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| OPERATIONS ADVISORY NOTICE (OAN) | |  Transport Malta Civil Aviation Directorate Flight Operations Inspectorate Transport Malta Malta Transport Centre Pantar Road Lija LJA 2021 Malta |
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| Subject: Root Cause Analysis | | |

1.0 Introduction

As part of the audit follow-up process, and in accordance with ORO.GEN.150 (a), operators are required to carry out a root cause analysis in order to identify the primary cause for the non-compliance. It is often noted that the replies received are not satisfactory, as they do not address the basic requirements behind root cause analysis, i.e. to prevent as far as reasonably possible the non conformance from re-occurring again. So it follows that, if the root cause has not been correctly identified, then the corrective action plan (CAP) cannot be accepted, and most likely will be rejected. In order to avoid unnecessary delays to the corrective action we recommend that operators take time to review and understand correctly the root cause analysis process.

2.0 Scope

When non-compliances are detected and findings raised, the most common response is to rush to find a solution. Finding an immediate fix for the problem is very satisfying no matter how many times this process occurs. However this might not be the best solution, as it may lead to the same problem re-occurring over and over again. A better approach is to find and eliminate the root cause. A simple technique could be as follows:

- Step 1: Start by defining the problem by simply asking what we want to prevent from re-occurring.
- Step 2: Then collect evidence that proves the problem does exist and what has been its impact.
- Step 3: Identify the sequence of events that lead to the problem. The 5 WHYS technique is a simple but effective way of doing this. By repeatedly asking the question “Why”, (five times is a good rule of thumb), you can peel away the layers of the symptoms which can eventually lead to the root cause of a problem.
- Step 4: Once you think you have defined the real reason why the problem occurred, i.e. the root cause, ask yourself if corrected, would this prevent a recurrence?
- Step 5: If so, then examine the problem in sufficient detail to be able to identify an effective solution.

3.0 Recommendation

Experience gained by working with several operators has repeatedly shown that unwanted situations within organizations are mostly caused by Organisation, Human, Technical or Environmental issues. Yet, most operators are very often quick to point out the effect rather than the cause, which can lead to unnecessary time being wasted by rejected proposals and requests for re-submissions. The corrective action plan must include a method to prevent the re-occurrence, usually through the internal compliance system. The Flight Operations Inspectorate requires the operators to submit a RCA and sub-sequent CAP within 2 weeks of date of finding.

It is hoped that by creating awareness and an understanding of proper root cause analysis, operators can make statements that the team can take action upon, and thereby convince the regulator that a real strategy is being implemented to address the origin of the problem and eventually help close the finding. It is recommended that the root cause analysis is conducted in line with this OAN.

6.0 Example

This illustrates a simple case scenario and is not related to any past, existing scenarios.

A non-conformance was raised by the authority for a failure to update the operations manual in accordance with new information provided in addendums to the ICAO Technical Instructions For The Safe Transport of Dangerous Goods By Air.

To determine why this occurred you will need to discuss the non-conformance with the responsible person/personnel. The 5 Why's technique is the most simple and effective approach:

1. Why was the manual not updated?

Answer: We do not have a subscription for the amendments.

2. Why don't we have a subscription?

Answer: It wasn't approved in the budget for the last quarter.

3. Why wasn't it in the budget?

Answer: It wasn't in the budget as the responsible person advised that he would check for amendments through the website each month to save money.

4. Why was this process not followed through?

Answer: It was not documented so it was missed.

5. Why was it not documented?

Answer: There is no process to document such verbal agreements.

Conclusion: A new process was discussed at an SRB meeting and agreed upon however, the action item to follow through with this change was never documented in the minutes. Corrective Action Plan:

1. Check the tools in use for taking minutes/documenting actions required during meetings.
2. Amend OM to include the new process by set date.
3. Check that the internal compliance monitoring system includes monitoring for DG amendments.
4. Schedule check in monthly programme.

There are more questions which could be asked for the above scenario.

CORRECTIVE ACTION PLAN

The flight operations inspectorate grants the organisations a corrective action implementation period that is commensurate with the nature of the finding. This implementation period may be extended in agreement with the inspectorate. This plan shall also be time-bound, and the implementation of the plan shall be completed within the time frame granted by the inspectorate upon issuance of the finding.

This process is aligned with the provisions of ARO.GEN.350.

RESPONSIBILITIES Although the flight operations inspectorate channels all audit findings through the compliance monitoring system, this does NOT imply that the compliance monitoring manager is responsible to action the finding.

It is expected that the required RCA, and CAP are agreed upon by the responsible nominated persons.

The Accountable Managers have been granted access to Centrik, and are expected to be informed of the outcomes, submissions and subsequent actions as well.

Flight Operations Inspectorate