


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: Guidance on Compliance Monitoring Functions		

1. INTRODUCTION

The purpose of this advisory notice is to provide clear guidelines and highlight implementation issues that have been raised through oversight audits conducted by the flight operations inspectorate and EASA standardisation visits.

2. COMPLIANCE MONITORING FUNCTION

The compliance monitoring function is a key component of an effective management system. While the requirements set out in ORO.GEN.200 (a) (6) and applicable AMC/GM, the inspectorate has found several similar systemic issues. Other common weaknesses or non-compliance issues need to be detected through the internal compliance monitoring system.

3. KEY EXPECTATIONS

The flight operations inspectorate expects the compliance monitoring system to effectively detect non-compliances during internal audits and also before submitting any applications to vary or amend the terms and privileges of the operator.

This section will detail key aspects and expectations that will be checked during routine audits.

3.1 Audit Plan / Scope

GM2 ORO.GEN.200 (a)(6) provides a list of areas that are expected to be included in the audit plan. Although there is no specific requirement for the audit plan to be approved or endorsed by the Accountable Manager (ACM), it is expected that at least a signed copy attesting approval is kept within the system.

The approval of the audit plan is a declaration by the ACM that adequate resources and time will be made available to fulfil the audit plan.

The audit plan shall clearly include how the elements/ areas are covered. It is not expected that specific areas are covered in more than one audit. The audit plan shall cover all areas within a yearly cycle (normally starting at the month of certification).

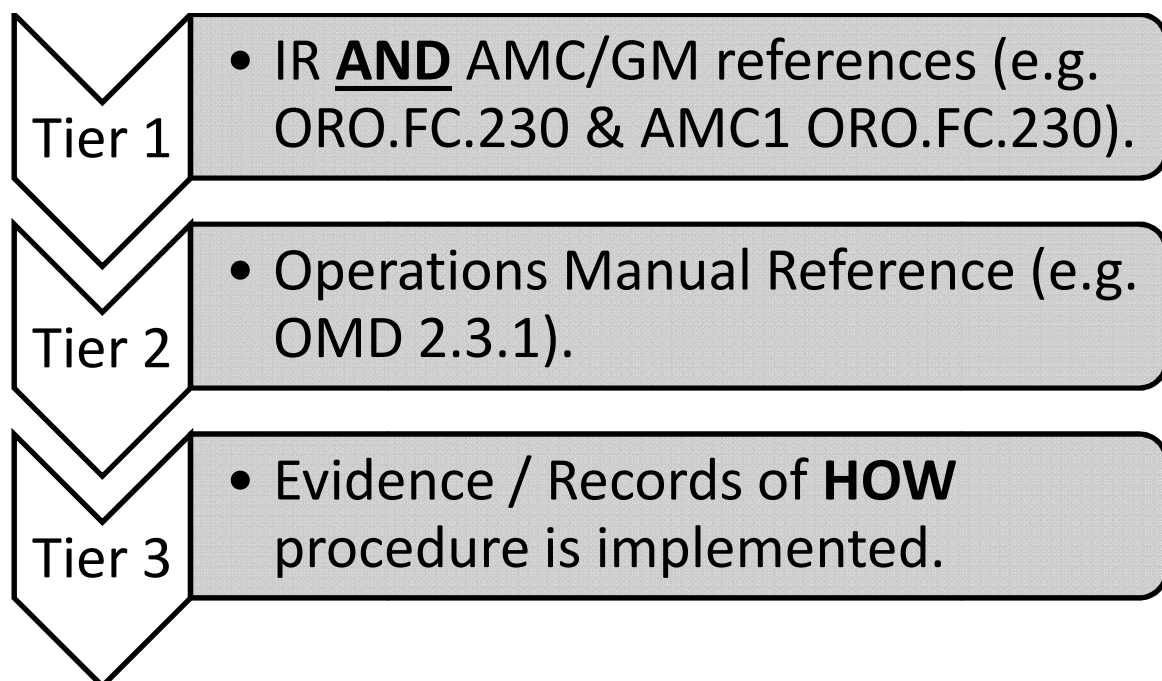
3.1.1 Adherence to Audit Plan

Adherence to the audit plan shows an effective and efficient system. However extraordinary factors could contribute to a non-adherence to the approved plan. In such cases, any such delays shall be justified and approved by the ACM. This shall be done through a documented procedure in the compliance monitoring manual.

