Office Manager on whether a Safety Alert should be issued
  - b) Considers whether an Aircraft Survey Report (ASR) should be issued with the Safety Alert.
2. **Issuing inspector, surveillance lead, authorisation management team leader and Controlling Office Manager:** Discuss and categorise safety concerns and decide if a Safety Alert should be issued.
3. **Issuing inspector:**
  - a) Compiles the Safety Alert using the [Safety Alert form \(Form 1300\)](#) in Sky Sentinel
  - b) Issues the Safety Alert advising the authorisation holder to respond within five calendar days detailing the remedial action taken
  - c) Notifies the authorisation management team leader and the Controlling Office

Manager when the Safety Alert is issued.

**Note:** *If the issuing inspector is not able to establish communication with the controlling office to discuss the issuance of the Safety Alert with the Controlling Office Manager or the authorisation management team leader, and a serious safety concern continues to exist, the Issuing Inspector should issue the Safety Alert and make the appropriate notifications as soon as they are able.*

**4. Controlling Office Manager:**

- a) Initiates the CEP as set out in [Chapter 3 of the Enforcement Manual](#)
- b) Informs the Executive Manager, Legal Services Division
- c) Notifies the Executive Manager when the Safety Alert is issued.

**5. Surveillance lead:** Provides support to the issuing inspector as required throughout the issuing process.

**6. Executive Manager:** Notifies the Manager, SSO and the Director of Aviation Safety when the Safety Alert is issued.

**7. Authorisation holder:** Responds to the Safety Alert, detailing all actions taken.

**8. Issuing inspector:**

- a) Assesses the authorisation holder's response and, when satisfied, acquits the Safety Alert
- b) Notifies the authorisation management team leader and Controlling Office Manager that the Safety Alert has been acquitted
- c) Notifies the authorisation holder that the Safety Alert has been acquitted.

**9. Controlling Office Manager:** Notifies the Executive Manager, the Manager Legal Branch and Senior Adviser, Enforcement Policy and Practice that the Safety Alert has been acquitted.

**10. Executive Manager:** Notifies the Manager, SSO and the Director of Aviation Safety that the Safety Alert has been acquitted.

**Note:** *A separate NCN must also be issued with the Surveillance Report if a Safety Alert has been issued (as outlined in the section below).*

*The process for dealing with the authorisation holder response, assessment and acquittal of a Safety Alert, including the capture of all details in Sky Sentinel and on the relevant file (TRIM), is the same as that for an NCN. Refer to Section 4.7.4 – Findings Management.*

#### 4.6.9.2 GUIDANCE – Issuance and acquittal of Safety Alerts

A Safety Alert is issued to raise an immediate safety concern with the authorisation holder and may be accompanied by an ASR.

Safety Alerts are issued as a result of surveillance in circumstances where it is assessed that the interests of safety will be best served by immediate notification to, and expected rectification by, the authorisation holder. The safety-related benefits of such an approach are measured against the delay involved in taking 'Serious and Imminent Risk' or other appropriate enforcement action.

A Safety Alert must be issued as soon as possible to the accountable person for the authorisation holder and must be associated with a surveillance event when recorded in Sky Sentinel.

When a surveillance lead or inspector is considering issuing a Safety Alert, they must consult with the authorisation management team leader and Controlling Office Manager to assist in maintaining consistency in CASA's use of Safety Alerts and ensure all appropriate processes are followed.

Once a Safety Alert has been issued, the issuing inspector or surveillance lead must notify the authorisation management team leader and Controlling Office Manager of the action.

When notified, the Controlling Office Manager must initiate the CEP and notify the Executive Manager, Legal Services Division. This process is set out in [Chapter 3 of the Enforcement Manual](#). The CEP provides a forum for discussing alternative options.

**Note:** For any queries in relation to this process, contact the Senior Adviser, Enforcement Policy and Practice.

The Controlling Office Manager will then notify their Executive Manager. The Executive Manager then refers the information on the Safety Alert to the Director of Aviation Safety and to Manager, SSO by email at [SafetySystems@casa.gov.au](mailto:SafetySystems@casa.gov.au).

Authorisation holders must respond with remedial action to rectify the safety concern before continuing any activity. Any authorisation holder who refuses to provide a response must be considered for enforcement action.

Safety Alerts must be supported by specific evidence to substantiate any future actions that may be required where an authorisation holder fails to respond or is unable to respond immediately to all concerns generated in a Safety Alert. A Safety Alert must also provide sufficient details for the authorisation holder to take appropriate remedial and corrective actions.

The surveillance lead must make it clear to the recipient of the Safety Alert that immediate action to rectify the deficiency must be taken before continuing any activity carried out under the authorisation that is the subject of the deficiency.

The following is a non-exhaustive list of examples where a Safety Alert can be issued:

- runway surface contaminated rendering it unsafe for any operations
- operating aircraft in contravention of an applicable Airworthiness Directive or approved system of maintenance including: scheduled maintenance not carried out by a due date or failure to replace time-expired aircraft components
- fire station operating with insufficient supervising officers to safely maintain the level of service
- maintenance certified by persons without appropriate licences or certificates of approval
- repeated non-compliance with authorised design data for production of aircraft and/or aeronautical products

- use of unapproved parts
- flight crew operating without being the holders of valid licences or appropriate type endorsements or ratings
- falsification of aircraft time-in-service records or flight crew records
- carriage of “Cargo Aircraft Only” dangerous goods on a passenger aircraft.

Once the issuing inspector is satisfied that the authorisation holder has undertaken the required immediate remedial action to rectify the identified safety concern, the Safety Alert can be acquitted and notification made to the relevant CASA personnel advising that this has occurred.



**NOTE:** A separate NCN is also issued in relation to the breach and is issued with the Surveillance Report. While a Safety Alert is issued to raise immediate safety concerns, a separate NCN is used so that the authorisation holder can respond to the root cause analysis and attend to necessary corrective action. The process to be followed in issuing and managing the subsequent NCN is the same as that for managing all findings.

Refer to Section 4.7.4 – Findings Management of this manual.

#### 4.6.10 Aircraft Survey Report

##### 4.6.10.1 PROCESS – Issuance and acquittal of Code ‘A’ ASRs

1. **Issuing inspector:** Immediately contacts the authorisation management team leader and the Controlling Office Manager to discuss if a Code ‘A’ ASR should be issued.
2. **Issuing inspector, surveillance lead, authorisation management team leader and Controlling Office Manager:** Discuss and categorise safety concerns and decide if a Code ‘A’ ASR should be issued.
3. **Issuing inspector:**
  - a) Compiles the Code ‘A’ ASR using the [ASR form \(Form 996\)](#)
  - b) Issues the Code ‘A’ ASR to the registered operator
  - c) Notifies the authorisation management team leader and the Controlling Office Manager when the Code ‘A’ ASR is issued.

**Note:** In the unlikely event that the issuing inspector is not able to establish communication with the controlling office to discuss the issuance of the Code ‘A’ ASR with the Controlling Office Manager or the authorisation management team leader, and a serious safety concern continues to exist, the Issuing Inspector should issue the Code ‘A’ ASR and make the appropriate notifications as soon as possible.

4. **Controlling Office Manager:**
  - a) Informs the Executive Manager, Legal Services Division in situations where the

- registered operator is being required to do something other than performing actual maintenance, so that Legal Services Division assistance can be provided.
- b) Notifies the Executive Manager, Operations when the Code 'A' ASR is issued.
5. **Surveillance lead:** Provides support to the issuing inspector as required throughout the issuing process.
6. **Executive Manager:** Notifies the SSO and the Director of Aviation Safety when the Code 'A' ASR is issued for a Class A aircraft.
7. **Registered operator:** Responds to the Code 'A' ASR, including all actions taken to rectify the safety concern.
8. **Issuing inspector:**
- a) Through a process of peer review, assesses the registered operator's response and, when satisfied, acquits the Code 'A' ASR
- b) Notifies the authorisation management team leader and Controlling Office Manager that the Code 'A' ASR has been acquitted
- c) Notifies the registered operator that the Code 'A' ASR has been acquitted.
9. **Controlling Office Manager:** Notifies the Executive Manager and the Executive Manager, Legal Services Division (in the situations referred to in 4 above as needing Legal Services Division input).
10. **Executive Manager:** Notifies the SSO and the Director of Aviation Safety, if required, that the Code 'A' ASR has been acquitted.
- Note: A separate NCN may also be issued with the Surveillance Report if a Code 'A' ASR has been issued for a deficiency related to a potential systemic failure and where there is a benefit to aviation safety through the identification of the root cause of the deficiency (as outlined in the section below).*
- The process for dealing with the registered operator's response, assessment and acquittal of a Code 'A' ASR, including the capture of all details in Sky Sentinel and on the relevant file (TRIM), is the same as that for an NCN. Refer to Section 4.7.4 – Findings Management.*

#### 4.6.10.2 PROCESS – Issuance and acquittal of Code 'B' & 'C' ASRs

1. **Issuing Inspector:**
- a) Determines the type of finding based on the nature of the issue, e.g. an ASR notifies airworthiness deficiencies identified following the survey of an aircraft and or its associated records
- b) Formulates findings using the [ASR form \(Form 996\)](#) in Sky Sentinel or, if issued on site, use the hard-copy form.
2. **Registered operator:** Responds to the Code 'B' or 'C' ASR, including all actions taken to

rectify the safety concern.

**3. Authorisation management team leader:** Takes appropriate action to ensure that standardisation and consistency is maintained.

**4. Surveillance lead or surveillance team member:**

- a) Where the office issuing the finding is not the responsible controlling office, the responsible controlling office can access all documentation via Sky Sentinel for review by the controlling office, authorisation management team leader and Controlling Office Manager
- b) Ensure all documentation is appropriately filed in TRIM.

#### 4.6.10.3 GUIDANCE – ASRs

ASRs are generally issued to registered operators (See reg 47.100 of the CASR 1998) who may or may not be the authorisation holder. The ASR notifies airworthiness deficiencies identified following the survey of an aircraft and or its associated records. An ASR can be accompanied by a covering Surveillance Report to identify a particular check undertaken, such as a ramp check, aircraft permanent records check or inspection of an aircraft that resulted in the issue of an ASR(s).



**NOTE:** The ASR for (Form 996) is available as a hard copy pad, can be downloaded from CASACONnect or can be generated from Sky Sentinel. If the ASR is recorded in a hard copy format the ASR must still be entered into Sky Sentinel.

ASRs are used to make a direction pursuant to CAR 38(1) or a formal notification relating to a non-compliance of an aircraft or its maintenance documentation. Copies of ASRs are kept on the aircraft TRIM file in each controlling office and on the relevant authorisation holder's TRIM file. ASRs may be accompanied by an NCN where there is a particular breach. An NCN is issued to the registered operator to ensure appropriate remedial and corrective action is taken.

ASRs must be associated with a surveillance event when recorded in Sky Sentinel.



**NOTE:** If the authorisation holder can be identified as contributing to the non-compliance, an NCN must also be raised on that authorisation holder. The issue of an ASR does not prejudice CASA's prerogative to take, at any time, such regulatory or other legal action as may be appropriate in the circumstances.

**Note:** All ASRs must be entered in Sky Sentinel and, if the hard copy ASR pad is used on site, the serial number annotated in the top right hand corner must be reflected in the Sky Sentinel entry as this system automatically generates a discrete number which must be cross referenced with the on-site hard copy.

#### Acquittal of ASRs

Acquittal of all codes of Aircraft Survey Report requires a registered operator to advise CASA in a timely manner of the action taken or being taken to address the identified problem(s). This will therefore require careful consideration of the code applied to the direction and the regulation reference.

#### Recommended Timeframes

- Code 'A' ASRs require "Prior to further Flight" action as they effectively ground the aircraft until the defect or damage is rectified. Responses to a Code 'A' ASR must be peer reviewed to ensure that an appropriate response has been received to acquit the ASR.
- Code 'B' and 'C' items require prompt action to initiate an inspection or corrective action as necessary. The registered operator as a result of the inspection irregularities found should reply within a 21 day period as to the corrective action undertaken. The lower section of the hardcopy form is used to facilitate this need. Once received and the inspector is satisfied the required action has been completed the Field Office can acquit the ASR in Sky Sentinel and notify the Operator.
- Another deciding factor as to what action CASA should take is whether the registered Operator is in contravention of the direction.

#### 4.6.11 Observations

##### 4.6.11.1 PROCESS – Write findings (Observations)

- 1. Surveillance lead or surveillance team member:**
  - a) Determine the type of finding based on the nature of the issue, e.g. an Observation is used when there is a potential breach of legislation caused by the deficiency  
*Note: An Observation is also used to highlight system deficiencies and poor operational safety risk control by the authorisation holder.*
  - b) Formulate findings using the [Observation form \(Form 1298\)](#) in Sky Sentinel.
- 2. Authorisation management team leader:** Takes appropriate action to ensure that standardisation and consistency is maintained.
- 3. Surveillance lead or surveillance team member:**
  - a) Where the office issuing the finding is not the responsible controlling office, the responsible controlling office can access all documentation via Sky Sentinel for review by the controlling office, authorisation management team leader and Controlling Office Manager
  - b) Ensure all documentation is appropriately filed in TRIM
  - c) Ensure the controlling office conducts data entry.

#### 4.6.11.2 GUIDANCE – Write findings (Observations)

An Observation is used to advise an authorisation holder of either or both of the following:

- latent conditions or system deficiencies which do not constitute a breach, but have the potential to result in a breach if not addressed
- identified areas for potential improvement in safety performance through more effective control of risks.

An Observation is issued to an authorisation holder to provide written notice of inadequate or ineffective risk control and should detail the identified potential system deficiency.

The aim of issuing an Observation against a system deficiency is not to provide consultancy or tell the authorisation holder what to do. It is always the authorisation holder's responsibility to investigate and identify the appropriate means of addressing potential enhancements to safety performance.

While an authorisation holder is not obligated to respond formally to an Observation, the way in which an authorisation holder manages Observations provides an indication of the level of maturity of their management system.

All Observations must be associated with a surveillance event and be recorded in Sky Sentinel.

#### 4.6.12 Surveillance reporting

The same Surveillance Report template is applied in developing reports for Level 1 and Level 2 surveillance events.

The maximum 20 business-day timeframe to produce and issue the report from the date of the exit meeting, as set out in the [Surveillance Notification Letter \(Form 1304\)](#), should only be extended in exceptional circumstances with the authorisation holder advised accordingly.

If a surveillance lead requires an extension to this timeframe they must seek approval from the authorisation management team leader who may approve an extension up to a total of 30 business days. The timeframe can only be extended beyond 30 business days if approved by the Controlling Office Manager with the authorisation holder kept informed accordingly.

This reporting period also allows the surveillance team time to review overall surveillance event outcomes and decide whether to continue with the collaborative corrective action. Alternatively, if greater concern exists, e.g. repeated findings over previous surveillance events or significant regulatory breach(s), the Controlling Office Manager must initiate the Coordinated Enforcement Process (CEP.) This process is set out in [Chapter 3 of the Enforcement Manual](#). The CEP will provide a forum for discussing alternative options. (For any queries in relation to this process contact the Senior Adviser, Enforcement Policy and Practice.)

**Note:** When preparing a Surveillance Report it should be kept in mind that the report is a formal record of the authorisation holder's compliance. This record may be viewed not only by the authorisation holder and CASA, but in courts and tribunals.





**Note:** Construct the Surveillance Report from the bottom up to ensure the findings reflect the discipline summaries and, in turn, the discipline summaries and findings are reflected in the summary.

#### 4.6.12.1 PROCESS – Develop Level 1 Surveillance Report

1. **Surveillance lead:** Discusses the overall performance of the surveillance with the surveillance team and obtains agreement from surveillance team members on the content of the Surveillance Report.
2. **Surveillance team member:**
  - a) Compiles surveillance data for their specific discipline area, including completing the [Surveillance Worksheet \(Form 1308\)](#), control effectiveness review in Sky Sentinel, findings and supporting evidence (All NCNs, Safety Alerts, ASRs or Observations must be included in the report via Sky Sentinel.)
  - b) Drafts the [Surveillance Technical Discipline Summary \(Form 1288\)](#) if applicable comparing the results with results from the last surveillance to help identify system deficiencies for inclusion in the Surveillance Report
  - c) Forwards the surveillance data and the draft discipline summaries to the surveillance lead.
3. **Surveillance lead:**
  - a) Ensures all surveillance documentation is consolidated and, with the Surveillance Report, information is entered into Sky Sentinel
  - b) Generates the [Surveillance Report \(Form 1301\)](#) embedded in Sky Sentinel and marks the report as completed

**Note:** Once the report is finalised in Sky Sentinel the system recognises the surveillance has been completed and the authorisation management team leader is notified via automated email that the report is available for review.
4. **Authorisation management team leader:**
  - a) Reviews the Surveillance Report to ensure it meets all requirements as outlined in this procedure
  - b) When satisfied, marks the Surveillance Report as endorsed in Sky Sentinel which then generates an automated email notifying the Controlling Office Manager that the report is available for approval.
5. **Controlling Office Manager:**
  - a) Reviews the Surveillance Report for clarity and conformity with CASA policies and procedures

- b) When satisfied, marks the Surveillance Report as approved in Sky Sentinel which generates an automated email notifying the surveillance lead that the report has been approved.

**6. Surveillance lead:**

- a) Once the email advice of approval is received, prints out a hard copy of the Surveillance Report
- b) Signs-off the report as the person responsible for conducting the surveillance
- c) Attaches hard copies of all associated findings
- d) Submits the hard copy report with findings to the Controlling Office Manager for signature.

**7. Controlling Office Manager:** Signs-off as approved the hard copy of the report and returns it to the surveillance lead.

**8. Surveillance lead:**

- a) Scans the signed copy and saves the document electronically as a PDF file
- b) Distributes the Surveillance Report to the authorisation holder ([Form 1292 – Surveillance Report Covering Letter](#)), including any findings that have been issued as part of the surveillance event.

**Note:** *The report may be emailed to the authorisation holder, handed personally to the authorisation holder's accountable manager or posted to the authorisation holder directly.)*

**9. Data entry staff/Technical administration staff (if available):** Ensure all information, including the report and surveillance findings are filed appropriately and entered into Sky Sentinel as per the guidelines.

**Note:** *Any proposed amendment to a finding requires notification to, and agreement by, the issuing inspector.*

*A control effectiveness review must be completed in Sky Sentinel by an authorisation management team member and not by data entry staff or a technical administration staff member.*

*Where the surveillance team that produced the Surveillance Report is not from the controlling office they should forward the report to the relevant controlling office for issue.*

#### 4.6.12.2 GUIDANCE – Develop Level 1 Surveillance Report

A Surveillance Report is used to succinctly capture information obtained during the surveillance and its analysis, which supports CASA's actions and future surveillance of an authorisation holder.

Inspectors must record findings made during the surveillance, evaluate the findings and develop the report. It should include analysis of the authorisation holder's performance against legislation and a review of control effectiveness during the surveillance event.

The purpose of CASA's Surveillance Report is to document the surveillance information in a logical manner, and be supported by facts, to enable decision-makers (i.e. the authorisation holder and CASA) to understand the deficiencies identified and to allow the authorisation holder to formulate appropriate action.

The Surveillance Report has a three-fold function:

- to direct the authorisation holder to address deficiencies and achieve legislative compliance
- to inform the authorisation holder of elevated system risks and encourage the authorisation holder to act on the findings
- to provide updated information to inform future assessments by the authorisation management team. This includes:
  - focusing future surveillance
  - enforcement strategies to secure compliance
  - highlighting areas for targeting surveillance and/or education.

**Note:** For guidelines on completing a Surveillance Report see Annex 1 – Surveillance Standards and Protocols.

#### 4.6.13 Level 2 – Surveillance Report

##### 4.6.13.1 PROCESS – Develop Level 2 Surveillance Report

###### 1. Surveillance team member or surveillance lead:

- a) Compiles surveillance data for specific discipline areas (if more than one discipline), including completing the [Surveillance Worksheet \(Form 1308\)](#), findings and supporting evidence (NCNs, Safety Alerts, ASRs and Observations must be included in the report via Sky Sentinel.)
- b) Drafts the Discipline Summaries, if relevant, comparing the results with results from the last surveillance to help identify system deficiencies for inclusion in the Surveillance Report
- c) Forwards the surveillance data and the draft discipline summaries to the surveillance lead, if more than one inspector.

###### 2. Surveillance lead:

- a) Ensures all surveillance documentation is consolidated and, with the Surveillance Report, is entered into Sky Sentinel
- b) Generates the [Surveillance Report \(Form 1301\)](#) embedded in Sky Sentinel and marks the Surveillance Report as completed. Notification to the authorisation management team leader is sent via automated email that the report is available for approval and sign-off.

#### 3. Authorisation management team leader:

- a) Reviews the Surveillance Report and, when satisfied, marks the Surveillance Report as approved in Sky Sentinel which generates an automated email notifying the surveillance lead that the report has been approved
- b) Advises the Controlling Office Manager of the finalisation of the Surveillance Report.

#### 4. Surveillance lead:

- a) Once the email advice of approval is received, prints out a hard copy of the Surveillance Report
- b) Signs-off the report as the person responsible for conducting the surveillance
- c) Attaches hard copies of all associated findings
- d) Submits the hard copy report with findings to the authorisation management team leader for signature.

#### 5. Authorisation management team leader: Signs-off as approved the hard copy of the report and returns it to the surveillance lead.

**Note:** Where the Authorisation management team leader is the Surveillance lead, these surveillance reports must be approved by the Controlling Office Manager.

#### 6. Surveillance lead:

- a) Scans the signed report and saves electronically as a PDF file to TRIM
- b) Distributes the report to the authorisation holder, including any findings that have been issued as part of the surveillance event. (**Note:** The Surveillance Report may be emailed to the authorisation holder, handed personally to the authorisation holder's accountable manager or posted to the authorisation holder directly.)

**Note:** If there are no findings resulting from the Level 2 surveillance event, the Surveillance Report need not be distributed to the authorisation holder, unless there is a particular reason to do so.

#### 7. Data entry staff/Technical administration staff (if available): Ensure all information, including the report and surveillance findings, is filed appropriately and entered into Sky Sentinel as per the guidelines.

**Note:** Any proposed amendment to a finding requires notification to, and agreement by, the issuing inspector.

Where the surveillance team that produced the Surveillance Report is not from the controlling office they should forward the report to the relevant controlling office for issue.

#### 4.6.13.2 GUIDANCE – Develop Level 2 Surveillance Report

The Level 2 – Surveillance Report is a reduced content version of the Level 1 – Surveillance Report. It should include analysis of the authorisation holder's performance against legislation.

The Surveillance Report includes a summary, and where applicable, disciplines summaries and a reference to findings. The report should be objective, clear and concise.

**Note:** For guidelines on completing a Surveillance Report see Annex 1 – Surveillance Standards and Protocols.



**Note:** Where multiple Operational Checks are conducted on separate authorisation holders a separate Surveillance Report must be issued to each authorisation holder.

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#### 4.6.14 Accountabilities – Surveillance Event Reporting

Position	Accountabilities
<b>Executive Manager</b>	<ul style="list-style-type: none"> <li>Notify the SSO and Director, Aviation Safety of any Safety Alerts and subsequent acquittal</li> </ul>
<b>Controlling Office Manager</b>	<ul style="list-style-type: none"> <li>Review and approve Level 1 – Surveillance Report</li> <li>Discuss and categorise safety concerns and decide if a Safety Alert should be issued</li> <li>Notify the Executive Manager, the Senior Adviser Enforcement Policy and Practice and the Manager Legal Branch of any Safety Alerts and subsequent acquittal</li> <li>Refer matters for Coordinated Enforcement</li> <li>Approve extensions to the timeframe for providing the Surveillance Report beyond 30 business days</li> </ul>
<b>Authorisation management team leader</b>	<ul style="list-style-type: none"> <li>Review and recommend approval of Level 1 – Surveillance Report</li> <li>Approve Level 2 – Surveillance Report</li> <li>Discuss and categorise safety concerns and decide if a Safety Alert should be issued</li> <li>Approve extensions to the timeframe for providing the Surveillance Report beyond 20 business days up to 30 business days</li> </ul>
<b>Surveillance lead</b>	<ul style="list-style-type: none"> <li>Consolidate surveillance information</li> <li>Peer review findings to ensure they meet requirements prior to issue</li> <li>Ensure production of the Surveillance Report and where appropriate, complete the summary</li> <li>Sign the Surveillance Report</li> <li>Distribute the Surveillance Report to the authorisation holder</li> <li>Discuss and categorise safety concerns and decide if a Safety Alert should be issued</li> <li>Provide support to issuing inspector as required throughout the issuing process</li> </ul>
<b>Issuing inspector</b>	<ul style="list-style-type: none"> <li>Consult with authorisation management team leader and Controlling Office Manager on whether a Safety Alert should be issued</li> <li>Write up of findings (Safety Alerts, NCNs, ASRs and Observations)</li> <li>Issue the Safety Alert advising the authorisation holder to respond</li> </ul>

Position	Accountabilities
	<p>within five calendar days detailing the immediate remedial action to be taken</p> <ul style="list-style-type: none"><li>• Notify the authorisation management team leader and Controlling Office Manager of Safety Alert issue and subsequent acquittal</li></ul>
<b>Surveillance team member</b>	<ul style="list-style-type: none"><li>• Collate and pass all relevant surveillance information to the surveillance lead</li><li>• Peer review NCN findings to ensure they meet requirements prior to issue</li><li>• Assist in compiling and reviewing the Surveillance Report, including Discipline Summaries if relevant</li><li>• Enter report data into Sky Sentinel</li><li>• Ensure records management processes are followed</li><li>• Analyse all surveillance event evidence and review control effectiveness for assessed systems risks and input effectiveness scores into the Mitigated Risk Calculator tool in Sky Sentinel</li></ul>
<b>Data entry staff/Technical administration staff</b>	<ul style="list-style-type: none"><li>• Ensure all information, including the report and surveillance findings, is filed appropriately and entered into Sky Sentinel as per the guidelines.</li></ul>



**NOTE:** The controlling/oversight office is responsible for issuing surveillance findings to an authorisation holder. However, findings may be issued by another office where a surveillance event is conducted on behalf of the controlling office or where a finding is issued during a non-scheduled check. All findings must be subsequently passed to the controlling/oversight office for their ongoing management.

## 4.7 Update System Information

### 4.7.1 Purpose

This section has two areas – information retrieval and finalisation. As discussed in *Section 3.2 – Surveillance Framework*, the Update System Information section is the point at which the process loops back in its continuum. This section provides guidance on collecting relevant information considered on the basis of its importance, relevance, completeness, quality and verifiability and the finalisation phase where the surveillance event is completed in a timely and effective manner, including the management of surveillance findings.

### 4.7.2 References

The following materials are applicable to the Update System Information – Finalisation phase.



<b>Handbook</b>	<i>Sky Sentinel User Guide</i>
<b>Report</b>	<i>Systems &amp; Elements</i> (refer to the relevant technical annex)
<b>Forms</b>	<i>Form 1291 – NCN Rejection Letter*</i> <i>Form 1302 – Overdue NCN Letter*</i> <i>Form 1303 – NCN Acquittal Letter*</i>

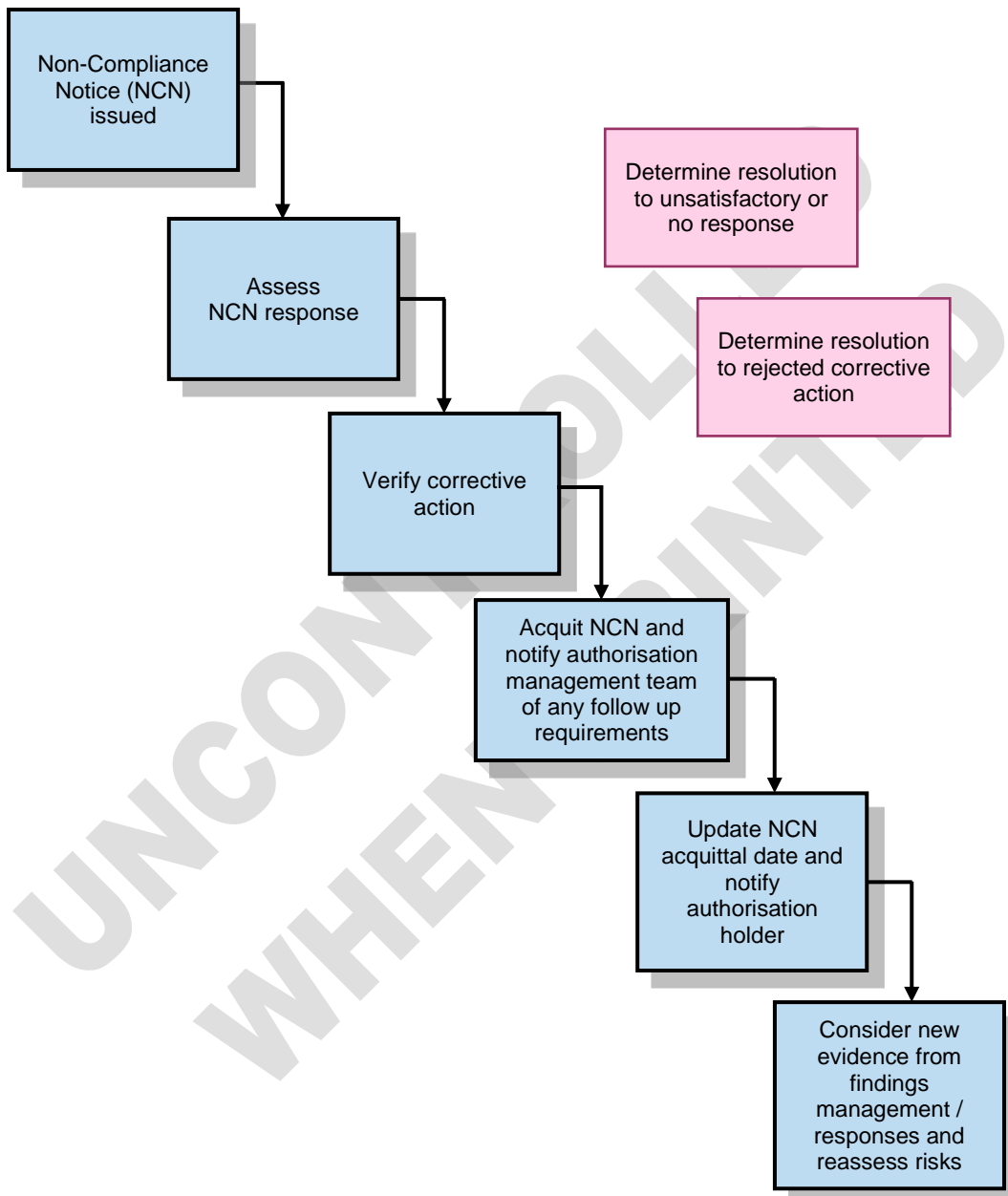
\* *Generated in Sky Sentinel*



#### 4.7.3 Process

**Note:** Detailed process maps are available online on the CASA intranet.

#### Manage findings (NCNs)



#### 4.7.4 Findings management

It is the responsibility of the authorisation management team to process any responses to NCNs and other findings should a response be received; and ensure adequate records are maintained. However, other offices acting on behalf of an authorisation management team may issue findings. It is the role of the issuing inspector to acquit an NCN.

The authorisation management team leader can provide more information on open findings as required to the SPR group on NCNs and ASRs, which are accessible through Sky Sentinel. Information can be viewed at any time from Sky Sentinel to determine overdue NCNs and ASRs. Overdue NCNs are managed and followed up by the controlling office through Sky Sentinel. Observations can be viewed through Sky Sentinel.

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##### 4.7.4.1 PROCESS – Receive response

###### Issuing inspector:

On receipt of a response from the authorisation holder regarding an NCN:

- a) Records the "Response received" date in Sky Sentinel, as outlined in the *Sky Sentinel User Guide*
- b) Records on the relevant file and in the comments section in Sky Sentinel, all administrative action taken, such as when the response was received and when the data was entered
- c) Captures authorisation holder's response on the relevant file (TRIM)
- d) Sets subsequent amended due dates, as necessary, and records the justification for any additional due dates in the comments section of the relevant NCN page in Sky Sentinel.

##### 4.7.4.2 GUIDANCE – Receive response

While it is a requirement that a formal response to an NCN be received from the authorisation holder within 21 calendar days (see *Section 4.6.8.2 – GUIDANCE – Write findings (NCN)*), it is not uncommon in the ongoing management of an NCN that after receipt of the initial response, verification and acquittal will involve multiple interactions with the authorisation holder. This is particularly relevant in cases involving requests for extension supported by documented acceptable action plans that include timeframes and milestones. (See *Section 4.7.8 – Request for extension* particularly noting when action plans should be referred to CEP.) Any subsequent responses/notifications of a substantial nature from the authorisation holder that are relevant to the NCN acquittal process, particularly if required to satisfy action plan milestones, must be managed by incrementally resetting new due dates as necessary and recording the information as received in Sky Sentinel.

#### 4.7.5 Assessment of response

##### 4.7.5.1 PROCESS – Assess response

1. **Authorisation management team leader:** Decides who is responsible for assessing an NCN in the exceptional circumstances where the issuing inspector is unavailable.
2. **Issuing inspector:**
  - a) Assesses the response
  - b) Prior to acquittal of an NCN, assesses response/remedial action by reviewing against criteria
  - c) Adds appropriate comments in the logged comments section within Sky Sentinel.

##### 4.7.5.2 GUIDANCE – Assess response

Under normal circumstances, the author of the NCN (issuing inspector) assesses the response. The authorisation management team leader must decide who is responsible for assessing an NCN should the issuing inspector be unavailable.

Any NCN must be responded to by the authorisation holder within 21 calendar days. The response must include advice of the remedial action that has been taken to return to a compliant state as well as the root cause analysis and corrective action to be undertaken and/or implemented. The response must provide evidence to satisfy the issuing inspector that the authorisation holder has returned to a compliant state and is actively working towards implementing the corrective action to mitigate the potential of recurrence of the identified deficiency.

While it is understood the required corrective action may not be achievable within the 21 day timeframe for large organisations or where the corrective action is complex, the expectation is that the authorisation holder will be able to satisfy the issuing inspector that the corrective action will be undertaken and provide suitable supporting evidence. These actions will need to be considered on a case by case basis. (See also 4.7.8 – *Request for extension*)

Options available to the issuing Inspector when assessing a response are:

- response accepted pending verification and acquittal, or
- response rejected.

Assessment of remedial action should be reviewed against the following criteria:

- Did the authorisation holder state the remedial action taken to remedy the identified breach?
- Did the remedial action adequately provide a short-term treatment to the identified deficiency?
- Has sufficient and conclusive evidence been provided to satisfy the inspector that all requirements have been met and the authorisation holder has returned to a compliant state?

Assess the adequacy of the corrective action taken by considering:

- Have the root causes been identified?
- Are the corrective actions necessary to address the breach and if so was it performed?
- When will the corrective action be completed?
- Is there sufficient validation of the response to acquit the NCN?
- Is there any flow-on effect that could impact on other processes? If so, has this impact been considered?
- Has the corrective action been implemented in all relevant areas of the authorisation holder's organisation?
- What monitoring system has been implemented to track the effectiveness of the corrective action?
- if there is uncertainty, the CEP should be initiated through the Controlling Office Manager. This process is set out in [Chapter 3 of the Enforcement Manual](#). The CEP will provide a forum for discussing alternative options. (For any queries in relation to this process contact the Senior Adviser, Enforcement Policy and Practice.)

#### Response accepted pending verification and acquittal

*Response accepted pending verification and acquittal* means the authorisation holder's response has adequately addressed each of the response elements, namely remedial action, root cause and corrective action, but this has not yet been verified. Verification in this context means evidence providing a high degree of assurance that the intended outcomes had been accomplished and verification has been scheduled for follow-up in Sky Sentinel.

The response should answer the principal questions and/or detail the following required actions:

- **Remedial action** – Immediate action taken by an authorisation holder in response to a finding to address the deficiency which caused the breach and return to a compliant state  
*Safety outcome* – An immediate, short-term treatment was put in place ensuring the operation was brought within safe parameters by eliminating the safety concern. If no remedial actions were applied, the deficiency may have become, or continue to be, an unsafe operation or act (ie error or violation).
- **Root cause** – the fundamental breakdown or failure of a process or system, which when resolved, prevents a recurrence of the deficiency.  
*Safety outcome* – Evidence supporting the conclusion of the causal factor(s) contributing to the deficiency's root cause. Singularly, this does not assure continued effectiveness of a corrective action.
- **Corrective action** – Action required by an authorisation holder in response to a breach that reduces the potential for recurrence. The action must address the root cause of the deficiency that caused the breach and must include a review to ensure the action is effective.  
*Safety outcome* – A prevention strategy (what, how, where and by whom) of the corrective measures to be applied to the root cause to eliminate a repeat recurrence and initiate continuous improvement. The variables allowing an authorisation holder to monitor the

effectiveness of their corrective action and to assure continued safety and compliance should also be included.

**Note:** *There will be situations where establishing the root cause may only require a fairly simple analysis by the authorisation holder and the corrective action needed is minor. The reason CASA includes root cause analysis and corrective action in the expected response to NCNs is that they provide further assurance to CASA, from a safety perspective, that the authorisation holder understands why the breach occurred and has acted to reduce the chance of reoccurrence.*



**NOTE:** *Consider conducting an oversight posture assessment using the AHPI tool based on information received.*

#### Response rejected

A *Response Rejected* assessment means that some/all elements of the response failed to satisfy the issuing inspector that the NCN had been appropriately addressed. The authorisation holder must be advised in writing ([Form 1291 – NCN Rejection Letter](#)) including the reasons why the response was rejected. If responses provided by the authorisation holder have led to repeated rejections by the issuing inspector or it is clear that they are not frankly and openly addressing the deficiencies raised by the NCN then the authorisation management team must apply the procedures for “Unsatisfactory response” in Section 4.7.7.3 GUIDANCE – Unsatisfactory response.

#### 4.7.6 Acquittal and closure of an NCN

##### 4.7.6.1 PROCESS – Acquit an NCN

1. **Authorisation management team leader:** Decides who is responsible for acquitting an NCN in the exceptional circumstances where the issuing inspector is unavailable.
2. **Issuing inspector:**  
Following assessment and acceptance of the NCN response:
  - a) Records the verification evidence and action taken in the relevant comments box in Sky Sentinel
  - b) Selects the appropriate MSM Component in Sky Sentinel, for data capture and reporting purposes, based on the root cause analysis provided by the authorisation holder
  - c) Acquits the NCN in Sky Sentinel by noting the acquittal date and entering all supporting acquittal comments
  - d) Notifies the authorisation holder in writing of the acquittal of the NCN ([Form 1303](#))

*NCN Acquittal Letter – optional*

- e) Ensures the acquitted NCN with supporting finalisation documentation are placed on the appropriate TRIM file
- f) Creates a proposed SR in Sky Sentinel for follow-up if deemed necessary.

#### 4.7.6.2 PROCESS – Close an NCN

1. **Authorisation management team leader:** Decides who is responsible for closing an NCN in the exceptional circumstances where the issuing inspector is unavailable.
2. **Issuing inspector:**  
Following the determination to close the NCN:
  - a) Completes the Verification of Action section of the appropriate NCN stating the reason for the closure (see *Management of NCN – Closure* below for more information)
  - b) Completes the name and file reference sections
  - c) Uses 'Print to PDF' from Sky Sentinel and prints
  - d) Signs the NCN.
3. **Authorisation management team leader:** Signs-off on the closure to indicate management approval of the closure by signing the hard copy of the NCN.
4. **Issuing inspector:**
  - a) Scans the signed NCN and saves the file to TRIM
  - b) Ensures the NCN and supporting documentation are placed on the appropriate TRIM file
  - c) Enters the NCN information into Sky Sentinel (**Note:** *The comments field must contain 'NCN closed'.*)

#### 4.7.6.3 GUIDANCE – Acquit and close an NCN

Under normal circumstances, the author of the NCN (issuing inspector) must acquit the response. The authorisation management team must decide who is responsible for acquitting an NCN if the issuing inspector is unavailable.

#### Management of NCN – Acquittal

Once a response has been accepted (see *Section 4.7.5.2 GUIDANCE – Assess response: Response accepted pending verification and acquittal*) it may be considered for acquittal.

On occasions an NCN response will require authorisation management team monitoring of the corrective action over time. This is particularly the case in circumstances involving larger

organisations, changes in complex systems, the development of supporting procedures and documentation or when training large numbers of personnel. This must be assessed on a case by case basis.

In managing the progress of corrective actions, the issuing inspector may acquit the NCN at any point where appropriate verification has been made. In doing so, the following principles must be considered:

- the response provides satisfactory explanation and evidence that the remedial action taken removes all immediate threats to safe operations while providing adequate and effective compliant short-term treatment
- the response is supported by evidence of a credible investigation by the authorisation holder and a root cause analysis process allowing for findings determining the causal factor(s) which contributed to the deficiency
- the response provides satisfactory explanation and evidence that the corrective action taken is considered adequate and effective in minimising or eliminating any repeat of the deficiencies leading to the breach.

**Satisfactory evidence** – NCN verification, based purely on a proposed plan of corrective action, is **not** adequate for acquittal. Evidence should be direct rather than circumstantial. There should be proof by way of material evidence such as:

- documentation, e.g. manual amendments
- acquisition of hardware or software
- acquisition of plant or material
- addition of qualified staff
- observed behavioural changes, changes of procedures
- observed rectification of material damage or deficiencies.

**Failure to verify** – If the issuing inspector becomes aware an authorisation holder is unable to provide satisfactory evidence or if corrective action cannot be verified, then the procedures for “unsatisfactory response” should be followed.

If the issuing inspector deems it necessary that an acquittal needs to be followed up for verification at a future date, this should be entered as a proposed SR in Sky Sentinel.

An NCN must only be acquitted when the controlling office is satisfied that the authorisation holder has addressed the remedial and corrective actions (see *Section 4.7.5 – Assessment of Response*). Acquittal of an NCN requires an authorisation holder to carry out rectification action within the agreed timeframe.

The acquittal process includes recording the verification evidence and action taken in the relevant comments box in Sky Sentinel. The verification evidence recorded must reflect the complexity of the rectification activities to be undertaken by the authorisation holder. The appropriate MSM Component must also be selected in Sky Sentinel at this time, for data capture and reporting purposes, based on the root cause analysis information provided by the authorisation holder.

Noting the effective acquittal date in Sky Sentinel formally records the NCN as acquitted.



**Note:** *If an authorisation holder is subject to current enforcement action, any NCN relating to the activity that is the subject of that enforcement action must not be acquitted unless Legal Services Division have been advised **prior** to the acquittal.*

*By the time enforcement action is commenced the authorisation holder will, most likely, be outside the time specified by CASA for response to the NCN.*

*It is anticipated that an authorisation holder will continue to address the subject of the outstanding NCN during the enforcement process as a measure of its willingness and ability to do so. However, where administrative action has been commenced, the timeframe for response will be constrained by the timeframe set out in the Show Cause Notice for a response to all the issues raised in that notice, including outstanding NCNs.*

#### Management of NCN – Closure

An NCN cannot be closed if enforcement action is being undertaken. An NCN can only be closed without acquittal when the authorisation holder is not operating, i.e. their authorisation has been surrendered or cancelled.

#### 4.7.7 No response received or unsatisfactory response

##### 4.7.7.1 PROCESS – No response received or unsatisfactory response

###### Controlling office:

- a) In the case of a Safety Alert – immediately notifies the Controlling Office Manager and initiates the CEP. This process is set out in [Chapter 3 of the Enforcement Manual](#). The CEP will provide a forum for discussing alternative options (For any queries in relation to this process contact the Senior Adviser, Enforcement Policy and Practice.)
- b) In cases of an NCN, determines the appropriate option (detailed below) depending on whether no response is received or an unsatisfactory response is received
- c) Documents all communication and actions/inactions in sufficient detail to support any possible enforcement action
- d) Ensures all actions, such as the issue of a reminder letter ([Form 1302 – Overdue NCN letter](#)), are entered in Sky Sentinel
- e) Reviews progress and options regularly and if issue persists, proposes a new SR through Sky Sentinel.

##### 4.7.7.2 GUIDANCE – No response received

A response should be received within the negotiated timeframes of the NCN.



If the NCN is associated with a Safety Alert and the authorisation holder has failed to respond, contact the Controlling Office Manager and initiate the CEP. This process is set out in [Chapter 3 of the Enforcement Manual](#). The CEP will provide a forum for discussing alternative options. (For any queries in relation to this process contact the Senior Adviser, Enforcement Policy and Practice.)

If the authorisation holder fails to respond to an NCN, the following options should be assessed to progress the NCN. One or several options can be considered and/or actioned:

- contact the authorisation holder's accountable representative to determine a way of resolution. Document all communication and retain on the appropriate file
- issue an NCN reminder letter ([Form 1302 – Overdue NCN letter](#)) at the appropriate time depending on the negotiated timeframes to be assessed on a case by case basis allowing a maximum of 14 calendar days in which to respond)
- schedule an additional surveillance event to verify the current situation. This option may depend on when the next surveillance is scheduled, resource availability.

If the authorisation holder fails to respond after being reminded of their responsibilities the Controlling Office Manager should be alerted and the CEP initiated. This process is set out in [Chapter 3 of the Enforcement Manual](#). The CEP will provide a forum for discussing alternative options. (For any queries in relation to this process contact the Senior Adviser, Enforcement Policy and Practice.)



**NOTE:** Any request for an extension of time received during the 14-day response period, subsequent to a reminder letter, should be dealt with by the controlling office on a case by case basis as per the processes set out in [Section 4.7.8 Request for Extension](#).

#### 4.7.7.3 GUIDANCE – Unsatisfactory response

Until satisfactory remedial and corrective actions have been provided and verified, the NCN must not be acquitted. If the authorisation holder is repeatedly unable or unwilling to provide an adequate response, despite reminders, the Controlling Office Manager must be alerted and the CEP initiated. This process is set out in [Chapter 3 – Enforcement Manual](#).

The response to an NCN may be unsatisfactory if:

- remedial and corrective actions have not addressed the root cause of the deficiency
- documented evidence is not sufficient
- the response is not understood.

At all stages, document the level or adequacy of the response in Sky Sentinel, i.e. the status of the acquittal process as the authorisation holder may not have responded in full to the NCN.

If the NCN is associated with a Safety Alert and the authorisation holder has failed to adequately respond contact the Controlling Office Manager and initiate the CEP. This process is set out in [Chapter 3 of the Enforcement Manual](#). The CEP will provide a forum for discussing alternative

options. (For any queries in relation to this process contact the Senior Adviser, Enforcement Policy and Practice.)

If the authorisation holder does not provide an adequate response, the following may be considered:

- contact the authorisation holder's accountable representative to determine a way of resolution. Document all communication
- schedule an additional surveillance event to verify the current situation. (This option may depend on when the next surveillance is scheduled, the availability of resources and may generate further NCNs.)

If the authorisation holder fails to give a satisfactory response after being reminded of their responsibilities contact the Controlling Office Manager and initiate the CEP. This process is set out in *Chapter 3 of the Enforcement Manual*. The CEP will provide a forum for discussing alternative options. (For any queries in relation to this process contact the Senior Adviser, Enforcement Policy and Practice.)

Documentation of decisions and escalation of unsatisfactory responses must be recorded in Sky Sentinel.

#### 4.7.8 Request for extension

##### 4.7.8.1 PROCESS – Request for extension

###### 1. Issuing inspector:

- a) Receives the authorisation holder's request for extension

**Note:** *The request must provide clear justification identifying what action is to be taken and the reason that further time is required to complete the action. The request must be made before the expiry of the 21-day response deadline.*

- b) Notifies the authorisation management team leader and the controlling office of the request and provides a copy of the proposed Action plan and any other supporting documentation submitted by the authorisation holder.

###### 2. Controlling office:

In consultation with the issuing inspector:

- a) Evaluates and approves those requests where the proposed extension is for a relatively short period and the authorisation holder has shown their capacity and willingness to satisfactorily complete the actions within the specified timeframe
- b) If the matter is of a complex nature requiring a detailed Action plan, including timeframes or milestones, and/or an extension beyond three months is being sought, refers the request and Action plan to the Controlling Office Manager.

###### 3. Controlling Office Manager: Decides on the acceptance or non-acceptance of the

extension as proposed based on the recommendations of the assessment. However, if the matter is of a complex nature requiring a detailed Action plan, including timeframes or milestones and/or an extension beyond three months is being sought, initiates the CEP. (See Section 4.7.8.2)

**Note:** Discretion will need to be exercised in relation to the complexity of the matter and whether it is required to be sent to CEP. In all cases where a decision on the facts is made **not** to refer to CEP the issuing inspector should note the reasons in Sky Sentinel for that decision and confirm their assessment that safety will not be compromised by the delay in the authorisation holder's response.

#### 4. Issuing inspector:

- a) Notifies the authorisation holder of acceptance or non-acceptance of the request or any required amendments to the action plan
- b) Files the request and documents the decision of acceptance or non-acceptance in Sky Sentinel
- c) Monitors the milestones and reports to the authorisation management team.

#### 5. Authorisation management team leader: Manages the monitoring and reporting process.

**Note:** If any deviations from an accepted Action plan occur, including any variation from specified timeframes or milestones etc, the CEP must be initiated through the Controlling Office Manager as set out in [Chapter 3 of the Enforcement Manual](#). The CEP provides a forum for discussing alternative options. (For any queries in relation to this process contact the Senior Adviser Enforcement Policy and Practice.)

#### 4.7.8.2 GUIDANCE – Request for extension

An authorisation holder is required to address the remedial action, root cause and corrective actions of an NCN. An authorisation holder may request an extension of time beyond the specified timeframe (21 days) to address the corrective action. **The request must be made before the expiry of the 21 days.** The request must provide justification for the extension including clearly identifying the action to be taken and the reason that further time is required to complete that action. The request must also detail what has already been done, up to the point of requesting the extension, to rectify the breach.

The process for consideration and approval of extension requests depends on the extent and nature of the request. No set timeframes are established for how long an extension can be granted with each request considered on a case by case basis. However, before granting an extension, CASA needs to be satisfied, based on the information provided by the authorisation holder, that it is reasonable to expect that the action to be taken cannot be completed within the 21 day period but will be completed within an agreed timeframe.

Requests for extensions for relatively short periods where the authorisation holder has shown the capacity and willingness to satisfactorily complete the actions within the specified timeframe can be approved by the controlling office in consultation with the issuing inspector. More complex requests and/or requests for extensions beyond three months must be referred to the CEP. It must be made

clear to the authorisation holder that the granting of an extension and the acceptance of an Action plan, as a result of a Coordinated Enforcement Meeting (CEM) or otherwise, does not preclude CASA from taking enforcement action, in the interest of aviation safety, if it considers that this is necessary and if there is any deviation from an agreed Action plan.

Any request for the variation of an accepted Action plan, including a change to the specified timeframes or milestones, must be considered through the CEP. The CEP will provide a forum for discussing alternative options.



**NOTE:** *An authorisation holder may at any time during the surveillance process suggest some form of written proposal, which in this manual is referred to as an Action plan (but may also be referred to by the authorisation holder by various names including recovery program, action management plan etc) to rectify issues that have been discussed generally during the surveillance event or which they realise, as a result of the conduct of the surveillance event, need to be addressed.*

*Discretion will need to be exercised in relation to the complexity of the matter and whether it is required to be sent to CEP. In all cases where a decision on the facts is made not to refer to CEP the relevant inspector will need to note in Sky Sentinel the reasons for that decision and confirm their assessment that safety will not be compromised by the delay in the authorisation holder's response. Those reasons will need to address:*

- *whether the proposed action covers all the issues*
- *whether the milestones (where there are a number of actions proposed) are realistic and have sufficient detail to be assessable*
- *while the issues are being addressed, persons are not exposed to a serious safety risk.*

*A proposed Action plan should form part of a request for extension of time to complete the action raised in an NCN(s) and will form part of the justification for an extension, that will be considered by the Controlling Office. Action plans of a complex nature, and/or where an extension of three months or more is being requested, must be referred through the Controlling Office Manager to the CEP for consideration.*

*For further information on dealing with such proposals see the Enforcement Manual – Chapter 3 Section 3.5 – Contraventions Identified during an Audit and in Chapter 6 at Section 6.8 – Further Coordinated Enforcement Meeting and Outcomes of Show Cause Conferences.*

#### 4.7.9 Transition to enforcement

##### 4.7.9.1 PROCESS – Transition to enforcement

1. **Controlling Office Manager:** Initiates action to refer the finding to the CEP
2. **Controlling Office:**
  - a) Documents the decision and places the documentation on the relevant surveillance file
  - b) Activates the Enforcement Flag in Sky Sentinel at the time the Coordinated Enforcement Referral form is completed and forwarded to the Enforcement Policy and Practice Outlook mailbox in Legal Services

*Note: Sky Sentinel prominently displays a textual notification 'flag' against the relevant authorisation holder indicating that a referral to Coordinated Enforcement has occurred. This referral to Coordinated Enforcement does not mean that enforcement action has or will be commenced.*
  - c) Indicates the reason for the referral as a logged comment in Sky Sentinel or provides details of the relevant TRIM reference for greater detail
  - d) If the referral does not progress, following advice from Legal Services, removes the enforcement flag from Sky Sentinel.
3. **Legal Services**
  - a) If the referral progresses to enforcement action, adds the appropriate notes in Sky Sentinel and regularly updates the current enforcement status as necessary
  - b) Records any additional information or references as necessary and relevant to ongoing surveillance activities associated with the authorisation holder concerned.
4. **Controlling Office Manager and Controlling Office:** Follows the steps outlined in the CEP as appropriate.

##### 4.7.9.2 GUIDANCE – Transition to enforcement

After any due date (or agreed extension date) has passed and the NCN is not acquitted, or where the period of requested extension is for a longer period and an Action plan has been proposed by the authorisation holder, where an Action plan has been proposed (see 4.7.5.2 GUIDANCE – Assess response and also 4.7.8.1 PROCESS – Request for extension and 4.7.8.2 GUIDANCE – Request for Extension) or in situations where there has been no response from the authorisation holder or the response is unsatisfactory, the Controlling Office Manager must initiate action to refer it to the CEP. This process is set out in [Chapter 3 of the Enforcement Manual](#). The CEP will provide a forum for discussing alternative options. (For any queries in relation to this process contact the Senior Adviser, Enforcement Policy and Practice.)

#### Enforcement flag

It is important that all CASA staff members involved in surveillance activities are aware of any current enforcement action and so the enforcement flag must be activated when an authorisation holder is referred to Coordinated Enforcement. Knowledge of the current enforcement status is

important throughout all surveillance phases; however, it is particularly important when assessing an NCN for acquittal.

**Note:** *If an authorisation holder is subject to current enforcement action, any NCN relating to the activity that is the subject of that enforcement action must not be acquitted unless the matter has been discussed with Legal Service Division prior to it being acquitted.*

*By the time that enforcement action is commenced the authorisation holder will most likely be outside of the time provided by CASA for response to the NCNs.*

*It is anticipated that an authorisation holder will continue to address the subject of the outstanding NCNs, during the enforcement process as a measure of its willingness and ability to do so.*

*However, where administrative action has been commenced, the timeframe for response will be constrained by the time-frame set out in the Show Cause Notice for a response to all the issues raised in that notice, including outstanding NCNs.*

#### 4.7.10 Follow-up control effectiveness review

##### 4.7.10.1 PROCESS – Follow-up control effectiveness review

###### Issuing Inspector:

- a) Considers all post-surveillance data received, including any information, root cause analysis, reports and plans submitted by the authorisation holder as part of the NCN acquittal process
- b) On the basis of new post-surveillance data received, including any responses received to Observations, decides whether there is any likelihood of change in the level of control effectiveness for those systems risks that had been assessed
- c) Consults with the authorisation management team leader as necessary in considering any new evidence received
- d) If the decision is not to amend any systems risks, documents this decision in Sky Sentinel as a comment in Sky Sentinel and, if appropriate, saves to TRIM
- e) If it is decided there is sufficient evidence that a follow-up review would result in a change in the level of the mitigated systems risk, compares the original evidence with the newly available evidence and enters the revised effectiveness score for the relevant system risk into the Risk Mitigation Calculator page in Sky Sentinel.

**Note:** *The follow-up review should be done by the issuing inspector who completed the initial control effectiveness review. If the issuing inspector is not available to complete the review at this time, the surveillance lead would be the best placed person to complete this activity, however, any surveillance team member (if relevant) could complete the review drawing on the original assessment and considering the impact of any new information.*

#### 4.7.10.2 GUIDANCE – Follow-up control effectiveness review

Once most of the information is received from the authorisation holder as part of the findings management process, particularly in verifying and acquitting any NCNs, a decision is made whether sufficient evidence exists to undertake a follow-up review of a particular system risk.

Possible post-surveillance information or evidence could include the following:

- NCN acquittal details:
- How effectively has the operator reviewed the root cause?
- How completely has the operator endeavoured to address both remedial and corrective actions to achieve long term compliance and safety?
- Has the authorisation holder addressed more than just compliance?
- Has the authorisation holder addressed the deeper safety questions?
- Have they initiated response to these issues in a timely manner or did they need reminding?
- if the authorisation holder utilises an SMS, did the operator include any, or all, of the appropriate issues from the surveillance into their SMS?
- responses to Observations
- responses to comments in the Surveillance Report
- any other information (email, letters or phone calls) that has a bearing on how the operator is addressing the issues raised in relation to a particular system risk.

The original review would have been based on evidence gathered during the surveillance. If the surveillance team member who initially conducted the risk analysis is available, they compare the new evidence with the original evidence and will be able to document the change to justify a follow-up review.

The timeframe for this review would normally be done after the findings have been acquitted and/or responded to. In circumstances where extensions are granted to authorisation holders to respond, any necessary follow up review may be deferred until the end of this period.



**NOTE:** This process should only be completed for systems risks which were originally assessed with mitigated risk ratings of Extreme Risk, High Risk or Medium Risk. No follow-up review is required for a system risk with a Low Risk mitigated risk rating.

#### 4.7.11 Information retrieval

Updating system information is a continuous process. The information retrieval process remains constantly active and may continue independently of a surveillance event and vice versa. The initiation of the authorisation holder assessment is routinely triggered by an update to system information.

#### 4.7.11.1 PROCESS – Retrieve information

**Authorisation management team:**

- a) Collects any relevant information to assist effective authorisation holder assessment
- b) Records the oversight posture assessment information in Sky Sentinel using the factors in the AHPI tool.

#### 4.7.11.2 GUIDANCE – Retrieve information

During this phase, information needed by the authorisation management team to inform the authorisation holder assessment is collected using the Authorisation Holder Assessment – Current Results page in Sky Sentinel.

In addition to standardised reports available through the data warehouse, local intelligence should be recorded. This can include recording comments in Sky Sentinel.

#### 4.7.12 Information sources

The following is a non-exhaustive list of information sources that can be accessed to support the assessment of a factor:

- past Sky Sentinel risk reports
- surveys
- regulatory history – findings (NCNs)
- system risk profile and history
- past Surveillance Reports and findings (NCNs and Observations)
- AIRS Information
- Service Difficulty Reports (SDRs)
- regulatory Service activity
- information gathered by the authorisation holder
- external information gathered from industry or other government agencies
- Enforcement action
- past accident/incident history
- action plans provided by the authorisation holder.

A large portion of this information is available to the surveillance team and authorisation management team via the Data Warehouse using the Business Objects application.



**Note:** For advice on where and how to access required information refer to Chapter 5 – Information Capture and Access.

#### 4.7.13 Issue of new authorisation and Post-authorisation Review

##### 4.7.13.1 PROCESS – Issue of new authorisation and Post-authorisation Review

**1. Controlling office:**

- a) Receives notification of the approval of a new authorisation
- b) Records the details of the new authorisation holder in Sky Sentinel.

**2. Controlling Office Manager:** Assigns an authorisation holder management team leader and team to be responsible for the ongoing surveillance monitoring of the new authorisation holder.

**3. Controlling office:** Record details of the responsible authorisation management team in Sky Sentinel.

**4. Authorisation management team:**

- a) Conducts a review of the new authorisation holder, including completing an oversight posture assessment using the AHPI
- b) Plans a post-authorisation review within a period of six to 15 months of the issue of a new authorisation to check all entry control requirements are being met.

##### 4.7.13.2 GUIDANCE – Issue of new authorisation and Post-authorisation Review

Notification of an authorisation approval triggers the recording of the new authorisation holder in Sky Sentinel for ongoing surveillance monitoring. An authorisation management team must also be assigned and recorded in Sky Sentinel at this time.

An assessment, including completing an AHPI, must also be conducted on the new authorisation holder.

A post-authorisation review is conducted to check that all entry control requirements are being met in the form of a Level 1 surveillance event for authorisation holders who are subject to this type of surveillance and may be a Health Check. Should a Health Check be conducted, then the next Level 1 surveillance event scheduled for the authorisation holder must be a Level 1 systems audit. Depending on the authorisation type issued, this type of surveillance must be conducted within six to 15 months following the initial issue. The scope of a post-authorisation review must be based on the authorisation type issued.

#### 4.7.14 Accountabilities – Update System Information

Position	Accountabilities
<b>Controlling Office Manager</b>	<ul style="list-style-type: none"> <li>• Ensure approved processes are in place to follow-up and acquit findings</li> <li>• Notify Senior Adviser, Enforcement Policy and Practice and the Manager Legal Branch about a Safety Alert when no response has been received within the specified timeframe</li> <li>• Refer matters for Coordinated Enforcement</li> <li>• Assigns responsibility for a new authorisation holder to an authorisation holder management team leader and team</li> <li>• Participate in collaborative decision making process for more complex requests for extensions for NCNs</li> </ul>
<b>Issuing inspector</b>	<ul style="list-style-type: none"> <li>• Follow up and acquit NCN findings</li> <li>• Notify the authorisation management team leader if no response received in the case of a Safety Alert</li> <li>• Ensure that the NCN follow-up data is provided to the relevant action officer and is entered into Sky Sentinel</li> <li>• Accept requests for extension for NCNs and notify authorisation management team leader and controlling office</li> <li>• Notify authorisation holder as to whether requests for extension are accepted or not accepted for NCNs</li> <li>• Monitor milestones on NCN extensions and report to authorisation management team</li> <li>• Conduct a follow-up control effectiveness review of any systems risks that may have changed sufficiently to constitute a change in the mitigated systems risk rating</li> </ul>
<b>Authorisation management team leader</b>	<ul style="list-style-type: none"> <li>• Assist issuing inspector in finalisation of a surveillance event to follow-up and acquit findings</li> </ul>
<b>Authorisation management team</b>	<ul style="list-style-type: none"> <li>• Collect relevant information to assist in assessment and record in Sky Sentinel</li> <li>• Conduct a review of the new authorisation holder, including completing an oversight posture assessment using the AHPI tool</li> <li>• Plan a post-authorisation review within a six to 15 month period of the issue of new authorisation</li> </ul>

Position	Accountabilities
<b>Controlling office</b>	<ul style="list-style-type: none"><li>• Record details of the new authorisation holder and responsible authorisation management team in Sky Sentinel</li><li>• Evaluate and approve requests for extension for NCNs of a straight forward nature in consultation with the issuing inspector</li><li>• Refer requests for extension for NCNs to Manager, Legal Branch for more complex requests and participate in collaborative decision making process</li></ul>

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### 5.1 Overview

#### 5.1.1 Purpose

This chapter defines the management of information in relation to the capture and assessment of surveillance information. It also outlines the purpose of the information captured, request of analysis of information and the release of information and associated protocols.

#### 5.1.2 References



##### Handbook

*Sky Sentinel User Guide*

##### Manuals/policies

*Safety Information Gateway*

*Records Management Manual*

*Information Security Manual*

*Information Management Procedures Manual*

*Protective Security Manual*

*Regulatory Safety Management Program Manual* (includes the Safety Analysis Framework)

### 5.2 Safety Analysis Information Support

The SSO supports all relevant divisions by providing safety analysis information to enhance decision making through the identification of existing and emerging risks.

SSO works within the Safety Analysis framework to:

- assist in deciding what additional facts are needed
- ascertain factors underlying safety deficiencies
- assist in reaching valid conclusions.

#### 5.2.1 Safety information

CASA's SAP BusinessObjects system (BO) enables access to important safety data, allowing centralised access to corporate information stored within the system.

BO provides safety reports and survey information at the individual operator level with the following information available:

- Electronic Safety Information Reports (ESIR) provided by Airservices
- 2011 and 2012 AOC Holder Safety Questionnaire (AHSQ) survey information
- 2010 Approved Maintenance Organisation survey information
- 2011 Aerodrome Survey (certified and registered aerodromes) information.

There are a number of options available for most reports, including the ability to download previously prepared reports, or customise search fields to access more specific information.

Guidance material on accessing and using BO is available on CASACONnect at:

<http://casaconnect/systems/bo/index.htm>

Access to specific reports through Business Objects can be gained by sending an email request to CASA's ICT Support or contacting the CASA IT service desk.

### 5.3 Ongoing Information Capture and Sharing

Throughout all phases of the surveillance process and on an ongoing basis, CASA inspectors and staff should be mindful of the importance of capturing and recording full details of all interactions with authorisation holders as well as providing the reasoning behind all decisions and assessments made during the process. All such recorded information must be evidence based, factual and justifiable within the scope of an individual's responsibilities and logged as a general comment in Sky Sentinel. Capturing and recording this information is important when reviewing previous events or if the matter is referred to CEP.

Any information collected regarding aviation activities should be made available to the Controlling Office Manager and/or the authorisation management team leader. The nature of the information will determine the method by which it is communicated (orally, email, etc).

The Controlling Office Manager and authorisation management team leader will consider the following when determining what to do with that information:

- effect on aviation safety
- effect on the existing risks associated with the authorisation holder
- relevant and applicable legal requirements
- who needs to be aware of the information
- the most effective way of communicating the information.

### 5.4 Information Quality Control

Controlling Office Managers and authorisation management team leaders must periodically review their information quality to ensure surveillance information is complete, consistent, valid, and

correct/accurate. This includes the ongoing review of NCNs, systems risk results and Surveillance Reports.

Authorisation management team leaders must ensure all information relevant to their assigned authorisation holders is entered into Sky Sentinel, including performing periodic reviews of work being undertaken by teams to ensure the highest information quality possible. The information contained in Sky Sentinel must not be altered in order to change or manipulate the surveillance work programs for the controlling offices. Any identified errors with data stored must be rectified by the information asset delegate. Details of information delegates and custodians are currently available from the Manager, Knowledge and Information Management Services. Information in the surveillance tool is used extensively for Safety Performance Analysis and national surveillance prioritisation.

### 5.4.1 Information elements

Each information element can be checked using some or all of the following measures:

- **Completeness** – all applicable fields contain the correct information. At this point no assessment is made regarding the content of the field, only that the information has been entered
- **Consistency** – records are checked for consistency with other information guidance, ie correct values are used for word pictures and in a consistent manner between inspectoral team members
- **Validity** – during information entry, appropriate and relevant peer review processes have occurred ensuring consistency and standardisation
- **Correctness/Accuracy** – Sky Sentinel fields may contain information that meets completeness, consistency and validity criteria, but can still be incorrect. Regular review of surveillance information by authorisation management team leaders and team members is a key step in correcting obvious typing errors and identifying missing or incorrect information.
- Answering the following questions may be helpful in ascertaining information quality:
  - Are the authorisation management team members using the surveillance tool?
  - Are timely entries being made?
  - Is the surveillance information complete, consistent, valid and accurate?
  - Are all surveillance records current for new authorisation holders?
  - Are all comments entered in a way that makes the intent readable, meaningful, useful, and understandable?

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### 1. Overview

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

### 1. Overview

This Annex defines the standards to be met and protocols to be followed by inspectors and, where relevant, associated staff and Managers, in relation to the conduct of surveillance, including:

- recurrent training requirements and maintenance of confidence
- protocols for conducting inspections and investigations
- sampling
- records management
- information capture protocols for findings
- systems risk guidelines
- Non-Compliance Notice (NCN) guidelines
- Aircraft Survey Report (ASR) guidelines
- Observation guidelines
- Surveillance Report guidelines
- Occurrence Management.

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## 2. Maintenance of Competency and Currency

Prior to undertaking tasks associated with surveillance and using the Sky Sentinel tool, all personnel are to receive training to ensure they have the required understanding and knowledge of the surveillance framework, their roles and responsibilities with regards to surveillance and the supporting tools. Responsibility for the delivery of this training and maintenance of these training records resides with the CASA Safety Education and Promotion Division. Further information is set out in the CASA Education Policy DAS-PN##-2013.

It is a requirement that all personnel maintain an acceptable level of currency and competency in conducting surveillance through:

- receiving training on:
  - systems standards and requirements
  - surveillance procedures, processes and methods
  - risk management procedures, processes and method
  - CASA's Enforcement Policy and the Coordinated Enforcement Process
- attaining a satisfactory or higher level of assessment made during the performance review and evaluation through CASA's Performance Appraisal and Communication Scheme (PACS) in regards to surveillance
- a requirement to participate in a minimum of four surveillance events annually.

All personnel associated with the management and conduct of surveillance are required to participate in regular surveillance events, commensurate with their role, in order to maintain their competency. If an individual fails to maintain this level of competency they are to inform their immediate manager so that action can be taken to ensure they are competent to perform surveillance tasks.

To regain currency, personnel are required to participate, under supervision, in:

- a single Level 1 surveillance event, or
- two Level 2 surveillance events.

If at any time an individual feels they do not have the confidence to undertake their surveillance tasking they should raise their concern with their immediate manager to discuss what options are available to assist the individual in reaching an appropriate level of competence.

Each manager is responsible for monitoring and managing personnel currency and competency requirements and keeping relevant records of these requirements as well as the results of training, qualifications and any recurrent training. Relevant training records are to be recorded in CASA Learning Management System (LMS).

This requirement will be monitored and included as part of the Internal Assurance Program.

#### 2.1 Higher duties

It is the responsibility of personnel performing higher duties to ensure they are fully aware of the roles and responsibilities associated with the acting role they are performing and that they are confident to do so. It is the responsibility of the Controlling Office Manager to monitor and manage the recency and confidence requirements of personnel performing higher duty roles and to keep appropriate training records to demonstrate that personnel performing higher duties hold the required skills to do so.

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### 3. Protocols for Conducting Inspections and Investigations

Certain CASA officers are authorised to conduct inspections and investigations to ensure authorisation holders are complying with the aviation legislation.

Officers are authorised to conduct inspections under various regulatory provisions of the CAR 1988 and the CASR 1998. (See both the general procedures in the CSM and the *Enforcement Manual* at Chapter 12 – Access, Chapter 13 – Gathering Evidence and Handling Exhibits, Chapter 14 – Note Taking, Chapter 15 – Interviewing and Chapter 16 – Detaining Aircraft.)

Officers should always determine whether they are *authorised* for these purposes. If there is any uncertainty in relation to the power to conduct an inspection of any organisation, CASA officers should contact Legal Service Division for advice.

Authorised CASA officers conducting routine inspections under the *Civil Aviation Regulations 1988* do not need to seek consent to enter an airfield or facility. However, as a matter of policy and courtesy, where possible, CASA officers will make contact with the occupier or owner.

If CASA officers do not produce their identity card when asked to do so, they are not authorised to conduct an inspection and any access may be denied by the occupier or owner.

As to whether consent is required for a CASA officer to take photographs or capture video footage during the conduct of an inspection, the matter depends on where the photographs or video are being taken.

If an aircraft is parked on premises which the CASA officer is lawfully entitled to access without requiring permission from the aircraft owner, e.g an accessible area at an aerodrome, then the officer may photograph the aircraft without the need for the consent so long as the officer does not otherwise interfere with the aircraft.

Where a CASA officer wishes to take a photograph of an aircraft or something else that is located inside a hangar or within some other private premises, they need not expressly ask for permission to commence taking photographs, but, if the occupier of the premises asks them to stop, they should cease at that point.

### 4. Sampling

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

## 4. Sampling

Sampling is a process that helps an inspector gain confidence that a system, process or procedure under review is in control and producing the desired output. This is done by examining a representative portion of the total population of items available for review. Following this review, it would be possible to make a reliable conclusion regarding the overall level of conformance of the applicable system, process or procedure. This conclusion is based on the probability that all items that may, or may not, conform have an equal chance of being selected.

### 4.1 Random sampling

While random sampling is typically used, various other sampling techniques may also be used. In a random sample, each item in the population has a specified probability of being selected.

Samples may be selected based on:

- numerical sequence (eg every tenth record)
- computer generated selection
- a record being produced on a particular day of the week
- letters of the alphabet.

The inspector must document the method used to select samples.

For sampling to be truly independent, and free from potential conflict, samples must be selected by the inspector and not the authorisation holder. This includes personnel selected for interviews as well as records.

Inspectors can use this information to determine if a system, process or procedure is effective. The number and severity of any deficiencies found can be analysed to determine the degree of conformance of that system, process or procedure and whether or not a finding will be issued.

## 5. Records Management

Surveillance records must be maintained in a clear, succinct manner and provide a chronological history of surveillance activities and events. It is important that all relevant surveillance documents are adequately filed in accordance with processes described in the Records Management Manual.

Surveillance records must include background documents, forms, files, notes and reports that relate to surveillance activities with all such documentation saved to CASA's electronic document and records management system (TRIM). Documentation may originate from all phases of a surveillance event. Examples include documented decisions from SPR meetings, certificates, preparation checklists, worksheets, surveillance notification, correspondence from an authorisation holder, emails sent to the authorisation holder, notes from an inspector, Entry/Exit meeting records, Surveillance Reports, findings and documentation relating to the follow up on findings.

Correspondence/documentation may be unclassified; however, if the security access for the document and/or electronic file is initially assigned as unclassified and sensitive material is subsequently added, this added content then determines the security access classification. (See [CASA Records Management Manual Section 2.8 – Classified and Limited Access Files/Records](#)).



*NOTE: Naming of files is to follow published TRIM conventions.*

### 5.1 Data management protocols

Data management is to be completed in accordance with CASA's Information Management Manual.



#### 5.2 Records management accountabilities

Position	Accountabilities
<b>Controlling Office Manager</b>	Ensure: <ul style="list-style-type: none"><li>• Staff responsibilities for local records/documentation handling are defined</li><li>• Records are handled and retained as described in the CASA Records Management Manual</li><li>• Records retention times are set as required by CASA's Records Disposal Authorities</li></ul>
<b>Surveillance lead</b>	Ensure: <ul style="list-style-type: none"><li>• All relevant surveillance documents are adequately filed in accordance with processes described in the CASA Records Management Manual</li><li>• The documents retained relating to surveillance are complete and accurate</li></ul>
<b>Authorisation management team leader</b>	Ensure all relevant documents are handed to the relevant surveillance lead or nominated officer
<b>Data entry staff/Technical administration staff</b>	Ensure: <ul style="list-style-type: none"><li>• Appropriate file is created for the surveillance process</li><li>• All records and documentation are filed at appropriate stages of the surveillance event</li><li>• All records/documentation are received and filed on finalisation of the surveillance event</li></ul>

## 6. Information Capture Protocols for Findings

### 6.1 Findings – Titling

When writing a finding title ensure an appropriate and pertinent single line entry is used. The title needs to clearly distinguish the particular finding and allow the record to be easily identifiable in Sky Sentinel. Examples of correctly worded findings are:

- Unauthorised Class A maintenance activity
- Provision of oxygen – Equipment standards
- Provision of oxygen – Crew duties
- Heightened risk – Flight crew scheduling (could apply to an Observation)

### 6.2 Findings – Correct regulatory reference

To ensure standardisation and easy identification of regulatory references in NCNs, Safety Alerts and ASRs, the following guidelines must be followed.

Insert into the finding template the regulation exactly as it is written on the CASA external website and in addition follow the points below:

- the year of the regulation cited without brackets ie CAR 1988
- do not add square brackets [ ] or any extra punctuation unless specified in the legislation
- use capitals as depicted in the reference
- if the number in the legislation is listed as a roman numeral keep the number in this format
- do not spell out the regulation in full. Use the abbreviated form except when the section or regulation is used to commence a sentence. Then it should be stated in full rather than abbreviated
- for references to the Act use 's' to denote a reference to a sub-section or section, for example s 28(1)(b)(i) of the CAA 1988
- for the CAR and CASR, use 'reg' to denote a reference to a regulation or sub-regulations – for example reg 39.003 of the CASR 1998
- individual paragraphs and subparagraphs within the CAR Schedule and the CAO are abbreviated by the use of 'para' – for example, para 5.1 of CAO 20.11.

**Note:** An NCN must be issued against a “Head of Power”, however, a CAO does not meet this requirement. An NCN must reference the overarching legislation that the CAO is linked to. While the CAO reference can also be cited, the appropriate section of the Act or Aviation Safety Regulation must be cited.



**NOTE:** For details and examples on the correct way for dealing with regulatory references, refer to [Section 3.19.2 – Guidance for referencing legislation – CASA Writing Style Manual](#).

#### 6.3 Systems risk – Question development

To enable an inspector to determine the level of risk control effectiveness exhibited by an authorisation holder over a system risk and to enhance standardisation, the following guidelines must be followed.

Questions should generally relate to key areas of the authorisation holder's systems. They should be written in such a way as an inspector would ask an authorisation holder and should not be simply memory joggers for the inspector. They must be relevant to the risk being assessed and follow the points below:

- questions should be written with the logical starting point of the control effectiveness in mind as the answers may require the inspector to digress to pursue the necessary evidence to prove the level of risk mitigation present
- questions should generally be of an open questioning type requiring more than a "Yes"/"No" answer, i.e. the questions should be of the "How", "Show me" and "Why" style
- sufficient key questions must be created or selected to ensure that all four MSM attributes are used in determining the level of risk mitigation present
- prompts can be added as required, but these should not be key questions. For example, a prompt such as "Ensure record ABC 7.2 is checked for procedural correctness and compliance", may be added on the basis of received intelligence.

#### 6.4 Systems risk – Questioning technique

To enable an inspector to determine the level of risk control exhibited over a systems risk the inspector should ask questions relating to a specific MSM attribute. Depending on the answer, either ask further questions relating to the same attribute to establish the degree of control the authorisation holder has in its ability to mitigate the risk or move on to another question relating to a different MSM attribute.

Continue questioning until sufficient evidence is obtained to determine what level of control the authorisation holder has in mitigating the risk being assessed.

Frequently, what seems to be the major MSM attribute contributing to an inadequately controlled risk is quickly identified, but with further probing, a more appropriate attribute can often be identified e.g. a process does not work (Process in Practice) because management won't provide the training and so Management Responsibility is the major contributor. The inspector is required to obtain sufficient evidence to determine the level of control the authorisation holder has in mitigating the system risk.

#### 6.5 Systems risk – Completing risk assessment

The results of the control effectiveness review are entered into Sky Sentinel through controls associated with each of the MSM attributes. The inspector is required to select one of the following associated with each of the four MSM attributes for both Likelihood and Consequence:

- No Control
- Ineffective (*control*)

- Partly Effective (*control*)
- Mainly Effective (*control*)
- Fully Effective (*control*)

Word pictures are provided (see below) to ensure standardisation. It is vital that the inspector correctly completes the control effectiveness review ensuring all four MSM attributes have been examined for its influence on the level of risk mitigation.











**NOTE:** *If insufficient evidence has been collected to complete the review, do not guess at what the Sky Sentinel risk control selection might be. Instead, inform the Surveillance Lead and note it in the log comments section of Sky Sentinel.*





#### 6.5.1 Method for using word pictures

In the Risk Mitigation Calculator page in Sky Sentinel, read a word picture aligning to a risk control result. If the risk control observed in the surveillance was better than what is reflected in the word picture, the next highest word picture should be considered. If the risk control is not as good as that word picture suggests then select the in-between shaded result.

RISK CONTROL – LIKELIHOOD				
Management Responsibility				
Fully Effective	Mainly Effective	Partly Effective	Ineffective	No Control
<ul style="list-style-type: none"> <li>Top management always communicate clearly and concisely</li> <li>Proactive risk identification evident</li> <li>Fully compliant with regulations</li> <li>Fully support operations group</li> <li>Defined safety standards higher than regulatory requirements</li> <li>Planning backs up management commitment</li> <li>Change control effective</li> <li>Record keeping a high priority</li> <li>SMS in place and reviewed regularly</li> <li>Meeting minutes kept</li> <li>No meetings cancelled</li> <li>Top management shows high interest</li> </ul>		<ul style="list-style-type: none"> <li>Top management frequently communicates although some policy unclear or not concise</li> <li>Some evidence of risk identification and mitigation however little follow up accomplished and mostly reactive</li> <li>Some non-compliance with regulations</li> <li>Management supports operations group but not readily accessible</li> <li>Majority of defined safety standards higher than regulatory requirements</li> <li>Planning generally backs up management commitment</li> <li>Change control effective with occasional exceptions</li> <li>Record keeping of importance, but detail frequently insufficient</li> <li>SMS in place and reviewed regularly</li> <li>Meeting minutes are sometimes kept</li> <li>Meetings short with no significant action items arising</li> <li>Top management takes little interest in procedures</li> </ul>		<ul style="list-style-type: none"> <li>Top management does not communicate its policies to its organisation</li> <li>No evidence of risk identification and mitigation – follow up is only accomplished when driven by a major incident or accident and is reactive by nature</li> <li>No nominated management representative</li> <li>Frequent non-compliance with regulations</li> <li>Little if any support for operations group</li> <li>Few if any defined safety standards higher than regulatory requirements</li> <li>No evidence of planning that backs up management commitment</li> <li>Change control not effective</li> <li>Record keeping not effective and not a high priority</li> <li>No regular safety meetings held</li> <li>Meeting minutes not kept</li> <li>Top management takes no interest in procedures</li> </ul>
Infrastructure				
Fully Effective	Mainly Effective	Partly Effective	Ineffective	No Control/
<ul style="list-style-type: none"> <li>Facilities meet or exceed requirements</li> <li>Facilities suitable for task</li> <li>Work areas clearly defined</li> <li>Stores meet requirements and are well maintained</li> <li>Segregation of critical equipment effective</li> <li>Essential hardware and software provided.</li> <li>No evidence of incorrect or inappropriate tools being used</li> <li>Equipment calibrated, suitable and in good order</li> <li>Well documented and available procedures</li> <li>Frequent review of procedures</li> <li>Documents meet or exceed requirements and address risk mitigation to considerable depth</li> <li>Key personnel identified and positions occupied</li> <li>Back up procedures in place</li> <li>Staff trained and conduct tasks without difficulty</li> </ul>		<ul style="list-style-type: none"> <li>Facilities mostly adequate, however, some significant facilities either not provided or not suitable</li> <li>Training facilities not conducive to learning</li> <li>Work areas clearly defined, however during high workload periods areas are inadequate</li> <li>Stores are frequently inadequate or not capable of meeting requirements</li> <li>Segregation of critical equipment not always effective</li> <li>Some evidence of essential hardware and software provided, but significant omissions evident</li> <li>Some evidence of incorrect or inappropriate tools being used</li> <li>Some equipment obsolete, uncalibrated, not suitable or in poor order</li> <li>Some documented and available procedures are available, but frequently are not or can't be found</li> <li>Frequent review of procedures</li> <li>Documents mostly meet or exceed requirements and address risk mitigation to some extent</li> <li>Key personnel ,while identified, often left unoccupied for long periods</li> <li>Some back up procedures in place</li> <li>Staffs occasionally employed to conduct tasks with insufficient training</li> </ul>		<ul style="list-style-type: none"> <li>Facilities inadequate</li> <li>Training facilities not provided</li> <li>No clearly defined work areas provided</li> <li>Rest facilities where required not provided</li> <li>Stores are inadequate or not capable of meeting requirements</li> <li>Segregation of critical equipment not catered for</li> <li>No evidence of provision of essential hardware and software to conduct operations</li> <li>Some evidence aircraft unsuitable for route being used</li> <li>Incorrect or inappropriate tools frequently used</li> <li>Some equipment obsolete, not provided or in a state of dis-repair</li> <li>No documented procedures available or procedures that are in place are well out of date and require extensive review.</li> <li>Those procedures that do exist do not meet requirements and do not address risk mitigation</li> <li>Key personnel positions either not identified or unoccupied by permanent staff</li> <li>Staff training clearly inadequate</li> <li>Clear evidence that key personnel are being overworked and cannot accomplish their primary role</li> </ul>
<p><i>Word pictures are provided as a guide to achieve standardisation. Judgment is required when determining which picture best fits the risk being assessed.</i></p>				

RISK CONTROL – LIKELIHOOD (cont)				
Process in Practice				
Fully Effective	Mainly Effective	Partly Effective	Ineffective	No Control
<ul style="list-style-type: none"> <li>Documented procedures cover all significant tasks and fully support the task</li> <li>Processes meet regulatory requirements and are safe</li> <li>No evidence that processes vary from documented procedure</li> <li>Processes safe and appropriate</li> <li>Safety equipment is used</li> <li>Staff always attempt to comply with written procedures</li> </ul>		<ul style="list-style-type: none"> <li>Significant documented procedures, however many inadequate or do not directly support process in practice</li> <li>Process is sometimes ineffective or unsafe from not following procedures or given scant regard</li> <li>Many process undertaken are adequate, however are prone to failing due to lack of personnel, poor infrastructure or lack of training</li> <li>Evidence that processes are sometimes derived through word-of-mouth and spur-of-the-moment short cuts which vary from written procedures</li> <li>Staff mostly comply with written procedures, however some staff are unaware of them</li> <li>Shortcuts are sometimes taken owing to workload or time constraints associated with the task</li> </ul>		<ul style="list-style-type: none"> <li>Little or no documented procedures and those that exist are inadequate or do not support process in practice, are ignored or are given scant regard</li> <li>Procedures that are recorded mostly do not meet regulatory requirements and do not address risk mitigation aspects</li> <li>Strong evidence that nearly all process derived through spur-of-the-moment decisions and communicated through word-of-mouth</li> <li>Processes are either unsafe or flawed to the point of negating risk mitigation</li> <li>Evidence that staff actively avoid using a procedure, if written, in favour of a self-developed process</li> </ul>
Monitoring and Improvement				
Fully Effective	Mainly Effective	Partly Effective	Ineffective	No Control
<ul style="list-style-type: none"> <li>Fully documented internal audit system established and structured</li> <li>Dedicated safety officer identified and appointed</li> <li>Audits scheduled at intervals &lt;= 12 months</li> <li>Audits rarely delayed</li> <li>Safety officer formally trained</li> <li>Safety meetings attended by top management</li> <li>Internal reporting in place is mature and supported by both top management and staff</li> <li>Incidents conveyed to Safety Officer via well documented processes</li> <li>Feedback from management is timely</li> <li>Written procedures for investigations in place</li> <li>Responses to NCNs complete and address root cause</li> <li>Proactive risk mitigation is high priority</li> <li>Documented procedures available for correcting defects and identified problems</li> <li>Evidence of proactive identification of latent problems</li> <li>Staff have strong interest in improving safety</li> <li>Cost not undue influence on decisions.</li> </ul>		<ul style="list-style-type: none"> <li>Documented internal audit system established however while system structured, no dedicated safety officer and audits ad-hoc or scheduled &gt; 12 months period</li> <li>Audits frequently delayed or cancelled</li> <li>Person acting as Safety Officer does not have any formal safety training</li> <li>Safety meetings attended by top management held infrequently</li> <li>Some evidence of internal reporting in place.</li> <li>Incidents conveyed to Safety Officer via word-of-mouth.</li> <li>Feedback from management often delayed although feedback, when received, mostly positive</li> <li>Responses to NCNs sometimes vague and occasionally defensive</li> <li>Identification of latent risks apparent, however proactive risk mitigation still infrequent</li> <li>Some documented procedures available for correcting defects and identified problems.</li> <li>Staff have some interest in improving safety</li> <li>Cost and commercial interests has considerable influence on the decision making</li> </ul>		<ul style="list-style-type: none"> <li>No documented internal audit system</li> <li>Any internal audit not structured, has no dedicated safety officer and no scheduled audit plan</li> <li>Safety officer not appointed with functions (if identified) left to senior management</li> <li>No safety meetings held attended by management</li> <li>No evidence of internal reporting in place.</li> <li>Incidents conveyed to senior management via word-of-mouth</li> <li>No written reports raised, or if they are incomplete.</li> <li>Reports passed to management met with defiance.</li> <li>Feedback from management insignificant and response to incidents/accidents totally reactive</li> <li>Responses to NCNs vague and often defensive</li> <li>No evidence of action to address identification latent risks</li> <li>No documented procedures available for correcting defects and identified problems</li> <li>Given size and complexity of operation top management and staff have little interest in improving safety culture</li> <li>Cost and commercial interests almost always drive decision making</li> </ul>
<p><i>Word pictures are provided as a guide to achieve standardisation. Judgment is required when determining which picture best fits the risk being assessed.</i></p>				

RISK CONTROL – CONSEQUENCES				
Management Responsibility				
Fully Effective	Mainly Effective	Partly Effective	Ineffective	No Control
<ul style="list-style-type: none"> <li>Comprehensive policies and practices in place to deal with most identified risks should they eventuate</li> <li>strong management commitment to non-jeopardy policies evident</li> <li>Where legislation exists to mitigate impact (design standards etc), non-compliance with legislation is rare and always unintentional</li> <li>Clearly defined safety standards higher than regulatory requirements in place and consistently adhered to.(eg multi-crew operating single pilot aircraft and company fuel policy takes into account failures whether required by legislation or not)</li> <li>Effective SMS with strong management commitment in operation</li> <li>Effective SMS and threat and error management training provided to all personnel</li> <li>Recurrent training exists and practiced</li> </ul>		<ul style="list-style-type: none"> <li>Some policies and practices in place to deal with identified risks however several medium-low risks have no planned response should they eventuate</li> <li>Management commitment to non-jeopardy policy in place however evidence indicates policy is not robust</li> <li>Where legislation exists to mitigate impact (design standards etc) non-compliance with legislation is repetitive and sometimes deliberate</li> <li>Defined safety standards higher than regulatory requirements in place and mostly adhered to (eg multi-crew operating single pilot aircraft and company fuel policy to take into account failures whether required by legislation or not)</li> <li>SMS established however strong management commitment not evident</li> <li>SMS and/or threat and error management training provided to operational personnel</li> <li>No recurrent training plan in place</li> </ul>		<ul style="list-style-type: none"> <li>No policies or practices in place to deal with identified risks should they eventuate and many medium-low risk have no planned response should they eventuate</li> <li>Management has no non-jeopardy policy in place – punitive punishment is frequent following incidents and/or accidents</li> <li>Where legislation exists to mitigate impact (design standards etc), non-compliance with legislation is frequently repetitive and often deliberate</li> <li>No safety standards defined with operations conducted to the minimum regulatory requirements</li> <li>No SMS (formal or informal) established</li> <li>SMS, and threat and error management training not provided to any essential personnel</li> </ul>
Infrastructure				
Fully Effective	Mainly Effective	Partly Effective	Ineffective	No Control
<ul style="list-style-type: none"> <li>Specialised facilities and equipment exist to deal with both minor and major incidents and accidents</li> <li>Formally trained personnel employed and available at short notice to respond to incidents and accidents</li> </ul>		<ul style="list-style-type: none"> <li>Some facilities and equipment exist to deal with minor and major accidents and incidents</li> <li>Personnel assigned to deal with the consequences of incidents and accidents are not formally trained or not available on short notice</li> </ul>		<ul style="list-style-type: none"> <li>No facilities or equipment available to deal with any minor or major incidents or accidents</li> <li>No personnel are assigned to deal with the consequences of accidents and incidents</li> </ul>
<p><i>Word pictures are provided as a guide to achieve standardisation. Judgment is required when determining which picture best fits the risk being assessed.</i></p>				

RISK CONTROL – CONSEQUENCES (cont)				
Process in Practice				
Fully Effective	Mainly Effective	Partly Effective	Ineffective	No Control
<ul style="list-style-type: none"> <li>Documented procedures for mitigating consequences are evident and in practice. Procedures address all identified risks</li> <li>Emergency response training (including refresher course) provided to all employees</li> <li>Potentially catastrophic incidents such as fire, aircraft accidents and equipment failure are simulated and regularly trained for</li> <li>Staff always attempt to comply with company policies and procedures – any exception is investigated</li> <li>Comprehensive risk register has been developed and kept up to date</li> </ul>		<ul style="list-style-type: none"> <li>Documented procedures for mitigating consequences are evident however many are inadequate or do not directly support risk mitigation</li> <li>Emergency response awareness material provided to most employees</li> <li>Emergency response plan is simulated and trained for annually</li> <li>Some company policies and procedures not adhered to and/or are prone to failing (due to lack of personnel, poor infrastructure, lack of training etc.)</li> <li>Evidence that processes are sometimes derived through word-of-mouth and spur-of-the-moment short cuts which vary from written procedures</li> <li>A risk register has been developed, however is not kept up to date</li> </ul>		<ul style="list-style-type: none"> <li>Little or no documented procedures addressing risks that eventuate with those that exist inadequate</li> <li>No evidence of an emergency response plan /no emergency response training evident</li> <li>Little or no company policies and procedures are adhered to with strong evidence that nearly all processes are derived through a spur-of-the-moment decision and communicated through word-of-mouth</li> <li>Processes are either unsafe or flawed to the point of negating risk mitigation</li> <li>Staff often unaware of the appropriate response to an incident or accident</li> <li>No risk register is evident</li> </ul>
Monitoring and Improvement				
Fully Effective	Mainly Effective	Partly Effective	Ineffective	No Control
<ul style="list-style-type: none"> <li>Company policy instructs all employees to report incidents, accidents and occurrences within set timeframes</li> <li>All incidents and occurrences are investigated and reviewed by trained personnel</li> <li>Root cause analysis is always conducted and mitigating actions are implemented in a timely manner to prevent a reoccurrence</li> <li>Feedback from management is timely</li> </ul>		<ul style="list-style-type: none"> <li>Company policy encourages employees to report incidents, accidents and occurrences</li> <li>Some incidents and occurrences are investigated and reviewed by personnel</li> <li>Root cause analysis is sometimes conducted and mitigation actions are sometimes implemented to prevent a reoccurrence although sometimes delayed or not provided</li> </ul>		<ul style="list-style-type: none"> <li>No reporting system for incidents, accidents and occurrences in place</li> <li>Incidents and occurrences are rarely investigated</li> <li>No root cause analysis conducted following incidents, accidents and occurrences</li> </ul>
<p><i>Word pictures are provided as a guide to achieve standardisation. Judgment is required when determining which picture best fits the risk being assessed.</i></p>				



## 7. Non-Compliance Notice Guidelines

<b>Authorisation Holder:</b> Holder of a Civil Aviation Authorisation as defined in Section 3 of the Act		
<b>ARN:</b> Auto-generated by Sky Sentinel	<b>TRIM Ref No:</b> Auto-generated by Sky Sentinel	<b>NCN Ref No:</b> Auto-generated by Sky Sentinel
<b>Contact address:</b> Auto generated by Sky Sentinel		<b>Postcode:</b>
<p><b>Regulatory reference:</b> Record section of Act, Civil Aviation Safety Regulation, and Civil Aviation Order/Manual of Operating Standards (MOS) reference, which is applicable and forms the basis of the non-compliance. For details and examples of the correct way for dealing regulatory references, refer to <i>Section 3.19.2 – Guidance for referencing legislation – CASA Writing Style Manual</i>.</p> <p><b>Note:</b> A breach of an Order or MOS must be supported by a regulatory head of power and only one breach shown per NCN.</p>		
<p><b>Subject/Title:</b> It is important to adopt correct titling protocols to allow for easier identification in Sky Sentinel. Ensure the title is an appropriate single line entry that is pertinent to the finding.</p>		
<b>System:</b> Enter the System where the breach has occurred		
<b>Element:</b> Enter the Element where the breach has occurred		
<p><b>Details of deficiency:</b> Details should be simple and to the point as appropriate to the complexity and/or seriousness of the deficiency leading to the non-compliance. Describe factual details that caused the non-compliance in sufficient detail to provide clear understanding. Must include process(es) that were deficient, that did not perform as intended or were not used as intended. Should clearly identify:</p> <ul style="list-style-type: none"> <li>• Time</li> <li>• Date</li> <li>• Place</li> <li>• Aircraft registration</li> <li>• Aircraft serial numbers</li> <li>• Persons</li> <li>• Part and serial numbers</li> <li>• Reference numbers</li> <li>• References to authorisation holder's documentation etc</li> </ul> <p>Details must relate to identified non-compliance. If the identified deficiency had previously caused an NCN or Safety Alert to be raised, state this fact and point out that the authorisation holder has not taken appropriate and effective action to rectify previous non-compliance.</p>		
<p><b>Criteria:</b> Quote the actual wording from the legislation that forms the basis of non-compliance. If subordinate legislation is contravened e.g. MOS or exposition, it is necessary to firstly state the regulatory head of power and/or offence provision.</p>		
<b>Issuing inspector</b>	Inspector who issued finding and who is subsequently managing finding	
<b>Date issued:</b>	Date NCN issued to authorisation holder	
<b>Due date:</b>	Date NCN must be responded to (within 21 calendar days of date of issue)	

## 8. Aircraft Survey Report Guidelines

ASR Requirements Table	
ASR Field	Description
ARN	The ARN for the service provider is to be entered
Name and Address	The name and address of the service provider is entered
Aircraft Registration Type & Serial No	Details may be obtained from files, Certificates of Registration or Airworthiness or from aircraft markings and data plates
References to Legislation	The CAR 1988 and CAR 1998 and CAO reference for all ASR items of non-compliance must be recorded in full for analysis purposes. For example: reg 196 (3) of the CAR 1988
ASR Codes	<p>All ASR items of non-compliance must be recorded as Code 'A', 'B' or 'C'.</p> <p><b>NOTE:</b> Code 'A' ASRs must be listed on a separate form from Code 'B' and 'C' items.</p> <p><b>Code 'A'</b></p> <p>A Code 'A' ASR is a direction under CAR 38(1) to have maintenance carried out on the aircraft before further flight.</p> <p>Only use a Code 'A' ASR when:</p> <ul style="list-style-type: none"> <li>Defects or damage that may affect the safety of flight have been detected</li> <li>You have evidence that a regulatory direction or maintenance requirement has not been met and continued operation of the aircraft may affect the level of safety.</li> </ul> <p><b>Note:</b> If it is believed that, in the interests of safety, action should be taken to prevent an aircraft from flying because of a failure to comply with a requirement, consideration should also be given to whether detention of the aircraft or enforcement action is necessary on the registered operator/authorisation holder. In either case this must be referred to the Controlling Office Manager for consideration of enforcement.</p> <p>In situations where the registered operator is being required to do something other than actual maintenance then the Executive Manager, Legal Services Division (LSD) should be contacted so that LSD assistance can be provided.</p>

ASR Requirements Table	
ASR Field	Description
	<p>Whenever issuing a Code 'A' ASR:</p> <ul style="list-style-type: none"> <li>• make sure the defect, damage or non-compliance is clearly stated, and specify the relevant regulatory reference(s)</li> <li>• make sure that the wording of the ASR includes instructions to rectify, replace, repair, remove, install, secure, fit, inspect, investigate etc, as relevant</li> <li>• deliver the ASR to the registered operator either by safe-hand or Certified Mail</li> <li>• make every effort to contact the registered operator, the owner, or any person likely to fly the aircraft and advise the nature of the defect, damage or non-compliance.</li> </ul> <p>If satisfied that contact cannot be achieved, the issuing inspector must affix a copy of the ASR to the aircraft in a position where it will be seen by anyone trying to gain access to the aircraft taking into consideration the cosmetic damage affixing the ASR may do to an aircraft.</p> <p>The following is a non-exhaustive list of examples of when a Code 'A' direction would typically be issued. Note: If in any doubt, contact and seek the advice of an AWI:</p> <ul style="list-style-type: none"> <li>• corrosion on main spar at Wing Station 10 exceeds manufacturers limits</li> <li>• right-hand flap inboard attachment bolt is missing</li> <li>• aircraft control surfaces have been painted, however, the aircraft records and discussions with the maintenance provider indicate the controls were not balanced after painting</li> <li>• a review of the aircraft records has revealed the engine time in service has exceeded the manufacturer's time limitations as set out in Chapter 5 of the manufacturer's maintenance manual.</li> </ul> <p><b>Code 'B'</b></p> <p>Use the Code 'B' direction to bring a defect or damage to the attention of the registered operator, the pilot or operator where:</p> <ul style="list-style-type: none"> <li>• it is consider the defect or damage to be minor, or</li> <li>• the inspection does not enable a determination as to whether the defect or damage is major.</li> </ul> <p>For a Code B item, a direction pursuant to CAR 38(1) to have defects or damage assessed and rectified as necessary.</p> <p>The registered operator, the pilot or operator is responsible for assessing the defects or damage and having them rectified.</p> <p>As the wording of the ASR for Code B items already contains the direction</p>

ASR Requirements Table	
ASR Field	Description
	<p>to have the items assessed and rectified as necessary, there is no need to give further directions.</p> <p>The defect or damage must be clearly stated and the relevant regulatory reference(s) specified.</p> <p>The following is a non-exhaustive list of examples of when a Code 'B' direction would typically be issued:</p> <ul style="list-style-type: none"> <li>• Aileron control surface appears to have excessive movement about the right-hand inboard hinge attachment</li> <li>• captain's control seat has significant wear on the seat tracks. Please inspect the seat tracks to ensure the wear is within manufacturer's limits.</li> <li>• fuel leaks are evident in right-hand wheel well and are indicated by dripping of fuel onto the tarmac.</li> </ul> <p><b>CODE 'C'</b></p> <p>A Code 'C' item is a formal notification to a registered operator of a non-compliance with a requirement or condition imposed under the CARs that, in the judgment of the surveillance team member, from the inspection carried out, will not have an immediate lowering effect on safety, but is required to be assessed and/or rectified.</p> <p>Code 'C' items may include any equipment referred to in:</p> <ul style="list-style-type: none"> <li>• the CARs</li> <li>• the CAOs</li> <li>• a company maintenance requirement</li> <li>• the type certification documents</li> <li>• the applicable maintenance requirements.</li> <li>• a direction issued pursuant to CAR 38(1) i.e. airworthiness</li> <li>• directives (ADs) or a previous ASR.</li> </ul> <p>When issuing a Code 'C' direction, the relevant regulation or requirement pertaining to the non-compliance must be specified.</p> <p>The following is a non-exhaustive list of examples of when a Code 'C' direction would typically be issued:</p> <ul style="list-style-type: none"> <li>• documents show the flight of 6.5 hours conducted on 29/11/93 has not been recorded in the aircraft records – CAR 43B refers</li> <li>• the flight manual does not contain amendment G3 – CAR 138 refers</li> <li>• reweighing is overdue by 3 months – CAO 100.7 paragraph 3.2 refers</li> <li>• airframe registration lettering on port side of tail and cabin exit decals are illegible – CARs 18 and 21 refer.</li> </ul>

ASR Requirements Table	
ASR Field	Description
Subject Code	<p>Either:</p> <ul style="list-style-type: none"><li>• Airframe – AFR</li><li>• Engine – ENG</li><li>• Avionics – AVI</li><li>• Documentation – DOC</li><li>• Maintenance Control – MC.</li></ul>
A/C maintained to Class A or B	A tick in the appropriate box to indicate whether the aircraft is being maintained to Class A or Class B standard.

#### Distribute the hardcopy ASRs

Distribution of hardcopy ASRs should be made as follows:

- **Original (white)** Registered Operator for formal notification and acquittal
- **Pink** (copy 1) The person on the spot who is likely to fly or perform maintenance on the aircraft, or affix to the aircraft
- **Yellow** (copy 2) Aircraft trim file
- **Blue** or photocopy attached to original Surveillance Report.



**NOTE:** Information copies of the ASRs may be handed to the registered operator, flight crew or maintenance staff at the time of the surveillance event. The information copies are only to be issued as previously agreed with an organisation or operator.

## 9. Observation Guidelines

<b>Authorisation holder:</b>	Holder of a Civil Aviation Authorisation as defined in Section 3 of the Act	
<b>ARN:</b> Auto-populated by Sky Sentinel		<b>Observation No:</b> Auto-generated by Sky Sentinel
<b>Contact address:</b> Auto-generated by Sky Sentinel		<b>Postcode:</b>
<b>Subject/Title:</b>	<p>It is important to adopt correct titling protocols to allow for easier identification in Sky Sentinel. Ensure the title is an appropriate single line entry that is pertinent to the finding. The title should be in <b>CAPITALS</b>.</p> <p><i>Note: For examples of correct titling see the previous section – 6. Information Capture Protocols for Findings.</i></p>	
<b>System:</b>	Enter the System that the Observation addresses	
<b>Element:</b>	Enter the Element that the Observation addresses	

#### Observation Details:

Details should be simple and to the point as appropriate to the complexity and/or seriousness of the system risk deficiency. Describe factual details that were observed that led to the determination that the authorisation holder was deficient in its mitigation of the system risk assessed.

Clearly reference the particular element that was found to be exposed to heightened systems risk factors. The actual CASA system risk must not be specifically stated.

*Note: An example of such an indirect reference would be: "... It appears that the availability of <name or person> is critical to crew scheduling and should <name of person> no longer be available there is a heightened risk that rostering errors could result in legislative breaches or inappropriately qualified or fatigued pilots being rostered for or conducting a flight."*

A recommendation to the authorisation holder to take action may be included.

*Note: An example of a recommendation would be: "It is recommended that the <name of Authorisation Holder> take appropriate action to address the heightened system risk aspects in connection with crew scheduling."*

**Issuing Inspector Name:** Inspector who issued the finding

## 10. Surveillance Report Guidelines

### Surveillance Reports (*Used for Level 1 and Level 2 Surveillance Reports*)

Surveillance reports should be well written and use simple language. The report must be descriptive, be a statement of fact and include the following items:

- title page
- summary
- statement of confidential nature of contents
- surveillance objective
- surveillance team
- dates and places onsite
- surveillance scope
- summary of surveillance findings
- brief surveillance technical discipline summary
- surveillance processes and procedures
- Appendix 1 – Documents used as standards and references
- Appendix 2 – Key people interviewed during the surveillance

#### Title Page

##### Authorisation holder details

**Identify** – authorisation holder, event, name, ARN, authorisation type, TRIM reference and dates of surveillance (Automatically generated by Sky Sentinel)

#### Summary

The summary should be written by the surveillance lead once all discipline summaries have been completed.

The summary's purpose is to draw the reader's attention to the important issues. It provides the reader with an overview of the report's essential information. The summary should say as much as possible in the fewest possible words and, therefore, every word should count.

The summary stands as an overview at the front of the report. Therefore, it must be self-sufficient and be understood in isolation. Typically, it is written last to ensure it accurately reflects the report's content.

The summary should briefly and concisely outline:

- The subject matter
- The background – why the surveillance was conducted
- A summary of the scope sampled – an overview of the authorisation holder and the surveillance outcomes for each discipline. (No new information should be introduced in the summary and it should only highlight key issues.)
- Important findings

- Any disagreements
  - Important issues raised in the discussion.
- Conclusion** – details the surveillance outcome provided by the surveillance team after considering the surveillance objectives and all surveillance findings as well as lists the key points flowing from the results. The conclusion should be kept short and to the point. Any problems encountered during the surveillance should be noted here. This section can also be used to thank the authorisation holder for their co-operation if it is considered appropriate.

Content	
<b>Statement of confidential nature of contents</b>	A statement relating to the confidentiality of the report.
<b>Surveillance objective</b>	Reason for conducting the surveillance event.
<b>Surveillance team</b>	Identification of the surveillance lead and members. Insert names and disciplines. (Automatically generated by Sky Sentinel)
<b>Dates and places onsite</b>	In chronological order, insert the dates and locations where the onsite activities were conducted, including the entry and exit meetings.
<b>Surveillance scope</b>	The Surveillance scope table is the extent of the surveillance and a count of findings issued.
Completed scope	Record the scope items that were completed during the surveillance, indicating the scope number, scope item, discipline that assessed the item and if any findings were issued.
Uncompleted scope	Record any scope items that were not completed during the surveillance, including the scope number, scope item and the discipline. These items are identified in the table by double asterisks (**) symbol at the end of the system or element title.
Additional scope	Record any additional items that were completed during the surveillance, including the scope number, scope item, the discipline and if any findings were issued. These items are identified in the table by a single asterisk (*) symbol at the end of the system or element title.
<b>Summary of findings</b>	List of findings, including the type and the discipline of the inspector who issued the finding (Automatically generated by Sky Sentinel)
<b>Brief discipline summary</b>	A discipline summary must be prepared by the inspector(s) from each discipline. The summary's technical content is the responsibility of inspector(s) from each discipline.