It is expected that the delayed audit is completed within the yearly cycle.

3.2 Design of Checklists

The requirements do not prescribe any specific format or tools used to conduct the audits. It is however expected that the checklists used include a 3-tier system as shown the below –



3.3 Documentation

The operator shall ensure that the documentation requirements are fulfilled. AMC1 ORO.GEN.200(a)(6) (d) outlines the requirements of the compliance monitoring documentation.

It is expected that such documentation shows how the operator procedures are implemented. The checklists may be included as an appendix in the operations manual or as an external document for which reference to is made in the operations manual. If you choose to include it as an external document, then it still must be a controlled document.

3.4 Management System Audit / Independence

In the case the same person acts as compliance monitoring manager and as safety manager, the accountable manager, with regards to his/her direct accountability for safety, should ensure that sufficient resources are allocated to both functions, taking into account the size of the operator and the nature and complexity of its activities.¹

The independence of the compliance monitoring function should be established by ensuring that audits and inspections are carried out by personnel not responsible for the function, procedure or products being audited.

It is not expected that the compliance monitoring manager is qualified to audit all areas, thus the use of qualified auditors is acceptable. It is important that auditors are qualified in accordance with the requirements documented in the compliance monitoring manual.

3.5 Updates to regulations

The inspectorate will verify that the operator has a documented process to monitor regulatory updates, and that these are properly disseminated **and** implemented.

¹ AMC1 ORO.GEN.200(a)(6)(c)(5)

4.0 COMMON ISSUES

Compliance monitoring managers are required to ensure that the below identified issues are included in the monitoring activities. This list is a summary of main deficiencies found during routine oversight, documentary reviews and also EASA standardisation audits.

4.1 Operations Manual (OM)

- i. One of the most common errors concerns the practice that an operator simply copies the legal text and inserts the name of the company under “... *an operator shall...*” This does not comply with the legal requirement of defining the operator’s internal processes, as a result of which the corresponding text passages have to be returned for correction. You are required to document your company policy, procedure or process to show how you will comply with the regulations. These policies, procedures and processes must be proportionate to the size and scope of your operation.

In order to ensure that all operators receive the same information and are assessed on the basis of the same criteria, TM-CAD will publish an Operations Manual Content Checklist which will be required to be completed prior to every change or AOC variation.

- ii. Other content issues as detailed below –
 - The content of OMs contravened the conditions contained in the operations specifications to the air operator certificate (AOC) (e.g. Dangerous Goods carriage or LVO operations or PBN specifications or steep approach operations or landings training {base training following type rating} vs. OPSSPEC).
 - OM-A or operational procedures in the approved MEL referred to cabin crew, however, the operator did not have cabin crew.
 - The content referred to a non-existing license (EASA Dispatcher).
 - The content referred to outdated requirements (e.g. Regulations 2407/92, 1702/2003, EU-OPS, JARs or NAT-MNPS).
 - The content referred to aircraft which were not currently operated.
 - In two cases, the temperature correction tables were outdated.
 - In two cases, the carriage of a Medical or clinical thermometer, which contains mercury, was allowed “on one’s person” which is in contradiction with ICAO Doc 9284 (only in checked baggage).
 - In one case, provisions for the crewing of inexperienced crew members were not in compliance with AMC1 ORO.FC.200 (a).

- Contradicting provisions to conduct safety related duties of an In-flight Service Staff in OM-A 1.5.3.5 and 4.1.3.1 without being trained in accordance with ORO.CC.
- Incorrect and missing provisions for extended non-ETOPS operations.
- The approved MEL was not customised to the operator's operations (e.g. MMEL references, "as required by regulations", procedures not developed when required).
- Flight Duty and Rest Time Infraction Report preservation period of three months in contradiction with the required six months was included (OPS 1.1105).
- Flight, Duty and Rest Time records preservation period of 12 months from the last relevant entry instead of the required 15 months was included (OPS 1.1135).

4.2 Training Requirements

Oversight of training requirements is an area that reveals several compliance issues. Compliance managers are required to ensure the below areas are included in their compliance checks.