<b>Appendices (Optional)</b>	
<b>Documents used as Standards and References</b>	A list of documents that has been reviewed or used while conducting the event.
<b>People interviewed during the surveillance</b>	A list of the key people who were interviewed during the event, including their name and position.

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## 11. Occurrence Management

### 11.1 Overview

Safety occurrence data relates to an aviation safety event which involves the holder of a civil aviation authorisation.

The *Civil Aviation Act 1988*, Section 9 (1)(g), assigns the following as part of CASA's functions: 'conducting regular reviews of the system of civil aviation safety in order to monitor the safety performance of the aviation industry, to identify safety-related trends and risk factors and to promote the development and improvement of the system'.

The CSM details the surveillance methods by which CASA carries out certain of its functions under the Act.

One aspect of CASA's surveillance activities is the review of safety occurrence data to determine whether a potential safety issue exists or there has been a regulatory breach. The occurrence management process requires the investigation of safety occurrences at various levels. Reviewing and assessing these occurrences is an integral part of the surveillance process with the outcomes of the assessment having a direct link to the Authorisation Holder Performance Indicator (AHPI), and therefore, the oversight posture of an authorisation holder.

An investigation is conducted as a Level 2 surveillance event, as outlined in Section 4.2.4.2 of the CSM.

The Occurrence Management section of this annex provides guidelines for occurrence investigations with regard to:

- the occurrence management accountabilities
- the requirements for conducting an unscheduled surveillance event of a safety occurrence in terms of:
  - What is a safety occurrence review?
  - How is the safety occurrence information accessed?
  - How is the safety occurrence data assessed, analysed, prioritised and categorised?
  - What level of investigation activity is required to be conducted?
  - What follow-up action is required by CASA?

### 11.2 Accountability

CASA policy requires that safety occurrences are assessed and considered for any potential follow-up action. The Controlling Office Manager is accountable for complying with the following standards:

- the automated daily occurrence information report is to be reviewed daily
- the report is annotated using the criteria listed in Section 11.5 of this annex

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- the annotated report is saved into TRIM (under the naming convention of operational surveillance)
- a Level 2 surveillance event is assigned and planned for those occurrences annotated for follow-up and is recorded in Sky Sentinel via the schedule as a new surveillance event (Direct Entry Event – Approve without normal process) function\*.

**Note:** \* Non-AOC operators – Occurrences involving operations not authorised by a CASA-issued AOC will also be assessed using the CSM Annex 1, Section 11 process and support forms. However, as Sky Sentinel currently does not allow for the scheduling of surveillance against non-AOC operators, the information gathered through this surveillance event must be captured in TRIM.

#### 11.3 Safety occurrence review

A safety occurrence review is a process carried out by the controlling office responsible for the oversight of the particular authorisation holder. The process ensures that safety occurrence data is accessed, reviewed, assessed for criticality and assigned for investigation (if required). Safety occurrence data is currently sourced from organisations as set out in the following table:

Safety occurrence sources

Report Name	Source
ASIR (Air Safety Incident Report)	ATSB
ESIR (Electronic Safety Incident Reporting system)	Airservices



**NOTE:** The safety occurrence information received from the ATSB and Airservices has not been **confirmed** by CASA. This is a key point to note for controlling office staff when contacting the authorisation holder to establish if the details, facts and circumstances are a true reflection of the occurrence.

The process and personnel used by the controlling office to conduct the daily review of occurrence information is to be established by each controlling office. All locally established procedures must be documented and meet the accountabilities listed in Section 11.2 above.

Controlling offices may separate the safety occurrence information for use by individual teams; however, a copy of the consolidated annotated report must be recorded in TRIM.

#### 11.4 Accessing information

ESIR and ASIR occurrence data is stored in CASA's Data Warehouse. Controlling office staff must review occurrence reports daily. Access to the report is by:

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1. **Automatic distribution** – a daily e-mail is automatically sent to a nominated e-mail account for each CASA Division and Operations Regional Office. Management of internal distribution remains the responsibility of each Division and Operations Regional Office, or
2. **(Optional) Direct access to the Business Objects platform** – this allows the assessor to extract the information directly. The direct access option provides the user more filtering options.

**Note:** Direct access can be gained by sending a request to CASA's IT support or logging a request through the CASA Service Desk.

User guidance on the information found within the body of the daily reports can be found in the 'key' summary document, located on the CASACONNECT intranet site. To access this document click on the following link: <http://casaconnect/systems/bo/guides.htm>

#### 11.5 Assessing a safety occurrence

The content of the daily Occurrence Reports are not for trend analysis purposes and each occurrence is to be considered on its individual merits. Occurrences in the report have not been confirmed or validated by CASA and are for information purposes only.

The Controlling Office Manager must ensure that all safety occurrences applicable to authorisation holders under their oversight are assessed daily to determine:

1. that all occurrences have been allocated correctly by the controlling office and/or authorisation management team
2. the criticality of the occurrence
3. what occurrences, if any, should be assigned an investigation level surveillance event type and entered into Sky Sentinel, if appropriate, as a surveillance event
4. that all accountabilities have been met.

#### 11.6 Assessing an occurrence criticality

Each safety occurrence must be assessed for criticality to assist in determining the scope and priority of any follow up activity. Likelihood has not been considered as the event would have already taken place.

Table 1 provides guidance on the criticality, investigation classification and follow-up action required. All assessed safety occurrences that require investigation are considered to be Level 2 surveillance events, with Surveillance Requests entered into Sky Sentinel as a Class A, B or C surveillance type as detailed in Table 1 below. Definitions included in the table are mapped to four classification types:

- Catastrophic
- Critical
- Major
- Minor.

**Table 1 – Occurrence criticality determination**

Criticality Description	Sky Sentinel	Follow-up Action Type
	Surveillance event type	
<p><b>Catastrophic</b></p> <p>An occurrence with fatalities.</p>	<p><b>NA</b></p>	<p><b>CASA does not investigate fatal accidents</b></p> <p>Such investigations fall under the jurisdiction of the ATSB and/or Coroner, and are outside of the scope of the CSM and this annex. CASA will monitor the outcomes of any such investigations.</p> <p>The controlling office may still however assess the occurrence as critical, major or minor and follow up as appropriate, focusing on the safety and regulatory performance of the authorisation holder, not the root cause of the accident.</p> <p>All CASA activities associated with Catastrophic occurrences must be coordinated through the Manager, Accident Liaison Investigation Unit (ALIU) who will manage the occurrence in accordance with the SSO – ALIU Procedures Manual.</p>
<p><b>Critical</b></p> <p>Complete loss/failure of the aviation system(s), or a destructive failure, impacting directly on the safe operation of the aircraft</p>	<p><b>Class A</b></p> <p>Record as a <i>Level 2 Unscheduled Occurrence Investigation Request – Site</i> event type in Sky Sentinel</p>	<p><b>Full investigation</b> (site visit)</p> <p>For details of follow up action see <i>Section 11.9 Follow up Action – Class A</i></p>
<p><b>Note:</b> <i>The controlling office should consider that the ATSB may conduct an investigation into a safety occurrence. If CASA elects to conduct a Class A or B investigation, notification must be sent to the ATSB as per the Memorandum of Understanding between CASA and the ATSB. When a parallel investigation occurs, be aware the ATSB generally places a protection order on certain records or equipment relating to the occurrence. In all circumstances, notify (by email) CASA’s Manager ALIU whenever a Class A or B investigation is considered necessary.</i></p>		

Criticality Description	Sky Sentinel	Follow-up Action Type
	Surveillance event type	
<b>Major</b> An occurrence that is neither critical nor minor	<b>Class B</b> Record as a <i>Level 2 Unscheduled Occurrence Investigation Request – Desktop or Site</i> event type in Sky Sentinel	<b>Independent desk top and/or site visit</b> For details of follow up action see <i>Section 11.9 Follow up Action – Class B</i>
<b>Minor</b> Degradation of the aviation system(s) or part thereof, not impacting directly on the safe operation of the aircraft.	<b>Class C</b> (If follow up action is to be taken) Record as a <i>Level 2 Unscheduled Occurrence Investigation Request – Desktop</i> event type in Sky Sentinel	<b>Generally, no further action is required</b> For details of follow up action see <i>Section 11.9 Follow up Action – Class C</i>

When conducting a review of an occurrence, the authorisation management team member must give consideration to the authorisation holder's oversight posture, as determined by the relevant AHPI tool in Sky Sentinel. The posture status may change the investigation class and the level of follow-up action. For example, an authorisation holder under 'active' posture may have a minor occurrence that CASA determines warrants the authorisation holder to conduct an internal investigation, or it may warrant CASA requesting the completion of the *Safety Occurrence Request for Information* (Form 997) to establish the circumstance of the occurrence, before making any further judgement.

In all cases when determining the type of investigation, the controlling office must monitor the authorisation holder's internal investigation.

#### 11.7 Scope

It is important that for each safety occurrence assigned for investigation there is a clear understanding of the impact of any potential safety issues, regulatory breaches and the corrective actions put in place or that will be required. For each occurrence assigned for investigation, the scope must be determined.

The scope defines the boundaries within which the investigation is to be carried out and defines the event or activities to be examined. The systems, elements and systems risks set out in the relevant authorisation type annexes, and contained within Sky Sentinel, may be applied in scoping the event.

When determining the scope, consider the level of investigation required. This could be one or a combination of the following:

- Full investigation (on-site)
- Independent desk-top assessment and/or site visit, or
- Monitoring the authorisation holders' internal investigation.

Details of the scope element must be selected within Sky Sentinel – Schedule a new surveillance event (Direct Entry Event – Approve without normal process) with any relevant comments included in the comments section as necessary if follow up action is required.

#### 11.8 Follow-up with authorisation holder

To obtain the most beneficial information to assist the assessment of the authorisation holder's actions, it is important that consideration be given to what level of questioning is appropriate and how to frame the enquiry to the authorisation holder. The authorisation management team member should consider applying one of the following information request methods:

- *Safety Occurrence Request for Information* (Form 997) – is a request for information from the authorisation holder for details of the occurrence (as noted in the ASIR), details of the pilot in command, a description of the authorisation holder's investigation, the cause and any closing action. (See also *Safety Occurrence Request for Information Covering Letter* – Form 994.)
- *Pilot Questionnaire and Response* (Form 998) – is a request for information from the pilot in command at the time of the occurrence. (See also *Pilot Questionnaire and Response Covering Letter* – Form 995.)

#### 11.9 Follow-up action

Class A

When an occurrence meets the Class A criteria, the:

1. **Controlling Office Manager:** Contacts the Manager-ALIU, to discuss the level of accident or incident investigation required
2. **Controlling Office:** (Under the direction of the Manager-ALIU) Enters the occurrence into Sky Sentinel via the schedule a new surveillance event (Direct Entry Event – Approve without normal process) function as a Level 2 Unscheduled Occurrence Investigation Request – Site surveillance type, or for non-AOC events, into TRIM.
3. **Manager, ALIU:**
  - a) Coordinates the on-site investigation in accordance with the ALIU manual
  - b) Accepts accountability for completion of the final report.



**NOTE:** When an occurrence meets either the Class B or C criteria, the controlling office must follow procedures as outlined in the CSM for Level 2 surveillance events. This will ensure that all steps required to achieve a satisfactory outcome are followed.

#### Class B

When an occurrence meets the Class B criteria, the:

1. **Authorisation Management team lead:** Determines the level of follow-up action required, considering the oversight posture of the authorisation holder (Routine/Enhanced/Active)
2. **Controlling Office:**
  - a) Enters the occurrence into Sky Sentinel via the Schedule a new surveillance event (Direct Entry Event – Approve without normal process) function as either:
    - o a Level 2 Unscheduled Occurrence Investigation Request – Desktop surveillance type, or
    - o a Level 2 Unscheduled Occurrence Investigation Request – Site surveillance type
  - b) In both cases (desktop and site visit) please notify CASA's manager ALIU by email when an occurrence meets the Class B criteria. This will ensure that the ATSB are notified, as required.
  - c) As required the Controlling Office:
    - o sends a request for information – *Safety Occurrence Request for Information* (Form 997) or *Pilot Questionnaire and Response* (Form 998) or,
    - o prepares for a site visit
3. **Authorisation holder:** Completes and returns the required form(s) within 21 calendar days of the request
4. **Authorisation management team member:**
  - a) Assesses the authorisations holder's response, and/or
  - b) Conducts the necessary site visit
  - c) For either surveillance option (4a or 4b), the authorisation management team member compiles a report as per CSM Level 2 Surveillance reporting requirements *Section 4.6.13*.

#### Class C

Generally, no further action is required on a Class C Occurrence.

When an occurrence meets the Class C criteria, the:

1. **Authorisation management team:**
  - a) Determines whether follow-up action may be warranted by considering the oversight posture of the authorisation holder (Routine/Enhanced/Active) and either:
    - o takes no action but continues to monitor the authorisation holder
    - o requests the authorisation holder to investigate the occurrence and provide a report detailing the outcome of the initial internal investigation within 21 calendar days of the request being issued; or
    - o forwards a request for information – *Safety Occurrence Request for Information* (Form 997) or *Pilot Questionnaire and Response* (Form 998) – for completion by the authorisation holder (response within 21 calendar days)



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- b) If follow-up action is to be taken, enters the occurrence into Sky Sentinel via the Schedule a new surveillance event (Direct Entry Event – Approve without normal process) function as a Level 2 Unscheduled Occurrence Investigation Request – Desktop surveillance type.

**2. Controlling Office:** Monitors the outcome

**3. Authorisation management team member:**

- a) Assesses the authorisation holder's response
- b) If a report is to be issued, prepare as per the requirements of Section 4.6.13 Level 2 – Surveillance Report of the CSM.

#### 11.10 Reporting guidelines

It is important when an investigation is initiated by CASA that results are captured in a report. The following is a guide to assist the level of report necessary:

- A. For an on-site investigation of a critical occurrence, a full report is required. The on-site investigation will be led by the Manager- ALIU and conducted in accordance with the ALIU manual. The Manager- ALIU is accountable for the final report.
- B. For an independent desk-top investigation or a site visit, of a Class B (Major) occurrence, a report is required in accordance with the CSM, Level 2 - surveillance event reporting requirements set out in Section 4.6.13 of the CSM.
- C. No report is required for a Class C (Minor) occurrence if it is decided that no follow up action is required. However, if further action is taken, a report must be compiled as per the requirements of *Section 4.6.13 Level 2 – Surveillance Report* of the CSM with all documentation relating to the occurrence stored in TRIM.

In all cases, the controlling office should determine the scope and objective, and monitor the authorisation holder's internal investigation. If during the course of any of the surveillance options, including the assessment and review processes, it is determined that a breach has occurred, then consideration must be given to issuing a Non-Compliance Notice (NCN) in accordance with CSM Section 4.6.8, or consider using the coordinated enforcement process, in accordance with Chapter 3 of the Enforcement Manual.



**NOTE:** Details of what constitutes a full report can be found in the ALIU procedure manual. Contact the Manager, ALIU for details.

In addition to entering information in Sky Sentinel, all reports (CASA reports and/or copies of the authorisation holders' investigation reports) and any other documents relating to investigations must be stored in TRIM using the standard naming conventions.

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### 1. Specific Guidelines: ATEL/RADNAV Service Providers

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

## 1. Specific Guidelines: ATEL/RADNAV Service Providers

### 1.1 Overview

This Annex provides guidelines for conducting surveillance of CASR Part 171 Aeronautical Telecommunications and Radio Navigation (ATEL/RADNAV) services and contains information relating to the following:

- Authorisation Holder Performance Indicator
- Systems and Elements
- Systems and Elements – Health Checks
- Surveillance Currency Guide
- Information Sources.

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### 2. Authorisation Holder Performance Indicator: ATEL/RADNAV Service Providers

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

### 2. Authorisation Holder Performance Indicator: ATEL/RADNAV Service Providers

Authorisation Holder Category	<b>Factor</b>	<b>Aircraft Size</b>
	<b>Prompt</b>	<i>Score according to the largest aircraft using the infrastructure or equipment operated and/or maintained by the ATEL/NAV unit or supported by this unit.</i>
	<b>Score</b>	<b>Word Picture</b>
	4	>30 pax or > 3400 kg payload
	<b>Factor</b>	<b>Type of Operations</b>
	<b>Prompt</b>	<i>Score according to the most critical type of operation using the infrastructure or equipment operated and/or maintained by the ATEL/NAV unit or supported by this unit.</i>
	<b>Score</b>	<b>Word Picture</b>
	3	Regular Public Transport and/or Charter Operations



**NOTE:** Because of the nature of this authorisation type the scores for the two Authorisation Holder Category factors default to a consistent score.

Organisational Factors	<b>Factor</b>	<b>Senior Officers' Skills &amp; Attitudes</b>
	<b>Prompt</b>	<i>Score according to the skills and attitudes of those persons responsible for the management of the ATEL/NAV unit.</i>
	<b>Score</b>	<b>Word Picture</b>
	1	Senior officers are highly effective in their jobs and have cultivated a strong safety culture with positive attitudes to regulatory compliance and safety.
	2	Senior officers are either highly effective with an accepting attitude towards regulatory compliance and safety or competent with a positive attitude towards regulatory compliance and safety.
	3	Most senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
	4	Few senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
5	Senior officers are apparently incapable of performing their jobs or have a poor attitude towards regulatory compliance and safety.	

### 2. Authorisation Holder Performance Indicator: ATEL/RADNAV Service Providers

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Organisational Factors	Factor	Maturity/Stability
	Prompt	Score according to the ATEL/NAV unit's internal maturity and stability.
	Score	Word Picture
	1	Industry participant (with >5 year operating history) with few or minor changes to operation, controlled growth/decline, low management and staff turnover, no financial issues, no political issues and no industrial relations concerns.
	2	Relatively new industry participant (with <5 years' operating history), <b>OR</b> longer term participant experiencing 1 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns or</li> <li>• industrial relations tensions.</li> </ul>
	3	New entrant (i.e. no surveillance history) <b>OR</b> industry participant experiencing 2 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/takeover activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	4	Industry participant experiencing 3 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	5	Industry participant with 4 or more wide-ranging issues including: <ul style="list-style-type: none"> <li>• significant changes to operations</li> <li>• excessive growth/decline</li> <li>• political issues</li> <li>• recent merger/take-over</li> <li>• high management and staff turnover</li> <li>• significant funding/supplier issues</li> <li>• current/imminent industrial action.</li> </ul>

### 2. Authorisation Holder Performance Indicator: ATEL/RADNAV Service Providers

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Organisational Factors	Factor	Control
	Prompt	Score according to the level of control the ATEL/NAV unit has over its functions, resources and personnel.
	Score	Word Picture
	1	Tight control with majority of organisational functions contained within the organisation and all supplier/3rd party authorisation holders considered low-risk.
	2	Few and/or minor aspects of the organisation's operations are outsourced or leased with most supplier/3rd party authorisation holders considered low-risk.
	3	Several aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium risk.
	4	Many and/or major aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium to high risk.
5	Majority of organisational functions outsourced, and resources, facilities and equipment leased, with many supplier/3rd party authorisation holders considered high-risk organisations.	

Management Factors	Factor	Documents & Procedures
	Prompt	Score according to the ATEL/NAV unit's document of and adherence to procedures.
	Score	Word Picture
	1	Well-designed, structured and effective documentation with procedures applied consistently.
	2	Documentation exists and procedures are followed with only minor, irregular deviations.
	3	Documentation exists but deviations from procedures are common although in practice these deviations address inadequacies in procedures.
4	Documentation exists but deviations from procedures are the norm and may or may not address inadequacies in procedures or safety hazards.	
5	Little or no documentation exists or where it exists, it is ineffective and/or actively ignored with a range of procedures in place, most with little or no effectiveness against real safety hazards present.	

### 2. Authorisation Holder Performance Indicator: ATEL/RADNAV Service Providers

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Management Factors	Factor	<b>Safety-related Decision Making</b>
	Prompt	<i>Score according to the ATEL/NAV unit's decision making process.</i>
	Score	Word Picture
1	Systematic, transparent and data-driven process incorporating effective consultation, thorough analysis and consideration of both regulatory compliance and safety outcomes.	
2	Defined process (incorporating good characteristics) but not implemented completely with results focussed on compliance but with limited consideration of safety outcomes.	
3	No defined process but decisions made effectively although focussed on minimum compliance only.	
4	No defined process and decisions made fail to achieve minimum compliance or effective safety outcomes.	
5	No defined process and decisions made by individuals with no consultation or analysis and no clear link to regulatory compliance or safety outcomes.	

Management Factors	Factor	<b>Safety Assurance</b>
	Prompt	<i>Score according to the ATEL/NAV unit's assurance activities.</i>
	Score	Word Picture
1	Proactive and reactive processes (including internal audits and investigations etc.) exist and are tied to safety outcomes and regulatory compliance.	
2	Proactive and reactive processes exist and are tied to safety outcomes or regulatory compliance but not completely implemented.	
3	Reactive processes exist but are not completely implemented or tied to safety outcomes or regulatory compliance.	
4	Reactive assurance activities (eg ad hoc investigations) are carried out but with little connection to regulatory compliance or safety outcomes.	
5	No assurance practices exist.	

Management Factors	Factor	<b>Training</b>
	Prompt	<i>Score according to the ATEL/NAV unit's management of training.</i>
	Score	Word Picture
1	The competence (including technical and non-technical skills) of all personnel is actively managed through established processes including planning and assurance.	
2	Staff complete a planned training regime designed to meet regulatory requirements however competence is not confirmed.	
3	Staff complete training in accordance with basic regulatory requirements without any system designed to manage the process.	
4	Staff complete training but it is unplanned and inconsistent with competence unconfirmed.	
5	Significant portions of the organisation are untrained and/or incompetent with no processes in place to manage the training of personnel.	

### 2. Authorisation Holder Performance Indicator: ATEL/RADNAV Service Providers

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Management Factors	Factor	Communication
	Prompt	Score according to the ATEL/NAV unit's management of communication.
	Score	Word Picture
	1	Communication throughout the organisation is clear, consistent and effective.
	2	Communication is mostly effective with the basic message getting through to the majority of the organisation.
	3	Communication is partially effective although some messages fail to reach all parts of the organisation.
	4	Communication systems are basic and ineffective with wide-spread failures in messages reaching all parts of the organisation.
5	Communication is non-existent or completely ineffective with messages failing to reach the whole of the organisation and/or conflicting messages reaching parts of the organisation.	

Operational/Environmental Factors	Factor	Complexity
	Prompt	Score according to the level of complexity with the ATEL/NAV unit and how they cope with that complexity. (Complexity relates to factors such as disparate technology and ageing technology.)
	Score	Word Picture
	1	Simple operation with no issues relating to complexity.
	2	Some complex aspects exist within the operation but systems and personnel work together to manage issues as they emerge.
	3	Complex operation but the systems and personnel work together to manage most issues which emerge.
	4	Complex operation but the systems and personnel are inadequate to address issues as they emerge.
5	Significantly complex operation with systems and personnel which do not manage issues which emerge.	



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<b>Operational/Environmental Factors</b>	<b>Factor</b>	<b>Facilities, Resources, Equipment &amp; Data</b>
	<b>Prompt</b>	<i>Score according to the quality, suitability, availability and currency of the ATEL/NAV unit's facilities, resources, equipment and data.</i>
	<b>Score</b>	<b>Word Picture</b>
	1	All are well-above minimum standards, with ample availability, are well-maintained and available for all parts of the organisation.
	2	All meet minimum standards, with generally available although may be limited at peak times, are adequately maintained and available for all parts of the organisation.
	3	1 of the following exists: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>
	4	2 of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>
	5	3 or more of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>

### 2. Authorisation Holder Performance Indicator: ATEL/RADNAV Service Providers

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Operational/Environmental Factors	Factor	<i>Operating Environment</i>
	Prompt	Score according to the ATEL/NAV unit's operating environment and how they cope in this environment. <i>(Operating environment issues include multiple work locations, limited local support, extremes in weather (rain, storms, temperature, dust, etc), limited shelter, night time work, shift work.)</i>
	Score	<b>Word Picture</b>
	1	Uncomplicated operating environment with systems suitable to the environment in place.
	2	Some aspects of the operating environment are more complicated but systems and personnel work together to manage issues as they emerge.
	3	Relatively stable operating environment but the systems and personnel work together to manage most issues which emerge.
	4	Relatively stable operating environment but the systems and personnel are not quite suitable to address issues as they emerge.
5	Difficult operating environment with systems and personnel ill-suited to manage operations as issues emerge.	

Safety Outcomes	Factor	<i>Regulatory History</i>
	Prompt	Score according to the ATEL/NAV unit's history with regulatory actions (both administrative and enforcement).
	Score	<b>Word Picture</b>
	1	Nil or minor NCNs issued and all acquitted expeditiously, and no enforcement action within the last 3 years.
	2	A few NCNs issued but all acquitted expeditiously, or resolved enforcement action within the last 3 years.
	3	Multiple NCNs issued and mostly acquitted without issue, or minor enforcement action carried out on outstanding issues.
4	Multiple NCNs issued but acquittal problematic, or moderate enforcement action carried out on outstanding issues.	
5	Multiple and recurring NCNs issued and rarely acquitted without issues or significant enforcement action underway or still in force.	

### 2. Authorisation Holder Performance Indicator: ATEL/RADNAV Service Providers

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Safety Outcomes	Factor	Safety Occurrences
	Prompt	Score according to the ATEL/NAV unit's recent accident, incident and undesired safety-related event history as it relates to aviation safety.
	Score	Word Picture
	1	No record of involvement or implication in any safety occurrences within the last 3 years.
	2	No record of involvement or implication in any accident or serious incident but has experienced minor safety-related events within the last 3 years.
	3	Involvement or implication in one serious incident or a significant number of minor incidents within the last 3 years.
	4	Involvement or implication in one accident or multiple serious incidents within the last 3 years.
5	Involvement or implication in multiple accidents and serious incidents within the last 3 years.	

Safety Outcomes	Factor	Other Safety Issues
	Prompt	Score according to the presence of any other safety issues (not involving a regulatory breach) raised through CASA activities and external parties.
	Score	Word Picture
	1	Nil issues observed during surveillance or other CASA activity and nil reports of safety concerns from third parties.
	2	Few issues observed during surveillance or other CASA activity, or safety reports received from third parties.
	3	Multiple minor issues or concerns observed during surveillance or other CASA activity or significant reports of safety concerns from third parties.
	4	Multiple issues or concerns observed during surveillance or other CASA activity.
5	Significant issues or concerns observed during surveillance or other CASA activity.	

### 3. Systems & Elements: ATEL/RADNAV Service Providers

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### 3. Systems & Elements: ATEL/RADNAV Service Providers

**D |** The CASA description of the ATEL/RADNAV Service consists of four systems incorporating 14 elements and a number of system risks associated with each element.

**D |** The audit technique involves assessing the documented system, comparing it against the actual system processes and assessing the level of system risk mitigation exercised by the authorisation holder against the generic CASA standard system risks. The system is assessed for compliance and sampling conducted as appropriate. The assessment of the system and its risks is achieved by a questioning technique using the four attributes (12 components) of the Management System Model Service (ATEL/RADNAV) Systems and Elements.

Systems	Elements
Airways	Maintenance System
	Works Control
	Maintenance Assurance
Operations	ATEL/RADNAV Operations
	Security
	Data, Records & Documents
	Support Systems
	Communications
Personnel	Personnel Standards
	Personnel Rostering
Safety Management	Safety Policy and Objectives
	Safety Risk Management
	Safety Assurance
	Safety Promotion

<b>SYSTEM: Airways</b>	
<b>ELEMENT: Maintenance System</b>	
This element describes the systems and the processes for achieving the ‘what’ maintenance activities are required to be done and ‘when’ the maintenance activities are to be completed.	
<b>Prompts:</b>	
Corrective Maintenance (CM) Equipment recorded in SAP Plant Maintenance system	Preventative Maintenance (PM) equipment recorded in SAP Plant Maintenance system
Equipment linked to Technical Functional location and Service Functional location	Ensure regulated facilities have maintenance plans available in SAP
Service Restoration Times (SRT) available for corrective maintenance activity	Check PM work orders for correct data entry
Check Corrective Maintenance for correct data entry	Ensure Mean Time Between Inspections (MTBI) and tolerance for PM schedules agrees with the relevant equipment Airways Engineering Instruction (AEI)
<b>ELEMENT: Works Control</b>	
This element describes the systems and the processes for achieving the ‘how’ works activities are conducted and ‘who’ completes the works activities.	
<b>Prompts:</b>	
Ensure PM and CM work orders are carried out by appropriately Certified staff. Refer to TechCert requirements	Works plans
Review CM work orders exceeding SRT	Post-accident performance inspection
Review PM work orders exceeding scheduled date plus tolerance	Review all work group specific work orders with schedule role and/or team leader to ensure adequate resourcing
<b>ELEMENT: Maintenance Assurance</b>	
This element describes the systems and the processes for ensuring the ATEL or RADNAV systems are fit for service. This is accomplished primarily through the authorisation holder's internal audit processes and closes the loop on the entire Airways system.	
<b>Prompts:</b>	
Review of (Reliability Maintainability Availability) RMA of facilities using SAP A1 notification data extraction	Site visit maintenance validation activity
Review performance inspections	Review previous CASA audit reports
Review Standard Operating Condition (SOC) Standard Configuration Data (SCD)	Review internal Airservices Audit reports
Ensure facilities included on Part 171 ATEL/NAV Certificate	

<b>SYSTEM: Operations</b>	
<b>ELEMENT: ATEL/RADNAV Operations</b>	
This element addresses the systems that ensure the authorisation holder contains its operations to those authorised by legislation. This is primarily achieved through the use of a properly structured organisation with appropriate communication channels. Appropriate key personnel are a key link in ensuring ATEL/RADNAV operations are not only contained but are appropriately controlled. Examples include the Chief Engineer, Engineering Authority and Maintenance Authority.	
<b>Prompts:</b>	
Organisation structure	Supervisory personnel
Operational staff	Support staff
Staff roles and responsibilities	Local management
<b>ELEMENT: Security</b>	
This element describes the systems that make up the control of all security aspects associated with ATEL/RADNAV system. The documented system should address security aspects relating to personnel, vehicles, animals, equipment of any sort and aircraft within the confines of ATEL or RADNAV equipment.	
<b>Prompts:</b>	
Security program	Document control and access
Physical and electronic security assurance	Document management and warehousing
<b>ELEMENT: Data, Records &amp; Documents</b>	
This element addresses all technical data, design drawings, regulatory documentation and quality/procedures manuals used in the course of carrying out ATEL/RADNAV operations.	
<b>Prompts:</b>	
Use of current documentation	Drawing modification and change procedure
Use of current handbooks	Site log book management, data entry and control
Use of Current Airways Engineering Instructions (AEIs)	Control of SOC/SCD
Use of current Procedure and Policy documents	Document authorisation
Drawing control	Document release management and process
DAMP documentation	
<b>ELEMENT: Support Systems</b>	
This element addresses all aspect of operations that go into supporting the objectives of the authorisation holder. This may include, but is not limited to, aspects such as managing the use of computer systems, providing resources for travel and appropriate facilities.	
<b>Prompts:</b>	
Vehicles	Appropriate and available spares
Test equipment use	Staff tools and PPE
IT Support	Line Replacement Unit (LRU) repair process
Test equipment calibration	

<b>SYSTEM: Operations (Continued)</b>	
<b>ELEMENT: Communications</b>	
This element addresses aspects of the authorisation holders operation related to internal and external communications and includes but is not limited to communications with staff while in the field, use of obsolete or damaged equipment and communication links with other relevant parties.	
<b>Prompts:</b>	
Incident/event escalation process	LOA with third party service providers
Letters of Agreement (LOA) with aerodrome operators	

<b>SYSTEM: Personnel</b>	
<b>ELEMENT: Personnel Standards</b>	
The ATEL/RADNAV authorisation holder is required to establish and maintain an appropriate organisation, with sound and effective management structure that uses a safety management system. The standards of personnel, including third party providers, are required to be documented detailing induction training, periodic recurrent training and any required upgrade training. A process for dealing with unsatisfactory performance should also be documented.	
<b>Prompts:</b>	
Base level training requirements	Staff performance review methodology
Specific equipment Training Needs Analysis (TNA)	External contractor management
Recording of qualifications	External contractor management
Course delivery and student evaluation	DAMP education and testing
Adherence to people and change business rules	DAMP supervision
<b>ELEMENT: Personnel Rostering</b>	
This element plays a significant role in achieving safe operations as it is through rostering that the authorisation holder ensures that required tasks are carried out with appropriate personnel who have appropriate qualifications, certification, operate in accordance with legislative requirements, certification and have appropriate recency (if applicable) in order to safely conduct the planned task from the start of the duty period until completion. Rostering should take into consideration fatigue factors associated with long duty days or late night duty. The roster should, where appropriate, be published and displayed in a prominent position.	
<b>Prompts:</b>	
Appropriately trained staff	Fatigue issues
Qualifications	TechCert certification and currency
Resourcing methodology	Future staffing requirements

# CASA Surveillance Manual

## ANNEX 2 – Aeronautical Telecommunications & Radio Navigation Service Providers

### 3. Systems & Elements: ATEL/RADNAV Service Providers

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

<b>SYSTEM: Safety Management</b>	
<b>ELEMENT: Safety Policy and Objectives</b>	
This element contains the systems and processes that ensure effective governance to support the safety management system are in place, this will include processes for the review and update of the authorisation holder's management and commitment (through Safety Policy, Just Culture and Safety Objectives), the appointment of key personnel, the accountabilities of management, the Emergency Response Plan and SMS documentation.	
<b>Prompts:</b>	
Management commitment and responsibility – safety policy	Appointment of key personnel
Management commitment and responsibility – just culture	Relevant third party relationships and interactions
Management commitment and responsibility – safety objectives	Coordination of emergency response plan
Safety accountabilities of managers	SMS documentation
Part 171 Operations Manual	
<b>ELEMENT: Safety Risk Management</b>	
This element contains the systems and processes to ensure investigation, and analysis, of the safety risks associated with identified hazards resulting in the implementation of effective safety risk controls.	
<b>Prompts:</b>	
Hazard identification processes – reactive	Risk assessment and mitigation
Hazard identification processes – proactive	DAMP supervision
<b>ELEMENT: Safety Assurance</b>	
This element contains the systems and processes for setting, recording and evaluating system performance, conformance with regulations and company procedures, a process for the conduct of internal safety investigations, effectively manage change across the aviation activities conducted and drive continuous improvement of the SMS.	
<b>Prompts:</b>	
Safety performance monitoring and assessment – system performance	Internal safety investigation
Safety performance monitoring and assessment – assurance	Management of change
Safety performance monitoring and assessment – flight data analysis (if applicable)	Continuous improvement of SMS
DAMP supervision	
<b>ELEMENT: Safety Promotion</b>	
This element contains the systems and processes for ensuring personnel are appropriately trained, are aware of the SMS to a degree commensurate with their positions, which conveys safety-critical information, explains why particular safety actions are taken and explains why safety procedures are introduced or changed must be evident.	
<b>Prompts:</b>	
Training and education	Safety communication
DAMP education and testing	



#### 3.1 Health Check

Health Check mandatory elements are current for a financial year and are reviewed and updated by the Safety Systems Office (SSO) each year for the following year. Details of the current mandatory elements for each authorisation type are published separately to the CASA website.

It is recognised that assessing all types of authorisation holders against all systems, elements and system risks would require an extended amount of time and resources. In order to more accurately target those authorisations holders requiring attention, a limited scope systems and risk assessment Health Check approach has been adopted.

The objective of a Health Check is to assess selected elements and system risks associated with areas that over time have demonstrated significant non-compliance and/or poor safety risk mitigation across a specific aviation sector. Compliance and assessment of system risk mitigation is required to be achieved during a Level 1 Health Check.

The results of Level 1 Health Checks drive consideration of what, if any, additional surveillance an authorisation holder requires. Good Health Check results will likely mean the overall compliance and safety management of the authorisation holder is being well controlled. Poor results will likely drive the requirement for additional surveillance in the form of a Level 1 systems audit and/or a Level 2 Operational Check.

The SSO, in consultation with the oversighting Division, is responsible for deciding on an annual basis the system elements and system risks to be addressed when conducting a Level 1 Health Check. The SSO will draw on existing risk and compliance data obtained over the previous periods in deciding what system elements and risks are to be targeted.

In order to provide a satisfactory indication of an authorisation holder's health the SSO will decide on not more than four mandatory elements to be targeted during the coming surveillance (financial) year as part of a Level 1 Health Check. The system elements to be targeted are nominated by the SSO in consultation with the technical discipline. Additional elements and risks can be added to a Health Check if capacity and resources allow. However, any additional elements or risks cannot replace those mandated.

Because of the time constraints placed on Health Checks, the scope of a Health Check should cover no more than four systems risks across the mandated elements. The decision on which four systems risks are to be assessed is at the discretion of the authorisation management team as this may differ between authorisation holders depending on the activities carried out by the authorisation holder.

Resources allocated to Health Checks are to be determined on a case by case basis by the relevant authorisation holder management team and may consist of a multi-discipline surveillance team or a single inspector, as applicable.

<b>Preparation:</b>	Half day
<b>On site:</b>	1 full day
<b>Surveillance write-up and documentation:</b>	1 full day

#### 4. Surveillance Currency Guide: ATEL/RADNAV Service Providers

Surveillance level	Type	Elements
Level 1	Systems Audit	Systems, Risks and Compliance
	Health Check	Specific Elements, Risks and Compliance
	Post-authorisation Review	Entry Control Elements
Level 2	Operational Check	E.g. Flight Deck Observation, Ramp check

#### ATEL/RADNAV Service (Part 171)

Type of operation	Level of surveillance	Recommended frequency
Technical Facility Maintenance Units	Level 1 – Systems Audit	1 per 3 years
Corporate – Project Management	Level 1 – Systems Audit	1 per 3 years
Corporate – Systems Maintenance Management	Level 1 – Systems Audit	1 per 3 years
Corporate – Systems Safety Management	Level 1 – Systems Audit	1 per 3 years
Manned & Unmanned Facilities	Level 2 – Operational Check	1 per 3 years

**NOTE:** The Surveillance Currency Guide above provides guidance to assist in the decisions made during the 'Conduct assessment' stage described in Section 4.2.5 of the CSM.

## 5. Information Sources

The following is a non-exhaustive list of information sources that can be accessed to support the assessment:

- past Sky Sentinel risk reports
- past Airservices internal audit reports
- Airservices System Action Improvement Requests, SAIRs
- Airservices HAZLOG entries
- surveys
- regulatory history, findings (NCNs, Observations and risk history)
- past Surveillance Reports and findings (NCNs and Observations)
- Airways System Issue Database (ASID)
- Regulatory Service activity
- project activity
- information gathered by the authorisation holder
- external information gathered from industry or other government agencies
- Enforcement action
- past accident/incident history
- risk management plans provided by the authorisation holder.
- ref doc Annex 10
- ref doc CASR 1998 Part 171
- ref doc MOS Part 171
- ref Doc Airservices OPSMAN Part 171
- ref doc Airservices SMS
- management interviews
- team Leader interviews
- staff interviews.

A large portion of this information is available to the surveillance team and authorisation management team via the Data Warehouse using the Business Objects application.

**Note:** For advice on where and how to access required information refer to Chapter 5 – Information Capture and Access.

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## 1. Specific Guidelines: AOC Holders

### 1.1 Overview

This Annex provides guidelines for conducting surveillance of Air Operator’s Certificates (AOC) issued under Section 27 of the Act and contains information relating to the following:

- Authorisation Holder Performance Indicator
- Systems and Elements
- Systems and Elements – Health Checks
- Surveillance Currency Guide
- ANZA requirements
- Information Sources.

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**2. Authorisation Holder Performance Indicator: AOC Holders**

<b>Authorisation Holder Category</b>	<b>Factor</b>	<b>Aircraft Size</b>
	<b>Prompt</b>	<i>Score according to the authorisation holder’s largest aircraft.</i>
	<b>Score</b>	<b>Word Picture</b>
	1	< 10 pax or < 1133 kg payload
	2	10-19 pax or 1133-2153 kg payload
	3	20-30 pax or 2153-3400 kg payload
	4	>30 pax or > 3400 kg payload
	<b>Factor</b>	<b>Type of Operations</b>
	<b>Prompt</b>	<i>Score according to the type of operation being performed.</i>
	<b>Score</b>	<b>Word Picture</b>
	1	General Aviation Operations
	2	Aerial Work Operations
3	Regular Public Transport Operations and/or Charter Operations	

<b>Organisational Factors</b>	<b>Factor</b>	<b>Senior Manager Skills &amp; Attitudes</b>
	<b>Prompt</b>	<i>Score according to the skills and attitudes of those persons responsible for the management of the authorisation holder.</i>
	<b>Score</b>	<b>Word Picture</b>
	1	Senior officers are highly effective in their jobs and have cultivated a strong safety culture with positive attitudes to regulatory compliance and safety.
	2	Senior officers are either highly effective with an accepting attitude towards regulatory compliance and safety or competent with a positive attitude towards regulatory compliance and safety.
	3	Most senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
	4	Few senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
5	Senior officers are apparently incapable of performing their jobs or have a poor attitude towards regulatory compliance and safety.	

Organisational Factors	Factor	Maturity/Stability
	Prompt	Score according to the authorisation holder’s internal maturity & stability
	Score	Word Picture
	1	Industry participant (with >5 year operating history) with few or minor changes to operation, controlled growth/decline, low management and staff turnover, no financial issues, no political issues and no industrial relations concerns.
	2	Relatively new industry participant (with <5 years’ operating history), <b>OR</b> longer term participant experiencing 1 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns or</li> <li>• industrial relations tensions.</li> </ul>
	3	New entrant (i.e. no surveillance history) <b>OR</b> industry participant experiencing 2 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/takeover activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	4	Industry participant experiencing 3 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	5	Industry participant with 4 or more wide-ranging issues including: <ul style="list-style-type: none"> <li>• significant changes to operations</li> <li>• excessive growth/decline</li> <li>• political issues</li> <li>• recent merger/take-over</li> <li>• high management and staff turnover</li> <li>• significant funding/supplier issues</li> <li>• current/imminent industrial action.</li> </ul>

Organisational Factors	Factor	Control
	Prompt	Score according to the level of control the authorisation holder has over its functions, resources and personnel
	Score	Word Picture
	1	Tight control with majority of organisational functions contained within the organisation and all supplier/3rd party authorisation holders considered low-risk.
	2	Few and/or minor aspects of the organisation’s operations are outsourced or leased with most supplier/3rd party authorisation holders considered low-risk.
	3	Several aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium risk.
	4	Many and/or major aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium to high risk.
5	Majority of organisational functions outsourced, and resources, facilities and equipment leased, with many supplier/3rd party authorisation holders considered high-risk organisations.	

Management Factors	Factor	Documents & Procedures
	Prompt	Score according to the authorisation holder’s documentation of and adherence to procedures
	Score	Word Picture
	1	Well-designed, structured and effective documentation with procedures applied consistently.
	2	Documentation exists and procedures are followed with only minor, irregular deviations.
	3	Documentation exists but deviations from procedures are common although in practice these deviations address inadequacies in procedures.
	4	Documentation exists but deviations from procedures are the norm and may or may not address inadequacies in procedures or safety hazards.
5	Little or no documentation exists or where it exists, it is ineffective and/or actively ignored with a range of procedures in place, most with little or no effectiveness against real safety hazards present.	



Management Factors	Factor	<b>Safety-related Decision Making</b>
	Prompt	<i>Score according to the authorisation holder’s decision making process</i>
	Score	Word Picture
1	Systematic, transparent and data-driven process incorporating effective consultation, thorough analysis and consideration of both regulatory compliance and safety outcomes.	
2	Defined process (incorporating good characteristics) but not implemented completely with results focussed on compliance but with limited consideration of safety outcomes.	
3	No defined process but decisions made effectively although focussed on minimum compliance only.	
4	No defined process and decisions made fail to achieve minimum compliance or effective safety outcomes.	
5	No defined process and decisions made by individuals with no consultation or analysis and no clear link to regulatory compliance or safety outcomes.	

Management Factors	Factor	<b>Safety Assurance</b>
	Prompt	<i>Score according to the authorisation holder’s assurance activities</i>
	Score	Word Picture
1	Proactive and reactive processes (including internal audits and investigations etc.) exist and are tied to safety outcomes and regulatory compliance.	
2	Proactive & reactive processes exist and are tied to safety outcomes or regulatory compliance but not completely implemented.	
3	Reactive processes exist but are not completely implemented or tied to safety outcomes or regulatory compliance.	
4	Reactive assurance activities (eg. ad hoc investigations) are carried out but with little connection to regulatory compliance or safety outcomes.	
5	No assurance practices exist.	

Management Factors	Factor	<b>Training</b>
	Prompt	<i>Score according to the authorisation holder’s management of training</i>
	Score	Word Picture
1	The competence (including technical and non-technical skills) of all personnel is actively managed through established processes including planning and assurance.	
2	Staff complete a planned training regime designed to meet regulatory requirements however competence is not confirmed.	
3	Staff complete training in accordance with basic regulatory requirements without any system designed to manage the process.	
4	Staff complete training but it is unplanned and inconsistent with competence unconfirmed.	
5	Significant portions of the organisation are untrained and/or incompetent with no processes in place to manage the training of personnel.	

Management Factors	Factor	Communication
	Prompt	Score according to the authorisation holder’s management of communication
	Score	Word Picture
	1	Communication throughout the organisation is clear, consistent and effective.
	2	Communication is mostly effective with the basic message getting through to the majority of the organisation.
	3	Communication is partially effective although some messages fail to reach all parts of the organisation.
4	Communication systems are basic and ineffective with wide-spread failures in messages reaching all parts of the organisation.	
5	Communication is non-existent or completely ineffective with messages failing to reach the whole of the organisation and/or conflicting messages reaching parts of the organisation.	

Operational/Environmental Factors	Factor	Complexity
	Prompt	Score according to the level of complexity within the authorisation holder’s operation and how they cope. <i>(Complexity relates to factors such as multiple aircraft types, ageing aircraft, disparate technology, multiple or undefined routes, and multiple certificates.)</i>
	Score	Word Picture
	1	Simple operation with no issues relating to complexity.
	2	Some complex aspects exist within the operation but systems and personnel work together to manage issues as they emerge.
	3	Complex operation but the systems and personnel work together to manage most issues which emerge.
4	Complex operation but the systems and personnel are inadequate to address issues as they emerge.	
5	Significantly complex operation with systems and personnel which do not manage issues which emerge.	

Operational/Environmental Factors	Factor	<b>Facilities, Resources, Equipment &amp; Data</b>
	Prompt	<i>Score according to the quality, suitability and availability of the authorisation holder’s facilities, resources &amp; equipment.</i>
	Score	Word Picture
	1	All are well-above minimum standards, with ample availability, are well-maintained and available for all parts of the organisation.
	2	All meet minimum standards, with generally available although may be limited at peak times, are adequately maintained and available for all parts of the organisation.
	3	1 of the following exists: <ul style="list-style-type: none"> <li>below minimum standards</li> <li>availability at peak times is limited</li> <li>poor maintenance of facilities &amp; equipment</li> <li>limited availability across the organisation.</li> </ul>
	4	2 of the following exist: <ul style="list-style-type: none"> <li>below minimum standards</li> <li>availability at peak times is limited</li> <li>poor maintenance of facilities &amp; equipment</li> <li>limited availability across the organisation.</li> </ul>
5	3 or more of the following exist: <ul style="list-style-type: none"> <li>below minimum standards</li> <li>availability at peak times is limited</li> <li>poor maintenance of facilities &amp; equipment</li> <li>limited availability across the organisation.</li> </ul>	

Operational/Environmental Factors	Factor	<b>Operating Environment</b>
	Prompt	<i>Score according to the authorisation holder’s operating environment. (Operating environment issues include international destinations, multiple bases, limited local support, extremes in rain, wind or temperature, and terrain concerns (high mountains, over-water operations etc.)</i>
	Score	Word Picture
	1	Uncomplicated operating environment with systems suitable to the environment in place.
	2	Some aspects of the operating environment are more complicated but systems and personnel work together to manage issues as they emerge.
	3	Relatively stable operating environment but the systems and personnel work together to manage most issues which emerge.
	4	Relatively stable operating environment but the systems and personnel are not quite suitable to address issues as they emerge.
5	Difficult operating environment with systems and personnel ill-suited to manage operations as issues emerge.	

Safety Outcomes	Factor	<b>Regulatory History</b>
	Prompt	<i>Score according to the authorisation holder’s history with regulatory actions (both administrative &amp; enforcement)</i>
	Score	<b>Word Picture</b>
	1	Nil or minor NCNs issued and all acquitted expeditiously, and no enforcement action within the last 3 years.
	2	A few NCNs issued but all acquitted expeditiously, or resolved enforcement action within the last 3 years.
	3	Multiple NCNs issued and mostly acquitted without issue, or minor enforcement action carried out on outstanding issues.
	4	Multiple NCNs issued but acquittal problematic, or moderate enforcement action carried out on outstanding issues.
5	Multiple and recurring NCNs issued and rarely acquitted without issues or significant enforcement action underway or still in force.	

Safety Outcomes	Factor	<b>Safety Occurrences</b>
	Prompt	<i>Score according to the authorisation holder’s recent accident, incident and undesired safety-related event history as it relates to aviation safety</i>
	Score	<b>Word Picture</b>
	1	No record of involvement or implication in any safety occurrences within the last 3 years.
	2	No record of involvement or implication in any accident or serious incident but has experienced minor safety-related events within the last 3 years.
	3	Involvement or implication in one serious incident or a significant number of minor incidents within the last 3 years.
	4	Involvement or implication in one accident <b>or</b> multiple serious incidents within the last 3 years.
5	Involvement or implication in multiple accidents and serious incidents within the last 3 years.	

Safety Outcomes	Factor	<b>Other Safety Issues</b>
	Prompt	<i>Score according to the presence of any other safety issues (not involving a regulatory breach) raised through CASA activities (including observations during surveillance) and external parties</i>
	Score	<b>Word Picture</b>
	1	Nil issues observed during surveillance or other CASA activity and nil reports of safety concerns from third parties.
	2	Few issues observed during surveillance or other CASA activity, or safety reports received from third parties.
	3	Multiple minor issues or concerns observed during surveillance or other CASA activity or significant reports of safety concerns from third parties.
	4	Multiple issues or concerns observed during surveillance or other CASA activity.
5	Significant issues or concerns observed during surveillance or other CASA activity.	

### 3. Systems & Elements: AOC Holders

The CASA description of an AOC consists of five systems incorporating 20 elements and a number of system risks associated with each element. For more detailed information on the description and application of these systems and elements see the [Systems & Elements](#) pages on CASACConnect.

The audit technique involves assessing the documented system, comparing it against the actual system processes and assessing the level of system risk mitigation exercised by the authorisation holder against the generic CASA standard system risks. The system is assessed for compliance and sampling conducted as appropriate. The assessment of the system and its risks is achieved by a questioning technique using the four attributes (12 components) of the Management System Model.

Systems	Elements
Operational Personnel	Crew Scheduling
	Operational Standards
Aircraft	Maintenance System
	Airworthiness Control
	Line Servicing
	Airworthiness Assurance
Flight Operations	AOC Operations
	Operational Support Systems
	Flight System
	Operating Ports
	Air Routes
Cargo and Passengers	Passenger Control
	Non DG / Baggage System
	DG Cargo Control
	Fuel Load Control
	Aircraft Load Control
Safety Management	Safety Policy and Objectives
	Safety Risk Management
	Safety Assurance
	Safety Promotion

<b>SYSTEM: Operational Personnel</b>	
<b>ELEMENT: Crew Scheduling</b>	
Crew scheduling plays a significant role in achieving safe operations for it is through crew scheduling that the authorisation holder ensures that flight and ground crew have appropriate qualifications, certification, operate in accordance with legislative requirements and have appropriate recency (as applicable) in order to safely conduct the planned task from the start of the duty period until completion.	
<b>Prompts:</b>	
Roster production (includes cabin crew and dispatchers)	Flight and duty limitations, Fatigue risk Management System (FRMS)
Crew records (includes cabin crew and dispatchers)	Maintenance authorities and other airworthiness authorisations
Flight authorisation	Qualifications, certifications, currency
DAMP education and testing	
<b>ELEMENT: Operational Standards</b>	
Operational Standards are a vital element of the AOC system required to maintain safe operations through the establishment of an appropriate set of systems (includes an appropriate organisational structure) to accommodate induction, check to line, upgrade training (where applicable) and a system for dealing with unacceptable performance.	
<b>Prompts:</b>	
Chief Pilot (however named)	Traffic staff
Head of training and checking (however named)	Operational support and admin staff
Check pilots	Dispatcher personnel
Supervisory pilots	Maintenance controller
Line pilots including casual/subcontracted pilots	Head of Aircraft Airworthiness and Maintenance Control (HAAMC)
Cabin check crew	Quality assurance personnel
Cabin crew	Load control personnel
Ground crew	Ground handling staff
Approved Testing Officer (ATO) delegates	Loading staff
Flight instructors	DG training Instructors
Ground instructors	Cabin staff
Flight school trainees	DAMP supervision

<b>SYSTEM: Aircraft</b>	
<b>ELEMENT: Maintenance System</b>	
This element contains the systems and processes for identifying “what” maintenance activities are required to be done as well as “when” the maintenance activities are to be completed.	
<b>Prompts:</b>	
Regulatory requirements	Safety equipment
Manufacturers recommendations	Major repairs and alterations
Aircraft age	Aircraft configuration and listing
Aircraft modifications	CASA approval
Aircraft operations	Audit feedback
Trend monitoring eg ECTM	Defect information
Audit feedback	Minimum Equipment List (MEL)/Configuration Deviation List (CDL)
Reliability program	Service Defect Reports (SDR)
System of Maintenance (SOM)	
<b>ELEMENT: Airworthiness Control</b>	
This element contains the systems and processes for achieving the “how” maintenance activities are conducted and “who” completes the maintenance activities.	
<b>Prompts:</b>	
Regulatory requirements	Parts pooling
System of certification	Contractual arrangements
Data	Audit feedback
Tooling	Special flight permits
Parts and stores	Operational equipment
Maintenance providers	MEL/CDL deferred maintenance
Aircraft maintenance documentation	Aircraft cross hire
Time in service details	CASA approval
Defect information	Short term escalation
Airworthiness directions	
<b>ELEMENT: Line Servicing</b>	
This element contains the systems and processes for ensuring the appropriate activities are conducted to ensure the aircraft is serviced for flight.	
<b>Prompts:</b>	
Line maintenance	Taxiing
Pilot maintenance	Equipment control
Configuration control	Engine running
Fuelling	Towing
Replenishing	De-icing
Cleaning	

<b>SYSTEM: Aircraft (Continued)</b>	
<b>ELEMENT: Airworthiness Assurance</b>	
This element contains the systems and processes for ensuring the aircraft is airworthy and fit for service. This is accomplished primarily through the authorisation holder’s internal audit processes and closes the loop on the entire maintenance system.	
<b>Prompts:</b>	
Audit	Maintenance
Aircraft	Locations
Aircraft documentation	

<b>SYSTEM: Flight Operations</b>	
<b>ELEMENT: AOC Operations</b>	
The AOC Operations element addresses the systems that ensure the authorisation holder contains its operations to those authorised by legislation. This is primarily achieved through the use of a properly structured organisation with appropriate communication channels. Appropriate Key Personnel is a key link in ensuring AOC operations are not only contained but are appropriately controlled. Examples include the Chief Pilot (however named) and, when applicable, the Chief Flying Instructor, Head of Check and Training, Head of Aircraft Maintenance Control, Maintenance Controller and Safety Officer.	
<b>Prompts:</b>	
System to contain operations to the AOC authorisation	Approved aerodromes
System to control AOC authorised operations	Special navigation areas
Manual currency procedures	Consistent content across manuals
Distribution system	Availability of manuals
Requirements for supplemental Ops manual procedures	
<b>ELEMENT: Operational Support Systems</b>	
This element contains the authorisation holder’s systems and processes that support the conduct of flight operations. This includes, but is not limited to, the authorisation holder accepting responsibility, mandated in CAOs 20.7, to provide crews with the published data and procedures necessary to achieve compliance with performance requirements.	
<b>Prompts:</b>	
Provision of Performance data	Flight planning
Facilities	



<b>SYSTEM: Flight Operations (Continued)</b>	
<b>ELEMENT: Flight System</b>	
This element contains the authorisation holder’s systems and processes for the safe conduct of the flight phase of operations. Much of this information, procedures and instructions are contained in the operations manual. This is not a limiting factor and other areas of operations may or may not require consideration.	
<b>Prompts:</b>	
Crew coordination	Approved Single Engine Powered Turbine Aeroplane (ASEPTA)
Flight check system	Extended Diversion Time Operations (EDTO)
Monitoring the flight path	Reduced Vertical Separation Minimum (RVSM)
ATS communication and procedures	Flight deck procedures
Navigation procedures	Navigation procedures
Altitude awareness procedures	Monitoring of flight path procedures
Flight profile procedures	Lower take-off and landing minimum
Aircraft performance considerations	Flight Management System (FMS) operation procedures
Aircraft system management procedures	Operational control procedures
Defect recording procedures	Turn around and post flight procedures
Passenger control procedures	Emergency procedures
Land And Hold Short Operation (LAHSO)	Precision Runway Monitoring (PRM)
Required Navigation Performance (RNP)	Supplemental electronic devices and information (eg iPad)
Pre-flight procedures	
<b>ELEMENT: Operating Ports</b>	
This element contains the systems and processes that ensure that the flight crew have adequate knowledge of the port and that the port is “suitable” for the operation.	
<b>Prompts:</b>	
Inspection and reporting procedure	Lower landing minima
Operating details	Weather reporting/Special Automatic Weather Report (SAWR)
Approved agents	Altimeter setting sources
Security	Suitability of port
<b>ELEMENT: Air Routes</b>	
This element contains the systems and processes that allow an authorisation holder to use, as applicable, but not be limited to the provisions of Required Navigation Performance (RNP), RVSM, EDTO, ASEPTA, or the use of Self-contained, long-range navigation systems.	
<b>Prompts:</b>	
Reduced Vertical Separation Minimum (RVSM)	Approved Single-engine Turbine Aeroplane (ASEPTA)
Extended Diversion Time Operations (EDTO)	Self-contained, long-range navigation systems (FMS)
Route limitations	Required navigation performance (RNP)

<b>SYSTEM: Cargo and Passengers</b>	
<b>ELEMENT: Passenger Control</b>	
This element contains the authorisation holder’s systems and processes that deliver control over passenger movement from check-in until completion of the flight.	
<b>Prompts:</b>	
Passenger check in and seat allocation	Exit-row seating
Passenger screening	Carry-on baggage
Passenger transport to aircraft	Cabin procedures
Passenger seating verification	Check In contractual arrangements
<b>ELEMENT: Non DG / Baggage System</b>	
This element contains the authorisation holder’s systems and processes that deliver control cargo classification to ensure that DG and any specialised cargo (perishable materials, animals) is identified prior to processing. Cargo or baggage, acceptance for non-DG cargo/baggage and specialised cargo (see AOCM) scales and their calibration, identification/tagging, cargo manifest building and data flow to the flight crew are key elements in this sub-system. Refer to the AOCM for a discussion of standard baggage weights.	
<b>Prompts:</b>	
Cargo classification system	Cargo loading
Cargo or baggage acceptance	DG control
Temporary storage	Cargo contractual arrangements
Transport to aircraft	
<b>ELEMENT: DG Cargo Control</b>	
This element contains the authorisation holder’s systems and processes relating to cargo classification and acceptance procedures to ensure that DG and any specialised cargo (perishable materials, animals) is identified and properly classified prior to acceptance. Establishing whether the DG can actually be carried by air. Examination of the presented DG for correct packaging, preparation declarations and documentation. Check-in and/or Freight Forwarding personnel require DG acceptance training and are required to ascertain the content of the DG prior to formally accepting the DG and provision of a quarantine area.	
<b>Prompts:</b>	
Acceptance	Loading
Examination	Notification
Storage	In-flight emergencies

#### SYSTEM: Cargo and Passengers (Continued)

##### ELEMENT: Fuel Load Control

This element ensures that the correct amount of fuel is loaded, where applicable, the correct amount of fuel is removed from an aircraft and the fuel quality is controlled. The sub-system “Fuel quality and equipment” is covered by the “Line Servicing” element from the Aircraft system (see AOCM). For demarcation in the audit process the “Line Servicing” element from the Aircraft system is considered to cover all issues related to the quality of delivered fuel, whereas the Fuel Load Control element covers issues of quantity, safety and contractual arrangements.

##### Prompts:

Fuel ordering	Defuel procedures
Refuelling procedures	Fuel contractual arrangements
DAMP supervision	

##### ELEMENT: Aircraft Load Control

This element is the central system within the total Load Control system and draws together outputs from all the other systems to ensure the aircraft is actually loaded in accordance with the rules of the aircraft loading system – in balance, within all weight limits including compartment weight limits, with the load correctly secured, in an aircraft correctly configured, and how the crew expected or requested that it be loaded.

##### Prompts:

Trim sheet production	Aircraft configuration
Load distribution	Cargo and baggage restraint

#### SYSTEM: Safety Management

##### ELEMENT: Safety Policy and Objectives

This element contains the systems and processes that ensure effective governance to support the safety management system (SMS) that is in place, including processes for the review and update of the authorisation holder’s management and commitment (through Safety Policy, Just Culture and Safety Objectives), the appointment of key personnel, the accountabilities of management, the Emergency Response Plan and SMS documentation.

##### Prompts:

Safety policy	Key personnel
Just culture	Third party relationships and interactions
Safety objectives	Emergency response plan
Safety accountabilities of managers	SMS documentation

<b>SYSTEM: Safety Management (Continued)</b>	
<b>ELEMENT: Safety Risk Management</b>	
This element contains the systems and processes to ensure investigation and analysis of the safety risks associated with identified hazards resulting in the implementation of effective safety risk controls.	
<b>Prompts:</b>	
Hazard identification processes - reactive	Risk assessment and mitigation
Hazard identification processes - proactive	DAMP supervision
<b>ELEMENT: Safety Assurance</b>	
This element contains the systems and processes for setting, recording and evaluating system performance, conformance with regulations and company procedures, a process for conducting internal safety investigations, effectively managing change across the aviation activities conducted and driving continuous improvement of the SMS.	
<b>Prompts:</b>	
System performance	Internal safety investigation
Assurance	Management of change
Flight data analysis (if applicable)	Continuous improvement of SMS
DAMP supervision	
<b>ELEMENT: Safety Promotion</b>	
This element contains the systems and processes for ensuring personnel are appropriately trained and are aware of the SMS to a degree commensurate with their positions, safety-critical information is conveyed, explains why particular safety actions are taken and explains why safety procedures are introduced or changed must be evident.	
<b>Prompts:</b>	
Training and education	Safety communication
DAMP education and testing	

#### 3.1 Health Check

Health Check mandatory elements are current for a financial year and are reviewed and updated by the Safety Systems Office (SSO) each year for the following year. Details of the current mandatory elements for each authorisation type are published separately to the CASA website. | D

It is recognised that assessing all types of authorisation holders against all systems, elements and system risks would require an extended amount of time and resources. In order to more accurately target those authorisations holders requiring attention, a limited scope systems and risk assessment Health Check approach has been adopted.

The objective of a Health Check is to assess selected elements and system risks associated with areas that over time have demonstrated significant non-compliance and/or poor safety risk mitigation across a specific aviation sector. Compliance and assessment of system risk mitigation is required to be achieved during a Level 1 Health Check.

The results of Level 1 Health Checks drive consideration of what, if any, additional surveillance an authorisation holder requires. Good Health Check results will likely mean the overall compliance and safety management of the authorisation holder is being well controlled. Poor results will likely drive the requirement for additional surveillance in the form of a Level 1 systems audit and/or a Level 2 Operational Check.

The SSO, in consultation with the oversighting Division, is responsible for deciding on an annual basis the system elements and system risks to be addressed when conducting a Level 1 Health Check. The SSO will draw on existing risk and compliance data obtained over the previous periods in deciding what system elements and risks are to be targeted.

In order to provide a satisfactory indication of an authorisation holder’s health the SSO will decide on not more than four mandatory elements to be targeted during the coming surveillance (financial) year as part of a Level 1 Health Check. The system elements to be targeted are nominated by the SSO in consultation with the technical discipline. Additional elements and risks can be added to a Health Check if capacity and resources allow. However, any additional elements or risks cannot replace those mandated.

Because of the time constraints placed on Health Checks, the scope of a Health Check should cover no more than four systems risks across the mandated elements. The decision on which four systems risks are to be assessed is at the discretion of the authorisation management team as this may differ between authorisation holders depending on the activities carried out by the authorisation holder.

Resources allocated to Health Checks are to be determined on a case by case basis by the relevant authorisation holder management team and may consist of a multi-discipline surveillance team or a single inspector, as applicable.

<b>Preparation:</b>	Half day
<b>On site:</b>	1 full day
<b>Surveillance write-up and documentation:</b>	1 full day

**4. Surveillance Currency Guide – AOC Holders**

Surveillance level	Type	Elements
Level 1	Systems Audit	Systems, Risks and Compliance
	Health Check	Specific Elements, Risks and Compliance
	Post-authorisation Review	Entry Control Elements
Level 2	Operational Check	E.g. Flight Deck Observation, Ramp check

Air Operator Certificate (AOC)		
Type of operation	Level of surveillance	Recommended frequency
Regular Public Transport	Level 1 – Systems Audit	1 per year
	Level 2 – Operational Check	1 per year
	Level 2 – Operational Check (IFS)	1 per year
Large Charter (greater than 5700kg)	Level 1 – Systems Audit	1 per year
	Level 2 – Operational Check	1 per year
Small Charter	Level 1 – Health Check	1 per year
	Level 2 – Operational Check	1 per year
Aerial Work	Level 1 – Health Check	1 per 3 years
	Level 2 – Operational Check	1 per year
Additional for CAR 217	Level 2 – Operational Check	1 per year

**NOTE:** The Surveillance Currency Guide above provides guidance to assist in the decisions made during the ‘Conduct assessment’ stage described in Section 4.2.5 of the CSM.

## 5. ANZA requirements

The arrangement between the Australian and New Zealand governments on Mutual Recognition of Aviation-Related Certification ('ANZA Mutual Recognition Arrangements') provide for the reciprocal recognition by Australia and New Zealand of Air Operator's Certificates authorising operation of aircraft with a capacity of 30 seats or more or has a maximum certificated take-off weight greater than 15,000kg . Such certifications are issued by the respective aviation safety authorities under the Australia New Zealand Aviation (ANZA) Mutual Recognition Principle set out in those agreements. CASA issues AOC's with ANZA privileges under s.27 of the Act. (General provisions in relation to mutual recognition under the ANZA Mutual Recognition Agreements are set out in Part III of the Act.)

Safety oversight of authorisation holders with ANZA privileges is the responsibility of the host regulator. CASA oversees and conducts surveillance of Australian registered authorisation holders with ANZA privileges in New Zealand territory. There is no requirement for CASA to conduct surveillance or international ramp checks of New Zealand authorisation holders with ANZA privileges, but it may choose to do so.

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## 6. Information Sources

The following is a non-exhaustive list of information sources that can be accessed to support the assessment of an authorisation holder:

- past Sky Sentinel risk reports
- surveys
- regulatory history, findings (NCNs, Observations and risk history)
- past Surveillance Reports and findings (NCNs and Observations)
- AIRS Information
- Service Difficulty Reports (SDRs)
- Regulatory Service activity
- information gathered by the authorisation holder
- external information gathered from industry or other government agencies
- Enforcement action
- past accident/incident history
- risk management plans provided by the authorisation holder.

A large portion of this information is available to the surveillance team and authorisation management team via the Data Warehouse using the Business Objects application.

**Note:** For advice on where and how to access required information refer to Chapter 5 – Information Capture and Access.



## 1. Specific Guidelines: ATS Providers

### 1.1 Overview

This Annex provides guidelines for conducting surveillance of CASR Part 172 Air Traffic Services and contains information relating to the following:

- Authorisation Holder Performance Indicator
- Systems and Elements
- Systems and Elements – Health Checks
- Surveillance Currency Guide
- Information Sources.

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2. Authorisation Holder Performance Indicator: ATS Providers



**Note:** AHPI is applicable for Part 172 surveillance activities at either the national authorisation holder (Corporate) level, the ATS Unit/Group or at the ATS project level.

Authorisation Holder Category	<b>Factor</b>	<b>Aircraft Size</b>
	<b>Prompt</b>	Score according to the largest aircraft receiving an air traffic service from or as a result of activity provided by the ATS unit.
	<b>Score</b>	<b>Word Picture</b>
	1	< 10 pax or < 1133 kg payload
	2	10-19 pax or 1133-2153 kg payload
	3	20-30 pax or 2153-3400 kg payload
	4	>30 pax or > 3400 kg payload
	<b>Factor</b>	<b>Type of Operations</b>
	<b>Prompt</b>	Score according to the most critical type of operation receiving an air traffic service from or as a result of activity provided by the ATS unit.
	<b>Score</b>	<b>Word Picture</b>
3	Regular Public Transport and/or Charter Operations	



**NOTE:** Because of the nature of this authorisation type the score for the Type of Operations factor defaults to a consistent score.

Organisational Factors	Factor	<i>Senior Officers' Skills &amp; Attitudes</i>
	Prompt	<i>Score according to the skills and attitudes of those persons responsible for the management of the ATS unit.</i>
	Score	Word Picture
	1	Senior officers are highly effective in their jobs and have cultivated a strong safety culture with positive attitudes to regulatory compliance and safety.
	2	Senior officers are either highly effective with an accepting attitude towards regulatory compliance and safety or competent with a positive attitude towards regulatory compliance and safety.
	3	Most senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
	4	Few senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
5	Senior officers are apparently incapable of performing their jobs or have a poor attitude towards regulatory compliance and safety.	

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Organisational Factors	Factor	Maturity/Stability
	Prompt	Score according to the ATS unit's internal maturity and stability.
	Score	Word Picture
	1	Industry participant (with >5 year operating history) with few or minor changes to operation, controlled growth/decline, low management and staff turnover, no financial issues, no political issues and no industrial relations concerns.
	2	Relatively new industry participant (with <5 years' operating history), <b>OR</b> longer term participant experiencing 1 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns or</li> <li>• industrial relations tensions.</li> </ul>
	3	New entrant (i.e. no surveillance history) <b>OR</b> industry participant experiencing 2 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/takeover activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	4	Industry participant experiencing 3 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	5	Industry participant with 4 or more wide-ranging issues including: <ul style="list-style-type: none"> <li>• significant changes to operations</li> <li>• excessive growth/decline</li> <li>• political issues</li> <li>• recent merger/take-over</li> <li>• high management and staff turnover</li> <li>• significant funding/supplier issues</li> <li>• current/imminent industrial action.</li> </ul>

Organisational Factors	Factor	Control
	Prompt	Score according to the level of control the ATS unit has over its functions, resources and personnel.
	Score	Word Picture
	1	Tight control with majority of organisational functions contained within the organisation and all supplier/3rd party authorisation holders considered low-risk.
	2	Few and/or minor aspects of the organisation's operations are outsourced or leased with most supplier/3rd party authorisation holders considered low-risk.
	3	Several aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium risk.
	4	Many and/or major aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium to high risk.
5	Majority of organisational functions outsourced, and resources, facilities and equipment leased, with many supplier/3rd party authorisation holders considered high-risk organisations.	

Management Factors	Factor	Documents & Procedures
	Prompt	Score according to the ATS unit's document of and adherence to procedures.
	Score	Word Picture
	1	Well-designed, structured and effective documentation with procedures applied consistently.
	2	Documentation exists and procedures are followed with only minor, irregular deviations.
	3	Documentation exists but deviations from procedures are common although in practice these deviations address inadequacies in procedures.
	4	Documentation exists but deviations from procedures are the norm and may or may not address inadequacies in procedures or safety hazards.
5	Little or no documentation exists or where it exists, it is ineffective and/or actively ignored with a range of procedures in place, most with little or no effectiveness against real safety hazards present.	

Management Factors	Factor	<b>Safety-related Decision Making</b>
	Prompt	<i>Score according to the ATS unit's decision making process.</i>
	Score	Word Picture
1	Systematic, transparent and data-driven process incorporating effective consultation, thorough analysis and consideration of both regulatory compliance and safety outcomes.	
2	Defined process (incorporating good characteristics) but not implemented completely with results focussed on compliance but with limited consideration of safety outcomes.	
3	No defined process but decisions made effectively although focussed on minimum compliance only.	
4	No defined process and decisions made fail to achieve minimum compliance or effective safety outcomes.	
5	No defined process and decisions made by individuals with no consultation or analysis and no clear link to regulatory compliance or safety outcomes.	

Management Factors	Factor	<b>Safety Assurance</b>
	Prompt	<i>Score according to the ATS unit's assurance activities.</i>
	Score	Word Picture
1	Proactive and reactive processes (including internal audits and investigations etc.) exist and are tied to safety outcomes and regulatory compliance.	
2	Proactive and reactive processes exist and are tied to safety outcomes or regulatory compliance but not completely implemented.	
3	Reactive processes exist but are not completely implemented or tied to safety outcomes or regulatory compliance.	
4	Reactive assurance activities (eg ad hoc investigations) are carried out but with little connection to regulatory compliance or safety outcomes.	
5	No assurance practices exist.	

Management Factors	Factor	<b>Training</b>
	Prompt	<i>Score according to the ATS unit's management of training.</i>
	Score	Word Picture
1	The competence (including technical and non-technical skills) of all personnel is actively managed through established processes including planning and assurance.	
2	Staff complete a planned training regime designed to meet regulatory requirements however competence is not confirmed.	
3	Staff complete training in accordance with basic regulatory requirements without any system designed to manage the process.	
4	Staff complete training but it is unplanned and inconsistent with competence unconfirmed.	
5	Significant portions of the organisation are untrained and/or incompetent with no processes in place to manage the training of personnel.	

Management Factors	Factor	Communication
	Prompt	Score according to the ATS unit's management of communication.
	Score	Word Picture
	1	Communication throughout the organisation is clear, consistent and effective.
	2	Communication is mostly effective with the basic message getting through to the majority of the organisation.
	3	Communication is partially effective although some messages fail to reach all parts of the organisation.
4	Communication systems are basic and ineffective with wide-spread failures in messages reaching all parts of the organisation.	
5	Communication is non-existent or completely ineffective with messages failing to reach the whole of the organisation and/or conflicting messages reaching parts of the organisation.	

Operational/Environmental Factors	Factor	Complexity
	Prompt	Score according to the level of complexity within the ATS unit and how they cope with that complexity. <i>(Complexity relates to factors such as traffic mix, airways structure, and the presence of or proximity to international, military and special operations.)</i>
	Score	Word Picture
	1	Simple operation with no issues relating to complexity.
	2	Some complex aspects exist within the operation but systems and personnel work together to manage issues as they emerge.
	3	Complex operation but the systems and personnel work together to manage most issues which emerge.
4	Complex operation but the systems and personnel are inadequate to address issues as they emerge.	
5	Significantly complex operation with systems and personnel which do not manage issues which emerge.	

Operational/Environmental Factors	Factor	<i>Facilities, Resources, Equipment &amp; Data</i>
	Prompt	<i>Score according to the quality, suitability, availability and currency of the ATS unit's facilities, resources, equipment and data.</i>
	Score	<b>Word Picture</b>
	1	All are well-above minimum standards, with ample availability, are well-maintained and available for all parts of the organisation.
	2	All meet minimum standards, with generally available although may be limited at peak times, are adequately maintained and available for all parts of the organisation.
	3	1 of the following exists: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>
	4	2 of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>
5	3 or more of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>	



Operational/Environmental Factors	Factor	<i>Operating Environment</i>
	Prompt	Score according to the ATS unit's operating environment and how they cope in this environment. <i>(Operating environment issues include high terrain within the airspace, the nature of the airspace, extremes in weather (including fog/smog/smoke/dust, rain, thunderstorms, etc.)</i>
	Score	<b>Word Picture</b>
	1	Uncomplicated operating environment with systems suitable to the environment in place.
	2	Some aspects of the operating environment are more complicated but systems and personnel work together to manage issues as they emerge.
	3	Relatively stable operating environment but the systems and personnel work together to manage most issues which emerge.
	4	Relatively stable operating environment but the systems and personnel are not quite suitable to address issues as they emerge.
5	Difficult operating environment with systems and personnel ill-suited to manage operations as issues emerge.	

Safety Outcomes	Factor	<i>Regulatory History</i>
	Prompt	Score according to the ATS unit's history with regulatory actions (both administrative and enforcement)
	Score	<b>Word Picture</b>
	1	Nil or minor NCNs issued and all acquitted expeditiously, and no enforcement action within the last 3 years.
	2	A few NCNs issued but all acquitted expeditiously, or resolved enforcement action within the last 3 years.
	3	Multiple NCNs issued and mostly acquitted without issue, or minor enforcement action carried out on outstanding issues.
4	Multiple NCNs issued but acquittal problematic, or moderate enforcement action carried out on outstanding issues.	
5	Multiple and recurring NCNs issued and rarely acquitted without issues or significant enforcement action underway or still in force.	

Safety Outcomes	Factor	Safety Occurrences
	Prompt	Score according to the ATS unit's recent accident, incident and undesired safety-related event history as it relates to aviation safety.
	Score	Word Picture
	1	No record of involvement or implication in any safety occurrences within the last 3 years.
	2	No record of involvement or implication in any accident or serious incident but has experienced minor safety-related events within the last 3 years.
	3	Involvement or implication in one serious incident or a significant number of minor incidents within the last 3 years.
	4	Involvement or implication in one accident or multiple serious incidents within the last 3 years.
5	Involvement or implication in multiple accidents and serious incidents within the last 3 years.	

Safety Outcomes	Factor	Other Safety Issues
	Prompt	Score according to the presence of any other safety issues (not involving a regulatory breach) raised through CASA activities and external parties.
	Score	Word Picture
	1	Nil issues observed during surveillance or other CASA activity and nil reports of safety concerns from third parties.
	2	Few issues observed during surveillance or other CASA activity, or safety reports received from third parties.
	3	Multiple minor issues or concerns observed during surveillance or other CASA activity or significant reports of safety concerns from third parties.
	4	Multiple issues or concerns observed during surveillance or other CASA activity.
5	Significant issues or concerns observed during surveillance or other CASA activity.	

### 3. Systems & Elements: ATS Providers

The CASA system description of an Air Traffic Service Provider consists of three systems incorporating 11 elements and a number of system risks associated with each element.

The audit technique involves assessing the documented system, comparing it against the actual system processes and assessing the level of system risk mitigation exercised by the authorisation holder against the generic CASA standard system risks. The system is assessed for compliance and sampling conducted as appropriate. The assessment of the system and its risks is achieved by a questioning technique using the four attributes (12 components) of the Management System Model.

Systems	Elements
<b>Air Traffic Service</b>	ATS Operations
	Towers, Terminal Control Units and Area Control Centres
	Security
	Data & Documents
	Support Systems
<b>Personnel</b>	Personnel Standards
	Personnel Rostering
<b>Safety Management</b>	Safety Policy and Objectives
	Safety Risk Management
	Safety Assurance
	Safety Promotion

<b>SYSTEM: Air Traffic Services</b>	
<b>ELEMENT: ATS Operations</b>	
<p>This element addresses the systems and processes that an ATS provider must have to ensure the air traffic services it provides meets regulatory standards and addresses the systems that ensure the Authorisation holder contains its operations to those authorised. This is primarily achieved through the use of a properly structured organisation with appropriate communication channels. Appropriate key personnel are a key link in ensuring ATS operations are not only contained but are appropriately controlled. Examples include the Senior Supervisor (however named) and, Safety Officer</p>	
<b>Prompts:</b>	
Organisation structure	Supervisory personnel
Operational staff	Appropriate communication channels
Appropriate key personnel	Operations contained to those authorised
Appropriate facilities	Commissioning of new Facilities
ATS Route Structure and Airspace	Alerting services including abnormal operations
ATS flow management	Environmental control
Flight Information Services	Air Traffic Services
<b>ELEMENT: Towers, Terminal Control Units and Area Control Centres</b>	
<p>The local control element consists of the systems that make up the control of aspects associated with surface movement and air movement control within the confines of the defined limits of local control. The documents system should address, but is not limited to, aspects relating to personnel duties and responsibilities, asset suitability and communications.</p>	
<b>Prompts:</b>	
Visibility from control towers	Communication equipment
Information displays	Lighting and controls (internal and external)
Voice and data recording	Handover of movements
Loss of communications	Alarms and Alerts
Environmental control	Runway/Movement area incursions
Contingency measures	Automation
Facilities	Switching and control
Messaging	Surveillance systems
<b>ELEMENT: Security</b>	
<p>This element describes the systems that make up the control of security aspects associated with ATSP system. The documented system should address security aspects relating to facilities, personnel, vehicles and equipment of any sort within the confines of the ATSP area of responsibility.</p>	
<b>Prompts:</b>	
Security measures	Access to facilities
External security measures (fencing)	Internal security (Staff and visitor access to secure areas)
Vehicle access	Contingency measures

#### SYSTEM: Air Traffic Services (Continued)

##### ELEMENT: Data & Documents

This element addresses all technical data, design drawings, regulatory documentation and quality/procedures manuals used in the course of carrying out ATSP operations.

##### Prompts:

Manual of Air Traffic Service	Standards for Air Traffic Services
Processes for ensuring the ATSP systems are fit for service	Operations Manual General
Document control	Document change management
Commissioning of new facilities	Transfer of information arrangements
ATS Route structure and airspace	Completeness of procedures
Log Books	Agreements with other Air Navigation Service Providers (ANSPs)
Agreements with aerodrome operators	Messaging
DAMP documentation	

##### ELEMENT: Support Systems

This element addresses all aspect of operations that go into supporting the objectives of the authorisation holder. This may include but is not limited aspects such as managing the use of computer and communications systems, providing resources for travel and appropriate support facilities.

##### Prompts:

Agreements with maintenance providers	Agreements with other third party providers
Agreements with aerodrome operators	Obsolete support systems
Replacement of aging support facilities program	

#### SYSTEM: Personnel

##### ELEMENT: Personnel Standards

The ATSP authorisation holder is required to establish and maintain an appropriate organisation, with sound and effective management structure that includes a training and checking organisation. The standards of personnel, including third party providers is required to be documented detailing induction training, periodic recurrent training/checking and any required upgrade training. A process for dealing with unsatisfactory performance should also be documented.

##### Prompts:

Induction training	Recurrent checking program
Upgrade training	Poor performance aspects
Recurrent training program	Training and performance
Checking and training	Personnel licensing
DAMP education and training	

<b>SYSTEM: Personnel (Continued)</b>	
<b>ELEMENT: Personnel Rostering</b>	
<p>This element plays a significant role in achieving safe operations for it is through rostering that the authorisation holder ensures that required tasks are carried out with appropriate personnel that have appropriate qualifications, operate in accordance with legislative requirements, and have appropriate recency (if applicable) in order to safely conduct the planned task from the start of the duty period until completion. Rostering should take into consideration fatigue factors associated with long duty days or late night duty. The roster should, where appropriate, be published and displayed in a prominent position.</p>	
<b>Prompts:</b>	
Roster production	Fatigue Issues
Qualifications	Recency and currency
DAMP supervision	

<b>SYSTEM: Safety Management</b>	
<b>ELEMENT: Safety Policy and Objectives</b>	
<p>This element contains the systems and processes that ensure effective governance to support the safety management system are in place, this will include processes for the review and update of the authorisation holder's management and commitment (through Safety Policy, Just Culture and Safety Objectives), the appointment of key personnel, the accountabilities of management, the Emergency Response Plan and SMS documentation.</p>	
<b>Prompts:</b>	
Management commitment and responsibility – safety policy	Appointment of key personnel
Management commitment and responsibility – just culture	Relevant third party relationships and interactions
Management commitment and responsibility – safety objectives	Coordination of emergency response plan
Safety accountabilities of managers	SMS documentation
<b>ELEMENT: Safety Risk Management</b>	
<p>This element contains the systems and processes to ensure investigation, and analysis, of the safety risks associated with identified hazards resulting in the implementation of effective safety risk controls.</p>	
<b>Prompts:</b>	
Hazard identification processes - reactive	Risk assessment and mitigation
Hazard identification processes - proactive	DAMP supervision

<b>SYSTEM: Safety Management (Continued)</b>	
<b>ELEMENT: Safety Assurance</b>	
This element contains the systems and processes for setting, recording and evaluating system performance, conformance with regulations and company procedures, a process for the conduct of internal safety investigations, effectively manage change across the aviation activities conducted and drive continuous improvement of the SMS.	
<b>Prompts:</b>	
Safety performance monitoring and assessment – system performance	Internal safety investigation
Safety performance monitoring and assessment – assurance	Management of change
Safety performance monitoring and assessment – flight data analysis (if applicable)	Continuous improvement of SMS
DAMP supervision	
<b>ELEMENT: Safety Promotion</b>	
This element contains the systems and processes for ensuring personnel are appropriately trained, are aware of the SMS to a degree commensurate with their positions, which convey safety-critical information, explains why particular safety actions are taken, and; explains why safety procedures are introduced or changed must be evident.	
<b>Prompts:</b>	
Training and education	Safety communication
DAMP education and testing	

#### 3.1 Health Check

Health Check mandatory elements are current for a financial year and are reviewed and updated by the Safety Systems Office (SSO) each year for the following year. Details of the current mandatory elements for each authorisation type are published separately to the CASA website.

It is recognised that assessing all types of authorisation holders against all systems, elements and system risks would require an extended amount of time and resources. In order to more accurately target those authorisations holders requiring attention, a limited scope systems and risk assessment Health Check approach has been adopted.

The objective of a Health Check is to assess selected elements and system risks associated with areas that over time have demonstrated significant non-compliance and/or poor safety risk mitigation across a specific aviation sector. Compliance and assessment of system risk mitigation is required to be achieved during a Level 1 Health Check.

The results of Level 1 Health Checks drive consideration of what, if any, additional surveillance an authorisation holder requires. Good Health Check results will likely mean the overall compliance and safety management of the authorisation holder is being well controlled. Poor results will likely drive the requirement for additional surveillance in the form of a Level 1 systems audit and/or a Level 2 Operational Check.

The SSO, in consultation with the oversighting Division, is responsible for deciding on an annual basis the system elements and system risks to be addressed when conducting a Level 1 Health Check. The SSO will draw on existing risk and compliance data obtained over the previous periods in deciding what system elements and risks are to be targeted.

In order to provide a satisfactory indication of an authorisation holder's health the SSO will decide on not more than four mandatory elements to be targeted during the coming surveillance (financial) year as part of a Level 1 Health Check. The system elements to be targeted are nominated by the SSO in consultation with the technical discipline. Additional elements and risks can be added to a Health Check if capacity and resources allow. However, any additional elements or risks cannot replace those mandated.

Because of the time constraints placed on Health Checks, the scope of a Health Check should cover no more than four systems risks across the mandated elements. The decision on which four systems risks are to be assessed is at the discretion of the authorisation management team as this may differ between authorisation holders depending on the activities carried out by the authorisation holder.

Resources allocated to Health Checks are to be determined on a case by case basis by the relevant authorisation holder management team and may consist of a multi-discipline surveillance team or a single inspector, as applicable.

<b>Preparation:</b>	Half day
<b>On site:</b>	1 full day
<b>Surveillance write-up and documentation:</b>	1 full day



#### 4. Surveillance Currency Guide: ATS Providers

Surveillance level	Type	Elements
Level 1	Systems Audit	Systems, Risks and Compliance
	Health Check	Specific Elements, Risks and Compliance
	Post-authorisation Review	Entry Control Elements
Level 2	Operational Check	E.g. Flight Deck Observation, Ramp check

ATS (Parts 172)		
Type of operation	Level of surveillance	Recommended frequency
Tower Operations	Level 1 – Systems Audit	1 per 3 years
	Level 2 – Operational Check	1 per 2 years
Terminal Operations	Level 1 – Systems Audit	1 per 3 years
	Level 2 – Operational Check	1 per 2 years
En-Route Control	Level 1 – Systems Audit	1 per 3 years
	Level 2 – Operational Check	1 per 2 years
Learning Academy – Part 172 aspects	Level 2 – Operational Check	1 per 2 years

**NOTE:** The Surveillance Currency Guide above provides guidance to assist in the decisions made during the 'Conduct assessment' stage described in Section 4.2.5 of the CSM.

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## 5. Information Sources

The following is a non-exhaustive list of information sources that can be accessed to support the assessment:

- past Sky Sentinel risk reports
- regulatory history, findings (NCNs, Observations and risk history)
- past Surveillance Reports and findings (NCNs and Observations)
- AIRS Information
- Regulatory Service activity
- information gathered by the authorisation holder
- external information gathered from industry or other government agencies
- Enforcement action
- past accident/incident history, including Electronic Safety Incident Reports (ESIR)
- risk management plans, including System Action Improvement Reporting (SAIR) and Safety Cases or Safety Assessment Reports (SAR), provided by the authorisation holder
- ATS operational and technical documentation provided by the authorisation holder
- ATS administrative documents and records, including Letters of Agreement (LOA) and Memorandum of Understandings (MOU), provided by the authorisation holder
- ATS licencing and training documents and records provided by the authorisation holder
- ATS staff rosters provided by the authorisation holder
- aeronautical information (AIP, ERSA, DAP, MAP)
- compliance/achievement with ATS Acceptable Level of Safety (ALS) measures or safety Key Performance Indicator (KPI)
- organisational structure and any proposed changes
- organisation's Part 172 Operational Manual including details of staffing arrangements, and supervisory personnel
- organisation's Safety Management System (SMS) and ICAO SMS requirements.

A large portion of this information is available to the surveillance team and authorisation management team via the Data Warehouse using the Business Objects application.

**Note:** For advice on where and how to access required information refer to Chapter 5 – Information Capture and Access.

### 1. Specific Guidelines: AMO

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## 1. Specific Guidelines: AMO

### 1.1 Overview

This Annex provides guidelines for conducting surveillance of Approved Maintenance Organisations (AMO), including CAR 30 Certificates of Approval and CASR Part 145, and contains information relating to the following:

- Authorisation Holder Performance Indicator
- Systems and Elements
- Systems and Elements – Health Checks
- Surveillance Currency Guide
- Information Sources.

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## 2. Authorisation Holder Performance Indicator: AMO

Authorisation Holder Category	<b>Factor</b>	<b>Aircraft Size</b>
	<b>Prompt</b>	<i>Score according to largest aircraft, which the authorisation holder maintains or to which components maintained by the authorisation holder may be fitted.</i>
	<b>Score</b>	<b>Word Picture</b>
	1	< 10 pax or < 1133 kg payload
	2	10-19 pax or 1133-2153 kg payload
	3	20-30 pax or 2153-3400 kg payload
	4	>30 pax or > 3400 kg payload
	<b>Factor</b>	<b>Type of Operations</b>
	<b>Prompt</b>	<i>Score according to the type of operation being performed by the aircraft, which the authorisation holder maintains or to which components maintained by the authorisation holder may be fitted.</i>
	<b>Score</b>	<b>Word Picture</b>
1	General Aviation Operations	
2	Aerial Work Operations	
3	Regular Public Transport and/or Charter Operations	

Organisational Factors	<b>Factor</b>	<b>Senior Officers' Skills &amp; Attitudes</b>
	<b>Prompt</b>	<i>Score according to the skills and attitudes of those persons responsible for the management of the authorisation holder.</i>
	<b>Score</b>	<b>Word Picture</b>
	1	Senior officer(s) are highly effective in their jobs and have cultivated a strong safety culture with positive attitudes to regulatory compliance and safety.
	2	Senior officer(s) are either highly effective with an accepting attitude towards regulatory compliance and safety or competent with a positive attitude towards regulatory compliance and safety.
	3	Most senior officer(s) are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
	4	Few senior officer(s) are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
5	Senior officer(s) are apparently incapable of performing their jobs or have a poor attitude towards regulatory compliance and safety.	

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Organisational Factors	Factor	Maturity/Stability
	Prompt	Score according to the authorisation holder's internal maturity and stability
	Score	Word Picture
	1	Industry participant (with >5 year operating history) with few or minor changes to operation, controlled growth/decline, low management and staff turnover, no financial issues, no political issues and no industrial relations concerns.
	2	Relatively new industry participant (with <5 years' operating history), <b>OR</b> longer term participant experiencing 1 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns or</li> <li>• industrial relations tensions.</li> </ul>
	3	New entrant (i.e. no surveillance history) <b>OR</b> industry participant experiencing 2 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/takeover activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	4	Industry participant experiencing 3 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	5	Industry participant with 4 or more wide-ranging issues including: <ul style="list-style-type: none"> <li>• significant changes to operations</li> <li>• excessive growth/decline</li> <li>• political issues</li> <li>• recent merger/take-over</li> <li>• high management and staff turnover</li> <li>• significant funding/supplier issues</li> <li>• current/imminent industrial action.</li> </ul>

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Organisational Factors	Factor	Control
	Prompt	Score according to the level of control the authorisation holder has over its functions, resources and personnel
	Score	Word Picture
	1	Tight control with majority of organisational functions contained within the organisation and all supplier/3rd party authorisation holders considered low-risk.
	2	Few and/or minor aspects of the organisation's operations are outsourced or leased with most supplier/3rd party authorisation holders considered low-risk.
	3	Several aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium risk.
	4	Many and/or major aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium to high risk.
5	Majority of organisational functions outsourced, and resources, facilities and equipment leased, with many supplier/3rd party authorisation holders considered high-risk organisations.	

Management Factors	Factor	Documents and Procedures
	Prompt	Score according to the authorisation holder's documentation of and adherence to procedures
	Score	Word Picture
	1	Well-designed, structured and effective documentation with procedures applied consistently.
	2	Documentation exists and procedures are followed with only minor, irregular deviations.
	3	Documentation exists but deviations from procedures are common although in practice these deviations address inadequacies in procedures.
	4	Documentation exists but deviations from procedures are the norm and may or may not address inadequacies in procedures or safety hazards.
5	Little or no documentation exists or where it exists, it is ineffective and/or actively ignored with a range of procedures in place, most with little or no effectiveness against real safety hazards present.	

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Management Factors	Factor	<b>Safety-related Decision Making</b>
	Prompt	<i>Score according to the authorisation holder's decision making process</i>
	Score	Word Picture
1	Systematic, transparent and data-driven process incorporating effective consultation, thorough analysis and consideration of both regulatory compliance and safety outcomes.	
2	Defined process (incorporating good characteristics) but not implemented completely with results focussed on compliance but with limited consideration of safety outcomes.	
3	No defined process but decisions made effectively although focussed on minimum compliance only.	
4	No defined process and decisions made fail to achieve minimum compliance or effective safety outcomes.	
5	No defined process and decisions made by individuals with no consultation or analysis and no clear link to regulatory compliance or safety outcomes.	

Management Factors	Factor	<b>Safety Assurance</b>
	Prompt	<i>Score according to the authorisation holder's assurance activities</i>
	Score	Word Picture
1	Proactive and reactive processes (including internal audits and investigations etc.) exist and are tied to safety outcomes and regulatory compliance.	
2	Proactive and reactive processes exist and are tied to safety outcomes or regulatory compliance but not completely implemented.	
3	Reactive processes exist but are not completely implemented or tied to safety outcomes or regulatory compliance.	
4	Reactive assurance activities (e.g. ad hoc investigations) are carried out but with little connection to regulatory compliance or safety outcomes.	
5	No assurance practices exist.	

Management Factors	Factor	<b>Training</b>
	Prompt	<i>Score according to the authorisation holder's management of training</i>
	Score	Word Picture
1	The competence (including technical and non-technical skills) of all personnel is actively managed through established processes including planning and assurance.	
2	Staff complete a planned training regime designed to meet regulatory requirements however competence is not confirmed.	
3	Staff complete training in accordance with basic regulatory requirements without any system designed to manage the process.	
4	Staff complete training but it is unplanned and inconsistent with competence unconfirmed.	
5	Significant portions of the organisation are untrained and/or incompetent with no processes in place to manage the training of personnel.	

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Management Factors	Factor	Communication
	Prompt	Score according to the authorisation holder's management of communication
	Score	Word Picture
	1	Communication throughout the organisation is clear, consistent and effective.
	2	Communication is mostly effective with the basic message getting through to the majority of the organisation.
	3	Communication is partially effective although some messages fail to reach all parts of the organisation.
	4	Communication systems are basic and ineffective with wide-spread failures in messages reaching all parts of the organisation.
5	Communication is non-existent or completely ineffective with messages failing to reach the whole organisation and/or conflicting messages reaching parts of the organisation.	

Operational/Environmental Factors	Factor	Complexity
	Prompt	Score according to the level of complexity, which exists within the scope of aircraft or aircraft components maintained by the organisation. (Complexity relates to factors such as multiple aircraft/component types, multiple aircraft/component manufacturers, disparate technology, ageing aircraft/components, and multiple customers.)
	Score	Word Picture
	1	Simple operation with no issues relating to complexity.
	2	Some complex aspects exist within the operation but systems and personnel work together to manage issues as they emerge.
	3	Complex operation but the systems and personnel work together to manage most issues which emerge.
	4	Complex operation but the systems and personnel are inadequate to address issues as they emerge.
5	Significantly complex operation with systems and personnel which do not manage issues which emerge.	



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Operational/Environmental Factors	Factor	<b>Facilities, Resources, Equipment &amp; Data</b>
	Prompt	<i>Score according to the quality, suitability and availability of the authorisation holder's facilities, resources and equipment.</i>
	Score	Word Picture
	1	All are well-above minimum standards, with ample availability, are well-maintained and available for all parts of the organisation.
	2	All meet minimum standards, with general availability although may be limited at peak times, are adequately maintained and available for all parts of the organisation.
	3	1 of the following exists: <ul style="list-style-type: none"> <li>below minimum standards,</li> <li>availability at peak times is limited</li> <li>poor maintenance of facilities and equipment</li> <li>limited availability across the organisation.</li> </ul>
4	2 of the following exist: <ul style="list-style-type: none"> <li>below minimum standards</li> <li>availability at peak times is limited</li> <li>poor maintenance of facilities and equipment</li> <li>limited availability across the organisation.</li> </ul>	
5	3 or more of the following exist: <ul style="list-style-type: none"> <li>below minimum standards</li> <li>availability at peak times is limited</li> <li>poor maintenance of facilities and equipment,</li> <li>limited availability across the organisation.</li> </ul>	

Operational/Environmental Factors	Factor	<b>Operating Environment</b>
	Prompt	<i>Score according to the authorisation holder's operating environment. (Operating environment issues include multiple locations, limited local support, extremes in weather (rain, storms, temperature, dust, etc), limited shelter, night time work, shift work.)</i>
	Score	Word Picture
	1	Uncomplicated operating environment with systems suitable to the environment in place.
	2	Some aspects of the operating environment are more complicated but systems and personnel work together to manage issues as they emerge.
	3	Relatively stable operating environment but the systems and personnel work together to manage most issues which emerge.
4	Relatively stable operating environment but the systems and personnel are not quite suitable to address issues as they emerge.	
5	Difficult operating environment with systems and personnel ill-suited to manage operations as issues emerge.	

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Safety Outcomes	Factor	<i>Regulatory History</i>
	Prompt	<i>Score according to the authorisation holder's history of enforcement action (including administrative action against the authorisation or other action)</i>
	Score	Word Picture
	1	Nil or minor NCNs issued and acquitted expeditiously, and no enforcement action within the last 3 years.
	2	A few NCNs issued but all acquitted expeditiously, or resolved enforcement action within the last 3 years.
	3	Multiple NCNs issued and mostly acquitted without issue, or minor enforcement action carried out on outstanding issues.
	4	Multiple NCNs issued but acquittal problematic, or moderate enforcement action carried out on outstanding issues.
5	Multiple and recurring NCNs issued and rarely acquitted without issues or significant enforcement action underway or still in force.	

Safety Outcomes	Factor	<i>Safety Occurrences</i>
	Prompt	<i>Score according to the authorisation holder's recent accident, incident and undesired safety-related event history as it relates to aviation safety</i>
	Score	Word Picture
	1	No record of involvement or implication in any safety occurrences within the last 3 years.
	2	No record of involvement or implication in any accident or serious incident but has experienced minor safety-related events within the last 3 years.
	3	Involvement or implication in one serious incident or a significant number of minor incidents within the last 3 years.
	4	Involvement or implication in one accident or multiple serious incidents within the last 3 years.
5	Involvement or implication in multiple accidents and serious incidents within the last 3 years.	

Safety Outcomes	Factor	<i>Other Safety Issues</i>
	Prompt	<i>Score according to the presence of any other safety issues (not involving a regulatory breach) raised through CASA activities (including observations during surveillance) and external parties</i>
	Score	Word Picture
	1	Nil issues observed during surveillance or other CASA activity and nil reports of safety concerns from third parties.
	2	Few issues observed during surveillance or other CASA activity, or safety reports received from third parties.
	3	Multiple minor issues or concerns observed during surveillance or other CASA activity or significant reports of safety concerns from third parties.
	4	Multiple issues or concerns observed during surveillance or other CASA activity.
5	Significant issues or concerns observed during surveillance or other CASA activity.	

### 3. Systems & Elements: AMO

The CASA description of an AMO consists of three systems, 11 elements and a number of system risks associated with those elements. The inclusion of a formal safety management system, where required, in some authorisation holder's systems should also be considered.

The audit technique involves assessing the documented system, comparing it against the actual system processes and assessing the level of system risk mitigation exercised by the authorisation holder against the generic CASA standard system. The system is assessed for compliance and sampling conducted as appropriate. The assessment of the system and its risks is achieved by a questioning technique using the four attributes (12 components) of the Management System Model.

<b>Systems</b>	<b>Elements</b>
<b>Aircraft Maintenance</b>	Tooling and Equipment
	Data and Documents
	Stores and Distribution
	Maintenance Activity
<b>Administration</b>	AMO Operations
	Personnel Standards
	Personnel Rostering
<b>Safety Management</b>	Safety Policy and Objectives
	Safety Risk Management
	Safety Assurance
	Safety Promotion

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SYSTEM: Aircraft Maintenance	
ELEMENT: Tooling and Equipment	
This element includes all tooling and equipment held, used, contracted, loaned or borrowed by the organisation for the purpose of maintaining aircraft or aircraft components.	
<b>Prompts:</b>	
Availability /Adequacy (dependent upon planned activities)	Disposal
Identification (traceability, history, correction and status)	Parts Pooling
Calibration	Training on specialised tooling/equipment
Storage/protection	Ground support equipment availability and serviceability
Maintenance	Responsibility for control
Parts Borrowing /Lending	Review of tool control, monitoring and improvement
Contracting	
ELEMENT: Data and Documents	
This element includes all technical data, design drawings, regulatory documentation, maintenance systems and quality/procedures manuals used in the course of carrying out aircraft or aircraft component maintenance.	
<b>Prompts:</b>	
Availability / Adequacy (dependent upon planned activities)	Amendment - current amendment service – Ref: CASA ruling No 5/2003 Use of Electronic Data
Identification	Borrowing/Lending
Storage	Responsible and accountable
Handling	Monitoring and improvement
DAMP documentation	
ELEMENT: Stores and Distribution	
This element includes the acquisition, storage and handling of all parts, components, materials and consumable goods used, kept, loaned or borrowed in the course of carrying out aircraft or aircraft component maintenance.	
<b>Prompts:</b>	
Purchasing	Borrowing/Lending
Receipt	Dispatch /Issue
Storage	Quarantine/Rejection
Handling	Traceability

<b>SYSTEM: Aircraft Maintenance (Continued)</b>	
<b>ELEMENT : Maintenance Activity</b>	
This element includes all aircraft and aircraft component maintenance and may be applied to each maintenance activity separately.	
<b>Prompts:</b>	
Receipt (job/task acceptance)	Housekeeping (work in progress control and cleanliness)
Task assignment	Dispatch (return to customer)
Contracting	Organisation structure, duties and responsibilities
Inspection	Infrastructure
Repair/Manufacture In The Course Of Maintenance (MITCOM)	Multiple and temporary site control
Modification	Activity within Certificate scope
Certification	Training
Defect reporting	Computer control
Defect deferral	Component and aircraft release documentation
Shift changing	Monitoring and improvement

<b>SYSTEM: Administration</b>	
<b>ELEMENT: AMO Operations</b>	
This element addresses the systems that ensure the Authorisation holder contains its operations to those authorised by legislation. This is primarily achieved through the use of a properly structured organisation with appropriate communication channels. Appropriate key personnel are a key link in ensuring AMO operations are not only contained but are appropriately controlled. Examples include the Chief Engineer (however named) and Safety Officer.	
<b>Prompts:</b>	
Appropriate structure	Key personnel
Appropriate numbers of personnel	Facilities
Support staff	Technical staff
<b>ELEMENT: Personnel Standards</b>	
AMO authorisation holder is required to establish and maintain an appropriate organisation, with sound and effective management structure that incorporates a safety management system where applicable. The standards of personnel, including third party providers is required to be documented detailing induction training, periodic recurrent training/checking and any required upgrade training. A process for dealing with unsatisfactory performance should also be documented.	
<b>Prompts:</b>	
Qualifications	Licensing
Recency (if applicable)	Supervision
DAMP education and testing	

<b>SYSTEM: Administration (Continued)</b>	
<b>ELEMENT: Personnel Rostering</b>	
<p>This element plays a significant role in achieving safe operations for it is through scheduling that the authorisation holder ensures that required tasks are carried out with appropriate personnel that have appropriate qualifications, operate in accordance with legislative requirements, certification and have appropriate recency (if applicable) in order to safely conduct the planned task from the start of the duty period until completion. Scheduling should take into consideration fatigue factors associated with long duty days or late night duty. A roster should, where appropriate, be published and displayed in a prominent position</p>	
<b>Prompts:</b>	
Roster production	Fatigue Issues
Qualifications	Recency
Certification	SMS documentation
Safety accountabilities of managers	DAMP supervision

<b>SYSTEM: Safety Management</b>	
<b>ELEMENT: Safety Policy and Objectives</b>	
<p>This element contains the systems and processes that ensure effective governance to support the safety management system that is in place, including processes for the review and update of the authorisation holder's management and commitment (through Safety Policy, Just Culture and Safety Objectives), the appointment of key personnel, the accountabilities of management, the Emergency Response Plan and SMS documentation.</p>	
<b>Prompts:</b>	
Safety policy	Key personnel
Just culture	Third party relationships and interactions
Safety objectives	Emergency response plan
Safety accountabilities of managers	SMS documentation
<b>ELEMENT: Safety Risk Management</b>	
<p>This element contains the systems and processes to ensure investigation and analysis of the safety risks associated with identified hazards resulting in the implementation of effective safety risk controls.</p>	
<b>Prompts:</b>	
Hazard identification processes - reactive	Risk assessment and mitigation
Hazard identification processes - proactive	DAMP supervision

#### SYSTEM: Safety Management (Continued)

##### ELEMENT: Safety Assurance

This element contains the systems and processes for setting, recording and evaluating system performance, conformance with regulations and company procedures, a process for conducting internal safety investigations, effectively managing change across the aviation activities conducted and driving continuous improvement of the SMS.

##### Prompts:

System performance	Management of change
Assurance	Continuous improvement of SMS
Internal safety investigation	DAMP supervision

##### ELEMENT: Safety Promotion

This element contains the systems and processes for ensuring personnel are appropriately trained and are aware of the SMS to a degree commensurate with their positions, safety-critical information is conveyed, explains why particular safety actions are taken and explains why safety procedures are introduced or changed must be evident.

##### Prompts:

Training and education	Safety communication
DAMP education and testing	

#### 3.1 Health Check

Health Check mandatory elements are current for a financial year and are reviewed and updated by the Safety Systems Office (SSO) each year for the following year. Details of the current mandatory elements for each authorisation type are published separately to the CASA website.

It is recognised that assessing all types of authorisation holders against all systems, elements and system risks would require an extended amount of time and resources. In order to more accurately target those authorisations holders requiring attention, a limited scope systems and risk assessment Health Check approach has been adopted.

The objective of a Health Check is to assess selected elements and system risks associated with areas that over time have demonstrated significant non-compliance and/or poor safety risk mitigation across a specific aviation sector. Compliance and assessment of system risk mitigation is required to be achieved during a Level 1 Health Check.

The results of Level 1 Health Checks drive consideration of what, if any, additional surveillance an authorisation holder requires. Good Health Check results will likely mean the overall compliance and safety management of the authorisation holder is being well controlled. Poor results will likely drive the requirement for additional surveillance in the form of a Level 1 systems audit and/or a Level 2 Operational Check.

The SSO, in consultation with the oversighting Division, is responsible for deciding on an annual basis the system elements and system risks to be addressed when conducting a Level 1 Health Check. The SSO will draw on existing risk and compliance data obtained over the previous periods in deciding what system elements and risks are to be targeted.

In order to provide a satisfactory indication of an authorisation holder's health the SSO will decide on not more than four mandatory elements to be targeted during the coming surveillance (financial) year as part of a Level 1 Health Check. The system elements to be targeted are nominated by the SSO in consultation with the technical discipline. Additional elements and risks can be added to a Health Check if capacity and resources allow. However, any additional elements or risks cannot replace those mandated.

Because of the time constraints placed on Health Checks, the scope of a Health Check should cover no more than four systems risks across the mandated elements. The decision on which four systems risks are to be assessed is at the discretion of the authorisation management team as this may differ between authorisation holders depending on the activities carried out by the authorisation holder.

Resources allocated to Health Checks are to be determined on a case by case basis by the relevant authorisation holder management team and may consist of a multi-discipline surveillance team or a single inspector, as applicable.

<b>Preparation:</b>	Half day
<b>On site:</b>	1 full day
<b>Surveillance write-up and documentation:</b>	1 full day



#### 4. Surveillance Currency Guide: AMO

Surveillance level	Type	Elements
Level 1	Systems Audit	Systems, Risks and Compliance
	Health Check	Specific Elements, Risks and Compliance
	Post-authorisation Review	Entry Control Elements
Level 2	Operational Check	E.g. Aircraft inspection, Ramp check

AMO		
Type of operation	Level of surveillance	Recommended frequency
Maintenance of aircraft RPT or above 5700kg, Class A	Level 1 – Systems Audit	1 per year
Maintenance of aircraft Below 5700kg, not Class A	Level 1 – Systems Audit	1 per 3 years
	Level 2 – Operational Check	1 per year
Large component	Level 1 – Systems Audit	1 per year
Small component	Level 1 – Systems Audit	1 per 3 years
	Level 2 – Operational Check	1 per year
Distribution Certificate Holders	Level 1 – Health Check	1 per 5 years

**NOTE:** The Surveillance Currency Guide above provides guidance to assist in the decisions made during the 'Conduct assessment' stage described in Section 4.2.5 of the CSM.

Classify the certificate to the highest level authorised on the certificate.

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<b>Large Components</b>	Maintenance of components where: <ol style="list-style-type: none"><li>1. There are &gt;9 full time staff employed in the activity</li><li>2. Class 1 components are maintained for passenger carrying operations</li><li>3. Class 2 components are maintained for RPT aircraft</li></ol>
<b>Small Components</b>	All other facilities carrying out maintenance of components that are not classified as Large components.

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## 5. Information Sources

The following is a non-exhaustive list of information sources that can be accessed to support the assessment of an authorisation holder:

- past Sky Sentinel risk reports
- surveys
- regulatory history, findings (NCNs, Observations and risk history)
- past Surveillance Reports and findings (NCNs and Observations)
- AIRS Information
- Service Difficulty Reports (SDRs)
- Regulatory Service activity
- information gathered by the authorisation holder
- external information gathered from industry or other government agencies
- Enforcement action
- past accident/incident history
- risk management plans provided by the authorisation holder.

A large portion of this information is available to the surveillance team and authorisation management team via the Data Warehouse using the Business Objects application.

**Note:** For advice on where and how to access required information refer to Chapter 5 – Information Capture and Access.

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## 1. Specific Guidelines: ARFFS Providers

### 1.1 Overview

This Annex provides guidelines for conducting surveillance of CASR Part 139H Aviation Rescue Fire Fighting Services and contains information relating to the following:

- Authorisation Holder Performance Indicator
- Systems and Elements
- Systems and Elements – Health Checks
- Surveillance Currency Guide
- Information Sources.

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## 2. Authorisation Holder Performance Indicator: ARFFS Providers

Authorisation Holder Category	<b>Factor</b>	<b>Aircraft Size</b>
	<b>Prompt</b>	Score according to the largest aircraft operating at the aerodrome which the ARFFS services or supports.
	<b>Score</b>	<b>Word Picture</b>
	4	>30 pax or > 3400 kg payload
	<b>Factor</b>	<b>Type of Operations</b>
	<b>Prompt</b>	Score according to the most critical type of operation operating at the aerodrome which the ARFFS services or supports.
	<b>Score</b>	<b>Word Picture</b>
	3	Regular Public Transport and/or Charter Operations



**NOTE:** Because of the nature of this authorisation type the scores for the two Authorisation Holder Category factors default to a consistent score.

Organisational Factors	<b>Factor</b>	<b>Senior Officers' Skills &amp; Attitudes</b>
	<b>Prompt</b>	Score according to the skills and attitudes of those persons responsible for the management of the ARFFS.
	<b>Score</b>	<b>Word Picture</b>
	1	Senior officers are highly effective in their jobs and have cultivated a strong safety culture with positive attitudes to regulatory compliance and safety.
	2	Senior officers are either highly effective with an accepting attitude towards regulatory compliance and safety or competent with a positive attitude towards regulatory compliance and safety.
	3	Most senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
	4	Few senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
5	Senior officers are apparently incapable of performing their jobs or have a poor attitude towards regulatory compliance and safety.	

Organisational Factors	Factor	Maturity/Stability
	Prompt	Score according to the ARFFS internal maturity and stability.
	Score	Word Picture
	1	Industry participant (with >5 year operating history) with few or minor changes to operation, controlled growth/decline, low management and staff turnover, no financial issues, no political issues and no industrial relations concerns.
	2	Relatively new industry participant (with <5 years' operating history), <b>OR</b> longer term participant experiencing 1 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns or</li> <li>• industrial relations tensions.</li> </ul>
	3	New entrant (i.e. no surveillance history) <b>OR</b> industry participant experiencing 2 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/takeover activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	4	Industry participant experiencing 3 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	5	Industry participant with 4 or more wide-ranging issues including: <ul style="list-style-type: none"> <li>• significant changes to operations</li> <li>• excessive growth/decline</li> <li>• political issues</li> <li>• recent merger/take-over</li> <li>• high management and staff turnover</li> <li>• significant funding/supplier issues</li> <li>• current/imminent industrial action.</li> </ul>

Organisational Factors	Factor	Control
	Prompt	Score according to the level of control the ARFFS has over its functions, resources and personnel.
	Score	Word Picture
	1	Tight control with majority of organisational functions contained within the organisation and all supplier/3rd party authorisation holders considered low-risk.
	2	Few and/or minor aspects of the organisation's operations are outsourced or leased with most supplier/3rd party authorisation holders considered low-risk.
	3	Several aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium risk.
	4	Many and/or major aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium to high risk.
	5	Majority of organisational functions outsourced, and resources, facilities and equipment leased, with many supplier/3rd party authorisation holders considered high-risk organisations.

Management Factors	Factor	Documents & Procedures
	Prompt	Score according to the ARFFS document of and adherence to procedures.
	Score	Word Picture
	1	Well-designed, structured and effective documentation with procedures applied consistently.
	2	Documentation exists and procedures are followed with only minor, irregular deviations.
	3	Documentation exists but deviations from procedures are common although in practice these deviations address inadequacies in procedures.
	4	Documentation exists but deviations from procedures are the norm and may or may not address inadequacies in procedures or safety hazards.
	5	Little or no documentation exists or where it exists, it is ineffective and/or actively ignored with a range of procedures in place, most with little or no effectiveness against real safety hazards present.



Management Factors	Factor	<b>Safety-related Decision Making</b>
	Prompt	<i>Score according to the ARFFS 's decision making process.</i>
	Score	Word Picture
	1	Systematic, transparent and data-driven process incorporating effective consultation, thorough analysis and consideration of both regulatory compliance and safety outcomes.
	2	Defined process (incorporating good characteristics) but not implemented completely with results focussed on compliance but with limited consideration of safety outcomes.
	3	No defined process but decisions made effectively although focussed on minimum compliance only.
	4	No defined process and decisions made fail to achieve minimum compliance or effective safety outcomes.
5	No defined process and decisions made by individuals with no consultation or analysis and no clear link to regulatory compliance or safety outcomes.	

Management Factors	Factor	<b>Safety Assurance</b>
	Prompt	<i>Score according to the ARFFS 's assurance activities.</i>
	Score	Word Picture
	1	Proactive and reactive processes (including internal audits and investigations etc.) exist and are tied to safety outcomes and regulatory compliance.
	2	Proactive and reactive processes exist and are tied to safety outcomes or regulatory compliance but not completely implemented.
	3	Reactive processes exist but are not completely implemented or tied to safety outcomes or regulatory compliance.
	4	Reactive assurance activities (eg ad hoc investigations) are carried out but with little connection to regulatory compliance or safety outcomes.
5	No assurance practices exist.	

Management Factors	Factor	<b>Training</b>
	Prompt	<i>Score according to the ARFFS 's management of training.</i>
	Score	Word Picture
	1	The competence (including technical and non-technical skills) of all personnel is actively managed through established processes including planning and assurance.
	2	Staff complete a planned training regime designed to meet regulatory requirements however competence is not confirmed.
	3	Staff complete training in accordance with basic regulatory requirements without any system designed to manage the process.
	4	Staff complete training but it is unplanned and inconsistent with competence unconfirmed.
5	Significant portions of the organisation are untrained and/or incompetent with no processes in place to manage the training of personnel.	

Management Factors	Factor	Communication
	Prompt	Score according to the ARFFS 's management of communication.
	Score	Word Picture
	1	Communication throughout the organisation is clear, consistent and effective.
	2	Communication is mostly effective with the basic message getting through to the majority of the organisation.
	3	Communication is partially effective although some messages fail to reach all parts of the organisation.
4	Communication systems are basic and ineffective with wide-spread failures in messages reaching all parts of the organisation.	
5	Communication is non-existent or completely ineffective with messages failing to reach the whole of the organisation and/or conflicting messages reaching parts of the organisation.	

Operational/Environmental Factors	Factor	Complexity
	Prompt	Score according to the level of complexity within the ARFFS and how they cope with that complexity. (Complexity relates to factors such as traffic mix, aerodrome layout, and equipment mix.)
	Score	Word Picture
	1	Simple operation with no issues relating to complexity.
	2	Some complex aspects exist within the operation but systems and personnel work together to manage issues as they emerge.
	3	Complex operation but the systems and personnel work together to manage most issues which emerge.
4	Complex operation but the systems and personnel are inadequate to address issues as they emerge.	
5	Significantly complex operation with systems and personnel which do not manage issues which emerge.	

<b>Operational/Environmental Factors</b>	<b>Factor</b>	<b><i>Facilities, Resources, Equipment &amp; Data</i></b>
	<b>Prompt</b>	<i>Score according to the quality, suitability, availability and currency of the ARFFS's facilities, resources, equipment and data.</i>
	<b>Score</b>	<b>Word Picture</b>
	1	All are well-above minimum standards, with ample availability, are well-maintained and available for all parts of the organisation.
	2	All meet minimum standards, with generally available although may be limited at peak times, are adequately maintained and available for all parts of the organisation.
	3	1 of the following exists: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>
	4	2 of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>
5	3 or more of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>	

Operational/Environmental Factors	Factor	<i>Operating Environment</i>
	Prompt	Score according to the ARFFS's operating environment and how they cope in this environment. <i>(Operating environment issues include limited local support, extremes in weather (rain, storms, temperature, dust, etc), limited shelter, night time work, shift work.)</i>
	Score	Word Picture
	1	Uncomplicated operating environment with systems suitable to the environment in place.
	2	Some aspects of the operating environment are more complicated but systems and personnel work together to manage issues as they emerge.
	3	Relatively stable operating environment but the systems and personnel work together to manage most issues which emerge.
	4	Relatively stable operating environment but the systems and personnel are not quite suitable to address issues as they emerge.
5	Difficult operating environment with systems and personnel ill-suited to manage operations as issues emerge.	

Safety Outcomes	Factor	<i>Regulatory History</i>
	Prompt	Score according to the ARFFS's history with regulatory actions (both administrative and enforcement)
	Score	Word Picture
	1	Nil or minor NCNs issued and all acquitted expeditiously, and no enforcement action within the last 3 years.
	2	A few NCNs issued but all acquitted expeditiously, or resolved enforcement action within the last 3 years.
	3	Multiple NCNs issued and mostly acquitted without issue, or minor enforcement action carried out on outstanding issues.
4	Multiple NCNs issued but acquittal problematic, or moderate enforcement action carried out on outstanding issues.	
5	Multiple and recurring NCNs issued and rarely acquitted without issues or significant enforcement action underway or still in force.	

Safety Outcomes	Factor	<i>Safety Occurrences</i>
	Prompt	<i>Score according to the ARFFS's involvement in recent accident, incident and undesired safety-related event history as it relates to aviation safety.</i>
	Score	Word Picture
	1	No record of involvement or implication in any safety occurrences within the last 3 years.
	2	No record of involvement or implication in any accident or serious incident but has experienced minor safety-related events within the last 3 years.
	3	Involvement or implication in one serious incident or a significant number of minor incidents within the last 3 years.
	4	Involvement or implication in one accident <b>or</b> multiple serious incidents within the last 3 years.
5	Involvement or implication in multiple accidents and serious incidents within the last 3 years.	

Safety Outcomes	Factor	<i>Other Safety Issues</i>
	Prompt	<i>Score according to the presence of any other safety issues (not involving a regulatory breach) raised through CASA activities and external parties.</i>
	Score	Word Picture
	1	Nil issues observed during surveillance or other CASA activity and nil reports of safety concerns from third parties.
	2	Few issues observed during surveillance or other CASA activity, or safety reports received from third parties.
	3	Multiple minor issues or concerns observed during surveillance or other CASA activity or significant reports of safety concerns from third parties.
	4	Multiple issues or concerns observed during surveillance or other CASA activity.
5	Significant issues or concerns observed during surveillance or other CASA activity.	

### 3. Systems & Elements: ARFFS Providers

The CASA description of ARFFS consists of four systems incorporating 14 elements and a number of specific risks associated with each element.

The audit technique involves assessing the documented system, comparing it against the actual system processes and assessing the level of system risk mitigation exercised by the authorisation holder against the generic CASA standard system risks. The system is assessed for compliance and sampling conducted as appropriate. The assessment of the system and its risks is achieved by a questioning technique using the four attributes (12 components) of the Management System Model.

Systems	Elements
<b>Maintenance</b>	Maintenance System
	Works Control
	Maintenance Assurance
<b>Operations</b>	ARFFS Operations
	Emergency Response
	Data & Documents
	Support Systems
	Communications
<b>Personnel</b>	Personnel Standards
	Personnel Rostering
<b>Safety Management</b>	Safety Policy and Objectives
	Safety Risk Management
	Safety Assurance
	Safety Promotion

<b>SYSTEM: Maintenance</b>	
<b>ELEMENT: Maintenance System</b>	
The maintenance system element describes the systems and the processes for achieving the 'What' maintenance activities are required to be done and 'When' the maintenance activities are to be completed.	
<b>Prompts:</b>	
Regulatory requirements	Facility and maintenance plan
Service and facility management requirements	Vehicle performance
Test equipment performance criteria	Ancillary equipment
<b>ELEMENT: Works Control</b>	
The works control element describes the systems and the processes for achieving the 'How' works activities are conducted and 'Who' completes the works activities.	
<b>Prompts:</b>	
Mechanical workshops	Fire fighting personnel
Emergency Vehicle Technicians (EVT)	
<b>ELEMENT: Maintenance Assurance</b>	
The maintenance assurance element describes the systems and the processes for ensuring the ARFFS systems are fit for service. This is accomplished primarily through the authorisation holder's internal audit processes and closes the loop on the entire maintenance system.	
<b>Prompts:</b>	
Audit Assurance & Self Assurance and Compliance Kit (SACK)	

<b>SYSTEM: Operations</b>	
<b>ELEMENT: ARFFS Operations</b>	
The ARFFS Operations element addresses the systems that ensure the Authorisation holder contains its operations to those authorised by legislation. This is primarily achieved through the use of a properly structured organisation with appropriate communication channels. Appropriate key personnel are a key link in ensuring ARFFS' operations are not only contained, but are appropriately controlled. Examples include the Officer in Charge.	
<b>Prompts:</b>	
Fire station facilities	Fire vehicles
Fire fighters	Fire Station Control Centre (FSCC)

<b>SYSTEM: Operations (Continued)</b>	
<b>ELEMENT: Emergency Response</b>	
The emergency response element describes the systems that make up the control of all aspects associated with provision of a timely emergency response. The documented system should address but not be limited to response times, location matters, third party providers and issues of security aspects relating to personnel, vehicles, equipment of any sort within the confines of the ARFFS area of responsibility.	
<b>Prompts:</b>	
Response times	ASICs
State or Territory Fire Brigades	
<b>ELEMENT: Data &amp; Documents</b>	
The data and documents element addresses all technical data, design drawings, regulatory documentation and quality/procedures manuals used in the course of carrying out ARFFS operations.	
<b>Prompts:</b>	
Operations Manual	Documentation and data control
Change management	Aviation Fire Fighting Manuals (AFFM)
Records	DAMP documentation
<b>ELEMENT: Support Systems</b>	
The support system element addresses all aspect of operations that go into supporting the objectives of the authorisation holder. This may include but is not limited aspects such as managing the use of computer systems, providing resources for travel and appropriate support facilities.	
<b>Prompts:</b>	
Transportation	Computers
Portable electronic devices	Facilities
<b>ELEMENT: Communications</b>	
The communications element addresses aspects of the authorisation holders operation related to internal and external communications and includes but is not limited to, communications with staff while in the field, use of obsolete or damaged equipment and communication links with other relevant parties.	
<b>Prompts:</b>	
Fire station communication systems	Access to AvNet (Airservices Australia's Intranet)



#### SYSTEM: Personnel

##### ELEMENT: Personnel Standards

The ARFFS authorisation holder is required to establish and maintain an appropriate organisation, with sound and effective management structure that incorporates a safety management system. The standards of personnel, including third party providers is required to be documented detailing induction training, periodic recurrent training/checking and any required upgrade training. A process for dealing with unsatisfactory performance should also be documented.

##### Prompts:

Recruitment	Medical/Physical fitness
Staffing and training requirements	Protective clothing
Competency	Training establishment
Qualifications	DAMP education and testing
DAMP supervision	

##### ELEMENT: Personnel Rostering

Personnel rostering plays a significant role in achieving safe operations for it is through rostering that the authorisation holder ensures that required tasks are carried out with appropriate personnel that have appropriate qualifications, operate in accordance with legislative requirements, approval and have appropriate recency (if applicable) in order to safely conduct the task from the start of the duty period until completion. Rostering should take into consideration fatigue factors associated with long duty days or late night duty. The roster should, where appropriate, be published and displayed in a prominent position.

##### Prompts:

Roster production/Business hours of operation	Qualifications
Approval	Competency

#### SYSTEM: Safety Management

##### ELEMENT: Safety Policy and Objectives

The element contains the systems and processes that ensure effective governance to support the safety management system are in place, this will include processes for the review and update of the authorisation holder's management and commitment (through Safety Policy, Just Culture and Safety Objectives), the appointment of key personnel, the accountabilities of management and Safety Management System (SMS) documentation.

##### Prompts:

Management commitment and responsibility – safety policy	Appointment of key personnel
Management commitment and responsibility – just culture	Relevant third party relationships and interactions
Management commitment and responsibility – safety objectives	SMS documentation
Safety accountabilities of managers and staff	

<b>SYSTEM: Safety Management (Continued)</b>	
<b>ELEMENT: Safety Risk Management</b>	
This element contains the systems and processes to ensure investigation, and analysis, of the safety risks associated with identified hazards resulting in the implementation of effective safety risk controls.	
<b>Prompts:</b>	
Hazard identification processes - reactive	Risk assessment and mitigation
Hazard identification processes - proactive	DAMP supervision
<b>ELEMENT: Safety Assurance</b>	
This element contains the systems and processes for setting, recording and evaluating system performance, conformance with regulations and company procedures, a process for the conduct of internal safety investigations, effectively manage change across the aviation activities conducted and drive continuous improvement of the SMS.	
<b>Prompts:</b>	
Safety performance monitoring and assessment – system performance	Internal safety investigation
Safety performance monitoring and assessment – assurance	Management of change
Safety performance monitoring and assessment – flight data analysis	Continuous improvement of SMS
Establishment/Disestablishment of ARFFS	Accident/Incident Reports
Determining Category	Quality Control
Interpretation or Change of Level of Operational Service	Contingency Plans
DAMP supervision	
<b>ELEMENT: Safety Promotion</b>	
This element contains the systems and processes for ensuring personnel are appropriately trained, are aware of the SMS to a degree commensurate with their positions that conveys safety-critical information, explains why particular safety actions are taken, and; explains why safety procedures are introduced or changed must be evident.	
<b>Prompts:</b>	
Training and education	Safety communication
DAMP education and testing	

#### 3.1 Health Check

Health Check mandatory elements are current for a financial year and are reviewed and updated by the Safety Systems Office (SSO) each year for the following year. Details of the current mandatory elements for each authorisation type are published separately to the CASA website.

It is recognised that assessing all types of authorisation holders against all systems, elements and system risks would require an extended amount of time and resources. In order to more accurately target those authorisations holders requiring attention, a limited scope systems and risk assessment Health Check approach has been adopted.

The objective of a Health Check is to assess selected elements and system risks associated with areas that over time have demonstrated significant non-compliance and/or poor safety risk mitigation across a specific aviation sector. Compliance and assessment of system risk mitigation is required to be achieved during a Level 1 Health Check.

The results of Level 1 Health Checks drive consideration of what, if any, additional surveillance an authorisation holder requires. Good Health Check results will likely mean the overall compliance and safety management of the authorisation holder is being well controlled. Poor results will likely drive the requirement for additional surveillance in the form of a Level 1 systems audit and/or a Level 2 Operational Check.

The SSO, in consultation with the oversighting Division, is responsible for deciding on an annual basis the system elements and system risks to be addressed when conducting a Level 1 Health Check. The SSO will draw on existing risk and compliance data obtained over the previous periods in deciding what system elements and risks are to be targeted.

In order to provide a satisfactory indication of an authorisation holder's health the SSO will decide on not more than four mandatory elements to be targeted during the coming surveillance (financial) year as part of a Level 1 Health Check. The system elements to be targeted are nominated by the SSO in consultation with the technical discipline. Additional elements and risks can be added to a Health Check if capacity and resources allow. However, any additional elements or risks cannot replace those mandated.

Because of the time constraints placed on Health Checks, the scope of a Health Check should cover no more than four systems risks across the mandated elements. The decision on which four systems risks are to be assessed is at the discretion of the authorisation management team as this may differ between authorisation holders depending on the activities carried out by the authorisation holder.

Resources allocated to Health Checks are to be determined on a case by case basis by the relevant authorisation holder management team and may consist of a multi-discipline surveillance team or a single inspector, as applicable.

<b>Preparation:</b>	Half day
<b>On site:</b>	1 full day
<b>Surveillance write-up and documentation:</b>	1 full day

**4. Surveillance Currency Guide: ARFFS Providers**

Surveillance level	Type	Elements
Level 1	Systems Audit	Systems, Risks and Compliance
	Health Check	Specific Elements, Risks and Compliance
	Post-authorisation Review	Entry Control Elements
Level 2	Operational Check	E.g. Response Preparedness Checks, Response time checks.

ARFFS (Part 139H)		
Type of operation	Level of surveillance	Recommended frequency
ARFFS category 9 and 10	Level 1 – Systems Audit	Every 12 months
ARFFS category 5, 6, 7 and 8	Level 1 – Systems Audit	Every 24 months
Training establishment	Level 2 – Operational Check	As required

**NOTE:** The Surveillance Currency Guide above provides guidance to assist in the decisions made during the ‘Conduct assessment’ stage described in Section 4.2.5 of the CSM.

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## 5. Information Sources

The following is a non-exhaustive list of information sources that can be accessed to support the assessment:

- past Sky Sentinel risk reports
- surveys
- regulatory history, findings (NCNs, Observations and risk history)
- past Surveillance Reports and findings (NCNs and Observations)
- AIRS Information
- Service Difficulty Reports (SDRs)
- Regulatory Service activity
- information gathered by the authorisation holder
- external information gathered from industry or other government agencies
- Enforcement action
- past accident/incident history
- risk management plans provided by the authorisation holder.
- Safety Plans and Safety Cases

A large portion of this information is available to the surveillance team and authorisation management team via the Data Warehouse using the Business Objects application.

**Note:** For advice on where and how to access required information refer to Chapter 5 – Information Capture and Access.

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### 1. Specific Guidelines: Design Certificate Holders and Authorised Persons for Design Approval

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

## 1. Specific Guidelines: Design Certificate Holders and Authorised Persons for Design Approval

### 1.1 Overview

This Annex provides guidelines for conducting surveillance of CAR 30 Design COA, CASR Subpart 21.J Approved Design Organisation and Authorised Persons for CASR 21.095, 21.006A, 21.007, 21.009 and Subpart 21.M and contains information relating to the following:

- Authorisation Holder Performance Indicator
- Systems and Elements
- Systems and Elements – Health Checks
- Surveillance Currency Guide
- Information Sources.

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### 2. Authorisation Holder Performance Indicator: Design Certificate Holders and Authorised Persons for Design Approval

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

### 2. Authorisation Holder Performance Indicator: Design Certificate Holders and Authorised Persons for Design Approval

Authorisation Holder Category	<b>Factor</b>	<b>Aircraft Size</b>
	<b>Prompt</b>	Score according to the authorisation holder's largest aircraft to which the design activity or design approvals apply.
	<b>Score</b>	<b>Word Picture</b>
	1	< 10 pax or < 1133 kg payload
	2	10-19 pax or 1133-2153 kg payload
	3	20-30 pax or 2153-3400 kg payload
	4	>30 pax or > 3400 kg payload
	<b>Factor</b>	<b>Type of Operations</b>
	<b>Prompt</b>	Score according to the type of operation to which the design activity or design approvals apply.
	<b>Score</b>	<b>Word Picture</b>
	1	Aerial Work Operations
	2	Small Charter Operations
	3	Regular Public Transport and/or Charter Operations

Organisational Factors	<b>Factor</b>	<b>Senior Officers' Skills &amp; Attitudes</b>
	<b>Prompt</b>	Score according to the skills and attitudes of those persons responsible for the management of the authorisation holder, as appropriate.
	<b>Score</b>	<b>Word Picture</b>
	1	Senior officers are highly effective in their jobs and have cultivated a strong safety culture with positive attitudes to regulatory compliance and safety.
	2	Senior officers are either highly effective with an accepting attitude towards regulatory compliance and safety or competent with a positive attitude towards regulatory compliance and safety.
	3	Most senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
	4	Few senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
5	Senior officers are apparently incapable of performing their jobs or have a poor attitude towards regulatory compliance and safety.	



### 2. Authorisation Holder Performance Indicator: Design Certificate Holders and Authorised Persons for Design Approval

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Organisational Factors	Factor	Maturity/Stability
	Prompt	Score according to the authorisation holder's internal maturity and stability
	Score	Word Picture
	1	Industry participant (with >5 year operating history) with few or minor changes to operation, controlled growth/decline, low management and staff turnover, no financial issues, no political issues and no industrial relations concerns.
	2	Relatively new industry participant (with <5 years' operating history), <b>OR</b> longer term participant experiencing 1 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns or</li> <li>• industrial relations tensions.</li> </ul>
	3	New entrant (i.e. no surveillance history) <b>OR</b> industry participant experiencing 2 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/takeover activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	4	Industry participant experiencing 3 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	5	Industry participant with 4 or more wide-ranging issues including: <ul style="list-style-type: none"> <li>• significant changes to operations</li> <li>• excessive growth/decline</li> <li>• political issues</li> <li>• recent merger/take-over</li> <li>• high management and staff turnover</li> <li>• significant funding/supplier issues</li> <li>• current/imminent industrial action.</li> </ul>

### 2. Authorisation Holder Performance Indicator: Design Certificate Holders and Authorised Persons for Design Approval

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Organisational Factors	Factor	Control
	Prompt	Score according to the level of control the authorisation holder has over its functions, resources and personnel.
	Score	Word Picture
	1	Tight control with majority of organisational functions contained within the organisation and all supplier/3rd party authorisation holders considered low-risk.
	2	Few and/or minor aspects of the organisation's operations are outsourced or leased with most supplier/3rd party authorisation holders considered low-risk.
	3	Several aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium risk.
	4	Many and/or major aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium to high risk.
5	Majority of organisational functions outsourced, and resources, facilities and equipment leased, with many supplier/3rd party authorisation holders considered high-risk organisations.	

Management Factors	Factor	Documents & Procedures
	Prompt	Score according to the authorisation holder's documentation of and adherence to procedures.
	Score	Word Picture
	1	Well-designed, structured and effective documentation with procedures applied consistently.
	2	Documentation exists and procedures are followed with only minor, irregular deviations.
	3	Documentation exists but deviations from procedures are common although in practice these deviations address inadequacies in procedures.
4	Documentation exists but deviations from procedures are the norm and may or may not address inadequacies in procedures or safety hazards.	
5	Little or no documentation exists or where it exists, it is ineffective and/or actively ignored with a range of procedures in place, most with little or no effectiveness against real safety hazards present.	

### 2. Authorisation Holder Performance Indicator: Design Certificate Holders and Authorised Persons for Design Approval

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Management Factors	Factor	<b>Safety-related Decision Making</b>
	Prompt	<i>Score according to the authorisation holder's decision making process</i>
	Score	Word Picture
	1	Systematic, transparent and data-driven process incorporating effective consultation, thorough analysis and consideration of both regulatory compliance and safety outcomes.
	2	Defined process (incorporating good characteristics) but not implemented completely with results focussed on compliance but with limited consideration of safety outcomes.
	3	No defined process but decisions made effectively although focussed on minimum compliance only.
4	No defined process and decisions made fail to achieve minimum compliance or effective safety outcomes.	
5	No defined process and decisions made by individuals with no consultation or analysis and no clear link to regulatory compliance or safety outcomes.	

Management Factors	Factor	<b>Safety Assurance</b>
	Prompt	<i>Score according to the authorisation holder's assurance activities.</i>
	Score	Word Picture
	1	Proactive and reactive processes (including internal audits and investigations etc) exist and are tied to safety outcomes and regulatory compliance.
	2	Proactive and reactive processes exist and are tied to safety outcomes or regulatory compliance but not completely implemented.
	3	Reactive processes exist but are not completely implemented or tied to safety outcomes or regulatory compliance.
4	Reactive assurance activities (e.g. ad hoc investigations) are carried out but with little connection to regulatory compliance or safety outcomes.	
5	No assurance practices exist.	

Management Factors	Factor	<b>Training</b>
	Prompt	<i>Score according to the authorisation holder's management of training.</i>
	Score	Word Picture
	1	The competence (including technical and non-technical skills) of all personnel is actively managed through established processes including planning and assurance.
	2	Staff complete a planned training regime designed to meet regulatory requirements however competence is not confirmed.
	3	Staff complete training in accordance with basic regulatory requirements without any system designed to manage the process.
4	Staff complete training but it is unplanned and inconsistent with competence unconfirmed.	
5	Significant portions of the organisation are untrained and/or incompetent with no processes in place to manage the training of personnel.	

### 2. Authorisation Holder Performance Indicator: Design Certificate Holders and Authorised Persons for Design Approval

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Management Factors	Factor	<b>Communication</b>
	Prompt	<i>Score according to the authorisation holder's management of communication.</i>
	Score	Word Picture
	1	Communication throughout the organisation is clear, consistent and effective.
	2	Communication is mostly effective with the basic message getting through to the majority of the organisation.
	3	Communication is partially effective although some messages fail to reach all parts of the organisation.
4	Communication systems are basic and ineffective with wide-spread failures in messages reaching all parts of the organisation.	
5	Communication is non-existent or completely ineffective with messages failing to reach the whole of the organisation and/or conflicting messages reaching parts of the organisation.	

Operational/Environmental Factors	Factor	<b>Complexity</b>
	Prompt	<i>Score according to the complexity of the designs being developed or approved and how the authorisation holder copes with that complexity. (Complexity relates to factors such as designs classified as major, designs involving multiple technical disciplines, designs involving new or novel technology and designs defined with large volumes of technical data.)</i>
	Score	Word Picture
	1	Simple operation with no issues relating to complexity.
	2	Some complex aspects exist within the operation but systems and personnel work together to manage issues as they emerge.
	3	Complex operation but the systems and personnel work together to manage most issues which emerge.
4	Complex operation but the systems and personnel are inadequate to address issues as they emerge.	
5	Significantly complex operation with systems and personnel which do not manage issues which emerge.	

### 2. Authorisation Holder Performance Indicator: Design Certificate Holders and Authorised Persons for Design Approval

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<b>Operational/Environmental Factors</b>	<b>Factor</b>	<b>Facilities, Resources, Equipment &amp; Data</b>
	<b>Prompt</b>	<i>Score according to the quality, suitability, availability and currency of the authorisation holder's facilities, resources, equipment and data.</i>
	<b>Score</b>	<b>Word Picture</b>
	1	All are well-above minimum standards, with ample availability, are well-maintained and available for all parts of the organisation.
	2	All meet minimum standards, with generally available although may be limited at peak times, are adequately maintained and available for all parts of the organisation.
	3	1 of the following exists: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities &amp; equipment</li> <li>• limited availability across the organisation.</li> </ul>
	4	2 of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities &amp; equipment</li> <li>• limited availability across the organisation.</li> </ul>
	5	3 or more of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities &amp; equipment</li> <li>• limited availability across the organisation.</li> </ul>

<b>Operational/Environmental Factors</b>	<b>Factor</b>	<b>Operating Environment</b>
	<b>Prompt</b>	<i>Score according to the authorisation holder's operating environment and how they cope in this environment. (Operating environment issues include multiple locations, limited local support, limited shelter, night time work, shift work.)</i>
	<b>Score</b>	<b>Word Picture</b>
	1	Uncomplicated operating environment with systems suitable to the environment in place.
	2	Some aspects of the operating environment are more complicated but systems and personnel work together to manage issues as they emerge.
	3	Relatively stable operating environment but the systems and personnel work together to manage most issues which emerge.
	4	Relatively stable operating environment but the systems and personnel are not quite suitable to address issues as they emerge.
5	Difficult operating environment with systems and personnel ill-suited to manage operations as issues emerge.	

### 2. Authorisation Holder Performance Indicator: Design Certificate Holders and Authorised Persons for Design Approval

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Safety Outcomes	Factor	<i>Regulatory History</i>
	Prompt	<i>Score according to the authorisation holder's history with regulatory actions (both administrative and enforcement).</i>
	Score	Word Picture
	1	Nil or minor NCNs issued and all acquitted expeditiously, and no enforcement action within the last 3 years.
	2	A few NCNs issued but all acquitted expeditiously, or resolved enforcement action within the last 3 years.
	3	Multiple NCNs issued and mostly acquitted without issue, or minor enforcement action carried out on outstanding issues.
	4	Multiple NCNs issued but acquittal problematic, or moderate enforcement action carried out on outstanding issues.
5	Multiple and recurring NCNs issued and rarely acquitted without issues or significant enforcement action underway or still in force.	

Safety Outcomes	Factor	<i>Safety Occurrences</i>
	Prompt	<i>Score according to the authorisation holder's recent accident, incident and undesired safety-related event history as it relates to aviation safety</i>
	Score	Word Picture
	1	No record of involvement or implication in any safety occurrences within the last 3 years.
	2	No record of involvement or implication in any accident or serious incident but has experienced minor safety-related events within the last 3 years.
	3	Involvement or implication in one serious incident or a significant number of minor incidents within the last 3 years.
4	Involvement or implication in one accident <b>or</b> multiple serious incidents within the last 3 years.	
5	Involvement or implication in multiple accidents and serious incidents within the last 3 years.	

# CASA Surveillance Manual

## ANNEX 7 – Design Certificate Holders and Authorised Persons for Design Approval

### 2. Authorisation Holder Performance Indicator: Design Certificate Holders and Authorised Persons for Design Approval

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Safety Outcomes	Factor	<i>Other Safety Issues</i>
	Prompt	<i>Score according to the presence of any other safety issues (not involving a regulatory breach) raised through CASA activities and external parties</i>
	Score	Word Picture
	1	Nil issues observed during surveillance or other CASA activity and nil reports of safety concerns from third parties.
	2	Few issues observed during surveillance or other CASA activity, or safety reports received from third parties.
	3	Multiple minor issues or concerns observed during surveillance or other CASA activity or significant reports of safety concerns from third parties.
	4	Multiple issues or concerns observed during surveillance or other CASA activity.
5	Significant issues or concerns observed during surveillance or other CASA activity.	

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### 3. Systems & Elements: Design Certificate Holders and Authorised Persons for Design Approval

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### 3. Systems & Elements: Design Certificate Holders and Authorised Persons for Design Approval

#### 3.1 CAR 30 Design COA and CASR Subpart 21.J Approved Design Organisation

The CASA description of a CAR 30 Design COA and CASR Subpart 21.J Approved Design Organisation consists of two systems incorporating five elements and a number of system risks associated with each element.

The audit technique involves assessing the documented system, comparing it against the actual system processes and assessing the level of system risk mitigation exercised by the authorisation holder against the generic CASA standard system risks. The system is assessed for compliance and sampling conducted as appropriate. The assessment of the system and its risks is achieved by a questioning technique using the four attributes (12 components) of the Management System Model.

Systems	Elements
Aircraft Design	Tooling and Equipment
	Data and Documents
	Design Activity
Administration	Engineering Operations
	Personnel Standards



### 3. Systems & Elements: Design Certificate Holders and Authorised Persons for Design Approval

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

<b>SYSTEM: Aircraft Design</b>	
<b>ELEMENT: Tooling and Equipment</b>	
This element includes all tooling and equipment held, used, contracted, loaned or borrowed by the organisation for the purpose of designing aircraft or aircraft components.	
<b>Prompts:</b>	
Adequacy for design activities	Borrowing/Lending
Identification	Training on specialist tools/equipment
Storage	Subcontracting
Maintenance	Persons responsible
Calibration	Independent monitoring
<b>ELEMENT: Data and Documents</b>	
This element includes all technical references and data, design drawings, regulatory documentation, and quality/procedures manuals used in the course of carrying out aircraft or aircraft component design activities.	
<b>Prompts:</b>	
Adequacy for design activities	Borrowing/Lending
Availability	Records retention
Storage	Persons responsible
Amendment level control	Independent monitoring
<b>ELEMENT: Design Activity</b>	
This element includes all personnel, facilities, equipment, documentation and processes for carrying out aircraft or aircraft component design activities.	
<b>Prompts:</b>	
Design activity procedures	Independent checking
Subcontractor management	Approved data
Project coordination	Major damage advice
Document configuration control	Design compliance certificates
Compliance planning	Experimental certificates
Compliance demonstration	ELOS determinations
Certification testing	Reporting errors and deficiencies
Compliance finding	Investigations
No unsafe features or characteristics	Activities within scope of approval certificate
Design Advice	Independent monitoring

### 3. Systems & Elements: Design Certificate Holders and Authorised Persons for Design Approval

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

<b>SYSTEM: Administration</b>	
<b>ELEMENT: Engineering Operations</b>	
<p>This element addresses the systems that ensure the authorisation holder contains its engineering operations to those authorised by legislation and is adequately resourced to carry out those operations. This is primarily achieved through the use of a properly structured organisation with appropriate responsibilities and communication channels. Appropriate key personnel are a key link in ensuring engineering operations are not only contained, but are appropriately controlled. Examples include the Accountable Manager and Head of Design.</p>	
<b>Prompts:</b>	
Organisational structure, roles and responsibilities	Support staff
Key management positions	Organisation change management
Adequate number of personnel	Procedure change management
Adequate facilities	Independent monitoring
<b>ELEMENT: Personnel Standards</b>	
<p>The authorisation holder is required to establish and maintain an appropriate organisation, with sound and effective management structure that incorporates a design assurance system where applicable. The standards of engineering personnel, including third party providers, is required to be documented detailing qualifications, knowledge and experience as well as on-going professional development.</p>	
<b>Prompts:</b>	
Head of Design	Subcontractors
Persons who carry out design activities – candidate identification and training	Individual workload
Persons who carry out design activities – candidate assessment	Periods of absence of key personnel
Persons who carry out design activities – Professional development program	Independent monitoring

# CASA Surveillance Manual

## ANNEX 7 – Design Certificate Holders and Authorised Persons for Design Approval

### 3. Systems & Elements: Design Certificate Holders and Authorised Persons for Design Approval

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

#### 3.2 Design Approval Authorised Persons for CASR 21.095, 21.006A, 21.007, 21.009 and Subpart 21.M

The CASA description of Design Approval Authorised Persons consists of one system incorporating two elements and a number of system risks associated with each element.

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System	Elements
Authorised Persons for CASR 21.095, 21.006A, 21.007, 21.009 and Subpart 21.M	Data and Documents
	Design Approval Activity

#### SYSTEM: Authorised Persons for CASR 21.095, 21.006A, 21.007, 21.009 and Subpart 21.M

##### ELEMENT: Data and Documents

This element includes all technical data, design drawings, regulatory documentation, maintenance systems and quality/procedures manuals used in the course of carrying out aircraft or aircraft component design approval.

##### Prompts:

Availability / Adequacy (dependent upon planned activities)	Amendment – current amendment service – Ref: CASA ruling No 5/2003 Use of Electronic Data
Identification	Borrowing/Lending
Storage	Responsible and accountable
Handling	Monitoring and improvement

##### ELEMENT: Design Approval Activity

This element includes all personnel, facilities, equipment, documentation and processes for carrying out aircraft or aircraft component design approval activity.

##### Prompts:

Organisational structure, duties and responsibilities	Project management and control
Infrastructure	Contracting
Training	Approval process
Monitoring and improvement	Procedures manual revision
Activity within instrument of appointment scope	DAMP education and testing
DAMP supervision	



### 3. Systems & Elements: Design Certificate Holders and Authorised Persons for Design Approval

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#### 3.3 Health Check

Health Check mandatory elements are current for a financial year and are reviewed and updated by the Safety Systems Office (SSO) each year for the following year. Details of the current mandatory elements for each authorisation type are published separately to the CASA website.

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It is recognised that assessing all types of authorisation holders against all systems, elements and system risks would require an extended amount of time and resources. In order to more accurately target those authorisations holders requiring attention, a limited scope systems and risk assessment Health Check approach has been adopted.

The objective of a Health Check is to assess selected elements and system risks associated with areas that over time have demonstrated significant non-compliance and/or poor safety risk mitigation across a specific aviation sector. Compliance and assessment of system risk mitigation is required to be achieved during a Level 1 Health Check.

The results of Level 1 Health Checks drive consideration of what, if any, additional surveillance an authorisation holder requires. Good Health Check results will likely mean the overall compliance and safety management of the authorisation holder is being well controlled. Poor results will likely drive the requirement for additional surveillance in the form of a Level 1 systems audit and/or a Level 2 Operational Check.

The SSO, in consultation with the overseeing Division, is responsible for deciding on an annual basis the system elements and system risks to be addressed when conducting a Level 1 Health Check. The SSO will draw on existing risk and compliance data obtained over the previous periods in deciding what system elements and risks are to be targeted.

In order to provide a satisfactory indication of an authorisation holder's health the SSO will decide on not more than four mandatory elements to be targeted during the coming surveillance (financial) year as part of a Level 1 Health Check. The system elements to be targeted are nominated by the SSO in consultation with the technical discipline. Additional elements and risks can be added to a Health Check if capacity and resources allow. However, any additional elements or risks cannot replace those mandated.

Because of the time constraints placed on Health Checks, the scope of a Health Check should cover no more than four systems risks across the mandated elements. The decision on which four systems risks are to be assessed is at the discretion of the authorisation management team as this may differ between authorisation holders depending on the activities carried out by the authorisation holder.

Resources allocated to Health Checks are to be determined on a case by case basis by the relevant authorisation holder management team and may consist of a multi-discipline surveillance team or a single inspector, as applicable.

<b>Preparation:</b>	Half day
<b>On site:</b>	1 full day
<b>Surveillance write-up and documentation:</b>	1 full day

**4. Surveillance Currency Guide: Design Certificate Holders and Authorised Persons for Design Approval**

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

**4. Surveillance Currency Guide: Design Certificate Holders and Authorised Persons for Design Approval**

Surveillance level	Type	Elements
Level 1	Systems Audit	Systems, Risks and Compliance
	Health Check	Specific Elements, Risks and Compliance
	Post-authorisation Review	Entry Control Elements
Level 2	Operational Check	Design and Approval Activity

**CAR 30 Design COA, CASR Subpart 21.J Approved Design Organisation or Authorised Persons for CASR 21.095, 21.006A, 21.007, 21.009 and Subpart 21.M**

Type of operation	Level of surveillance	Recommended frequency
Category 1	Level 1 – Systems Audit	1 per 12 months
	Level 2 – Operational Check	1 per 12 months
Category 2	Level 1 – Systems Audit	1 per 24 months
	Level 2 – Operational Check	1 per 12 months
Category 3	Level 1 – Health Check	1 per 48 months
	Level 2 – Operational Check	1 per 12 months

**NOTE:** The Surveillance Currency Guide above is a guideline to assist in the decisions made during the 'Conduct Assessment' stage described in Section 4.2.5 of the CSM.

### 4. Surveillance Currency Guide: Design Certificate Holders and Authorised Persons for Design Approval

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Organisations and Instrument Holders are categorised based on their risk profile as follows:

		Consequence		
		Level 1	Level 2	Level 3
Risk-based Groups	Group A	CAT 1	CAT 1	CAT 1
	Group B	CAT 1	CAT 2	CAT 2
	Group C	CAT 2	CAT 3	CAT 3

#### Risk Based Groups

<b>Group A</b>	<ul style="list-style-type: none"> <li>High volume of design activity or approvals, or</li> <li>Design activity or approvals mostly applicable to transport category aircraft, or</li> <li>Design activity or approvals within a manufacturing organisation, or</li> <li>Design activity or approvals of APMA designs</li> </ul>
<b>Group B</b>	<ul style="list-style-type: none"> <li>Medium volume of design activity or approvals, or</li> <li>Design activity or approvals mostly applicable to commuter category aircraft</li> </ul>
<b>Group C</b>	<ul style="list-style-type: none"> <li>Low volume of design activity or approvals, or</li> <li>Design activity or approvals mostly applicable to general aviation type aircraft</li> </ul>

#### Consequences

<b>Level 1</b>	<ul style="list-style-type: none"> <li>High liability for CASA, or</li> <li>Global obligations and scrutiny, or</li> <li>Potential for large number of persons injured</li> </ul>
<b>Level 2</b>	<ul style="list-style-type: none"> <li>Medium liability for CASA, or</li> <li>Potential for medium number of persons injured</li> </ul>
<b>Level 3</b>	<ul style="list-style-type: none"> <li>Low liability for CASA, or</li> <li>Potential for small number of persons injured</li> </ul>

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## 5. Information Sources

The following is a non-exhaustive list of information sources that can be accessed to support the assessment of an authorisation holder:

- Authorised Person Design Approval Activity Reports
- Authorised Person Design Advice Records
- past Sky Sentinel risk reports
- surveys
- regulatory history, findings (NCNs, Observations and risk history)
- past Surveillance Reports and findings (NCNs and Observations)
- AIRS Information
- Service Difficulty Reports (SDRs)
- Regulatory Service activity
- information gathered by the authorisation holder
- external information gathered from industry or other government agencies
- Enforcement action
- past accident/incident history
- Organisation exposition
- Organisation design assurance system manual

A large portion of this information is available to the surveillance team and authorisation management team via the Data Warehouse using the Business Objects application.

**Note:** For advice on where and how to access required information refer to Chapter 5 – Information Capture and Access.

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## 1. Specific Guidelines: Certified & Registered Aerodromes

### 1.1 Overview

This Annex provides guidelines for conducting surveillance of CASR Part 139 aerodromes and contains information relating the following:

- Authorisation Holder Performance Indicator
- Systems and Elements
- Systems and Elements – Health Checks
- Surveillance Currency Guide
- Information Sources.

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### 2. Authorisation Holder Performance Indicator: Certified & Registered Aerodromes

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

### 2. Authorisation Holder Performance Indicator: Certified & Registered Aerodromes

<b>Authorisation Holder Category</b>	<b>Factor</b>	<b>Aircraft Size</b>
	<b>Prompt</b>	<i>Score according to the largest aircraft to use the aerodrome</i>
	<b>Score</b>	<b>Word Picture</b>
	1	< 10 pax or < 1133 kg payload
	2	10-19 pax or 1133-2153 kg payload
	3	20-30 pax or 2153-3400 kg payload
	4	>30 pax or > 3400 kg payload
	<b>Factor</b>	<b>Type of Operations</b>
	<b>Prompt</b>	<i>Score according to the most critical type of operation performed at the aerodrome</i>
	<b>Score</b>	<b>Word Picture</b>
1	General Aviation Operations	
2	Aerial Work Operations	
3	Regular Public Transport and/or Charter Operations	

<b>Organisational Factors</b>	<b>Factor</b>	<b>Senior Officers' Skills &amp; Attitudes</b>
	<b>Prompt</b>	<i>Score according to the skills and attitudes of those persons responsible for the management of the authorisation holder</i>
	<b>Score</b>	<b>Word Picture</b>
	1	Senior officers are highly effective in their jobs and have cultivated a strong safety culture with positive attitudes to regulatory compliance and safety.
	2	Senior officers are either highly effective with an accepting attitude towards regulatory compliance and safety or competent with a positive attitude towards regulatory compliance and safety.
	3	Most senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
4	Few senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.	
5	Senior officers are apparently incapable of performing their jobs or have a poor attitude towards regulatory compliance and safety.	

Organisational Factors	Factor	Maturity/Stability
	Prompt	Score according to the authorisation holder's internal maturity and stability
	Score	Word Picture
	1	Industry participant (with >5 year operating history) with few or minor changes to operation, controlled growth/decline, low management and staff turnover, no financial issues, no political issues and no industrial relations concerns.
	2	Relatively new industry participant (with <5 years' operating history), <b>OR</b> longer term participant experiencing 1 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns or</li> <li>• industrial relations tensions.</li> </ul>
	3	New entrant (i.e. no surveillance history) <b>OR</b> industry participant experiencing 2 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/takeover activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	4	Industry participant experiencing 3 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	5	Industry participant with 4 or more wide-ranging issues including: <ul style="list-style-type: none"> <li>• significant changes to operations</li> <li>• excessive growth/decline</li> <li>• political issues</li> <li>• recent merger/take-over</li> <li>• high management and staff turnover</li> <li>• significant funding/supplier issues</li> <li>• current/imminent industrial action.</li> </ul>

### 2. Authorisation Holder Performance Indicator: Certified & Registered Aerodromes

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Organisational Factors	Factor	Control
	Prompt	<i>Score according to the level of control the authorisation holder has over its functions, resources and personnel</i>
	Score	Word Picture
1	Tight control with majority of organisational functions contained within the organisation and all supplier/3rd party authorisation holders considered low-risk.	
2	Few and/or minor aspects of the organisation's operations are outsourced or leased with most supplier/3rd party authorisation holders considered low-risk.	
3	Several aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium risk.	
4	Many and/or major aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium to high risk.	
5	Majority of organisational functions outsourced, and resources, facilities and equipment leased, with many supplier/3rd party authorisation holders considered high-risk organisations.	

Management Factors	Factor	Documents & Procedures
	Prompt	<i>Score according to the authorisation holder's documentation of and adherence to procedures</i>
	Score	Word Picture
1	Well-designed, structured and effective documentation with procedures applied consistently.	
2	Documentation exists and procedures are followed with only minor, irregular deviations.	
3	Documentation exists but deviations from procedures are common although in practice these deviations address inadequacies in procedures.	
4	Documentation exists but deviations from procedures are the norm and may or may not address inadequacies in procedures or safety hazards.	
5	Little or no documentation exists or where it exists, it is ineffective and/or actively ignored with a range of procedures in place, most with little or no effectiveness against real safety hazards present.	

### 2. Authorisation Holder Performance Indicator: Certified & Registered Aerodromes

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Management Factors	Factor	<i>Safety-related Decision Making</i>
	Prompt	<i>Score according to the authorisation holder's decision making process</i>
	Score	<b>Word Picture</b>
	1	Systematic, transparent and data-driven process incorporating effective consultation, thorough analysis and consideration of both regulatory compliance and safety outcomes.
	2	Defined process (incorporating good characteristics) but not implemented completely with results focussed on compliance but with limited consideration of safety outcomes.
	3	No defined process but decisions made effectively although focussed on minimum compliance only.
	4	No defined process and decisions made fail to achieve minimum compliance or effective safety outcomes.
5	No defined process and decisions made by individuals with no consultation or analysis and no clear link to regulatory compliance or safety outcomes.	

Management Factors	Factor	<i>Safety Assurance</i>
	Prompt	<i>Score according to the authorisation holder's assurance activities</i>
	Score	<b>Word Picture</b>
	1	Proactive and reactive processes (including internal audits and investigations etc.) exist and are tied to safety outcomes and regulatory compliance.
	2	Proactive and reactive processes exist and are tied to safety outcomes or regulatory compliance but not completely implemented.
	3	Reactive processes exist but are not completely implemented or tied to safety outcomes or regulatory compliance.
4	Reactive assurance activities (eg ad hoc investigations) are carried out but with little connection to regulatory compliance or safety outcomes.	
5	No assurance practices exist.	

Management Factors	Factor	<i>Training</i>
	Prompt	<i>Score according to the authorisation holder's management of training</i>
	Score	<b>Word Picture</b>
	1	The competence (including technical and non-technical skills) of all personnel is actively managed through established processes including planning and assurance.
	2	Staff complete a planned training regime designed to meet regulatory requirements however competence is not confirmed.
	3	Staff complete training in accordance with basic regulatory requirements without any system designed to manage the process.
4	Staff complete training but it is unplanned and inconsistent with competence unconfirmed.	
5	Significant portions of the organisation are untrained and/or incompetent with no processes in place to manage the training of personnel.	

### 2. Authorisation Holder Performance Indicator: Certified & Registered Aerodromes

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Management Factors	Factor	Communication
	Prompt	Score according to the authorisation holder's management of communication
	Score	Word Picture
	1	Communication throughout the organisation is clear, consistent and effective.
	2	Communication is mostly effective with the basic message getting through to the majority of the organisation.
	3	Communication is partially effective although some messages fail to reach all parts of the organisation.
	4	Communication systems are basic and ineffective with wide-spread failures in messages reaching all parts of the organisation.
5	Communication is non-existent or completely ineffective with messages failing to reach the whole of the organisation and/or conflicting messages reaching parts of the organisation.	

Operational/Environmental Factors	Factor	Complexity
	Prompt	Score according to the level of complexity, which exists within the scope of aircraft or aircraft components maintained by the organisation. (Complexity relates to factors such as multiple aircraft types, number of runways, runway layout, taxiway/apron layout and stakeholder diversity.)
	Score	Word Picture
	1	Simple operation with no issues relating to complexity.
	2	Some complex aspects exist within the operation but systems and personnel work together to manage issues as they emerge.
	3	Complex operation but the systems and personnel work together to manage most issues which emerge.
	4	Complex operation but the systems and personnel are inadequate to address issues as they emerge.
5	Significantly complex operation with systems and personnel which do not manage issues which emerge.	

Operational/Environmental Factors	Factor	<b>Facilities, Resources, Equipment &amp; Data</b>
	Prompt	<i>Score according to the quality, suitability, availability and currency of the authorisation holder's facilities, resources, equipment and data.</i>
	Score	Word Picture
	1	All are well-above minimum standards, with ample availability, are well-maintained and available for all parts of the organisation.
	2	All meet minimum standards, with generally available although may be limited at peak times, are adequately maintained and available for all parts of the organisation.
	3	1 of the following exists: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>
	4	2 of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>
5	3 or more of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>	

Operational/Environmental Factors	Factor	<b>Operating Environment</b>
	Prompt	<i>Score according to the authorisation holder's operating environment and how they cope in this environment.</i> <i>(Operating environment issues include remote location, limited local support, extremes in weather (rain, storms, temperature, dust, etc), night time work, neighbouring geography (terrain, population, etc)</i>
	Score	Word Picture
	1	Uncomplicated operating environment with systems suitable to the environment in place.
	2	Some aspects of the operating environment are more complicated but systems and personnel work together to manage issues as they emerge.
	3	Relatively stable operating environment but the systems and personnel work together to manage most issues which emerge.
	4	Relatively stable operating environment but the systems and personnel are not quite suitable to address issues as they emerge.
5	Difficult operating environment with systems and personnel ill-suited to manage operations as issues emerge.	

### 2. Authorisation Holder Performance Indicator: Certified & Registered Aerodromes

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Safety Outcomes	Factor	<i>Regulatory History</i>
	Prompt	<i>Score according to the authorisation holder's history with regulatory actions (both administrative and enforcement)</i>
	Score	Word Picture
1	Nil or minor NCNs issued and all acquitted expeditiously, and no enforcement action within the last 3 years.	
2	A few NCNs issued but all acquitted expeditiously, or resolved enforcement action within the last 3 years.	
3	Multiple NCNs issued and mostly acquitted without issue, or minor enforcement action carried out on outstanding issues.	
4	Multiple NCNs issued but acquittal problematic, or moderate enforcement action carried out on outstanding issues.	
5	Multiple and recurring NCNs issued and rarely acquitted without issues or significant enforcement action underway or still in force.	

Safety Outcomes	Factor	<i>Safety Occurrences</i>
	Prompt	<i>Score according to the authorisation holder's recent accident, incident and undesired safety-related event history as it relates to aviation safety</i>
	Score	Word Picture
1	No record of involvement or implication in any safety occurrences within the last 3 years.	
2	No record of involvement or implication in any accident or serious incident but has experienced minor safety-related events within the last 3 years.	
3	Involvement or implication in one serious incident or a significant number of minor incidents within the last 3 years.	
4	Involvement or implication in one accident <b>or</b> multiple serious incidents within the last 3 years.	
5	Involvement or implication in multiple accidents and serious incidents within the last 3 years.	

Safety Outcomes	Factor	<i>Other Safety Issues</i>
	Prompt	<i>Score according to the presence of any other safety issues (not involving a regulatory breach) raised through CASA activities and external parties</i>
	Score	Word Picture
1	Nil issues observed during surveillance or other CASA activity and nil reports of safety concerns from third parties.	
2	Few issues observed during surveillance or other CASA activity, or safety reports received from third parties.	
3	Multiple minor issues or concerns observed during surveillance or other CASA activity or significant reports of safety concerns from third parties.	
4	Multiple issues or concerns observed during surveillance or other CASA activity.	
5	Significant issues or concerns observed during surveillance or other CASA activity.	



### 3. Systems & Elements: Certified & Registered Aerodromes

The CASA description of Aerodromes consists of four systems incorporating 13 elements and a number of system risks associated with each element.

The audit technique involves assessing the documented system, comparing it against the actual system processes and assessing the level of system risk mitigation exercised by the authorisation holder against the generic CASA standard system risks. The system is assessed for compliance and sampling conducted as appropriate. The assessment of the system and its risks is achieved by a questioning technique using the four attributes (12 components) of the Management System Model.

Systems	Elements
<b>Aerodrome Maintenance</b>	Maintenance System
	Works Control
	Maintenance Assurance
<b>Surface Movement</b>	Access Control System
	Equipment Personnel and Aircraft Movement Control
	Aerodrome Emergency Response
<b>Administration</b>	Data and Documents
	Personnel Standards
	Personnel Rostering
<b>Safety Management</b>	Safety policy and Objectives
	Safety Risk Management
	Safety Assurance
	Safety Promotion

<b>SYSTEM: Aerodrome Maintenance</b>	
<b>ELEMENT: Maintenance System</b>	
This element describes the systems and the processes for achieving the “what” maintenance activities are required to be done and “when” the maintenance activities are to be completed.	
<b>Prompts:</b>	
Regulatory Requirements	Serviceability checking
Runway(s)	Runway strip(s)
Taxiway(s)	Taxiway strip/s
Apron(s)	Access prevention
Non-movement areas	Aerodrome lighting including obstacle lighting
Mobile equipment	Major repairs, alterations and additions
Trained personnel	Navigation/Communication aids
<b>ELEMENT: Works Control</b>	
This element describes the systems and the processes for achieving the “how” works activities are conducted and “who” completes the works activities.	
<b>Prompts:</b>	
Regulatory requirements	Contractual arrangements
System of approval	Parts and stores
Documentation and data	Trained personnel
Tools and equipment	Planning, including Method of Work Plans (MOWP)
Commissioning of new works	
<b>ELEMENT: Maintenance Assurance</b>	
This element describes the systems and the processes for ensuring the aerodrome is fit for service. This is accomplished primarily through the authorisation holder’s internal audit processes and closes the loop on the entire aerodrome maintenance system.	
<b>Prompts:</b>	
Audit	Equipment
Navigation and communications aids	Movement area
Obstacles	Qualified people

<b>SYSTEM: Surface Movement</b>	
<b>ELEMENT: Access Control System</b>	
The access control element describes the systems and the processes for ensuring the aerodrome access control measures are adequate, safe and compliant with Australian legislation. Access control includes, but is not limited to such areas as: aerodrome perimeters and fencing, airside access control, including, vehicles, staff, visitors, sub-contractors and wildlife incursions.	
<b>Prompts:</b>	
Aerodrome perimeter	Protection of navigation aids
Unauthorised access	Airside vehicle control
Third party providers	Visitors
<b>ELEMENT: Equipment, Personnel and Aircraft Movement Control</b>	
The equipment and aircraft movement control element describes the systems that make up the control of all movements conducted on the aerodrome. The documented system should account for the control of personnel, vehicles, animals, equipment of any sort and aircraft within the confines of the aerodrome. If an aerodrome operator permits any vehicles to operate airside they must have procedures for airside vehicle control. This is mandatory for certified.	
<b>Prompts:</b>	
Vehicles/equipment on movement area	Airside vehicle control
Aircraft parking control	Apron, taxiway and runways
Personnel and equipment	ATC and apron management
<b>ELEMENT: Aerodrome Emergency Response</b>	
This element describes the processes and sub-systems that make up the aerodrome emergency response system. Third party arrangements associated with the emergency response are included along with onsite resources. The emergency response system should not be limited to aircraft-related incidents and accidents and should take into account essential services failures and severe environmental conditions.	
<b>Prompts:</b>	
Emergency committee and representatives	Emergency Service Organisations (ESO) described
Activation, control and coordination of ESO	Emergency facilities on aerodrome
Agency response arrangements	Full emergency/ Local standby response
Role of each ESO	Testing of the Aerodrome Emergency Plan
Periodic review	Return to normal status after emergency.

<b>SYSTEM: Administration</b>	
<b>ELEMENT: Data and Documents</b>	
This element includes (when applicable) the Aerodrome manual, all technical data, design drawings, regulatory documentation, maintenance systems and quality/procedures manuals used in the course of operating and maintaining the aerodrome.	
<b>Prompts:</b>	
Aerodrome manual processes documented.	Compliance checked
New facilities provision	Maintenance of equipment and replacement planning
Provision of aerodrome information and data (AIP/ERSA, NOTAM)	Bird and animal hazard management
Maintenance/replacement of existing facilities	Technical inspections reporting
Aerodrome inspection reporting	DAMP documentation
<b>ELEMENT: Personnel Standards</b>	
This element includes the requirement of an aerodrome authorisation holder to establish and maintain an appropriate organisation, with sound and effective management structure that uses as safety management system (certified aerodromes only). The operational standards of personnel, including third party providers is required to be documented (certified aerodromes only) detailing induction training, periodic recurrent training and any required upgrade training. A process for dealing with unsatisfactory performance should also be documented.	
<b>Prompts:</b>	
Aerodrome manager	Grounds staff
Technical maintenance personnel	Third party provider's personnel
Visitors	Works safety officer
Aerodrome reporting officer	DAMP education and testing
<b>ELEMENT: Personnel Rostering</b>	
Personnel rostering plays a significant role in achieving safe operations for it is through rostering that the authorisation holder ensures that required tasks are carried out with appropriate personnel that have appropriate qualifications, certification, operate in accordance with legislative requirements, certification and have appropriate recency (if applicable) in order to safely conduct the planned task from the start of the duty period until completion. Rostering should take into consideration fatigue factors associated with long duty days. The roster should, where appropriate, be published and displayed in a prominent position.	
<b>Prompts:</b>	
Roster production	Fatigue Issues
Qualifications	Recency
Certification	DAMP supervision

<b>SYSTEM: Safety Management</b>	
<b>ELEMENT: Safety Policy and Objectives</b>	
The element contains the systems and processes that ensure effective governance to support the safety management system are in place, this will include processes for the review and update of the authorisation holder's management and commitment (through Safety Policy, Just Culture and Safety Objectives), the appointment of key personnel, the accountabilities of management, the Emergency Response Plan and SMS documentation.	
<b>Prompts:</b>	
Management commitment and responsibility – safety policy	Appointment of key personnel
Management commitment and responsibility – just culture	Relevant third party relationships and interactions
Management commitment and responsibility – safety objectives	Coordination of emergency response plan
Safety accountabilities of managers	SMS documentation
<b>ELEMENT: Safety Risk Management</b>	
This element contains the systems and processes to ensure investigation, and analysis, of the safety risks associated with identified hazards resulting in the implementation of effective safety risk controls.	
<b>Prompts:</b>	
Hazard identification processes – reactive	Risk assessment and mitigation
Hazard identification processes – proactive	DAMP supervision
<b>ELEMENT: Safety Assurance</b>	
This element contains the systems and processes for setting, recording and evaluating system performance, conformance with regulations and company procedures, a process for the conduct of internal safety investigations, effectively manage change across the aviation activities conducted and drive continuous improvement of the SMS.	
<b>Prompts:</b>	
Safety performance monitoring and assessment – system performance	Internal safety investigation
Safety performance monitoring and assessment – assurance	Management of change
Safety performance monitoring and assessment – flight data analysis (if applicable)	Continuous improvement of SMS
DAMP supervision	
<b>ELEMENT: Safety Promotion</b>	
This element contains the systems and processes for ensuring personnel are appropriately trained, are aware of the SMS to a degree commensurate with their positions that conveys safety-critical information, explains why particular safety actions are taken, and; explains why safety procedures are introduced or changed must be evident.	
<b>Prompts:</b>	
Training and education	Safety communication
DAMP education and testing	

#### 3.1 Health Check

Health Check mandatory elements are current for a financial year and are reviewed and updated by the Safety Systems Office (SSO) each year for the following year. Details of the current mandatory elements for each authorisation type are published separately to the CASA website.

It is recognised that assessing all types of authorisation holders against all systems, elements and system risks would require an extended amount of time and resources. In order to more accurately target those authorisations holders requiring attention, a limited scope systems and risk assessment Health Check approach has been adopted.

The objective of a Health Check is to assess selected elements and system risks associated with areas that over time have demonstrated significant non-compliance and/or poor safety risk mitigation across a specific aviation sector. Compliance and assessment of system risk mitigation is required to be achieved during a Level 1 Health Check.

The results of Level 1 Health Checks drive consideration of what, if any, additional surveillance an authorisation holder requires. Good Health Check results will likely mean the overall compliance and safety management of the authorisation holder is being well controlled. Poor results will likely drive the requirement for additional surveillance in the form of a Level 1 systems audit and/or a Level 2 Operational Check.

The SSO, in consultation with the oversighting Division, is responsible for deciding on an annual basis the system elements and system risks to be addressed when conducting a Level 1 Health Check. The SSO will draw on existing risk and compliance data obtained over the previous periods in deciding what system elements and risks are to be targeted.

In order to provide a satisfactory indication of an authorisation holder's health the SSO will decide on not more than four mandatory elements to be targeted during the coming surveillance (financial) year as part of a Level 1 Health Check. The system elements to be targeted are nominated by the SSO in consultation with the technical discipline. Additional elements and risks can be added to a Health Check if capacity and resources allow. However, any additional elements or risks cannot replace those mandated.

Because of the time constraints placed on Health Checks, the scope of a Health Check should cover no more than four systems risks across the mandated elements. The decision on which four systems risks are to be assessed is at the discretion of the authorisation management team as this may differ between authorisation holders depending on the activities carried out by the authorisation holder.

Resources allocated to Health Checks are to be determined on a case by case basis by the relevant authorisation holder management team and may consist of a multi-discipline surveillance team or a single inspector, as applicable.

<b>Preparation:</b>	Half day
<b>On site:</b>	1 full day
<b>Surveillance write-up and documentation:</b>	1 full day

**4. Surveillance Currency Guide: Certified & Registered Aerodromes**

Surveillance level	Type	Elements
Level 1	Systems Audit	Systems, Risks and Compliance
	Health Check	Specific Elements, Risks and Compliance
	Post-authorisation Review	Entry Control Elements
Level 2	Operational Check	E.g. Aerodrome Reporting Inspection observation

Aerodrome		
Type of operation	Level of surveillance	Recommended frequency
Certified Aerodrome	Level 1 – Systems Audit	1 per 2 years
	Level 1 – Health Check	1 per year
Registered Aerodrome	Level 1 – Systems Audit	1 per 2 years
	Level 1 – Health Check	1 per 2 years

**4.1 Certified aerodromes**

A Certified Aerodrome is an aerodrome that:

- a) Has a runway that is suitable for use by aircraft having:
  - I. A maximum passenger seating capacity of more than 30 seats, or
  - II. A maximum carrying capacity of more than 3400 kilograms, and
- b) Is available for use in regular public transport operations or charter operations by such aircraft.

An aerodrome operator may choose to be a certified aerodrome even if the above does not apply.

**4.2 Registered aerodromes**

This is an aerodrome that has either chosen not to be a certified aerodrome or the facility does not cater for aircraft that are mandated to use a certified aerodrome.

## 5. Information Sources

The following is a non-exhaustive list of information sources that can be accessed to support the assessment of an authorisation holder:

- Aerodrome Safety Inspection reports
- Annual Technical Inspection reports
- aerodrome manual
- flight validation of instrument procedure reports
- past Sky Sentinel risk reports
- surveys
- regulatory history, findings (NCNs, Observations and risk history)
- past Surveillance Reports and findings (NCNs and Observations)
- AIRS Information
- Regulatory Service activity
- information gathered by the authorisation holder
- external information gathered from industry or other government agencies
- Enforcement action
- past accident/incident history
- risk management plans provided by the authorisation holder.

A portion of this information is available to the surveillance team and authorisation management team via the Data Warehouse using the Business Objects application.

**Note:** For advice on where and how to access required information refer to Chapter 5 – Information Capture and Access.



## 1. Specific Guidelines: Dangerous Goods – Non-AOC Holders

### 1.1 Overview

This Annex provides guidelines for conducting surveillance for non-AOC holders overseen by the Dangerous Goods Inspectorate, including freight forwarders, other non-AOC holders/shippers and designated postal operators (but excluding training organisations). This Annex contains information relating to the following:

- Authorisation Holder Performance Indicator
- Systems and Elements
- Systems and Elements – Health Checks
- Surveillance Currency Guide
- Information Sources.



**NOTE:** For guidelines on conducting surveillance of a Dangerous Goods (DG) training organisation refer to Annex 15 – Training Organisations (Excluding Flying Training).

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## 2. Authorisation Holder Performance Indicator: Dangerous Goods – Non AOC Holders

Authorisation Holder Category	<b>Factor</b>	<b>Aircraft Size</b>
	<b>Prompt</b>	Score according to the authorisation holder's largest aircraft.
	<b>Score</b>	<b>Word Picture</b>
	4	>30 pax or > 3400 kg payload
	<b>Factor</b>	<b>Type of Operations</b>
	<b>Prompt</b>	Score according to the type of operation being performed.
	<b>Score</b>	<b>Word Picture</b>
	3	Regular Public Transport and/or Charter Operations



**NOTE:** Because of the nature of this authorisation type the scores for the two Authorisation Holder Category factors default to a consistent score.

Organisational Factors	<b>Factor</b>	<b>Senior Officers' Skills &amp; Attitudes</b>
	<b>Prompt</b>	Score according to the skills and attitudes of those persons responsible for the management of the authorisation holder
	<b>Score</b>	<b>Word Picture</b>
	1	Senior officers are highly effective in their jobs and have cultivated a strong safety culture with positive attitudes to regulatory compliance and safety.
	2	Senior officers are either highly effective with an accepting attitude towards regulatory compliance and safety or competent with a positive attitude towards regulatory compliance and safety.
	3	Most senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
	4	Few senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
5	Senior officers are apparently incapable of performing their jobs or have a poor attitude towards regulatory compliance and safety.	

Organisational Factors	Factor	Maturity/Stability
	Prompt	Score according to the authorisation holder's internal maturity and stability
	Score	Word Picture
	1	Industry participant (with >5 year operating history) with few or minor changes to operation, controlled growth/decline, low management and staff turnover, no financial issues, no political issues and no industrial relations concerns.
	2	Relatively new industry participant (with <5 years' operating history), <b>OR</b> longer term participant experiencing 1 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns or</li> <li>• industrial relations tensions.</li> </ul>
	3	New entrant (i.e. no surveillance history) <b>OR</b> industry participant experiencing 2 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/takeover activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	4	Industry participant experiencing 3 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	5	Industry participant with 4 or more wide-ranging issues including: <ul style="list-style-type: none"> <li>• significant changes to operations</li> <li>• excessive growth/decline</li> <li>• political issues</li> <li>• recent merger/take-over</li> <li>• high management and staff turnover</li> <li>• significant funding/supplier issues</li> <li>• current/imminent industrial action.</li> </ul>

Organisational Factors	Factor	Control
	Prompt	<i>Score according to the level of control the authorisation holder has over its functions, resources and personnel</i>
	Score	Word Picture
1	Tight control with majority of organisational functions contained within the organisation and all supplier/3rd party authorisation holders considered low-risk.	
2	Few and/or minor aspects of the organisation's operations are outsourced or leased with most supplier/3rd party authorisation holders considered low-risk.	
3	Several aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium risk.	
4	Many and/or major aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium to high risk.	
5	Majority of organisational functions outsourced, and resources, facilities and equipment leased, with many supplier/3rd party authorisation holders considered high-risk organisations.	

Management Factors	Factor	Documents & Procedures
	Prompt	<i>Score according to the authorisation holder's documentation of and adherence to procedures</i>
	Score	Word Picture
1	Well-designed, structured and effective documentation with procedures applied consistently.	
2	Documentation exists and procedures are followed with only minor, irregular deviations.	
3	Documentation exists but deviations from procedures are common although in practice these deviations address inadequacies in procedures.	
4	Documentation exists but deviations from procedures are the norm and may or may not address inadequacies in procedures or safety hazards.	
5	Little or no documentation exists or where it exists, it is ineffective and/or actively ignored with a range of procedures in place, most with little or no effectiveness against real safety hazards present.	

Management Factors	Factor	<b><i>Safety-related Decision Making</i></b>
	Prompt	<i>Score according to the authorisation holder's decision making process</i>
	Score	Word Picture
1	Systematic, transparent and data-driven process incorporating effective consultation, thorough analysis and consideration of both regulatory compliance and safety outcomes.	
2	Defined process (incorporating good characteristics) but not implemented completely with results focussed on compliance but with limited consideration of safety outcomes.	
3	No defined process but decisions made effectively although focussed on minimum compliance only.	
4	No defined process and decisions made fail to achieve minimum compliance or effective safety outcomes.	
5	No defined process and decisions made by individuals with no consultation or analysis and no clear link to regulatory compliance or safety outcomes.	

Management Factors	Factor	<b><i>Safety Assurance</i></b>
	Prompt	<i>Score according to the authorisation holder's assurance activities</i>
	Score	Word Picture
1	Proactive and reactive processes (including internal audits and investigations etc.) exist and are tied to safety outcomes and regulatory compliance.	
2	Proactive and reactive processes exist and are tied to safety outcomes or regulatory compliance but not completely implemented.	
3	Reactive processes exist but are not completely implemented or tied to safety outcomes or regulatory compliance.	
4	Reactive assurance activities (eg ad hoc investigations) are carried out but with little connection to regulatory compliance or safety outcomes.	
5	No assurance practices exist.	

Management Factors	Factor	<b><i>Training</i></b>
	Prompt	<i>Score according to the authorisation holder's management of training</i>
	Score	Word Picture
1	The competence (including technical and non-technical skills) of all personnel is actively managed through established processes including planning and assurance.	
2	Staff complete a planned training regime designed to meet regulatory requirements however competence is not confirmed.	
3	Staff complete training in accordance with basic regulatory requirements without any system designed to manage the process.	
4	Staff complete training but it is unplanned and inconsistent with competence unconfirmed.	
5	Significant portions of the organisation are untrained and/or incompetent with no processes in place to manage the training of personnel.	

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Management Factors	Factor	Communication
	Prompt	Score according to the authorisation holder's management of communication
	Score	Word Picture
	1	Communication throughout the organisation is clear, consistent and effective.
	2	Communication is mostly effective with the basic message getting through to the majority of the organisation.
	3	Communication is partially effective although some messages fail to reach all parts of the organisation.
	4	Communication systems are basic and ineffective with wide-spread failures in messages reaching all parts of the organisation.
5	Communication is non-existent or completely ineffective with messages failing to reach the whole of the organisation and/or conflicting messages reaching parts of the organisation.	

Operational/Environmental Factors	Factor	Complexity
	Prompt	Score according to the level of complexity within the authorisation holder's operation and how they cope
	Score	Word Picture
	1	Simple operation with no issues relating to complexity.
	2	Some complex aspects exist within the operation but systems and personnel work together to manage issues as they emerge.
	3	Complex operation but the systems and personnel work together to manage most issues which emerge.
	4	Complex operation but the systems and personnel are inadequate to address issues as they emerge.
5	Significantly complex operation with systems and personnel which do not manage issues which emerge.	

Operational/Environmental Factors	Factor	<i>Facilities, Resources, Equipment &amp; Data</i>
	Prompt	<i>Score according to the quality, suitability, availability and currency of the authorisation holder's facilities, resources, equipment and data</i>
	Score	Word Picture
	1	All are well-above minimum standards, with ample availability, are well-maintained and available for all parts of the organisation.
	2	All meet minimum standards, with generally available although may be limited at peak times, are adequately maintained and available for all parts of the organisation.
	3	1 of the following exists: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>
4	2 of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>	
5	3 or more of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>	

Operational/Environmental Factors	Factor	<i>Operating Environment</i>
	Prompt	<i>Score according to the authorisation holder's operating environment and how they cope in this environment. (Operating environment issues include international destinations &amp; multiple bases.)</i>
	Score	Word Picture
	1	Uncomplicated operating environment with systems suitable to the environment in place.
	2	Some aspects of the operating environment are more complicated but systems and personnel work together to manage issues as they emerge.
	3	Relatively stable operating environment but the systems and personnel work together to manage most issues which emerge.
	4	Relatively stable operating environment but the systems and personnel are not quite suitable to address issues as they emerge.
5	Difficult operating environment with systems and personnel ill-suited to manage operations as issues emerge.	

Safety Outcomes	Factor	<i>Regulatory History</i>
	Prompt	<i>Score according to the authorisation holder's history with regulatory actions (both administrative &amp; enforcement)</i>
	Score	Word Picture
	1	Nil or minor NCNs issued and all acquitted expeditiously, and no enforcement action within the last 3 years.
	2	A few NCNs issued but all acquitted expeditiously, or resolved enforcement action within the last 3 years.
	3	Multiple NCNs issued and mostly acquitted without issue, or minor enforcement action carried out on outstanding issues.
4	Multiple NCNs issued but acquittal problematic, or moderate enforcement action carried out on outstanding issues.	
5	Multiple and recurring NCNs issued and rarely acquitted without issues or significant enforcement action underway or still in force.	



Safety Outcomes	Factor	<i>Safety Occurrences</i>
	Prompt	<i>Score according to the authorisation holder's recent accident, incident and undesired safety-related event history as it relates to aviation safety</i>
	Score	Word Picture
	1	No record of involvement or implication in any safety occurrences within the last 3 years.
	2	No record of involvement or implication in any accident or serious incident but has experienced minor safety-related events within the last 3 years.
	3	Involvement or implication in one serious incident or a significant number of minor incidents within the last 3 years.
	4	Involvement or implication in one accident or multiple serious incidents within the last 3 years.
5	Involvement or implication in multiple accidents and serious incidents within the last 3 years.	

Safety Outcomes	Factor	<i>Other Safety Issues</i>
	Prompt	<i>Score according to the presence of any other safety issues (not involving a regulatory breach) raised through CASA activities and external parties</i>
	Score	Word Picture
	1	Nil issues observed during surveillance or other CASA activity and nil reports of safety concerns from third parties.
	2	Few issues observed during surveillance or other CASA activity, or safety reports received from third parties.
	3	Multiple minor issues or concerns observed during surveillance or other CASA activity or significant reports of safety concerns from third parties.
	4	Multiple issues or concerns observed during surveillance or other CASA activity.
5	Significant issues or concerns observed during surveillance or other CASA activity.	

### 3. Systems & Elements: Dangerous Goods – Non AOC Holders

The CASA system description of Dangerous Goods – Non AOC Holders consists of two systems incorporating six elements and a number of system risks associated with each element.

The audit technique involves assessing the documented system, comparing it against the actual system processes and assessing the level of system risk mitigation exercised by the freight forwarder against the generic CASA standard system risks. The system is assessed for compliance and sampling conducted as appropriate. The assessment of the system and its risks is achieved by a questioning technique using the four attributes (12 components) of the Management System Model.



**NOTE:** When surveillance is to be conducted of a Dangerous Goods (DG) training organisation refer to the Systems and Elements section of Annex 15 – Training Organisations (Excluding Flying Training).

Systems	Elements
Freight Personnel	Personnel Rostering
	Operating Standards
Freight Operations	Tools and Equipment
	Stores and Distribution
	Freight Activity
	Data and Documents

#### SYSTEM: Freight Personnel

##### ELEMENT: Personnel Rostering

This element plays a significant role in achieving safe freight operations for it is through this element that the authorisation holder ensures that administration and freight handling personnel have appropriate qualifications, certification and operate in accordance with legislative requirements in order to safely conduct the planned task.

##### Prompts:

Roster production	Fatigue management
Position descriptions	

<b>SYSTEM: Freight Personnel (Continued)</b>	
<b>ELEMENT: Operating Standards</b>	
Operating Standards are a vital element of the FRA system required to maintain safe operations through the establishment of an appropriate set of systems (includes an appropriate organisational structure) to accommodate induction, supervision, upgrade training (where applicable) and a system for dealing with unacceptable performance.	
<b>Prompts:</b>	
Qualifications	Induction
Structure	Checking
Supervision	Upgrade training
Poor performance aspects	

<b>SYSTEM: Flight Operations</b>	
<b>ELEMENT: Tools and Equipment</b>	
This element contains the systems and processes for ensuring the correct tools and equipment is used in all phases of the movement of dangerous goods from receipt through until dispatch.	
<b>Prompts:</b>	
Serviceable	Appropriate
Sufficient assets	
<b>ELEMENT: Stores and Distribution</b>	
This element contains the systems and processes associated with the storage and distribution of items being prepared for freight forwarding. This includes the acquisition, storage and handling of all items and consumable goods used, kept, loaned or borrowed in the course of carrying out the distribution of items being forwarded.	
<b>Prompts:</b>	
Regulatory requirements	Purchasing
Purchasing	Receipt
Handling	Quarantine/Rejection
Storage	Traceability
Dispatch/Issue	Purchasing
<b>ELEMENT: Freight Activity</b>	
This element contains the systems and processes that account for the actual activity of moving freight internally from receipt until distribution is completed.	
<b>Prompts:</b>	
Floor personnel qualifications	Safe environment
Correct handling of DG	Identification of freight bins
Documented versus actual processes	Access security

SYSTEM: Flight Operations (Continued)	
ELEMENT: Data and Documents	
This element contains the systems and processes for ensuring the activities of the freight forwarding operation are properly documented and used in the course of carrying out freight operations.	
<b>Prompts:</b>	
Availability/Adequacy (dependent upon planned activities)	Identification
Storage	Currency
Change control	Appropriate content
DAMP documentation	

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#### 3.1 Health Check

Health Check mandatory elements are current for a financial year and are reviewed and updated by the Safety Systems Office (SSO) each year for the following year. Details of the current mandatory elements for each authorisation type are published separately to the CASA website. | D

It is recognised that assessing all types of authorisation holders against all systems, elements and system risks would require an extended amount of time and resources. In order to more accurately target those authorisations holders requiring attention, a limited scope systems and risk assessment Health Check approach has been adopted.

The objective of a Health Check is to assess selected elements and system risks associated with areas that over time have demonstrated significant non-compliance and/or poor safety risk mitigation across a specific aviation sector. Compliance and assessment of system risk mitigation is required to be achieved during a Level 1 Health Check.

The results of Level 1 Health Checks drive consideration of what, if any, additional surveillance an authorisation holder requires. Good Health Check results will likely mean the overall compliance and safety management of the authorisation holder is being well controlled. Poor results will likely drive the requirement for additional surveillance in the form of a Level 1 systems audit and/or a Level 2 Operational Check.

The SSO, in consultation with the oversighting Division, is responsible for deciding on an annual basis the system elements and system risks to be addressed when conducting a Level 1 Health Check. The SSO will draw on existing risk and compliance data obtained over the previous periods in deciding what system elements and risks are to be targeted.

In order to provide a satisfactory indication of an authorisation holder's health the SSO will decide on not more than four mandatory elements to be targeted during the coming surveillance (financial) year as part of a Level 1 Health Check. The system elements to be targeted are nominated by the SSO in consultation with the technical discipline. Additional elements and risks can be added to a Health Check if capacity and resources allow. However, any additional elements or risks cannot replace those mandated.

Because of the time constraints placed on Health Checks, the scope of a Health Check should cover no more than four systems risks across the mandated elements. The decision on which four systems risks are to be assessed is at the discretion of the authorisation management team as this may differ between authorisation holders depending on the activities carried out by the authorisation holder.

Resources allocated to Health Checks are to be determined on a case by case basis by the relevant authorisation holder management team and may consist of a multi-discipline surveillance team or a single inspector, as applicable.

<b>Preparation:</b>	Half day
<b>On site:</b>	1 full day
<b>Surveillance write-up and documentation:</b>	1 full day

### 4. Surveillance Currency Guide: Dangerous Goods – Non AOC Holders

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

#### 4. Surveillance Currency Guide: Dangerous Goods – Non AOC Holders

Surveillance level	Type	Elements
Level 1	Systems Audit	Systems, Risks and Compliance
	Health Check	Specific Elements, Risks and Compliance
	Post-authorisation Review	Entry Control Elements
Level 2	Operational Check	Risks, Specific Elements and Compliance

Dangerous Goods – Non AOC Holders		
Type of operation	Level of surveillance	Recommended frequency
Air Transport Operators	Level 2 – Operational Check	1 per year
Operator does not carry DG (other than Passengers & Crew provisions & Excepted DG)	Level 2 – Operational Check	1 per 2 years
Freight Forwarder Not aligned to any Authorisation Holder	Level 2 – Operational Check	1 per 2 years
Shippers of Dangerous Goods	Level 2 – Operational Check	1 per 2 years

**NOTE:** The Surveillance Currency Guide above provides guidance to assist in the decisions made during the ‘Conduct assessment’ stage described in Section 4.2.5 of the CSM.

Classify the certificate to the highest level authorised on the certificate.

The classifications of operations referred to in these guidelines are taken from the CASA Standards Development Manual v1.2, Section 2.13, *Classification of Aircraft Operations*, as detailed below.



**NOTE:** While current at the time of writing, it is the readers’ responsibility to ensure that they are referring to the most up to date version of the referenced manual.

### 4. Surveillance Currency Guide: Dangerous Goods – Non AOC Holders

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

#### 4.1 Air Transport Operations

*Air Transport Operations* comprises passenger and cargo-carrying operations that:

- are provided on a commercial basis (for hire or reward) or are otherwise publicly available
- are conducted in manned free balloons and in aircraft that are certificated in the transport, commuter or normal category.

In this class of operation, passengers, cargo consignors and aircraft hirers may generally be expected to have limited, or no knowledge of the risks involved in their transport and little or no control over those risks.

The Air Transport Operations class includes operations that are provided on a scheduled basis and on a non-scheduled basis.

Operations classified as Air Transport Operations require an Air Operators Certificate (AOC).

Air Transport Operations will be operated to the highest regulated safety standards.

#### 4.2 Aerial Work

Aerial Work comprises operations in which:

- the aircraft is being used for specialised in-flight purposes
- the operation presents elevated operational and/or organisational risks and/or the potential for significant injury or damage to persons or property if there is an accident (taking into account the number of persons involved and/or the area of operation).

Aerial work may involve specially trained and/or qualified task specialists who perform duties on board the aircraft related to the specialised use of the aircraft.

In some cases, the aircraft flight crew may also act as task specialists.

In certain circumstances, aerial work operations may involve the carriage of limited numbers of passengers, who are informed of and accept the risks associated with the flight. The CASRs define in what circumstances passengers may be carried in specific aerial work operations.

#### 4.3 General Aviation Operations

General Aviation Operations generally comprises of:

- operations *involving* the carriage of passengers on a flight that is not provided on a commercial basis and is not publicly available with operations being for personal or recreational purposes
- operations involving the carriage of passengers in what would otherwise be an air transport operation, but that involve aeroplanes or rotorcraft that are not certificated in the normal, commuter or transport category (eg a warbird flight in a limited category aircraft)
- certain other aviation operations (eg crew-only) that do not fall into one of the other two classes.



**NOTE:** *The maximum number of persons that may be carried on board an aircraft engaged in General Aviation or Aerial Work Operations is limited and the carriage of passengers above those numbers will trigger the application of a higher classification of operations or increased regulatory attention. For example, operations for the transport of passengers that are not commercial or publicly available may be regulated to the same, or many of the same, safety standards that are applicable to Air Transport Operations where the number of passengers carried is large enough or other risk factors exist to warrant this level of regulation.*

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## 5. Information Sources

The following is a non-exhaustive list of information sources that can be accessed to support the assessment of an authorisation holder:

- ESIR
- adverse inspection findings
- industry intel/complaints
- public intel/complaints
- DG inspectors' web inbox.

**Note:** For advice on where and how to access required information refer to Chapter 5 – Information Capture and Access.

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### 1. Specific Guidelines: Delegation and Authorised Persons Authorisation Holders

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

## 1. Specific Guidelines: Delegation and Authorised Persons Authorisation Holders

### 1.1 Overview

This annex provides guidelines for conducting surveillance of non-CASA officers (industry) who hold delegations and/or authorisations, issued by CASA, to exercise regulatory powers. This includes some 'approvals' which are not more appropriately covered elsewhere, specifically approvals under CASR 139.320 to conduct aviation safety inspections.

There is a broad range of regulations, against which CASA appoints persons to exercise powers under those regulations, across several technical disciplines. Consequently, responsibility for the surveillance of industry delegates is allocated across CASA offices, to best align with appropriate geographic location and/or technical inspectorate staff.

The Delegate Management Branch, although not responsible for the ongoing direct management of industry delegates, monitors and analyses certain delegate activities (particularly in the airworthiness area) and may suggest and/or conduct special surveillance activities, with engagement of the responsible oversighting office, based on identified areas of concern. Delegate Management Branch records any significant interactions with the oversighting office, concerning individual authorisation holders, as a brief discussion in Sky Sentinel.

This annex provides guidelines for conducting surveillance for all independent delegates and authorised persons including, but not limited to, technical airworthiness delegates, Approved Testing Officers (ATO), dangerous goods delegates and training delegates.

Delegates and authorised persons associated with, or restricted to working under a holder of an authorisation such as an AOC or COA, must be assessed under the authorisation holder's systems and are not covered in this Annex.

**Note:** *Surveillance of ATOs whose delegation is either limited to students of a particular flying training organisation, or is in force only while they are directly employed by the flying training organisation, are covered by this Annex.*

The annex includes:

- Systems and Elements
- Surveillance Currency Guide
- Information Sources.

2. Authorisation Holder Performance Indicator: Delegation and Authorised Persons Authorisation Holders

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2. Authorisation Holder Performance Indicator: Delegation and Authorised Persons Authorisation Holders



**NOTE:** Due to the nature of the oversight and the type of surveillance conducted on non-CASA officers (industry) who hold delegations and/or authorisations, the usability of the AHPI tool or a similar approach is not considered suitable at this stage.

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**3. Systems & Elements: Delegation and Authorised Persons Authorisation Holders**

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

**3. Systems & Elements: Delegation and Authorised Persons Authorisation Holders**

The CASA description of Delegate Management consists of one system incorporating three elements and a number of system risks associated with each element. | D

The audit technique involves assessing the documented system, comparing it against the actual system processes and assessing the level of system risk mitigation exercised by the authorisation holder against the generic CASA standard system. The system is assessed for compliance and sampling conducted as appropriate. The assessment of the system and its risks is achieved by a questioning technique using the four attributes (12 components) of the Management System Model. | D

<b>Systems</b>	<b>Elements</b>
<b>Delegates and Authorised Persons</b>	Operating Standards
	Data & Documents
	Delegate/Authorised Person Activity

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<b>SYSTEM: Delegates and Authorised Persons</b>	
<b>ELEMENT: Operating Standards</b>	
<p>The Operating Standards element ensures safe operations and defines how processes and procedures are maintained to ensure the delegate or authorised person maintains the required qualifications, experience, approvals/certification and recency (as applicable) in relation to the regulatory powers conferred to them. The delegate/authorised person must have a system in place that ensures they keep abreast of contemporary CASA policy, procedures and regulations, and should detail how the duties and tasks are performed. The delegate/authorised person must have a system in place to record, report and otherwise account for the workload for managing and performing the duties and tasks to ensure they are carried out in accordance with the prescribed standards and procedures (as applicable).</p>	
<b>Prompts:</b>	
Access to current data via mailing list, internet access, technical library and/or customer supplied data relevant to the scope of the Instrument.	Familiar with the scope and powers conferred in the instrument and any changes to relevant legislation, CASA policy, procedures and guidance material.
Maintain contemporary knowledge and skills. Recent training (including regulatory) or attend seminars, conferences relevant to the instrument scope and powers.	Qualifications match requirements of the privileges, responsibilities and scope of the instrument.
Currency and recency, where applicable.	Certification, where applicable.
What process is there to review the delegate's/authorised person's exercise of regulatory powers to verify decisions meet the operating standards.	Other activities the holder performs which impacts his/her workload. Consider other CASA and/or National Airworthiness Authority (NAA) permissions, other roles and functions within the organisation, and what assistance/support the delegate or authorised person has available.
<b>ELEMENT: Data and Documents</b>	
<p>This element addresses all technical data, design drawings, regulatory documentation, guidance material and the policy and procedures used by the delegate/authorised person in the course of exercising the delegate's/authorised person's powers under their instrument.</p>	
<b>Prompts:</b>	
All required data and documents identified and complete.	Availability/Adequacy/Currency of data and documents used for the job. Amendment service/subscriptions in place.
Data and documents maintained and secure.	Procedures support the scope of the instrument; comply with legislation and CASA policy and guidance.
Records are maintained as specified under the instrument/legislation.	Processes to ensure the person exercises powers, under the instrument, independently to the preparation of the technical assessment document process (as applicable).
Reporting as required under the instrument/legislation.	Procedures are current, approved/accepted. Any changes are properly approved/accepted.
Test results complete, maintained and secured (as applicable).	DAMP documentation

SYSTEM: Delegates and Authorised Persons (Continued)	
ELEMENT: Delegate/Authorised Person Activity	
This element addresses all delegate/authorised person activities undertaken in exercising the conferred regulatory powers under their respective instruments.	
<b>Prompts (as applicable):</b>	
Review Instrument for the scope of the permission and validity period.	Certification, as applicable.
Activity statements to ensure all technical activities have been recorded and the statements have been submitted to CASA in accordance with the instruments requirements.	Instrument holder acts with independence and not under 'dictation'. Decisions based on safety and not undue influence, duress or commercial pressures.
Compliance with legislative, policy and procedural requirements.	Level of activity (too high/not high enough). Workload and effects on decision making and thorough practices.
All relevant data taken into consideration. Not influenced by irrelevant information.	Consideration of relevant guidance material.
Job package accurate and complete.	Human factors
Activity reports to CASA as required by his/her instrument.	Reviews decisions and work packages.

#### 3.1 Health Check



**NOTE:** Health Checks are not conducted on non-CASA officers (industry) who hold delegations and/or authorisations at this stage.

### 4. Overview: Approved Testing Officers (ATO)

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### 4. Overview: Approved Testing Officers (ATO)

The surveillance conducted by the Flying Standards Branch (FSB) on Approved Testing Officers (ATO) represents a Level 2 Operational Check of the Delegate/Approved Person Activity element and is a means of meeting the safety obligations under the *Civil Aviation Act 1988* (“the Act”). Surveillance of Approved Testing Officers by the FSB is limited to ATOs exercising their delegation outside of a training and checking organisation. Surveillance activities may be in the form of announced or unannounced operational surveillance. The FSB may undertake surveillance of an ATO conducting the ground, flight and/or post flight component of any flight test.

Details of typical surveillance activities undertaken on ATOs are as follows:

APPROVED TESTING OFFICERS (ATO)	
<b>Flight Test – Ground Component</b>	
Addresses the competencies an ATO must display during the flight test – ground component of the activity being checked.	
<b>Prompts:</b>	
Establishes rapport with applicant	Assesses long brief correctly – content, delivery, knowledge*
Reviews documentation accurately	Confers with FTE/FOI regarding flight test result
Determines applicant eligibility for the flight test	Makes correct decision supported by standards
Reviews applicant preparation and planning accurately	Delivers comprehensive ATO briefing to applicant
Asks suitable questions appropriately	
* Only applicable for FIR flight test ATO surveillance	
<b>Flight Test – Flight Component</b>	
Addresses the competencies an ATO must display during the flight test – flight component of the activity being checked.	
<b>Prompts:</b>	
Assesses pre-flight brief correctly – content, delivery, knowledge*	Observes and assesses applicant performance
Confirms aircraft serviceability	Applies performance criteria to make an objective assessment
Observes applicant conduct pre-flight inspection	Complies with all legislative and operational requirements
Role plays appropriately	Prevents potentially unsafe or non-compliant situations
Provides applicant with unambiguous instructions	
*Only applicable for FIR flight test ATO surveillance	



### 4. Overview: Approved Testing Officers (ATO)

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APPROVED TESTING OFFICERS (ATO) Continued	
<b>Flight Test – Post Flight Component</b>	
Addresses the competencies an ATO must display during the flight test - post flight component of the activity being checked.	
<b>Prompts:</b>	
Confers with FTE/FOI regarding flight test result	Provides relevant advice and/or recommends retraining
Makes correct decision supported by standards	Debriefs CFI/HOTC. If applicable, identifies training deficiencies
Advises applicant of the flight test result	Accurately completes all required paperwork
Debriefs the applicant thoroughly	
<b>Flight Test – Other Considerations</b>	
Addresses the administrative competencies an ATO must display in addition to the flight test components of the activity.	
<b>Prompts:</b>	
Duration of the flight test appropriate	Exercised powers and functions correctly (e.g. testing only)
Flight test well planned and executed	Complied with Delegate Instructions
Demeanour suitable	Had regard to ATOM guidance
Behaviour consistent with CASA Code of Conduct	



**NOTE:** If a Level 1 surveillance is to be conducted of an ATO's system for managing their operations the Delegate Management Systems and Elements must be applied. If a Level 1 surveillance is to be conducted of a Flying Training Organisation the AOC Systems and Elements must be applied. A list of the specific risks associated with each system can be found in Sky Sentinel by navigating to the "Prepare" menu and then clicking on the "Print Risks" sub menu.

### 5. Surveillance Currency Guide: Delegation and Authorised Persons Authorisation Holders

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

### 5. Surveillance Currency Guide: Delegation and Authorised Persons Authorisation Holders

Surveillance level	Type	Elements
Level 1	Systems Audit	Systems, Risks and Compliance
	Post-authorisation Review	Entry Control Elements
Level 2	Operational Check	E.g. Manual review, Observation of specific activity

#### Delegate Management

Type of operation	Level of surveillance	Recommended frequency
<b>Airworthiness</b> (not including design approval)	Level 1 – Systems Audit	1 per 2 years
<b>Manufacturing</b>	Level 1 – Systems Audit	1 per 2 years
<b>Aerodromes</b> (approved persons to conduct aerodrome safety inspections)	Level 2 – Operational Check	1 per 5 years
<b>Approved Testing Officer (ATO) – new delegate or existing delegate with new testing permission</b>	Level 2 – Operational Check	1 in first 12 months
<b>Approved Testing Officer (ATO) – existing delegate</b>	Level 2 – Operational Check	1 per 3 years

**NOTE:** The Surveillance Currency Guide above provides guidance to assist in the decisions made during the 'Conduct assessment' stage described in Section 4.2.5 of the CSM.

#### 5.1 Airworthiness Delegates (not including design approval)

Responsibility for oversight of delegates exercising powers related to airworthiness lies with the CASA Operations Division. Individual delegates are generally assigned to the office within that division which is best suited to maintain appropriate oversight of that delegate.

### 5. Surveillance Currency Guide: Delegation and Authorised Persons Authorisation Holders

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Airworthiness powers and functions which are delegated to industry are usually limited to the following (although others may be delegated from time to time in order to meet particular needs):

#### Instrument of Appointment as an Authorised Person under CAR 6 or CASR 201.001:

<b>CAR 29A</b>	Conduct welding examinations
<b>CAR 42M</b>	Approve a system of maintenance for an aircraft
<b>CAR 42R</b>	Approve a change to a system of maintenance for an aircraft
<b>CAR 42ZC(7)</b>	Authorise a person to carry out maintenance on Class A aircraft
<b>CAR 42ZS</b>	Grant an exemption from or variation to a prescribed regulation in relation to an aircraft or component
<b>CAR 262AP(5)</b>	Authorise operations of experimental category aircraft over built-up area
<b>CAR 262AP(6)</b>	Authorise operations of experimental category aircraft other than by day and under Visual Flight Rules (VFR)
<b>CASR 21.176</b>	Issue certain certificates of airworthiness
<b>CASR 21.195A</b>	Issue an experimental certificate
<b>CASR 21.200</b>	Issue a special flight permit
<b>CASR 21.324</b>	Issue an export certificate of airworthiness

#### Instrument of Delegation under CASR 11.260:

<b>CAR 2A</b>	Approve maintenance data
<b>CAR 37</b>	Approve a defect as a permissible unserviceability
<b>CAR 42ZC(6)</b>	Approve a person to carry out maintenance on aircraft, components or materials

Airworthiness delegates are usually appointed for a period of two years, and must apply to be re-appointed prior to expiry. In general, a Level 1 surveillance event should be conducted on each delegate at least once during their period of appointment (two years).

Shorter Operational Checks should be scheduled through the normal surveillance planning and approval process based on identified areas of concern.

A post-authorisation review, which should be conducted between six to 15 months after the initial appointment of a delegate/authorised person, would usually be considered to fulfil the Level 1 surveillance event requirement for that period of appointment.

Airworthiness delegates/authorised person operating in association with another permission holder (for example an AOC holder or COA holder) may be subject to surveillance as a result of a surveillance event conducted on that permission holder. This may justify consideration as a surveillance event for the delegate/authorised person. Each activity should be considered on its merit.

### 5. Surveillance Currency Guide: Delegation and Authorised Persons Authorisation Holders

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#### 5.2 Manufacturing Authorised Persons

Responsibility for oversight of authorised persons exercising powers related to manufacturing lies with the Manufacturing section of the Airworthiness & Engineering Branch, Standards Division.

Manufacturing powers and functions which are authorised to industry are usually limited to the following:

##### Instrument of Appointment as an Authorised Person under CASR 201.001:

<b>CASR 21.303(4)</b>	Approve design data for Australian Parts Manufacturing Approval (APMA)
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Manufacturing authorised persons are usually appointed for a period of two years, and must apply to be re-appointed upon expiry. In general, a Level 1 surveillance event should be conducted on each authorised person at least once during their period of appointment.

Shorter Operational Checks should be scheduled through the normal surveillance planning and approval process based on identified areas of concern.

A post-authorisation review, which should be conducted between six to 15 months after the initial appointment of an authorised person, would usually be considered to fulfil the Level 1 surveillance event requirement for that period of appointment.

Manufacturing authorised persons operating in association with another permission holder (for example a manufacturing organisation) may be subject to surveillance as a result of a surveillance event conducted on that permission holder. This may justify consideration as a surveillance event for the authorised person. Each activity should be considered on its merit.

#### 5.3 Aerodromes approvals

Responsibility for oversight of approved persons exercising powers related to aerodromes lies with the Airways and Aerodromes Branch, Airspace and Aerodrome Regulation Division.

Aerodromes powers and functions which are approved to industry are usually limited to the following:

##### 'Approved persons' appointed under CASR 139.320:

<b>CASR 139.315</b>	Conduct aerodrome safety inspections at registered aerodromes
<b>CASR 139.345</b>	Conduct aerodrome safety inspections at certain other aerodromes

#### 5.4 Approved Testing Officer (ATO) Delegates

The responsibility for oversight of delegates exercising powers related to flight testing, other than within a training and checking organisation, lies with the FSB, Operations Division. Surveillance of

### 5. Surveillance Currency Guide: Delegation and Authorised Persons Authorisation Holders

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these ATOs is generally assigned to the Flight Training Examiner(s) in the region which is best suited to maintain appropriate oversight of that ATO.

This ATO surveillance is planned and reviewed at monthly surveillance planning meetings. Surveillance activities are approved by the Manager FSB and Team Leader Flight Training and Testing Office.

Flight testing powers and functions delegated to industry are usually limited to the following:

#### Approved Testing Officers' appointed under CASR 11.260:

<b>CAR 5.14</b>	Flight crew rating – issue and refusal
<b>CAR 5.19</b>	Flight crew rating – flight tests
<b>CAR 5.20</b>	Flight crew rating – approval to give training
<b>CAR 5.21</b>	Approval to give conversion training
<b>CAR 5.23</b>	Aircraft endorsement – issue and refusal
<b>CAR 5.41</b>	Flight crew licence – flight tests
<b>CAR 83E</b>	Aircraft radiotelephone operator certificate of proficiency – qualifications
<b>CAO 40.1.7 9.7(b)</b>	Approval to conduct flight test to remove single engine limitation on a flight instructor (Aeroplane) rating

In addition to the recommended frequency, surveillance of ATOs, exercising their powers outside of a training and checking organisation, may occur based on a risk assessment. The risk assessment is conducted by the FSB using the following indicators:

- flight test activity rate
- the complexity of tests undertaken
- the number of tests conducted in a single day
- the volume of tests conducted over time
- the duration of each test conducted
- the “pass/fail” rate of the ATO
- safety trends within the aviation industry or operator
- immediately reportable matters
- incident or accident data
- the periodicity of the last surveillance activity based on the recommended frequency.

The FSB may also conduct random surveillance of ATOs on an opportunity basis. In these circumstances, the surveillance activity must still be approved by the Team Leader and/or Manager, FSB.

### 6. Information Sources

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

### 6. Information Sources

All airworthiness industry delegates are required to enter details of their activities in the Delegate Management Notification System (DMNS) – unless alternate reporting requirements have been individually approved – before commencement and on completion. This provides a complete and current standardised data set to support surveillance activities conducted on these delegates. The DMNS is managed by the Delegate Management Branch.

Information about activities related to a delegate who is associated with another permission holder may be available as a result of surveillance activities conducted on that permission holder.

All non-airline Approved Testing Officers (ATOs) are required to advise CASA of their flight testing activities through the use of the Flight Test Notification System (FTNS). The FTNS is used as a primary source of information for the planning and execution of surveillance activities. FTNS data is also used to conduct risk assessments of non-airline ATOs, as per the risk assessment indicators listed at section 5.4 of this annex.

The following non-exhaustive list of information sources provides the Flying Standards Branch with additional data on ATO activities. Information from these sources is used in conjunction with the previously mentioned risk assessment indicators:

- feedback, intelligence and reports provided by:
  - Flight Crew Licencing
  - Regional Offices i.e. the Inspectorate
  - Industry personnel
- past surveillance reports and findings
- external government agencies i.e. ATSB.

## 1. Specific Guidelines: FAAOC Holders

### 1.1 Overview

This Annex provides guidelines for conducting surveillance of Foreign Air Operator Certificate (AOC) holders and contains information relating to the following:

- Overview of Foreign AOC surveillance
- Surveillance Currency Guide
- Information Sources.

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## 2. Authorisation Holder Performance Indicator: FAAOC Holders



**NOTE:** Due to the nature of the authorisation oversight and the type of surveillance conducted on this authorisation holder type, the usability of the AHPI tool or a similar approach is not considered suitable at this stage.

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### 3. Overview: FAAOC Holders

As a contributing State to ICAO, CASA undertakes periodic surveillance of foreign operators who hold approval under Section 27 of the Act to undertake aviation activity in Australia. In conducting this surveillance CASA undertakes ramp inspections and en route surveillance. Ramp Inspections are conducted using the Ramp Inspection Report (CASA Form 355) and includes items, referenced to the applicable reference in the ICAO Annexes, as recommended by ICAO in Doc 8335. The en route surveillance is conducted as per CASA Form 505.

Details of typical surveillance activities undertaken on foreign operators are as follows:

FOREIGN OPERATORS: Ground	
<b>International Ramp Check</b>	
<i>Reference: CASA form 355 – Aircraft Ramp Inspection Report</i>	
Flight deck	Safety equipment
Documentation	Flight crew
Flight data	Journey Log Book / Technical Log
Safety/Cabin	Cargo
Aircraft condition	General

FOREIGN OPERATORS: Inflight	
<b>Inflight Surveillance</b>	
<i>Reference: CASA form 505 – En Route Inspection – Flight Operations</i>	
Flight Preparation	Flight Phase
Pre-flight	Operational Facilities
Start / Pre Take-off	Aerodrome Facilities

**Note:** If for any reason a Level 1 surveillance (eg Systems Audit) is to be conducted, the Systems & Elements designated for an AOC should be applied. A list of the specific risks associated with each system can be found in Sky Sentinel by navigating to the “Prepare” menu and then clicking on the “Print Risks” sub menu.

### 3.1 Health Check



**NOTE:** Health Checks are not conducted on Foreign AOCs at this stage.

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#### 4. Surveillance Currency Guide: FAAOC Holders

Surveillance level	Type	Elements
Level 2	Operational Check	E.g. Flight Deck Observation, Ramp check

Foreign Aircraft AOC		
Type of operation	Level of surveillance	Recommended frequency
Foreign Aircraft Air Operator Certificate	Level 2 – Operational Check	1 per year

**NOTE:** The Surveillance Currency Guide above is a guideline to assist in the decisions made during the 'Conduct assessment' stage described in Section 4.2.5 of the CSM.

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## 5. ANZA requirements

The arrangement between the Australian and New Zealand governments on Mutual Recognition of Aviation-Related Certification ('ANZA Mutual Recognition Arrangements') provide for the reciprocal recognition by Australia and New Zealand of Air Operator's Certificates authorising operation of aircraft with a capacity of 30 seats or more or has a maximum certificated take-off weight greater than 15,000kg . Such certifications are issued by the respective aviation safety authorities under the Australia New Zealand Aviation (ANZA) Mutual Recognition Principle set out in those agreements. CASA issues AOC's with ANZA privileges under s.27 of the Act. (General provisions in relation to mutual recognition under the ANZA Mutual Recognition Agreements are set out in Part III of the Act.)

Safety oversight of authorisation holders with ANZA privileges is the responsibility of the host regulator. CASA oversees and conducts surveillance of Australian registered authorisation holders with ANZA privileges in New Zealand territory. There is no requirement for CASA to conduct surveillance or international ramp checks of New Zealand authorisation holders with ANZA privileges, but it may choose to do so.

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## 6. Information Sources

The following is a non-exhaustive list of information sources that can be accessed to support the assessment of an authorisation holder:

- National Aviation Authority
- government agencies (ATSB, ASA)
- general public (complaints, reports)
- aviation industry
- open source information (news, media and aviation publications).

**Note:** For advice on where and how to access required information refer to Chapter 5 – Information Capture and Access.

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### 1. Specific Guidelines: Instrument Flight Procedure Design Authorisation Holders

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

## 1. Specific Guidelines: Instrument Flight Procedure Design Authorisation Holders

### 1.1 Overview

This Annex provides guidelines for conducting surveillance of CASR Part 173 Instrument Flight Procedure Design and contains information relating to the following:

- Authorisation Holder Performance Indicator
- Systems and Elements
- Systems and Elements – Health Checks
- Surveillance Currency Guide
- Information Sources.

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### 2. Authorisation Holder Performance Indicator: Instrument Flight Procedure Design Authorisation Holders

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

### 2. Authorisation Holder Performance Indicator: Instrument Flight Procedure Design Authorisation Holders

Authorisation Holder Category	<b>Factor</b>	<b>Aircraft Size</b>
	<b>Prompt</b>	Score according to the largest aircraft that utilises the procedures developed by the authorisation holder.
	<b>Score</b>	<b>Word Picture</b>
	4	>30 pax or > 3400 kg payload
	<b>Factor</b>	<b>Type of Operations</b>
	<b>Prompt</b>	Score according to the most critical type of operation that utilises the procedures developed by the authorisation holder.
	<b>Score</b>	<b>Word Picture</b>
	3	Regular Public Transport and/or Charter Operations



**NOTE:** Because of the nature of this authorisation type the scores for the two Authorisation Holder Category factors default to a consistent score.

Organisational Factors	<b>Factor</b>	<b>Senior Officers' Skills &amp; Attitudes</b>
	<b>Prompt</b>	Score according to the skills and attitudes of those persons responsible for the management of the authorisation holder.
	<b>Score</b>	<b>Word Picture</b>
	1	Senior officers are highly effective in their jobs and have cultivated a strong safety culture with positive attitudes to regulatory compliance and safety.
	2	Senior officers are either highly effective with an accepting attitude towards regulatory compliance and safety or competent with a positive attitude towards regulatory compliance and safety.
	3	Most senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
	4	Few senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
5	Senior officers are apparently incapable of performing their jobs or have a poor attitude towards regulatory compliance and safety.	



### 2. Authorisation Holder Performance Indicator: Instrument Flight Procedure Design Authorisation Holders

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Organisational Factors	Factor	Maturity/Stability
	Prompt	Score according to the authorisation holder's internal maturity and stability.
	Score	Word Picture
	1	Industry participant (with >5 year operating history) with few or minor changes to operation, controlled growth/decline, low management and staff turnover, no financial issues, no political issues and no industrial relations concerns.
	2	Relatively new industry participant (with <5 years' operating history), <b>OR</b> longer term participant experiencing 1 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns or</li> <li>• industrial relations tensions.</li> </ul>
	3	New entrant (i.e. no surveillance history) <b>OR</b> industry participant experiencing 2 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/takeover activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	4	Industry participant experiencing 3 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	5	Industry participant with 4 or more wide-ranging issues including: <ul style="list-style-type: none"> <li>• significant changes to operations</li> <li>• excessive growth/decline</li> <li>• political issues</li> <li>• recent merger/take-over</li> <li>• high management and staff turnover</li> <li>• significant funding/supplier issues</li> <li>• current/imminent industrial action.</li> </ul>

### 2. Authorisation Holder Performance Indicator: Instrument Flight Procedure Design Authorisation Holders

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Organisational Factors	Factor	Control
	Prompt	Score according to the level of control the authorisation holder has over its functions, resources and personnel
	Score	Word Picture
	1	Tight control with majority of organisational functions contained within the organisation and all supplier/3rd party authorisation holders considered low-risk.
	2	Few and/or minor aspects of the organisation's operations are outsourced or leased with most supplier/3rd party authorisation holders considered low-risk.
	3	Several aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium risk.
	4	Many and/or major aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium to high risk.
5	Majority of organisational functions outsourced, and resources, facilities and equipment leased, with many supplier/3rd party authorisation holders considered high-risk organisations.	

Management Factors	Factor	Documents & Procedures
	Prompt	Score according to the authorisation holder's documentation of and adherence to procedures.
	Score	Word Picture
	1	Well-designed, structured and effective documentation with procedures applied consistently.
	2	Documentation exists and procedures are followed with only minor, irregular deviations.
	3	Documentation exists but deviations from procedures are common although in practice these deviations address inadequacies in procedures.
	4	Documentation exists but deviations from procedures are the norm and may or may not address inadequacies in procedures or safety hazards.
5	Little or no documentation exists or where it exists, it is ineffective and/or actively ignored with a range of procedures in place, most with little or no effectiveness against real safety hazards present.	

### 2. Authorisation Holder Performance Indicator: Instrument Flight Procedure Design Authorisation Holders

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Management Factors	Factor	<b>Safety-related Decision Making</b>
	Prompt	<i>Score according to the authorisation holder's decision making process.</i>
	Score	Word Picture
1	Systematic, transparent and data-driven process incorporating effective consultation, thorough analysis and consideration of both regulatory compliance and safety outcomes.	
2	Defined process (incorporating good characteristics) but not implemented completely with results focussed on compliance but with limited consideration of safety outcomes.	
3	No defined process but decisions made effectively although focussed on minimum compliance only.	
4	No defined process and decisions made fail to achieve minimum compliance or effective safety outcomes.	
5	No defined process and decisions made by individuals with no consultation or analysis and no clear link to regulatory compliance or safety outcomes.	

Management Factors	Factor	<b>Safety Assurance</b>
	Prompt	<i>Score according to the authorisation holder's assurance activities.</i>
	Score	Word Picture
1	Proactive and reactive processes (including internal audits and investigations etc.) exist and are tied to safety outcomes and regulatory compliance.	
2	Proactive and reactive processes exist and are tied to safety outcomes or regulatory compliance but not completely implemented.	
3	Reactive processes exist but are not completely implemented or tied to safety outcomes or regulatory compliance.	
4	Reactive assurance activities (eg ad hoc investigations) are carried out but with little connection to regulatory compliance or safety outcomes.	
5	No assurance practices exist.	

Management Factors	Factor	<b>Training</b>
	Prompt	<i>Score according to the authorisation holder's management of training.</i>
	Score	Word Picture
1	The competence (including technical and non-technical skills) of all personnel is actively managed through established processes including planning and assurance.	
2	Staff complete a planned training regime designed to meet regulatory requirements however competence is not confirmed.	
3	Staff complete training in accordance with basic regulatory requirements without any system designed to manage the process.	
4	Staff complete training but it is unplanned and inconsistent with competence unconfirmed.	
5	Significant portions of the organisation are untrained and/or incompetent with no processes in place to manage the training of personnel.	

### 2. Authorisation Holder Performance Indicator: Instrument Flight Procedure Design Authorisation Holders

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Management Factors	Factor	Communication
	Prompt	<i>Score according to the authorisation holder's management of communication.</i>
	Score	Word Picture
	1	Communication throughout the organisation is clear, consistent and effective.
	2	Communication is mostly effective with the basic message getting through to the majority of the organisation.
	3	Communication is partially effective although some messages fail to reach all parts of the organisation.
4	Communication systems are basic and ineffective with wide-spread failures in messages reaching all parts of the organisation.	
5	Communication is non-existent or completely ineffective with messages failing to reach the whole of the organisation and/or conflicting messages reaching parts of the organisation.	

Operational/Environmental Factors	Factor	Complexity
	Prompt	<i>Score according to the level of complexity within the authorisation holder and how they cope with that complexity. (Complexity relates to factors such as the variety of procedures types, the number of countries they design for, and the level of new or emerging technology.)</i>
	Score	Word Picture
	1	Simple operation with no issues relating to complexity.
	2	Some complex aspects exist within the operation but systems and personnel work together to manage issues as they emerge.
	3	Complex operation but the systems and personnel work together to manage most issues which emerge.
4	Complex operation but the systems and personnel are inadequate to address issues as they emerge.	
5	Significantly complex operation with systems and personnel which do not manage issues which emerge.	

### 2. Authorisation Holder Performance Indicator: Instrument Flight Procedure Design Authorisation Holders

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Operational/Environmental Factors	Factor	<i>Facilities, Resources, Equipment &amp; Data</i>
	Prompt	<i>Score according to the quality, suitability, availability and currency of the authorisation holder's facilities, resources, equipment and data.</i>
	Score	Word Picture
	1	All are well-above minimum standards, with ample availability, are well-maintained and available for all parts of the organisation.
	2	All meet minimum standards, with generally available although may be limited at peak times, are adequately maintained and available for all parts of the organisation.
	3	1 of the following exists: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>
	4	2 of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>
5	3 or more of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>	

### 2. Authorisation Holder Performance Indicator: Instrument Flight Procedure Design Authorisation Holders

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Operational/Environmental Factors	Factor	<i>Operating Environment</i>
	Prompt	<i>Score according to the authorisation holder's operating environment and how they cope in this environment. (Operating environment issues include multiple locations and working environment condition.)</i>
	Score	Word Picture
	1	Uncomplicated operating environment with systems suitable to the environment in place.
	2	Some aspects of the operating environment are more complicated but systems and personnel work together to manage issues as they emerge.
	3	Relatively stable operating environment but the systems and personnel work together to manage most issues which emerge.
4	Relatively stable operating environment but the systems and personnel are not quite suitable to address issues as they emerge.	
5	Difficult operating environment with systems and personnel ill-suited to manage operations as issues emerge.	

Safety Outcomes	Factor	<i>Regulatory History</i>
	Prompt	<i>Score according to the authorisation holder's history with regulatory actions (both administrative and enforcement).</i>
	Score	Word Picture
	1	Nil or minor NCNs issued and all acquitted expeditiously, and no enforcement action within the last 3 years.
	2	A few NCNs issued but all acquitted expeditiously, or resolved enforcement action within the last 3 years.
	3	Multiple NCNs issued and mostly acquitted without issue, or minor enforcement action carried out on outstanding issues.
4	Multiple NCNs issued but acquittal problematic, or moderate enforcement action carried out on outstanding issues.	
5	Multiple and recurring NCNs issued and rarely acquitted without issues or significant enforcement action underway or still in force.	

### 2. Authorisation Holder Performance Indicator: Instrument Flight Procedure Design Authorisation Holders

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Safety Outcomes	Factor	<i>Safety Occurrences</i>
	Prompt	<i>Score according to the authorisation holder's recent accident, incident and undesired safety-related event history as it relates to aviation safety.</i>
	Score	Word Picture
	1	No record of involvement or implication in any safety occurrences within the last 3 years.
	2	No record of involvement or implication in any accident or serious incident but has experienced minor safety-related events within the last 3 years.
	3	Involvement or implication in one serious incident or a significant number of minor incidents within the last 3 years.
4	Involvement or implication in one accident <b>or</b> multiple serious incidents within the last 3 years.	
5	Involvement or implication in multiple accidents and serious incidents within the last 3 years.	

Safety Outcomes	Factor	<i>Other Safety Issues</i>
	Prompt	<i>Score according to the presence of any other safety issues (not involving a regulatory breach) raised through CASA activities and external parties.</i>
	Score	Word Picture
	1	Nil issues observed during surveillance or other CASA activity and nil reports of safety concerns from third parties.
	2	Few issues observed during surveillance or other CASA activity, or safety reports received from third parties.
	3	Multiple minor issues or concerns observed during surveillance or other CASA activity or significant reports of safety concerns from third parties.
4	Multiple issues or concerns observed during surveillance or other CASA activity.	
5	Significant issues or concerns observed during surveillance or other CASA activity.	

### 3. Systems & Elements: Instrument Flight Procedure Design Authorisation Holders

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### 3. Systems & Elements: Instrument Flight Procedure Design Authorisation Holders

The CASA system description of an Instrument Flight Procedure Design (IFPD) authorisation holder consists of four systems incorporating eight elements and a number of system risks associated with each element.

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**Note:** The term ‘authorisation holder’ as used in this annexe refers to a procedure design certificate holder or procedure design authorisation holder, as appropriate.

The audit technique involves assessing the documented system, comparing it against the actual system processes and assessing the level of system risk mitigation exercised by the authorisation holder against the generic CASA standard system risks. The system is assessed for compliance and sampling conducted as appropriate. The assessment of the system and its risks is achieved by a questioning technique using the four attributes (12 components) of the Management System Model.

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Systems	Elements
Administration	IFPD Operations
	Tooling and Equipment
	Data & Documents
Personnel	Personnel Standards
Design Activity	<b>System level only</b>
Safety Management	Safety Policy and Objectives
	Safety Risk Management
	Safety Assurance
	Safety Promotion



<b>SYSTEM: Administration</b>	
<b>ELEMENT: IFPD Operations</b>	
<p>The IFPD Operations element addresses the systems and processes that an authorisation holder must have to ensure the services and or products it provides meets regulatory standards and addresses the systems that ensure the authorisation holder contains and controls its operations to those authorised. This is primarily achieved through the use of a properly structured organisation with appropriate processes. Appropriate key personnel are a key link in ensuring procedure design not only meet the required Standards but have appropriate quality assurance. An example of key personnel includes the Chief Designer.</p>	
<b>Prompts:</b>	
Organisation structure	Supervisory personnel
Operational staff	Appropriate communication channels
Appropriate key personnel	Operations limited to those authorised
Appropriate facilities	Operations controlled to those authorised.
Consistency of policy	Certificate/exemption conditions met
Operations manual	Certificate variation
Design standards	Transfer/withdrawal of maintenance responsibilities
<b>ELEMENT: Tooling and Equipment</b>	
<p>The tooling and equipment element consists of the systems that make up the control of aspects associated with any tooling and equipment utilised in the production of the authorisation holder's product or provision of a service. The documented system should address, but is not limited to all tooling and equipment held, used or contracted by the organisation for the purpose of designing and publishing instrument flight procedures.</p>	
<b>Prompts:</b>	
Availability/Adequacy	Maintenance
Identification	Validation/Acceptance
Data integrity	Training
Contractual arrangements	Operation
<b>ELEMENT: Data &amp; Documents</b>	
<p>The data and documents element addresses all technical data, design drawings, regulatory documentation and quality/procedures manuals used in the course of producing and publishing instrument flight procedures.</p>	
<b>Prompts:</b>	
Availability	Identification
Storage/Security	Handling
Document control	Change management
Currency (documents, charts, data)	Back up of data
Records management	Verification
Validation	Operations manual
Design standards	Personnel records

<b>SYSTEM: Personnel</b>	
<b>ELEMENT: Personnel Standards</b>	
The IFPD authorisation holder is required to establish and maintain an appropriate organisation, with sound and effective management structure. The standards of personnel, including third party providers is required to be documented detailing induction training, periodic recurrent training/checking and any required training for new criteria. A process for dealing with unsatisfactory performance should also be documented.	
<b>Prompts:</b>	
Basic criteria training	Proficiency program
Induction/OJT training	Poor performance aspects
Recurrent training program	Training and performance
Checking and training	Supervisors
Chief Designer	Acting Chief Designer
DAMP education and testing	

<b>SYSTEM: Design Activity</b>	
<i>(Note: The Design activity system has no smaller elements associated with it. It addresses the systems and processes that apply to the outputs of the authorisation holder. Documented processes should exist but not be limited to individually or collective design activities undertaken.)</i>	
<b>Prompts:</b>	
Design standards met	Validation
Publication	Operations manual followed
Supervision	Task assignment
Verification	Issue reporting
Sub-contracting	Records and documentation
Procedure withdrawal	Procedure maintenance

<b>SYSTEM: Safety Management</b>	
<b>ELEMENT: Safety Policy and Objectives</b>	
The element contains the systems and processes that ensure effective governance to support the safety management system are in place, this will include processes for the review and update of the authorisation holder's management and commitment (through Safety Policy, Just Culture and Safety Objectives), the appointment of key personnel, the accountabilities of management, immediate corrective action and SMS documentation.	
<b>Prompts:</b>	
Management commitment and responsibility – safety policy	Appointment of key personnel
Management commitment and responsibility – just culture	Relevant third party relationships and interactions
Management commitment and responsibility – safety objectives	Immediate corrective action
Safety accountabilities of managers	SMS documentation

<b>SYSTEM: Safety Management (Continued)</b>	
<b>ELEMENT: Safety Risk Management</b>	
This element contains the systems and processes to ensure investigation, and analysis, of the safety risks associated with identified hazards resulting in the implementation of effective safety risk controls.	
<b>Prompts:</b>	
Hazard identification processes - reactive	Risk assessment and mitigation
Hazard identification processes - proactive	
DAMP supervision	
<b>ELEMENT: Safety Assurance</b>	
This element contains the systems and processes for setting, recording and evaluating system performance, conformance with regulations and company procedures, a process for the conduct of internal safety investigations, effectively manage change across the aviation activities conducted and drive continuous improvement of the SMS.	
<b>Prompts:</b>	
Safety performance monitoring and assessment – system performance	Internal safety investigation
Safety performance monitoring and assessment – assurance	Management of change
Safety performance monitoring and assessment – flight data analysis (if applicable)	Continuous improvement of SMS
DAMP supervision	
<b>ELEMENT: Safety Promotion</b>	
This element contains the systems and processes for ensuring personnel are appropriately trained, are aware of the SMS to a degree commensurate with their positions, that conveys safety-critical information, explains why particular safety actions are taken, and; explains why safety procedures are introduced or changed must be evident.	
<b>Prompts:</b>	
Training and education	Safety communication
DAMP education and testing	

### 3. Systems & Elements: Instrument Flight Procedure Design Authorisation Holders

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#### 3.1 Health Check

Health Check mandatory elements are current for a financial year and are reviewed and updated by the Safety Systems Office (SSO) each year for the following year. Details of the current mandatory elements for each authorisation type are published separately to the CASA website.

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It is recognised that assessing all types of authorisation holders against all systems, elements and system risks would require an extended amount of time and resources. In order to more accurately target those authorisations holders requiring attention, a limited scope systems and risk assessment Health Check approach has been adopted.

The objective of a Health Check is to assess selected elements and system risks associated with areas that over time have demonstrated significant non-compliance and/or poor safety risk mitigation across a specific aviation sector. Compliance and assessment of system risk mitigation is required to be achieved during a Level 1 Health Check.

The results of Level 1 Health Checks drive consideration of what, if any, additional surveillance an authorisation holder requires. Good Health Check results will likely mean the overall compliance and safety management of the authorisation holder is being well controlled. Poor results will likely drive the requirement for additional surveillance in the form of a Level 1 systems audit and/or a Level 2 Operational Check.

The SSO, in consultation with the oversighting Division, is responsible for deciding on an annual basis the system elements and system risks to be addressed when conducting a Level 1 Health Check. The SSO will draw on existing risk and compliance data obtained over the previous periods in deciding what system elements and risks are to be targeted.

In order to provide a satisfactory indication of an authorisation holder's health the SSO will decide on not more than four mandatory elements to be targeted during the coming surveillance (financial) year as part of a Level 1 Health Check. The system elements to be targeted are nominated by the SSO in consultation with the technical discipline. Additional elements and risks can be added to a Health Check if capacity and resources allow. However, any additional elements or risks cannot replace those mandated.

Because of the time constraints placed on Health Checks, the scope of a Health Check should cover no more than four systems risks across the mandated elements. The decision on which four systems risks are to be assessed is at the discretion of the authorisation management team as this may differ between authorisation holders depending on the activities carried out by the authorisation holder.

Resources allocated to Health Checks are to be determined on a case by case basis by the relevant authorisation holder management team and may consist of a multi-discipline surveillance team or a single inspector, as applicable.

<b>Preparation:</b>	Half day
<b>On site:</b>	1 full day
<b>Surveillance write-up and documentation:</b>	1 full day

**4. Surveillance Currency Guide: Instrument Flight Procedure Design Authorisation Holders**

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**4. Surveillance Currency Guide: Instrument Flight Procedure Design Authorisation Holders**

Surveillance level	Type	Elements
Level 1	Systems Audit	Systems, Risks and Compliance
	Health Check	Specific Elements, Risks and Compliance
	Post-authorisation Review	Entry Control Elements
Level 2	Operational Check	E.g. Flight Deck Observation, Ramp check

Instrument Procedure Design (Part 173)		
Type of operation	Level of surveillance	Recommended frequency
Certificate Holders	Level 1 – Systems Audit	1 per year
Authorisation Holders	Level 1 – Health Check	1 per year
Authorisation holders for helicopter off-shore procedures	Level 1 – Health Check	1 per 2 years
Training Organisations	Level 2 – Operational Check	1 per 3 years

**NOTE:** The Surveillance Currency Guide above provides guidance to assist in the decisions made during the ‘Conduct assessment’ stage described in Section 4.2.5 of the CSM.

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### 5. Information Sources

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

### 5. Information Sources

The following is a non-exhaustive list of information sources that can be accessed to support the assessment:

- past Sky Sentinel risk reports
- surveys
- regulatory history, findings (NCNs, Observations and risk history)
- past Surveillance Reports and findings (NCNs and Observations)
- AIRS Information
- Regulatory Service activity
- Information gathered by the authorisation holder
- external information gathered from industry or other government agencies
- Enforcement action
- past accident/incident history
- risk management plans provided by the authorisation holder.

A large portion of this information is available to the surveillance team and authorisation management team via the Data Warehouse using the Business Objects application.

**Note:** For advice on where and how to access required information refer to Chapter 5 – Information Capture and Access.

## 1. Specific Guidelines: Manufacturing Organisations

### 1.1 Overview

This Annex provides guidelines for conducting surveillance of CASR Part 21 Manufacturing Organisations and contains information relating to the following:

- Authorisation Holder Performance Indicator
- Systems and Elements
- Systems and Elements – Health Checks
- Surveillance Currency Guide
- Information Sources.

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### 2. Authorisation Holder Performance Indicator: Manufacturing Organisations

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

### 2. Authorisation Holder Performance Indicator: Manufacturing Organisations

Authorisation Holder Category	<b>Factor</b>	<b>Aircraft Size</b>
	<b>Prompt</b>	<i>Score according to the authorisation holder's largest aircraft to which the authorisation holder's manufacturing approval(s) applies.</i>
	<b>Score</b>	<b>Word Picture</b>
	1	< 10 pax or < 1133 kg payload
	2	10-19 pax or 1133-2153 kg payload
	3	20-30 pax or 2153-3400 kg payload
	4	>30 pax or > 3400 kg payload
	<b>Factor</b>	<b>Type of Operations</b>
	<b>Prompt</b>	<i>Score according to the type of operation to which the authorisation holder's manufacturing approval(s) applies.</i>
	<b>Score</b>	<b>Word Picture</b>
1	Aerial Work Operations	
2	Small Charter Operations	
3	Regular Public Transport and/or Charter Operations	

Organisational Factors	<b>Factor</b>	<b>Senior Officers' Skills &amp; Attitudes</b>
	<b>Prompt</b>	<i>Score according to the skills and attitudes of the senior officer(s) of the authorisation holder or of the individual approval holder, as appropriate.</i>
	<b>Score</b>	<b>Word Picture</b>
	1	Senior officers are highly effective in their jobs and have cultivated a strong safety culture with positive attitudes to regulatory compliance and safety.
	2	Senior officers are either highly effective with an accepting attitude towards regulatory compliance and safety or competent with a positive attitude towards regulatory compliance and safety.
	3	Most senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
	4	Few senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
5	Senior officers are apparently incapable of performing their jobs or have a poor attitude towards regulatory compliance and safety.	



Organisational Factors	Factor	Maturity/Stability
	Prompt	Score according to the authorisation holder's internal maturity and stability.
	Score	Word Picture
	1	Industry participant (with >5 year operating history) with few or minor changes to operation, controlled growth/decline, low management and staff turnover, no financial issues, no political issues and no industrial relations concerns.
	2	Relatively new industry participant (with <5 years' operating history), <b>OR</b> longer term participant experiencing 1 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns or</li> <li>• industrial relations tensions.</li> </ul>
	3	New entrant (i.e. no surveillance history) <b>OR</b> industry participant experiencing 2 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/takeover activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	4	Industry participant experiencing 3 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	5	Industry participant with 4 or more wide-ranging issues including: <ul style="list-style-type: none"> <li>• significant changes to operations</li> <li>• excessive growth/decline</li> <li>• political issues</li> <li>• recent merger/take-over</li> <li>• high management and staff turnover</li> <li>• significant funding/supplier issues</li> <li>• current/imminent industrial action.</li> </ul>

### 2. Authorisation Holder Performance Indicator: Manufacturing Organisations

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Organisational Factors	Factor	Control
	Prompt	Score according to the level of control the authorisation holder has over its functions, resources and personnel.
	Score	Word Picture
1	Tight control with majority of organisational functions contained within the organisation and all supplier/3rd party authorisation holders considered low-risk.	
2	Few and/or minor aspects of the organisation's operations are outsourced or leased with most supplier/3rd party authorisation holders considered low-risk.	
3	Several aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium risk.	
4	Many and/or major aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium to high risk.	
5	Majority of organisational functions outsourced, and resources, facilities and equipment leased, with many supplier/3rd party authorisation holders considered high-risk organisations.	

Management Factors	Factor	Documents & Procedures
	Prompt	Score according to the authorisation holder's documentation of, and adherence to, procedures.
	Score	Word Picture
1	Well-designed, structured and effective documentation with procedures applied consistently.	
2	Documentation exists and procedures are followed with only minor, irregular deviations.	
3	Documentation exists but deviations from procedures are common although in practice these deviations address inadequacies in procedures.	
4	Documentation exists but deviations from procedures are the norm and may or may not address inadequacies in procedures or safety hazards.	
5	Little or no documentation exists or where it exists, it is ineffective and/or actively ignored with a range of procedures in place, most with little or no effectiveness against real safety hazards present.	

Management Factors	Factor	<b><i>Safety-related Decision Making</i></b>
	Prompt	<i>Score according to the authorisation holder's decision making process.</i>
	Score	Word Picture
	1	Systematic, transparent and data-driven process incorporating effective consultation, thorough analysis and consideration of both regulatory compliance and safety outcomes.
	2	Defined process (incorporating good characteristics) but not implemented completely with results focussed on compliance but with limited consideration of safety outcomes.
	3	No defined process but decisions made effectively although focussed on minimum compliance only.
	4	No defined process and decisions made fail to achieve minimum compliance or effective safety outcomes.
5	No defined process and decisions made by individuals with no consultation or analysis and no clear link to regulatory compliance or safety outcomes.	

Management Factors	Factor	<b><i>Safety Assurance</i></b>
	Prompt	<i>Score according to the authorisation holder's assurance activities.</i>
	Score	Word Picture
	1	Proactive and reactive processes (including internal audits and investigations etc) exist and are tied to safety outcomes and regulatory compliance.
	2	Proactive and reactive processes exist and are tied to safety outcomes or regulatory compliance but not completely implemented.
	3	Reactive processes exist but are not completely implemented or tied to safety outcomes or regulatory compliance.
4	Reactive assurance activities (eg ad hoc investigations) are carried out but with little connection to regulatory compliance or safety outcomes.	
5	No assurance practices exist.	

Management Factors	Factor	<b><i>Training</i></b>
	Prompt	<i>Score according to the authorisation holder's management of training.</i>
	Score	Word Picture
	1	The competence (including technical and non-technical skills) of all personnel is actively managed through established processes including planning and assurance.
	2	Staff complete a planned training regime designed to meet regulatory requirements however competence is not confirmed.
	3	Staff complete training in accordance with basic regulatory requirements without any system designed to manage the process.
4	Staff complete training but it is unplanned and inconsistent with competence unconfirmed.	
5	Significant portions of the organisation are untrained and/or incompetent with no processes in place to manage the training of personnel.	

### 2. Authorisation Holder Performance Indicator: Manufacturing Organisations

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Management Factors	Factor	<b>Communication</b>
	Prompt	<i>Score according to the authorisation holder's management of communication.</i>
	Score	Word Picture
	1	Communication throughout the organisation is clear, consistent and effective.
	2	Communication is mostly effective with the basic message getting through to the majority of the organisation.
	3	Communication is partially effective although some messages fail to reach all parts of the organisation.
	4	Communication systems are basic and ineffective with wide-spread failures in messages reaching all parts of the organisation.
5	Communication is non-existent or completely ineffective with messages failing to reach the whole of the organisation and/or conflicting messages reaching parts of the organisation.	

Operational/Environmental Factors	Factor	<b>Complexity</b>
	Prompt	<i>Score according to the complexity of the designs being developed or approved and how the authorisation holder copes with that complexity. (Complexity relates to factors such as designs classified as major, designs involving multiple technical disciplines, designs involving new or novel technology and designs defined with large volumes of technical data.)</i>
	Score	Word Picture
	1	Simple operation with no issues relating to complexity.
	2	Some complex aspects exist within the operation but systems and personnel work together to manage issues as they emerge.
	3	Complex operation but the systems and personnel work together to manage most issues which emerge.
	4	Complex operation but the systems and personnel are inadequate to address issues as they emerge.
5	Significantly complex operation with systems and personnel which do not manage issues which emerge.	

Operational/Environmental Factors	<b>Factor</b>	<b><i>Facilities, Resources, Equipment &amp; Data</i></b>
	<b>Prompt</b>	<i>Score according to the quality, suitability, availability and currency of the authorisation holder's facilities, resources, equipment and data.</i>
	<b>Score</b>	<b>Word Picture</b>
	1	All are well-above minimum standards, with ample availability, are well-maintained and available for all parts of the organisation.
	2	All meet minimum standards, with generally available although may be limited at peak times, are adequately maintained and available for all parts of the organisation.
	3	1 of the following exists: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities &amp; equipment</li> <li>• limited availability across the organisation.</li> </ul>
	4	2 of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities &amp; equipment</li> <li>• limited availability across the organisation.</li> </ul>
5	3 or more of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities &amp; equipment</li> <li>• limited availability across the organisation.</li> </ul>	

Operational/Environmental Factors	<b>Factor</b>	<b><i>Operating Environment</i></b>
	<b>Prompt</b>	<i>Score according to the authorisation holder's operating environment and how they cope in this environment. (Operating environment issues include multiple locations, limited local support, limited shelter, night time work, shift work.)</i>
	<b>Score</b>	<b>Word Picture</b>
	1	Uncomplicated operating environment with systems suitable to the environment in place.
	2	Some aspects of the operating environment are more complicated but systems and personnel work together to manage issues as they emerge.
	3	Relatively stable operating environment but the systems and personnel work together to manage most issues which emerge.
	4	Relatively stable operating environment but the systems and personnel are not quite suitable to address issues as they emerge.
5	Difficult operating environment with systems and personnel ill-suited to manage operations as issues emerge.	

Safety Outcomes	Factor	<i>Regulatory History</i>
	Prompt	<i>Score according to the authorisation holder's history with regulatory actions (both administrative and enforcement).</i>
	Score	Word Picture
1	Nil or minor NCNs issued and all acquitted expeditiously, and no enforcement action within the last 3 years.	
2	A few NCNs issued but all acquitted expeditiously, or resolved enforcement action within the last 3 years.	
3	Multiple NCNs issued and mostly acquitted without issue, or minor enforcement action carried out on outstanding issues.	
4	Multiple NCNs issued but acquittal problematic, or moderate enforcement action carried out on outstanding issues.	
5	Multiple and recurring NCNs issued and rarely acquitted without issues or significant enforcement action underway or still in force.	

Safety Outcomes	Factor	<i>Safety Occurrences</i>
	Prompt	<i>Score according to the authorisation holder's recent accident, incident and undesired safety-related event history as it relates to aviation safety.</i>
	Score	Word Picture
1	No record of involvement or implication in any safety occurrences within the last 3 years.	
2	No record of involvement or implication in any accident or serious incident but has experienced minor safety-related events within the last 3 years.	
3	Involvement or implication in one serious incident or a significant number of minor incidents within the last 3 years.	
4	Involvement or implication in one accident <b>or</b> multiple serious incidents within the last 3 years.	
5	Involvement or implication in multiple accidents and serious incidents within the last 3 years.	

Safety Outcomes	Factor	<i>Other Safety Issues</i>
	Prompt	<i>Score according to the presence of any other safety issues (not involving a regulatory breach) raised through CASA activities and external parties.</i>
	Score	Word Picture
1	Nil issues observed during surveillance or other CASA activity and nil reports of safety concerns from third parties.	
2	Few issues observed during surveillance or other CASA activity, or safety reports received from third parties.	
3	Multiple minor issues or concerns observed during surveillance or other CASA activity or significant reports of safety concerns from third parties.	
4	Multiple issues or concerns observed during surveillance or other CASA activity.	
5	Significant issues or concerns observed during surveillance or other CASA activity.	

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### 3. Systems & Elements: Manufacturing Organisations

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The CASA system description of a Manufacturing Organisation authorisation holder consists of four systems incorporating 15 elements and a number of risks associated with each element.

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The audit technique involves assessing the documented system, comparing it against the actual system processes and assessing the level of system risk mitigation exercised by the authorisation holder against the generic CASA standard system risks. The system is assessed for compliance and sampling conducted as appropriate. The assessment of the system and its risks is achieved by a questioning technique using the four attributes (12 components) of the Management System Model.

Systems	Elements
<b>Manufacturing Operations</b>	Manufacturing Administration
	Tooling and Equipment
	Supplier Control
	Data and Documents
<b>Personnel</b>	Personnel Standards
<b>Activity</b>	Certification and Release
	Storage and Distribution
	Material Review
	Manufacturing Activity
<b>Quality &amp; Safety Management</b>	Quality Policy and Objectives
	Quality Assurance
	Safety Policy and Objectives
	Safety Risk Management
	Safety Assurance
	Safety Promotion



<b>SYSTEM: Manufacturing Operations</b>	
<b>ELEMENT: Manufacturing Administration</b>	
<p>The Manufacturing Administration element addresses the systems and processes that an authorisation holder must have to ensure the services and or products it provides meets regulatory standards and addresses the systems that ensure the Authorisation holder contains and controls its operations to those authorised. This is primarily achieved through the use of a properly structured organisation with appropriate communication channels. Appropriate key personnel are a key link in ensuring ATS operations are not only contained but are appropriate controlled. Examples include the Senior Supervisor (however named) and Safety Officer.</p>	
<b>Prompts:</b>	
Organisation structure	Supervisory personnel
Operational staff	Appropriate communication channels
Appropriate key personnel	Operations contained to those authorised
Appropriate facilities	Operations controlled to those authorised.
Consistency of policy	DAMP supervision
<b>ELEMENT: Tooling and Equipment</b>	
<p>This element consists of the systems that make up the control of aspects associated with any tooling and equipment utilised in the production of the authorisation holder's product. The documented system should address, but is not limited to, all tooling and equipment held, used, contracted, loaned or borrowed by the organisation for the purpose of manufacturing aircraft or aircraft components.</p>	
<b>Prompts:</b>	
Availability/Adequacy	Parts pooling
Identification	Calibration
Protection and storage	Maintenance
Borrowing/lending arrangements	Contracting
Disposal	Testing
<b>ELEMENT: Supplier Control</b>	
<p>This element describes the systems that make up the control of materials and products received from external suppliers. The documented system should address acquisition, storage and handling of all parts, components, materials and consumable goods used, kept, loaned or borrowed in the course of manufacturing aircraft or aircraft component maintenance.</p>	
<b>Prompts:</b>	
Purchasing	Receipt
Storage	Handling
Borrowing/Lending	Dispatch/Issue
Quarantine/Rejection	Traceability
Tracking	Quality

<b>SYSTEM: Manufacturing Operations (Continued)</b>	
<b>ELEMENT: Data and Documents</b>	
This element addresses all technical data, design drawings; regulatory documentation and quality/procedures manuals used in the course of manufacturing aircraft or aircraft components.	
<b>Prompts:</b>	
Availability	Identification
Storage	Handling
Document control	Change management
Borrowing/Lending	Back up of data
Records management	DAMP documentation

<b>SYSTEM: Personnel</b>	
<b>ELEMENT: Personnel Standards</b>	
The manufacturing authorisation holder is required to establish and maintain an appropriate organisation, with sound and effective management structure. The standards of personnel, including third party providers is required to be documented detailing induction training, periodic recurrent training/checking (if applicable) and any required upgrade training. A process for dealing with unsatisfactory performance should also be documented.	
<b>Prompts:</b>	
Induction training	Recurrent checking program
Upgrade training	Poor performance aspects
Recurrent training program	Training and performance
Checking and training	Qualifications
Licensing	DAMP education and testing
DAMP supervision	

<b>SYSTEM: Activity</b>	
<b>ELEMENT: Certification &amp; Release</b>	
This element addresses the systems and processes that ensure proper release of products is obtained. Documented process should exist but not be limited to supervision, certification, release and internal audit.	
<b>Prompts:</b>	
Supervision	Initial certification
Non-conformity	Final certification
Product release	Internal audit
Supervision	Housekeeping (work in progress control and cleanliness)
<b>ELEMENT: Storage &amp; Distribution</b>	
This element contains the systems and processes associated with the storage and distribution of items being prepared for freight forwarding. This includes the acquisition, storage and handling of all items and consumable goods used, kept, loaned or borrowed in the course of carrying out the manufacture of products.	
<b>Prompts:</b>	
Identification	Tracking
Quarantine	Shelf life
Purchasing	Receipt
Dispatch	
<b>ELEMENT: Material Review</b>	
This element contains the systems and processes associated with the review of material likely to be re-used in manufacturing items. This includes but is not limited to the Material Review Board (MRB), correct MRB representation and record keeping.	
<b>Prompts:</b>	
MRB representation	MRB exists
MRB utilised	Documentation
Decisions recorded correctly	
<b>ELEMENT: Manufacturing Activity</b>	
This element addresses the systems and processes that apply to the outputs of the manufacturing authorisation holder. Documented process should exist but not be limited to individually or collective manufacturing activity undertaken, including general and specialised activities.	
<b>Prompts:</b>	
Current Data	Current standards
Contractors	Supervision
Specialised data	Obsolete or conflicting data
Interpretation of data	Conformance to procedures

<b>SYSTEM: Quality &amp; Safety Management</b>	
<b>ELEMENT: Quality Policy &amp; Objectives</b>	
The element contains the systems and processes that ensure effective governance to support the quality system are in place, this will include processes for the review and update of the authorisation holder's management and commitment (through quality policy and objectives), the appointment of key personnel, the accountabilities of management and quality documentation.	
<b>Prompts:</b>	
Management commitment and responsibility – quality policy	Appointment of key personnel
Management commitment and responsibility – communication of policy	Quality system is adopted by personnel
Quality accountabilities of managers	
<b>ELEMENT: Quality Assurance</b>	
This element contains the systems and processes for setting, recording and evaluating system performance, conformance with regulations and company procedures, a process for the conduct of internal quality investigations, effectively manage change across the activities conducted and drive continuous improvement of the quality system.	
<b>Prompts:</b>	
Quality performance monitoring and assessment – system performance	Internal investigation
Quality performance monitoring and assessment – assurance	Management of change
Safety performance monitoring and assessment	Continuous improvement of quality system
<b>ELEMENT: Safety Policy and Objectives</b>	
This element contains the systems and processes that ensure effective governance to support the safety management system is in place including processes for the review and update of the authorisation holder's management and commitment (through Safety Policy, Just Culture and Safety Objectives), the appointment of key personnel, the accountabilities of management, the Emergency Response Plan and SMS documentation.	
<b>Prompts:</b>	
Management commitment and responsibility – safety policy	Appointment of key personnel
Management commitment and responsibility – just culture	Relevant third party relationships and interactions
Management commitment and responsibility – safety objectives	Coordination of emergency response plan
Safety accountabilities of managers	SMS documentation

<b>SYSTEM: Quality &amp; Safety Management (Continued)</b>	
<b>ELEMENT: Safety Risk Management</b>	
This element contains the systems and processes to ensure investigation and analysis of the safety risks associated with identified hazards resulting in the implementation of effective safety risk controls.	
<b>Prompts:</b>	
Hazard identification processes – reactive	Risk assessment and mitigation
Hazard identification processes – proactive	DAMP supervision
<b>ELEMENT: Safety Assurance</b>	
This element contains the systems and processes for setting, recording and evaluating system performance, conformance with regulations and company procedures, a process for the conduct of internal safety investigations, effectively manage change across the aviation activities conducted and drive continuous improvement of the SMS.	
<b>Prompts:</b>	
Safety performance monitoring and assessment – system performance	Internal safety investigation
Safety performance monitoring and assessment – assurance	Management of change
Safety performance monitoring and assessment – flight data analysis (if applicable)	Continuous improvement of SMS
DAMP supervision	
<b>ELEMENT: Safety Promotion</b>	
This element contains the systems and processes for ensuring personnel are appropriately trained, are aware of the SMS to a degree commensurate with their positions that conveys safety-critical information, explains why particular safety actions are taken and explains why safety procedures are introduced or changed must be evident.	
<b>Prompts:</b>	
Training and education	Safety communication
DAMP education and testing	

#### 3.1 Health Check

Health Check mandatory elements are current for a financial year and are reviewed and updated by the Safety Systems Office (SSO) each year for the following year. Details of the current mandatory elements for each authorisation type are published separately to the CASA website.

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It is recognised that assessing all types of authorisation holders against all systems, elements and system risks would require an extended amount of time and resources. In order to more accurately target those authorisations holders requiring attention, a limited scope systems and risk assessment Health Check approach has been adopted.

The objective of a Health Check is to assess selected elements and system risks associated with areas that over time have demonstrated significant non-compliance and/or poor safety risk mitigation across a specific aviation sector. Compliance and assessment of system risk mitigation is required to be achieved during a Level 1 Health Check.

The results of Level 1 Health Checks drive consideration of what, if any, additional surveillance an authorisation holder requires. Good Health Check results will likely mean the overall compliance and safety management of the authorisation holder is being well controlled. Poor results will likely drive the requirement for additional surveillance in the form of a Level 1 systems audit and/or a Level 2 Operational Check.

The SSO, in consultation with the oversighting Division, is responsible for deciding on an annual basis the system elements and system risks to be addressed when conducting a Level 1 Health Check. The SSO will draw on existing risk and compliance data obtained over the previous periods in deciding what system elements and risks are to be targeted.

In order to provide a satisfactory indication of an authorisation holder's health the SSO will decide on not more than four mandatory elements to be targeted during the coming surveillance (financial) year as part of a Level 1 Health Check. The system elements to be targeted are nominated by the SSO in consultation with the technical discipline. Additional elements and risks can be added to a Health Check if capacity and resources allow. However, any additional elements or risks cannot replace those mandated.

Because of the time constraints placed on Health Checks, the scope of a Health Check should cover no more than four systems risks across the mandated elements. The decision on which four systems risks are to be assessed is at the discretion of the authorisation management team as this may differ between authorisation holders depending on the activities carried out by the authorisation holder.

Resources allocated to Health Checks are to be determined on a case by case basis by the relevant authorisation holder management team and may consist of a multi-discipline surveillance team or a single inspector, as applicable.

<b>Preparation:</b>	Half day
<b>On site:</b>	1 full day
<b>Surveillance write-up and documentation:</b>	1 full day

**4. Surveillance Currency Guide: Manufacturing Organisations**

Surveillance level	Type	Elements
Level 1	Systems Audit	Systems, Risks and Compliance
	Health Check	Specific Elements, Risks and Compliance
	Post-authorisation Review	Entry Control Elements
Level 2	Operational Check	Selected elements of the Production/Fabrication Inspection System (FIS/PIS Check)

Manufacturing		
Type of Manufacturer	Level of surveillance	Recommended frequency
Class I	Level 1 – System Audit	1 per 6 months
	Level 1 – Post Authorisation Review	1 per 6 months
Class II	Level 1 – System Audit	1 per year
	Level 1 – Health Check	1 per 6 months
	Level 1 – Post Authorisation Review	1 per 6 months
	Level 2 – PIS/FIS	Ad Hoc
Class III	Level 1 – System Audit	1 per 2 years
	Level 1 – Health Check	1 per year
	Level 1 – Post Authorisation Review	1 per 6 months
	Level 2 – PIS/FIS	Ad Hoc

- Class I: A complete aircraft, aircraft engines or propeller
- Class II: A major component of a Class 1, such as wings, fuselages, empennage assemblies, landing gear, power transmission, and control surfaces.
- Class III: A Class III product is any part or component which is not a Class I or Class II product.

**NOTE:** *The Surveillance Currency Guide above provides guidance to assist in the decisions made during the 'Conduct assessment' stage described in Section 4.2.5 of the CSM.*

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## 5. Information Sources

The following is a non-exhaustive list of information sources that can be accessed to support an assessment:

- previous Manufacturing audit reports, including NCNs and observations and history of non-compliance
- related audits reports, i.e. CAR30/CASR Part 145 and CASR Part 42
- industry report and information received during workshops and seminars
- surveys
- AIRS Information
- Service Difficulty Reports (SDRs)
- information gathered by the authorisation holder
- external information gathered from industry or other government agencies including foreign NAAs
- Enforcement action
- past accident/Incident history
- risk management plans provided by the authorisation holder
- information received from CASA Authorised Persons.

**Note:** For advice on where and how to access required information refer to Chapter 5 – Information Capture and Access.

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## 1. Specific Guidelines: RAAO

### 1.1 Overview

This Annex provides guidelines for conducting surveillance of Recreational Aviation Administration Organisations (RAAOs) and contains information relating to the following:

- Authorisation Holder Performance Indicator
- Surveillance Currency Guide
- Information Sources.

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## 2. Authorisation Holder Performance Indicator: RAAO

Authorisation Holder Category	<b>Factor</b>	<b>Aircraft Size</b>
	<b>Prompt</b>	<i>Score according to largest aircraft, over which the RAAO has responsibility.</i>
	<b>Score</b>	<b>Word Picture</b>
	1	< 10 pax or < 1133 kg payload
	2	10-19 pax or 1133-2153 kg payload
	3	20-30 pax or 2153-3400 kg payload
	4	>30 pax or > 3400 kg payload
	<b>Factor</b>	<b>Type of Operations</b>
	<b>Prompt</b>	<i>Score according to the type of operation being performed by the aircraft, over which the RAAO has responsibility.</i>
	<b>Score</b>	<b>Word Picture</b>
1	General Aviation Operations	



**NOTE:** Because of the nature of this authorisation type the scores for the Type of Operations factor defaults to a consistent score.

Organisational Factors	<b>Factor</b>	<b>Senior Officers' Skills &amp; Attitudes</b>
	<b>Prompt</b>	<i>Score according to the skills and attitudes of those persons (most likely, the Board) responsible for the management of the RAAO.</i>
	<b>Score</b>	<b>Word Picture</b>
	1	Senior officers are highly effective in their jobs and have cultivated a strong safety culture with positive attitudes to regulatory compliance and safety.
	2	Senior officers are either highly effective with an accepting attitude towards regulatory compliance and safety or competent with a positive attitude towards regulatory compliance and safety.
	3	Most senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
	4	Few senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
5	Senior officers are apparently incapable of performing their jobs or have a poor attitude towards regulatory compliance and safety.	

Organisational Factors	Factor	Maturity/Stability
	Prompt	Score according to the RAAO's internal maturity and stability.
	Score	Word Picture
1	Industry participant (with >5 year operating history) with few or minor changes to operation, controlled growth/decline, low management and staff turnover, no financial issues, no political issues and no industrial relations concerns.	
2	Relatively new industry participant (with <5 years' operating history), <b>OR</b> longer term participant experiencing 1 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns or industrial relations tensions.</li> </ul>	
3	New entrant (i.e. no surveillance history) <b>OR</b> industry participant experiencing 2 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/takeover activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>	
4	Industry participant experiencing 3 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>	
5	Industry participant with 4 or more wide-ranging issues including: <ul style="list-style-type: none"> <li>• significant changes to operations</li> <li>• excessive growth/decline</li> <li>• political issues</li> <li>• recent merger/take-over</li> <li>• high management and staff turnover</li> <li>• significant funding/supplier issues</li> <li>• current/imminent industrial action.</li> </ul>	

Organisational Factors	Factor	Control
	Prompt	Score according to the level of control the RAAO has over its functions, resources and personnel including clubs, chapters, flight training facilities etc.
	Score	Word Picture
	1	Tight control with majority of organisational functions contained within the organisation and all supplier/3rd party authorisation holders considered low-risk.
	2	Few and/or minor aspects of the organisation's operations are outsourced or leased with most supplier/3rd party authorisation holders considered low-risk.
	3	Several aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium risk.
	4	Many and/or major aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium to high risk.
5	Majority of organisational functions outsourced, and resources, facilities and equipment leased, with many supplier/3rd party authorisation holders considered high-risk organisations.	

Management Factors	Factor	Documents & Procedures
	Prompt	Score according to the RAAO's documentation of and adherence to procedures.
	Score	Word Picture
	1	Well-designed, structured and effective documentation with procedures applied consistently.
	2	Documentation exists and procedures are followed with only minor, irregular deviations.
	3	Documentation exists but deviations from procedures are common although in practice these deviations address inadequacies in procedures.
4	Documentation exists but deviations from procedures are the norm and may or may not address inadequacies in procedures or safety hazards.	
5	Little or no documentation exists or where it exists, it is ineffective and/or actively ignored with a range of procedures in place, most with little or no effectiveness against real safety hazards present.	

Management Factors	Factor	<b>Safety-related Decision Making</b>
	Prompt	<i>Score according to the RAAO's decision making process.</i>
	Score	Word Picture
1	Systematic, transparent and data-driven process incorporating effective consultation, thorough analysis and consideration of both regulatory compliance and safety outcomes.	
2	Defined process (incorporating good characteristics) but not implemented completely with results focussed on compliance but with limited consideration of safety outcomes.	
3	No defined process but decisions made effectively although focussed on minimum compliance only.	
4	No defined process and decisions made fail to achieve minimum compliance or effective safety outcomes.	
5	No defined process and decisions made by individuals with no consultation or analysis and no clear link to regulatory compliance or safety outcomes.	

Management Factors	Factor	<b>Safety Assurance</b>
	Prompt	<i>Score according to the RAAO's assurance activities.</i>
	Score	Word Picture
1	Proactive and reactive processes (including internal audits and investigations etc.) exist and are tied to safety outcomes and regulatory compliance.	
2	Proactive and reactive processes exist and are tied to safety outcomes or regulatory compliance but not completely implemented.	
3	Reactive processes exist but are not completely implemented or tied to safety outcomes or regulatory compliance.	
4	Reactive assurance activities (eg ad hoc investigations) are carried out but with little connection to regulatory compliance or safety outcomes.	
5	No assurance practices exist.	

Management Factors	Factor	<b>Training</b>
	Prompt	<i>Score according to the RAAO's management of training of its officers.</i>
	Score	Word Picture
1	The competence (including technical and non-technical skills) of all personnel is actively managed through established processes including planning and assurance.	
2	Staff complete a planned training regime designed to meet regulatory requirements however competence is not confirmed.	
3	Staff complete training in accordance with basic regulatory requirements without any system designed to manage the process.	
4	Staff complete training but it is unplanned and inconsistent with competence unconfirmed.	
5	Significant portions of the organisation are untrained and/or incompetent with no processes in place to manage the training of personnel.	

Management Factors	Factor	Communication
	Prompt	Score according to the RAAO's management of communication
	Score	Word Picture
	1	Communication throughout the organisation is clear, consistent and effective.
	2	Communication is mostly effective with the basic message getting through to the majority of the organisation.
	3	Communication is partially effective although some messages fail to reach all parts of the organisation.
4	Communication systems are basic and ineffective with wide-spread failures in messages reaching all parts of the organisation.	
5	Communication is non-existent or completely ineffective with messages failing to reach the whole of the organisation and/or conflicting messages reaching parts of the organisation.	

Operational/Environmental Factors	Factor	Complexity
	Prompt	Score according to the level of complexity within the RAAO and how they cope with that complexity. <i>(Complexity relates to factors such as regulatory structure, multiple aircraft types, disparate technology, the variety of membership types, oversight and operational structure and the roles of the RAAO.)</i>
	Score	Word Picture
	1	Simple operation with no issues relating to complexity.
	2	Some complex aspects exist within the operation but systems and personnel work together to manage issues as they emerge.
	3	Complex operation but the systems and personnel work together to manage most issues which emerge.
4	Complex operation but the systems and personnel are inadequate to address issues as they emerge.	
5	Significantly complex operation with systems and personnel which do not manage issues which emerge.	



Operational/Environmental Factors	<b>Factor</b>	<b>Facilities, Resources, Equipment &amp; Data</b>
	<b>Prompt</b>	Score according to the quality, suitability, availability and currency of the RAAO's facilities, resources, equipment and data.
	<b>Score</b>	<b>Word Picture</b>
	1	All are well-above minimum standards, with ample availability, are well-maintained and available for all parts of the organisation.
	2	All meet minimum standards, with generally available although may be limited at peak times, are adequately maintained and available for all parts of the organisation.
	3	1 of the following exists: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>
	4	2 of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>
5	3 or more of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities and equipment</li> <li>• limited availability across the organisation.</li> </ul>	

Operational/Environmental Factors	<b>Factor</b>	<b>Operating Environment</b>
	<b>Prompt</b>	Score according to the RAAO's operating environment and how they cope in this environment. (Operating environment issues include dispersal of members, remote operations, etc.)
	<b>Score</b>	<b>Word Picture</b>
	1	Uncomplicated operating environment with systems suitable to the environment in place.
	2	Some aspects of the operating environment are more complicated but systems and personnel work together to manage issues as they emerge.
	3	Relatively stable operating environment but the systems and personnel work together to manage most issues which emerge.
	4	Relatively stable operating environment but the systems and personnel are not quite suitable to address issues as they emerge.
5	Difficult operating environment with systems and personnel ill-suited to manage operations as issues emerge.	

Safety Outcomes	Factor	<b>Regulatory History</b>
	Prompt	<i>Score according to the RAAO and member history with respect to regulatory actions (both administrative and enforcement)</i>
	Score	<b>Word Picture</b>
	1	Nil or minor NCNs issued and all acquitted expeditiously, and no enforcement action within the last 3 years.
	2	A few NCNs issued but all acquitted expeditiously, or resolved enforcement action within the last 3 years.
	3	Multiple NCNs issued and mostly acquitted without issue, or minor enforcement action carried out on outstanding issues.
	4	Multiple NCNs issued but acquittal problematic, or moderate enforcement action carried out on outstanding issues.
5	Multiple and recurring NCNs issued and rarely acquitted without issues or significant enforcement action underway or still in force.	

Safety Outcomes	Factor	<b>Safety Occurrences</b>
	Prompt	<i>Score according to the RAAO's recent accident, incident and undesired safety-related event history as it relates to aviation safety</i>
	Score	<b>Word Picture</b>
	1	No record of involvement or implication in any safety occurrences within the last 3 years.
	2	No record of involvement or implication in any accident or serious incident but has experienced minor safety-related events within the last 3 years.
	3	Involvement or implication in one serious incident or a significant number of minor incidents within the last 3 years.
4	Involvement or implication in one accident <b>or</b> multiple serious incidents within the last 3 years.	
5	Involvement or implication in multiple accidents and serious incidents within the last 3 years.	

Safety Outcomes	Factor	<b>Other Safety Issues</b>
	Prompt	<i>Score according to the presence of any other safety issues (not involving a regulatory breach) raised through CASA activities and external parties</i>
	Score	<b>Word Picture</b>
	1	Nil issues observed during surveillance or other CASA activity and nil reports of safety concerns from third parties.
	2	Few issues observed during surveillance or other CASA activity, or safety reports received from third parties.
	3	Multiple minor issues or concerns observed during surveillance or other CASA activity or significant reports of safety concerns from third parties.
4	Multiple issues or concerns observed during surveillance or other CASA activity.	
5	Significant issues or concerns observed during surveillance or other CASA activity.	

### 3. Systems & Elements: RAAO



**NOTE:** Due to the nature of this authorisation type and because no Level 1 surveillance events are undertaken on Recreational Aviation Administration Organisations (RAAO), no Systems & Elements are required at this stage.

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### 3.1 Health Check



**NOTE:** Health Checks are not conducted on RAAOs

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#### 4. Surveillance Currency Guide: RAAO

Surveillance level	Type	Elements
Level 1	Systems Audit	Systems, Risks and Compliance
	Health Check	Specific Elements, Risks and Compliance
	Post-authorisation Review	Entry Control Elements
Level 2	Operational Check	E.g. Ramp check, Flight Training Facility, Instrument Holder, Exemption Holder

RAAO		
Type of operation	Level of surveillance	Recommended frequency
Australian Ballooning Federation (ABF)	Level 1 – Systems Audit	1 per year
	Level 1 – Health Check	As necessary – undefined as depends on the current risks identified
	Level 2 – Operational Check	As necessary – undefined as depends on the current activities and risks identified
Australian Parachuting Federation (APF)	Level 1 – Systems Audit	1 per year
	Level 1 – Health Check	As necessary – undefined as depends on the current risks identified
	Level 2 – Operational Check	As necessary – undefined as depends on the current activities and risks identified
Australian Sport Rotorcraft Association (ASRA)	Level 1 – Systems Audit	1 per year
	Level 1 – Health Check	As necessary – undefined as depends on the current risks identified
	Level 2 – Operational Check	As necessary – undefined as depends on the current activities and risks identified

RAAO (continued)		
Type of operation	Level of surveillance	Recommended frequency
<b>Australian Warbirds Association Limited (AWAL)</b>	Level 1 – Systems Audit	1 per year
	Level 1 – Health Check	As necessary – undefined as depends on the current risks identified
	Level 2 – Operational Check	As necessary – undefined as depends on the current activities and risks identified
<b>Gliding Federation of Australia (GFA)</b>	Level 1 – Systems Audit	1 per year
	Level 1 – Health Check	As necessary – undefined as depends on the current risks identified
	Level 2 – Operational Check	As necessary – undefined as depends on the current activities and risks identified
<b>Hang-gliding Federation of Australia (HGFA)</b>	Level 1 – Systems Audit	1 per year
	Level 1 – Health Check	As necessary – undefined as depends on the current risks identified
	Level 2 – Operational Check	As necessary – undefined as depends on the current activities and risks identified
<b>Recreational Aviation Australia (RA-Aus)</b>	Level 1 – Systems Audit	1 per year
	Level 1 – Health Check	As necessary – undefined as depends on the current risks identified
	Level 2 – Operational Check	As necessary – undefined as depends on the current activities and risks identified
<b>Model Aeronautical Association of Australia (MAAA)</b>	Level 2 – Operational Check	As required
<b>Sport Aircraft Association of Australia (SAAA)</b>	Level 2 – Operational Check	As required

**NOTE:** The Surveillance Currency Guide above provides guidance to assist in the decisions made during the ‘Conduct assessment’ stage described in Section 4.2.5 of the CSM.

## 5. Information Sources

The following is a non-exhaustive list of information sources that can be accessed to support an assessment:

- past Sky Sentinel risk reports
- regulatory history, findings (NCNs, Observations and risk history)
- past Surveillance Reports and findings (NCNs and Observations)
- AIRS Information
- Service Difficulty Reports (SDRs)
- information gathered by the RAAO

**Note:** CASA does not have access to information gathered by the RAAO and has no control over the provision of information nor can it request it as there is no regulatory head of power.

- Enforcement action
- past accident/incident history
- risk management plans provided by the authorisation holder
- accident/incident reports
- ESIRs
- meetings with RAAO members
- Ramp Checks
- various RAAO newsletters and magazines
- CASA Hotline complaints and other complaints
- surveillance activities of Instrument holders and exemption holders.

**Note:** For advice on where and how to access required information refer to Chapter 5 – Information Capture and Access.

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### 1. Specific Guidelines: Training Organisations (Excluding Flying Training)

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

## 1. Specific Guidelines: Training Organisations (Excluding Flying Training)

### 1.1 Overview

This Annex provides guidelines for conducting surveillance of training organisations, excluding flying training, and contains information relating to the following:

- Authorisation Holder Performance Indicator
- Systems and Elements
- Systems and Elements – Health Checks
- Surveillance Currency Guide
- Information Sources.

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### 2. Authorisation Holder Performance Indicator: Training Organisations (Excluding Flying Training)

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

### 2. Authorisation Holder Performance Indicator: Training Organisations (Excluding Flying Training)

Authorisation Holder Category	<b>Factor</b>	<b>Aircraft Size</b>
	<b>Prompt</b>	Score according to the largest aircraft included under their approval.
	<b>Score</b>	<b>Word Picture</b>
	1	< 10 pax or < 1133 kg payload
	2	10-19 pax or 1133-2153 kg payload
	3	20-30 pax or 2153-3400 kg payload
	4	>30 pax or > 3400 kg payload
	<b>Factor</b>	<b>Type of Operations</b>
	<b>Prompt</b>	Score according to type of operation being performed
	<b>Score</b>	<b>Word Picture</b>
	3	Regular Public Transport and/or Charter Operations



**NOTE:** Because of the nature of this authorisation type the score for the type of Operations factors defaults to a consistent score.

Organisational Factors	<b>Factor</b>	<b>Senior Officers' Skills &amp; Attitudes</b>
	<b>Prompt</b>	Score according to the skills and attitudes of those persons responsible for the management of the authorisation holder.
	<b>Score</b>	<b>Word Picture</b>
	1	Senior officers are highly effective in their jobs and have cultivated a strong safety culture with positive attitudes to regulatory compliance and safety.
	2	Senior officers are either highly effective with an accepting attitude towards regulatory compliance and safety or competent with a positive attitude towards regulatory compliance and safety.
	3	Most senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
	4	Few senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
5	Senior officers are apparently incapable of performing their jobs or have a poor attitude towards regulatory compliance and safety.	

### 2. Authorisation Holder Performance Indicator: Training Organisations (Excluding Flying Training)

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Organisational Factors	Factor	Maturity/Stability
	Prompt	Score according to the industry participant's internal maturity and stability.
	Score	Word Picture
	1	Industry participant (with >5 year operating history) with few or minor changes to operation, controlled growth/decline, low management and staff turnover, no financial issues, no political issues and no industrial relations concerns.
	2	Relatively new industry participant (with <5 years' operating history), <b>OR</b> longer term participant experiencing 1 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns or industrial relations tensions.</li> </ul>
	3	New entrant (i.e. no surveillance history) <b>OR</b> industry participant experiencing 2 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/takeover activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	4	Industry participant experiencing 3 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>
	5	Industry participant with 4 or more wide-ranging issues including: <ul style="list-style-type: none"> <li>• significant changes to operations</li> <li>• excessive growth/decline</li> <li>• political issues</li> <li>• recent merger/take-over</li> <li>• high management and staff turnover</li> <li>• significant funding/supplier issues</li> <li>• current/imminent industrial action.</li> </ul>

### 2. Authorisation Holder Performance Indicator: Training Organisations (Excluding Flying Training)

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Organisational Factors	Factor	Control
	Prompt	<i>Score according to the level of control the authorisation holder has over its functions, resources and personnel.</i>
	Score	Word Picture
1	Tight control with majority of organisational functions contained within the organisation and all supplier/3rd party authorisation holders considered low-risk.	
2	Few and/or minor aspects of the organisation's operations are outsourced or leased with most supplier/3rd party authorisation holders considered low-risk.	
3	Several aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium risk.	
4	Many and/or major aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium to high risk.	
5	Majority of organisational functions outsourced, and resources, facilities and equipment leased, with many supplier/3rd party authorisation holders considered high-risk organisations.	

Management Factors	Factor	Documents & Procedures
	Prompt	<i>Score according to the authorisation holder's documentation and adherence to procedures.</i>
	Score	Word Picture
1	Well-designed, structured and effective documentation with procedures applied consistently.	
2	Documentation exists and procedures are followed with only minor, irregular deviations.	
3	Documentation exists but deviations from procedures are common although in practice these deviations address inadequacies in procedures.	
4	Documentation exists but deviations from procedures are the norm and may or may not address inadequacies in procedures or safety hazards.	
5	Little or no documentation exists or where it exists, it is ineffective and/or actively ignored with a range of procedures in place, most with little or no effectiveness against real safety hazards present.	

### 2. Authorisation Holder Performance Indicator: Training Organisations (Excluding Flying Training)

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Management Factors	Factor	<b>Safety-related Decision Making</b>
	Prompt	<i>Score according to the authorisation holder's decision making process.</i>
	Score	Word Picture
	1	Systematic, transparent and data-driven process incorporating effective consultation, thorough analysis and consideration of both regulatory compliance and safety outcomes.
	2	Defined process (incorporating good characteristics) but not implemented completely with results focussed on compliance but with limited consideration of safety outcomes.
	3	No defined process but decisions made effectively although focussed on minimum compliance only.
	4	No defined process and decisions made fail to achieve minimum compliance or effective safety outcomes.
5	No defined process and decisions made by individuals with no consultation or analysis and no clear link to regulatory compliance or safety outcomes.	

Management Factors	Factor	<b>Safety Assurance</b>
	Prompt	<i>Score according to the authorisation holder's quality assurance activities.</i>
	Score	Word Picture
	1	Proactive and reactive processes (including internal audits and investigations etc.) exist and are tied to safety outcomes and regulatory compliance.
	2	Proactive and reactive processes exist and are tied to safety outcomes or regulatory compliance but not completely implemented.
	3	Reactive processes exist but are not completely implemented or tied to safety outcomes or regulatory compliance.
4	Reactive assurance activities (eg ad hoc investigations) are carried out but with little connection to regulatory compliance or safety outcomes.	
5	No assurance practices exist.	

### 2. Authorisation Holder Performance Indicator: Training Organisations (Excluding Flying Training)

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Management Factors	Factor	<i>Training</i>
	Prompt	<i>Score according to the authorisation holder's ability to train instructors and examiners on the types they are authorised on as well as their compliance with development training requirements.</i>
	Score	Word Picture
1	The competence (including technical and non-technical skills) of all personnel is actively managed through established processes including planning and assurance.	
2	Staff complete a planned training regime designed to meet regulatory requirements however competence is not confirmed.	
3	Staff complete training in accordance with basic regulatory requirements without any system designed to manage the process.	
4	Staff complete training but it is unplanned and inconsistent with competence unconfirmed.	
5	Significant portions of the organisation are untrained and/or incompetent with no processes in place to manage the training of personnel.	

Management Factors	Factor	<i>Communication</i>
	Prompt	<i>Score according to the authorisation holder's management of communication</i>
	Score	Word Picture
1	Communication throughout the organisation is clear, consistent and effective.	
2	Communication is mostly effective with the basic message getting through to the majority of the organisation.	
3	Communication is partially effective although some messages fail to reach all parts of the organisation.	
4	Communication systems are basic and ineffective with wide-spread failures in messages reaching all parts of the organisation.	
5	Communication is non-existent or completely ineffective with messages failing to reach the whole of the organisation and/or conflicting messages reaching parts of the organisation.	

### 2. Authorisation Holder Performance Indicator: Training Organisations (Excluding Flying Training)

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Operational/Environmental Factors	Factor	Complexity
	Prompt	Score according to the complexity of the training organisation. (Complexity relates to the range of course types and methods of delivery and may also involve both CASA and RTO approval types.)
	Score	Word Picture
	1	Simple operation with no issues relating to complexity.
	2	Some complex aspects exist within the operation but systems and personnel work together to manage issues as they emerge.
	3	Complex operation but the systems and personnel work together to manage most issues which emerge.
	4	Complex operation but the systems and personnel are inadequate to address issues as they emerge.
5	Significantly complex operation with systems and personnel which do not manage issues which emerge.	

Operational/Environmental Factors	Factor	Facilities, Resources, Equipment & Data
	Prompt	Score according to the quality, suitability and availability of the authorisation holder's facilities, resources and equipment. Consider off site training facilities we have knowledge of them using.
	Score	Word Picture
	1	All are well-above minimum standards, with ample availability, are well-maintained and available for all parts of the organisation.
	2	All meet minimum standards, with generally available although may be limited at peak times, are adequately maintained and available for all parts of the organisation.
	3	1 of the following exists: <ul style="list-style-type: none"> <li>below minimum standards</li> <li>availability at peak times is limited</li> <li>poor maintenance of facilities and equipment</li> <li>limited availability across the organisation.</li> </ul>
	4	2 of the following exist: <ul style="list-style-type: none"> <li>below minimum standards</li> <li>availability at peak times is limited</li> <li>poor maintenance of facilities and equipment</li> <li>limited availability across the organisation.</li> </ul>
5	3 or more of the following exist: <ul style="list-style-type: none"> <li>below minimum standards</li> <li>availability at peak times is limited</li> <li>poor maintenance of facilities and equipment</li> <li>limited availability across the organisation.</li> </ul>	

### 2. Authorisation Holder Performance Indicator: Training Organisations (Excluding Flying Training)

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Operational/Environmental Factors	Factor	<b>Operating Environment</b>
	Prompt	Score according to the authorisation holder's operating environment and how they cope in this environment. (Operating environment issues include situations where courses are delivered on site or away from dedicated facilities etc.)
	Score	Word Picture
	1	Uncomplicated operating environment with systems suitable to the environment in place.
	2	Some aspects of the operating environment are more complicated but systems and personnel work together to manage issues as they emerge.
	3	Relatively stable operating environment but the systems and personnel work together to manage most issues which emerge.
	4	Relatively stable operating environment but the systems and personnel are not quite suitable to address issues as they emerge.
5	Difficult operating environment with systems and personnel ill-suited to manage operations as issues emerge.	

Safety Outcomes	Factor	<b>Regulatory History</b>
	Prompt	Score according to the authorisation holder's history. Also consider other issue such as not reporting courses IAW procedures and known issues with training delivery.
	Score	Word Picture
	1	Nil or minor NCNs issued and all acquitted expeditiously, and no enforcement action within the last 3 years.
	2	A few NCNs issued but all acquitted expeditiously, or resolved enforcement action within the last 3 years.
	3	Multiple NCNs issued and mostly acquitted without issue, or minor enforcement action carried out on outstanding issues.
	4	Multiple NCNs issued but acquittal problematic, or moderate enforcement action carried out on outstanding issues.
5	Multiple and recurring NCNs issued and rarely acquitted without issues or significant enforcement action underway or still in force.	

Safety Outcomes	Factor	<b>Safety Occurrences</b>
	Prompt	Score according to the authorisation holder's recent accident, incident and undesired safety-related event history as it relates to aviation safety.
	Score	Word Picture
	1	No record of involvement or implication in any safety occurrences within the last 3 years.
	2	No record of involvement or implication in any accident or serious incident but has experienced minor safety-related events within the last 3 years.
	3	Involvement or implication in one serious incident or a significant number of minor incidents within the last 3 years.
	4	Involvement or implication in one accident <b>or</b> multiple serious incidents within the last 3 years.
5	Involvement or implication in multiple accidents and serious incidents within the last 3 years.	



# CASA Surveillance Manual

## ANNEX 15 – Training Organisations (Excluding Flying Training)

### 2. Authorisation Holder Performance Indicator: Training Organisations (Excluding Flying Training)

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Safety Outcomes	Factor	<i>Other Safety Issues</i>
	Prompt	<i>Score according to any industry feedback related to the training organisation as well as observations during dealings and surveillance.</i>
	Score	Word Picture
	1	Nil issues observed during surveillance or other CASA activity and nil reports of safety concerns from third parties.
	2	Few issues observed during surveillance or other CASA activity, or safety reports received from third parties.
	3	Multiple minor issues or concerns observed during surveillance or other CASA activity or significant reports of safety concerns from third parties.
	4	Multiple issues or concerns observed during surveillance or other CASA activity.
5	Significant issues or concerns observed during surveillance or other CASA activity.	

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### 3. Systems & Elements: Training Organisations (Excluding Flying Training)

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

### 3. Systems & Elements: Training Organisations (Excluding Flying Training)

**D |** The CASA description of Training Organisations consists of three systems incorporating seven elements and a number of system risks associated with each element.

**D |** The audit technique involves assessing the documented system, comparing it against the actual system processes and assessing the level of system risk mitigation exercised by the authorisation holder against the generic CASA standard system risks. The system is assessed for compliance and sampling conducted as appropriate. The assessment of the system and its risks is achieved by a questioning technique using the four attributes (12 components) of the Management System Model.

Systems	Elements
<b>Administration</b>	Operations
	Data and Documents
	Personnel Standards
	Personnel Rostering
<b>Training &amp; Examination</b>	Training
	Examination
<b>Quality Assurance</b>	Internal Audit

<b>SYSTEM: Administration</b>	
<b>ELEMENT: Operations</b>	
This element addresses the systems that ensure the authorisation holder contains its operations to those authorised by legislation. This is primarily achieved through the use of a properly structured organisation with appropriate communication channels. Appropriate key personnel are a key link in ensuring that training organisations' operations are not only contained but are appropriately controlled. Examples include the Accountable Manager, Principal Instructor (however named) and Chief Examiner (however named).	
<b>Prompts:</b>	
Accountable manager	Organisational chart
Principal instructor	Chief Examiner
Approved locations	System to control training to those authorised
System to contain training to that authorised	Management personnel
Assessors	Examiners
Librarians	Administrative officers
Quality manager	If relevant, external accreditation (including accreditation as a Registered Training Organisation (RTO))
<b>ELEMENT: Data and Documents</b>	
This element includes (when applicable) the operations manual, (however termed), all technical data, design drawings, regulatory documentation and quality manuals used in the course of operating and maintaining the training organisation.	
<b>Prompts:</b>	
Security of examination material	Duties and responsibilities
List of Instructional and examination staff	List of approved addresses
List of sub-contractors	Description of facilities
List of approved courses	Notification of changes to organisation
Change control (manuals and exposition)	Distribution systems
Availability of documentation/data etc	Training records
DAMP documentation	

#### SYSTEM: Administration (Continued)

##### ELEMENT: Personnel Standards

The training organisation authorisation holder is required to establish and maintain an appropriate organisation, with sound and effective management structure utilising a system of quality assurance. The standard of personnel, including third party providers is required to be documented detailing induction training, periodic recurrent training, methods to ensure consistency among instructors and any required upgrade training. A process for dealing with unsatisfactory performance should also be documented.

##### Prompts:

Staff Induction training	Upgrade training
Instructor, staff, examiner, assessor records	Certification
Currency	Qualifications
Unsatisfactory performance	Student induction
Third party provider Induction	Temporary staff
Visitors	Qualifying instructors
Qualifying examiners/Assessors	DAMP training and testing

##### ELEMENT: Personnel Rostering

This element plays a significant role in achieving effective training as it is through rostering that the authorisation holder ensures that required tasks are carried out with appropriate personnel who have appropriate qualifications and certification, operate in accordance with legislative requirements and certification and have appropriate recency (if applicable) in order to effectively conduct the planned task from the start of the duty period until completion. Rostering should take into consideration fatigue factors associated with long duty days. The roster should, where appropriate, be published and displayed in a prominent position.

##### Prompts:

Roster production	Fatigue issues
Qualifications	Recency
Certification	Temporary staff
DAMP supervision	

#### SYSTEM: Training and Examination

##### ELEMENT: Training

This element describes the systems and the processes for ensuring the system of training is effective, complete and with legislation. Training includes, but is not limited to, such areas as preparation of training materials, instructor guides, workbooks, courses and provision of workshops and execution of training.

##### Prompts:

Organisation of courses	Course material preparation
Classrooms	Equipment
Facilities	Type knowledge
Practical training	Alternate locations
Compliance with regulatory standards	DAMP education and testing

<b>SYSTEM: Training and Examination (Continued)</b>	
<b>ELEMENT: Examination</b>	
<p>This element describes the systems that make up the control of all systems associated with the conduct of examinations of students under the control of the authorisation holder. In some circumstances this may be extended to staff who are required to undertake periodic examinations. The documented system should account, but is not limited to, the control of personnel supervising examinations and undertaking examinations, conduct of practical tests and assessments and control and issue of certificates. The exam structure should ensure that the relevant syllabus items are covered, that the marking key is appropriate, with multiple choice answers, that the distractors are reasonably realistic; that where a computer generated question paper is used that there are processes to prevent the same questions recurring.</p>	
<b>Prompts:</b>	
Organisation of examinations	Examination facilities
Exam structure	Coverage of syllabus, marking key
Conduct	Basic/Type practical assessments
Inappropriate practices	Measures to detect/prevent cheating or inappropriate collaboration
Examination assessment	Alternate locations
Issue of certificates	Compliance with regulatory standards
DAMP education and testing	

<b>SYSTEM: Quality Assurance</b>	
<b>ELEMENT: Internal Audit</b>	
<p>This element describes the systems and the processes for ensuring the training organisation systems are functioning and are fit for use. This is accomplished primarily through the authorisation holder's internal audit processes and closes the loop on the entire training organisation system.</p>	
<b>Prompts:</b>	
Training	Examinations
Analysis of training	Analysis of examinations
Remedial action	Accountable manager annual review

#### 3.1 Health Check

Health Check mandatory elements are current for a financial year and are reviewed and updated by the Safety Systems Office (SSO) each year for the following year. Details of the current mandatory elements for each authorisation type are published separately to the CASA website.

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It is recognised that assessing all types of authorisation holders against all systems, elements and system risks would require an extended amount of time and resources. In order to more accurately target those authorisations holders requiring attention, a limited scope systems and risk assessment Health Check approach has been adopted.

The objective of a Health Check is to assess selected elements and system risks associated with areas that over time have demonstrated significant non-compliance and/or poor safety risk mitigation across a specific aviation sector. Compliance and assessment of system risk mitigation is required to be achieved during a Level 1 Health Check.

The results of Level 1 Health Checks drive consideration of what, if any, additional surveillance an authorisation holder requires. Good Health Check results will likely mean the overall compliance and safety management of the authorisation holder is being well controlled. Poor results will likely drive the requirement for additional surveillance in the form of a Level 1 systems audit and/or a Level 2 Operational Check.

The SSO, in consultation with the oversighting Division, is responsible for deciding on an annual basis the system elements and system risks to be addressed when conducting a Level 1 Health Check. The SSO will draw on existing risk and compliance data obtained over the previous periods in deciding what system elements and risks are to be targeted.

In order to provide a satisfactory indication of an authorisation holder's health the SSO will decide on not more than four mandatory elements to be targeted during the coming surveillance (financial) year as part of a Level 1 Health Check. The system elements to be targeted are nominated by the SSO in consultation with the technical discipline. Additional elements and risks can be added to a Health Check if capacity and resources allow. However, any additional elements or risks cannot replace those mandated.

Because of the time constraints placed on Health Checks, the scope of a Health Check should cover no more than four systems risks across the mandated elements. The decision on which four systems risks are to be assessed is at the discretion of the authorisation management team as this may differ between authorisation holders depending on the activities carried out by the authorisation holder.

Resources allocated to Health Checks are to be determined on a case by case basis by the relevant authorisation holder management team and may consist of a multi-discipline surveillance team or a single inspector, as applicable.

<b>Preparation:</b>	Half day
<b>On site:</b>	1 full day
<b>Surveillance write-up and documentation:</b>	1 full day

**4. Surveillance Currency Guide: Training Organisations (Excluding Flying Training)**

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

**4. Surveillance Currency Guide: Training Organisations (Excluding Flying Training)**

Surveillance level	Type	Elements
Level 1	Systems Audit	Systems, Risks and Compliance
	Health Check	Specific Elements, Risks and Compliance
	Post-authorisation Review	Entry Control Elements
Level 2	Operational Check	E.g. Review of RPL assessment, Review of Journal assessment

Training Organisations (Excluding Flying Training)		
Type of operation	Level of surveillance	Recommended frequency
Category Training Organisation	Level 1 – Systems Audit	1 per year
	Level 1 – Health Check	2 per year
	Level 1 – Post Authorisation Review	6 months after approval or significant extension to scope
Type Training Organisation	Level 1 – Systems Audit	1 per year
	Level 1 – Health Check	Domestic – 1 per year Overseas – 1 per 2 years
	Level 2 – Operational Check	Domestic – 1 per 2 years Overseas – 1 per 3 years

**NOTE:** The Surveillance Currency Guide above provides guidance to assist in the decisions made during the ‘Conduct assessment’ stage described in Section 4.2.5 of the CSM.

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## 5. Information Sources

The following is a non-exhaustive list of information sources that could be accessed to support the assessment of an authorisation holder:

- past Sky Sentinel risk reports
- surveys
- regulatory history, findings (NCNs, Observations and risk history)
- past Surveillance Reports and findings (NCNs and Observations)
- routine interaction with the organisation
- AIRS Information
- Service Difficulty Reports (SDRs)
- Regulatory Service activity
- information gathered by the non-AOC authorisation holder
- external information gathered from industry or other government agencies
- Enforcement action
- risk management plans provided by the authorisation holder.

**Note:** For advice on where and how to access required information refer to Chapter 5 – Information Capture and Access.



## 1. Specific Guidelines: UAV Operator Certificate Holders

### 1.1 Overview

This Annex provides guidelines for conducting surveillance of CASR 101.270 Unmanned Aerial Vehicle Operator Certificates. It contains information relating to the following:

- Authorisation Holder Performance Indicator
- Systems and Elements
- Systems and Elements – Health Checks
- Surveillance Currency Guide
- Information Sources.

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### 2. Authorisation Holder Performance Indicator: UAV Operator Certificate Holders

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

### 2. Authorisation Holder Performance Indicator: UAV Operator Certificate Holders

Authorisation Holder Category	<b>Factor</b>	<b>Aircraft Size</b>
	<b>Prompt</b>	Score according to the authorisation holder's largest aircraft.
	<b>Score</b>	<b>Word Picture</b>
	1	< 10 pax or < 1133 kg payload
	2	10-19 pax or 1133-2153 kg payload
	3	20-30 pax or 2153-3400 kg payload
	4	>30 pax or > 3400 kg payload
	<b>Factor</b>	<b>Type of Operations</b>
	<b>Prompt</b>	Score according to the type of operation being performed.
	<b>Score</b>	<b>Word Picture</b>
2	Small Charter Operations	



**NOTE:** Because of the nature of this authorisation type the score for the Type of Operations factor defaults to a consistent score.

Organisational Factors	<b>Factor</b>	<b>Senior Officers' Skills &amp; Attitudes</b>
	<b>Prompt</b>	Score according to the skills and attitudes of those persons responsible for the management of the authorisation holder.
	<b>Score</b>	<b>Word Picture</b>
	1	Senior officers are highly effective in their jobs and have cultivated a strong safety culture with positive attitudes to regulatory compliance and safety.
	2	Senior officers are either highly effective with an accepting attitude towards regulatory compliance and safety or competent with a positive attitude towards regulatory compliance and safety.
	3	Most senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
	4	Few senior officers are competent in their jobs or have an accepting attitude towards regulatory compliance and safety.
5	Senior officers are apparently incapable of performing their jobs or have a poor attitude towards regulatory compliance and safety.	

### 2. Authorisation Holder Performance Indicator: UAV Operator Certificate Holders

Approved by the Deputy Director of Aviation Safety Version 2.2: February 2014

Organisational Factors	Factor	Maturity/Stability
	Prompt	Score according to the authorisation holder's internal maturity and stability, including knowledge of the environment
	Score	Word Picture
1	Industry participant (with >5 year operating history) with few or minor changes to operation, controlled growth/decline, low management and staff turnover, no financial issues, no political issues and no industrial relations concerns.	
2	Relatively new industry participant (with <5 years' operating history), <b>OR</b> longer term participant experiencing 1 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns or</li> <li>• industrial relations tensions.</li> </ul>	
3	New entrant (i.e. no surveillance history) <b>OR</b> industry participant experiencing 2 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/takeover activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>	
4	Industry participant experiencing 3 of the following issues: <ul style="list-style-type: none"> <li>• changes to operation</li> <li>• excessive growth</li> <li>• political issues</li> <li>• merger/take-over activity</li> <li>• management and staff turnover</li> <li>• financial concerns</li> <li>• industrial relations tensions.</li> </ul>	
5	Industry participant with 4 or more wide-ranging issues including: <ul style="list-style-type: none"> <li>• significant changes to operations</li> <li>• excessive growth/decline</li> <li>• political issues</li> <li>• recent merger/take-over</li> <li>• high management and staff turnover</li> <li>• significant funding/supplier issues</li> <li>• current/imminent industrial action.</li> </ul>	

### 2. Authorisation Holder Performance Indicator: UAV Operator Certificate Holders

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Organisational Factors	Factor	Control
	Prompt	<i>Score according to the level of control the authorisation holder has over its functions, resources and personnel</i>
	Score	Word Picture
1	Tight control with majority of organisational functions contained within the organisation and all supplier/3rd party authorisation holders considered low-risk.	
2	Few and/or minor aspects of the organisation's operations are outsourced or leased with most supplier/3rd party authorisation holders considered low-risk.	
3	Several aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium risk.	
4	Many and/or major aspects of the organisation's operations outsourced or leased and/or some suppliers/3rd party authorisation holders considered medium to high risk.	
5	Majority of organisational functions outsourced, and resources, facilities and equipment leased, with many supplier/3rd party authorisation holders considered high-risk organisations.	

Management Factors	Factor	Documents & Procedures
	Prompt	<i>Score according to the authorisation holder's documentation of and adherence to procedures</i>
	Score	Word Picture
1	Well-designed, structured and effective documentation with procedures applied consistently.	
2	Documentation exists and procedures are followed with only minor, irregular deviations.	
3	Documentation exists but deviations from procedures are common although in practice these deviations address inadequacies in procedures.	
4	Documentation exists but deviations from procedures are the norm and may or may not address inadequacies in procedures or safety hazards.	
5	Little or no documentation exists or where it exists, it is ineffective and/or actively ignored with a range of procedures in place, most with little or no effectiveness against real safety hazards present.	

Management Factors	Factor	<b><i>Safety-related Decision Making</i></b>
	Prompt	<i>Score according to the authorisation holder's decision making process</i>
	Score	Word Picture
1	Systematic, transparent and data-driven process incorporating effective consultation, thorough analysis and consideration of both regulatory compliance and safety outcomes.	
2	Defined process (incorporating good characteristics) but not implemented completely with results focussed on compliance but with limited consideration of safety outcomes.	
3	No defined process but decisions made effectively although focussed on minimum compliance only.	
4	No defined process and decisions made fail to achieve minimum compliance or effective safety outcomes.	
5	No defined process and decisions made by individuals with no consultation or analysis and no clear link to regulatory compliance or safety outcomes.	

Management Factors	Factor	<b><i>Safety Assurance</i></b>
	Prompt	<i>Score according to the authorisation holder's assurance activities</i>
	Score	Word Picture
1	Proactive and reactive processes (including internal audits and investigations etc) exist and are tied to safety outcomes and regulatory compliance.	
2	Proactive and reactive processes exist and are tied to safety outcomes or regulatory compliance but not completely implemented.	
3	Reactive processes exist but are not completely implemented or tied to safety outcomes or regulatory compliance.	
4	Reactive assurance activities (eg ad hoc investigations) are carried out but with little connection to regulatory compliance or safety outcomes.	
5	No assurance practices exist.	

Management Factors	Factor	<b><i>Training</i></b>
	Prompt	<i>Score according to the authorisation holder's management of training</i>
	Score	Word Picture
1	The competence (including technical and non-technical skills) of all personnel is actively managed through established processes including planning and assurance.	
2	Staff complete a planned training regime designed to meet regulatory requirements however competence is not confirmed.	
3	Staff complete training in accordance with basic regulatory requirements without any system designed to manage the process.	
4	Staff complete training but it is unplanned and inconsistent with competence unconfirmed.	
5	Significant portions of the organisation are untrained and/or incompetent with no processes in place to manage the training of personnel.	

### 2. Authorisation Holder Performance Indicator: UAV Operator Certificate Holders

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Management Factors	Factor	Communication
	Prompt	Score according to the authorisation holder's management of communication
	Score	Word Picture
	1	Communication throughout the organisation is clear, consistent and effective.
	2	Communication is mostly effective with the basic message getting through to the majority of the organisation.
	3	Communication is partially effective although some messages fail to reach all parts of the organisation.
	4	Communication systems are basic and ineffective with wide-spread failures in messages reaching all parts of the organisation.
5	Communication is non-existent or completely ineffective with messages failing to reach the whole of the organisation and/or conflicting messages reaching parts of the organisation.	

Operational/Environmental Factors	Factor	Complexity
	Prompt	Score according to the level of complexity within the authorisation holder's operation and how they cope. (Complexity relates to factors such as multiple aircraft types, multiple aerial work activities, and/or multiple certificates.)
	Score	Word Picture
	1	Simple operation with no issues relating to complexity.
	2	Some complex aspects exist within the operation but systems and personnel work together to manage issues as they emerge.
	3	Complex operation but the systems and personnel work together to manage most issues which emerge.
	4	Complex operation but the systems and personnel are inadequate to address issues as they emerge.
5	Significantly complex operation with systems and personnel which do not manage issues which emerge.	

### 2. Authorisation Holder Performance Indicator: UAV Operator Certificate Holders

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Operational/Environmental Factors	<b>Factor</b>	<b><i>Facilities, Resources, Equipment &amp; Data</i></b>
	<b>Prompt</b>	<i>Score according to the quality, suitability, availability and currency of the authorisation holder's facilities, resources, equipment and data.</i>
	<b>Score</b>	<b>Word Picture</b>
	1	All are well-above minimum standards, with ample availability, are well-maintained and available for all parts of the organisation.
	2	All meet minimum standards, with generally available although may be limited at peak times, are adequately maintained and available for all parts of the organisation.
	3	1 of the following exists: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities &amp; equipment</li> <li>• limited availability across the organisation.</li> </ul>
	4	2 of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities &amp; equipment</li> <li>• limited availability across the organisation.</li> </ul>
5	3 or more of the following exist: <ul style="list-style-type: none"> <li>• below minimum standards</li> <li>• availability at peak times is limited</li> <li>• poor maintenance of facilities &amp; equipment</li> <li>• limited availability across the organisation.</li> </ul>	

Operational/Environmental Factors	<b>Factor</b>	<b><i>Operating Environment</i></b>
	<b>Prompt</b>	<i>Score according to the authorisation holder's operating environment and how they cope in this environment. (Operating environment issues include multiple bases, limited local support, extremes in rain, wind or temperature, and terrain concerns (high mountains, over-water operations etc.)</i>
	<b>Score</b>	<b>Word Picture</b>
	1	Uncomplicated operating environment with systems suitable to the environment in place.
	2	Some aspects of the operating environment are more complicated but systems and personnel work together to manage issues as they emerge.
	3	Relatively stable operating environment but the systems and personnel work together to manage most issues which emerge.
	4	Relatively stable operating environment but the systems and personnel are not quite suitable to address issues as they emerge.
5	Difficult operating environment with systems and personnel ill-suited to manage operations as issues emerge.	

### 2. Authorisation Holder Performance Indicator: UAV Operator Certificate Holders

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Safety Outcomes	Factor	<b>Regulatory History</b>
	Prompt	<i>Score according to the authorisation holder's history with regulatory actions (both administrative and enforcement)</i>
	Score	Word Picture
1	Nil or minor NCNs issued and all acquitted expeditiously, and no enforcement action within the last 3 years.	
2	A few NCNs issued but all acquitted expeditiously, or resolved enforcement action within the last 3 years.	
3	Multiple NCNs issued and mostly acquitted without issue, or minor enforcement action carried out on outstanding issues.	
4	Multiple NCNs issued but acquittal problematic, or moderate enforcement action carried out on outstanding issues.	
5	Multiple and recurring NCNs issued and rarely acquitted without issues or significant enforcement action underway or still in force.	

Safety Outcomes	Factor	<b>Safety Occurrences</b>
	Prompt	<i>Score according to the authorisation holder's recent accident, incident and undesired safety-related event history as it relates to aviation safety</i>
	Score	Word Picture
1	No record of involvement or implication in any safety occurrences within the last 3 years.	
2	No record of involvement or implication in any accident or serious incident but has experienced minor safety-related events within the last 3 years.	
3	Involvement or implication in one serious incident or a significant number of minor incidents within the last 3 years.	
4	Involvement or implication in one accident <b>or</b> multiple serious incidents within the last 3 years.	
5	Involvement or implication in multiple accidents and serious incidents within the last 3 years.	

Safety Outcomes	Factor	<b>Other Safety Issues</b>
	Prompt	<i>Score according to the presence of any other safety issues (not involving a regulatory breach) raised through CASA activities and external parties</i>
	Score	Word Picture
1	Nil issues observed during surveillance or other CASA activity and nil reports of safety concerns from third parties.	
2	Few issues observed during surveillance or other CASA activity, or safety reports received from third parties.	
3	Multiple minor issues or concerns observed during surveillance or other CASA activity or significant reports of safety concerns from third parties.	
4	Multiple issues or concerns observed during surveillance or other CASA activity.	
5	Significant issues or concerns observed during surveillance or other CASA activity.	



### 3. Systems & Elements: UAV Operator Certificate Holders

The CASA description of an Unmanned Aerial Vehicle (UAV) Operator Certificate consists of six systems incorporating 17 elements and a number of system risks associated with each element. | D

The audit technique involves assessing the documented system, comparing it against the actual system processes and assessing the level of system risk mitigation exercised by the authorisation holder against the generic CASA standard system risks. The system is assessed for compliance and sampling conducted as appropriate. The assessment of the system and its risks is achieved by a questioning technique using the four attributes (12 components) of the Management System Model. | D

Systems	Elements
Remotely Piloted Aircraft	Maintenance System
	Works Control
	Airworthiness Assurance
Operational Personnel	Scheduling
	Operational Standards
Flight Operations	UOC Operations
	Flight System
	Operations Area
Command, Control & Communications	Maintenance System
	Works Control
	Technical Assurance
Remote Pilot Aircraft	Maintenance System
	Works Control
	Technical Assurance
Support Systems	Data & Documents
	Role Equipment
	Ground Support

<b>SYSTEM: Remotely Piloted Aircraft</b>	
<b>ELEMENT: Maintenance System</b>	
This element contains the systems and processes for identifying “what” maintenance activities are required to be done as well as “when” the maintenance activities are to be completed.	
<b>Prompts:</b>	
Receivers	Transmitters
Electrics/looming	Battery/batteries
GPS	Autopilot
Motors/Engines	Propellers
Airframe	Configuration control
Landing gear	Launch components
Recovery equipment	Servos
Wings and winglets	Empennage
Speed Controller	Compass
<b>ELEMENT: Works Control</b>	
This element contains the systems and processes for achieving the “how” maintenance activities are conducted and “who” completes the maintenance activities.	
<b>Prompts:</b>	
Battery servicing manual	Maintenance controller
Motor/engine servicing	Maintainer
Maintenance schedule	Remote pilot
Maintenance manual	Maintenance release
Flight manual	Defect recording
Refuelling/Charging procedures and records	Recording un-serviceabilities
<b>ELEMENT: Airworthiness Assurance</b>	
This element contains the systems and processes for ensuring the aircraft is airworthy and fit for service. This is accomplished primarily through the authorisation holder’s internal audit processes and closes the loop on the entire maintenance system.	
<b>Prompts:</b>	
Internal audit	Defect recording cleared
Flight Release	Reliability recording
Configuration Control	Specifications
Schedules	Parts replacement tracking

<b>SYSTEM: Operational Personnel</b>	
<b>ELEMENT: Scheduling</b>	
This element plays a significant role in achieving safe operations for it is through crew scheduling that the authorisation holder ensures that controllers and support crew have appropriate qualifications, certification, operate in accordance with legislative requirements and have appropriate recency (as applicable) in order to safely conduct the planned task from the start of the duty period until completion.	
<b>Prompts:</b>	
Fatigue	Medical
Certification	Qualifications
Ratings	Currency/Recency requirements
Flight and duty records	Pilot qualification records
Flight and duty limitations	Induction requirements
Rostering	Experience requirements
DAMP	Professional development
Continuation training	Recording cycles/events
<b>ELEMENT: Operational Standards</b>	
Operational Standards are a vital element of the UAV system required to maintain safe operations through the establishment of an appropriate set of systems (includes an appropriate organisational structure) to accommodate induction, check to operations, upgrade training (where applicable) and a system for dealing with unacceptable performance.	
<b>Prompts:</b>	
Chief remote pilot	Maintenance controller
Ground operations staff	Remote pilots
Induction syllabus	Type conversion syllabus
Remote pilot in command upgrades	RPA observer syllabus
Personnel records	Unsatisfactory performance reporting
DAMP education and testing	

<b>SYSTEM: Flight Operations</b>	
<b>ELEMENT: UOC Operations</b>	
<p>The UAV Operating Certificate (UOC) Operations element addresses the systems that ensure the authorisation holder contains its operations to those authorised by legislation. This is primarily achieved through the use of a properly structured organisation with appropriate communication channels. Appropriate Key Personnel is a key link in ensuring OC operations are not only contained but are appropriately controlled. Examples include the Chief Remote Pilot and, when applicable, the Chief RPAS Instructor, Maintenance Controller, RPA Observer and Safety Officer.</p>	
<b>Prompts:</b>	
Chief remote pilot	Maintenance controller
Chief RPAS instructor	RPA observer
CASA approval/co-ordination	UOC conditions
Compliance to applicable regulations	Conformance to company policies and procedures
Area approval	Accident/Incident reporting
AIP	Operations manual
Flight manual	Maintenance manual
Advisory circulars	Copies of instruments
Remote PIC responsibilities	
<b>ELEMENT: Flight System</b>	
<p>This element contains the authorisation holder's systems and processes for the safe conduct of the flight phase of operations. Much of this information, procedures and instructions are contained in the operations manual. This is not a limiting factor and other areas of operations may or may not require consideration.</p>	
<b>Prompts:</b>	
Pre-flight procedures	Beyond visual range operations
Pre-flight brief	Visual line of sight operations
RPA weight and CG control	Weather and daylight limitations
Flight endurance	Post-flight procedures
Operations manual	Crew briefing
Specific procedures for operations area	Safety measures
Dangerous goods	Flight authorisation
<b>ELEMENT: Operations Area</b>	
<p>This element contains the systems and processes that allow an authorisation holder to use, as applicable, but not be limited to the provisions of beyond visual range navigation and visual line of sight operations.</p>	
<b>Prompts:</b>	
Visual line of sight	Transition procedures
Beyond visual range navigation	Area approval
Air traffic management	Risk assessment
RPAS observer briefing	Aerodrome specifications/procedures

<b>UOC SYSTEM: Command, Control &amp; Communications</b>	
<b>ELEMENT: Maintenance System</b>	
This element contains the systems and processes for identifying “what” maintenance activities are required to be done as well as “when” the maintenance activities are to be completed.	
<b>Prompts:</b>	
Receivers	Transmitters
Batteries/Power	Computers
Manual control panel	Frequency selection/allocation
<b>ELEMENT: Works Control</b>	
This element contains the systems and processes for achieving the “how” maintenance activities are conducted and “who” completes the maintenance activities.	
<b>Prompts:</b>	
Battery servicing manual	Maintenance Controller
Transmitter/Receiver servicing	Maintainer
Maintenance schedule	Remote Pilot
Maintenance manual	Maintenance release
Flight manual	Defect recording
<b>ELEMENT: Technical Assurance</b>	
This element contains the systems and processes for identifying “what” maintenance activities are required to be done as well as “when” the maintenance activities are to be completed.	
<b>Prompts:</b>	
Internal audit	Defect recording cleared
Technical Release	Reliability recording
Configuration Control	Specifications
Schedules	Parts replacement tracking

<b>SYSTEM: Remote Pilot Aircraft</b>	
<b>ELEMENT: Maintenance System</b>	
This element contains the systems and processes for identifying “what” maintenance activities are required to be done as well as “when” the maintenance activities are to be completed.	
<b>Prompts:</b>	
Manual control panel	Computers
Air conditioning	Displays
Furnishings	Keyboard(s)
Back-up power	Power source
Controls	

<b>SYSTEM: Remote Pilot Aircraft (Continued)</b>	
<b>ELEMENT: Works Control</b>	
This element contains the systems and processes for achieving the “how” maintenance activities are conducted and “who” completes the maintenance activities.	
<b>Prompts:</b>	
Power servicing	Maintenance controller
Controls servicing	Maintainer
Maintenance schedule	Remote pilot
Maintenance manual	Maintenance release
Flight manual	Defect recording
<b>ELEMENT: Technical Assurance</b>	
This element contains the systems and processes for identifying “what” maintenance activities are required to be done as well as “when” the maintenance activities are to be completed.	
<b>Prompts:</b>	
Internal audit	Defect recording cleared
Technical release	Reliability recording
Configuration control	Specifications
Schedules	Parts replacement tracking

<b>SYSTEM: Support Systems</b>	
<b>ELEMENT: Data &amp; Documents</b>	
This element contains the authorisation holder’s systems and processes that addresses technical data, design drawings, regulatory documentation, and quality/procedures manuals used in the course of carrying out aircraft operations.	
<b>Prompts:</b>	
Co-ordination/authorisation with CASA	Noise abatement
Regulatory/operational Library access	Aeronautical information publication
Maps and charts	Airspace structure
Register of local operators	Flight planning and notification
Weather services	DAMP documentation

<b>SYSTEM: Support Systems (Continued)</b>	
<b>ELEMENT: Role Equipment</b>	
This element contains the authorisation holder's systems and processes that address the specialised role equipment required for the safe operation of the task. This includes considerations of other specialised equipment required for the task such as launch equipment, recovery equipment and radios; and their respective maintenance requirements.	
<b>Prompts:</b>	
Launch system	Radio communications – fixed
Recovery system	Radio communications – hand-held
Maintenance manuals	
<b>ELEMENT: Ground Support</b>	
This element contains the authorisation holder's systems and processes that address the support systems necessary to ensure the flight phase is enabled and includes such items as ground vehicles, generators and transit equipment; and their respective maintenance requirements.	
<b>Prompts:</b>	
Base stations	Power/Generators
Transit cases	Specialised vehicles, including trailers
Maintenance processes for ground support equipment	Company policies and procedures
Logistics – spares	Maintenance manuals

#### 3.1 Health Check

Health Check mandatory elements are current for a financial year and are reviewed and updated by the Safety Systems Office (SSO) each year for the following year. Details of the current mandatory elements for each authorisation type are published separately to the CASA website.

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It is recognised that assessing all types of authorisation holders against all systems, elements and system risks would require an extended amount of time and resources. In order to more accurately target those authorisations holders requiring attention, a limited scope systems and risk assessment Health Check approach has been adopted.

The objective of a Health Check is to assess selected elements and system risks associated with areas that over time have demonstrated significant non-compliance and/or poor safety risk mitigation across a specific aviation sector. Compliance and assessment of system risk mitigation is required to be achieved during a Level 1 Health Check.

The results of Level 1 Health Checks drive consideration of what, if any, additional surveillance an authorisation holder requires. Good Health Check results will likely mean the overall compliance and safety management of the authorisation holder is being well controlled. Poor results will likely drive the requirement for additional surveillance in the form of a Level 1 systems audit and/or a Level 2 Operational Check.

The SSO, in consultation with the oversighting Division, is responsible for deciding on an annual basis the system elements and system risks to be addressed when conducting a Level 1 Health Check. The SSO will draw on existing risk and compliance data obtained over the previous periods in deciding what system elements and risks are to be targeted.

In order to provide a satisfactory indication of an authorisation holder's health the SSO will decide on not more than four mandatory elements to be targeted during the coming surveillance (financial) year as part of a Level 1 Health Check. The system elements to be targeted are nominated by the SSO in consultation with the technical discipline. Additional elements and risks can be added to a Health Check if capacity and resources allow. However, any additional elements or risks cannot replace those mandated.

Because of the time constraints placed on Health Checks, the scope of a Health Check should cover no more than four systems risks across the mandated elements. The decision on which four systems risks are to be assessed is at the discretion of the authorisation management team as this may differ between authorisation holders depending on the activities carried out by the authorisation holder.

Resources allocated to Health Checks are to be determined on a case by case basis by the relevant authorisation holder management team and may consist of a multi-discipline surveillance team or a single inspector, as applicable.

<b>Preparation:</b>	Half day
<b>On site:</b>	1 full day
<b>Surveillance write-up and documentation:</b>	1 full day



**4. Surveillance Currency Guide: UAV Operator Certificate Holders**

Surveillance level	Type	Elements
Level 1	Systems Audit	Systems, Risks and Compliance
	Health Check	Specific Elements, Risks and Compliance
	Post-authorisation Review	Entry Control Elements
Level 2	Operational Check	E.g. Flight Deck Observation, Ramp check

UAV Operator Certificate		
Type of operation	Level of surveillance	Recommended frequency
Aerial Work	Level 1 – Systems Audit	1 per 3 years
	Level 1 – Health Check	1 per year
	Level 1 – Post-authorisation review	Once only – between 6-9 months of initial UOC issue
	Level 2 – Operational check	1 per year

**NOTE:** The Surveillance Currency Guide above provides guidance to assist in the decisions made during the ‘Conduct assessment’ stage described in Section 4.2.5 of the CSM.

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## 5. Information Sources

The following is a non-exhaustive list of information sources that can be accessed to support the assessment:

- past Sky Sentinel risk reports
- surveys
- regulatory history, findings (NCNs, Observations and risk history)
- past Surveillance Reports and findings (NCNs and Observations)
- AIRS information
- UOC conditions
- area approvals
- letters of approval for Chief Remote Pilots and Maintenance Controllers
- Regulatory Service activity
- information gathered by the authorisation holder
- external information gathered from industry or other government agencies
- Enforcement action
- past accident/incident history
- risk management plans provided by the authorisation holder.

A large portion of this information is available to the surveillance team and authorisation management team via the Data Warehouse using the Business Objects application.

**Note:** For advice on where and how to access required information refer to Chapter 5 – Information Capture and Access.