- i. Compliance monitoring audits on flight and cabin crew shall not only be conducted on documented procedures (e.g. training records). This is giving rise to a number of findings related to the content and adherence to the training programme.
- ii. CMM shall include a compliance verification check of all the training syllabi including those done through computer based techniques (CBT). CBT may be related to (but not limited) EFB, DG, Volcanic Ash, NAT-HLA, RVSM, Winter Operations, LVO, PBN and Aeroplane Systems).
- iii. Checks under (ii) shall ensure that these syllabi are to date with current legislation (e.g. SPA.RVSM, ICAO etc).
- iv. Oversight of simulator training shall not be limited to a desktop supplier audit. The CMM function shall ensure that the approved training programmes are adhered to and that the training setup is congruent **with the supplier's performance contract**. Compliance managers shall use the guidelines provided by OAN 04/18.
- v. A number of inspections have highlighted that some simulators have differences which were not include in the initial application for the FSTD user approval and that instructors are not always providing the required differences briefing prior to commencing the simulator session.
- vi. Any contracted TRE/I conducting the training/checking session shall be familiar with the procedures, terms and privileges of the operator in OMA and OMD.

- vii. Knowledge of the ground training (aircraft systems, operational procedures and requirements, including ground de-icing/anti-icing and pilot incapacitation; and accident/incident and occurrence review) should be verified by a questionnaire or other suitable methods. Internal compliance checks need to ensure that aircraft systems and accident/incident and occurrence review are verified by a questionnaire or other suitable method could not be provided during the audit.
- viii. CRM training conducted solely through CBT is not compliant and not acceptable under the regulations.

4.3 Flight Time Limitations (FTL)

Common issues with FTL oversight stem from poorly documented procedures and lack of internal procedures related to management and planning of FTL. The below guidelines are a result of past audit findings, and all CMM's are urged to include internal checks for the following;

- i. No documented procedures available to operational staff involved in crew scheduling to ensure that the combination of standby and FDP do not lead to more than 18hours awake time as required by CS FTL.1.225 and delayed reporting as required by ORO.FTL.205(g).
- ii. Positioning times for the purpose of duty/training are not accounted for in the FTL records;
- iii. No monitoring of Working Time Directive EC 88/2003 (2000 hours duty time/ calendar year) being conducted, nor monitoring as required by Council Directive EC 2013/59/EURATOM.
- iv. Duty time for pilots who hold a nominated personnel role or other role within the company in addition to flying duties not accounted for in the duty time records.
- v. Standby time is not accounted for or recorded in FTL duty records.
- vi. FTL audits do not account or check specific CAD parameters required by OSC 08/08.

4.4 Management System

Management system oversight resulted in 41% of total audit findings between September 2017 - August 2018. This is not an uncommon occurrence given operators needed to implement and align the safety management system requirements in 2014. Operators may use available tools in their assessments, namely SMICG tools & EASA assessment tool.

The below summary of key identified areas should serve as guidance to ensure these areas are included in the compliance oversight system.

- i. Safety Policy, not endorsed by Accountable Manager, not reviewed periodically or staff evidently not aware of the contents of such policy.
- ii. Safety Review Board (SRB) meetings not setup or process setup not in accordance with ORO.GEN.200 requirements.

- iii. SRB attendees do not include head of all functional areas.
- iv. Safety objectives not set, nor discussed at SRB.
- v. Neither safety performance indicators, nor safety objectives as part of the management system were established.
- vi. Hazard register does not demonstrate associated risk assessments, not demonstrate priority status level.
- vii. Top hazards could not be identified, or hazards stemming from SSP not assessed.
- viii. Emergency Response Plan (ERP) does not include mandatory elements required by EU 996/2010 and related articles.
- ix. Management of change process to identify whether changes have an impact on safety and to manage any identified risks in accordance with existing safety risk management processes not implemented.

4.5 Sub-contractor oversight

Oversight of the compliance monitoring function is showing a weak oversight of the operator's sub-contractors. Desktop audits will only serve a limited scope.

While the business models necessitate the use of a high number of ground handling suppliers, the compliance monitoring function should ensure that a representative number of contractor are audited.

It is expected that the operator devises a procedure to ensure a robust sub-contractor oversight plan.

5.0 ACTION BY OPERATORS

The responsible persons within the organisations' are expected to take into account these elements in their internal compliance system.

The flight operations inspectorate reserves the right to issue findings on the compliance monitoring system, should any deficiencies highlighted in this document are found during routine oversight and/or other inspections.

6.0 DOCUMENT CONTROL

This OAN will be updated in accordance with issues stemming from oversight exercises. It is the responsibility of the respective compliance monitoring managers to ensure use of the latest notice revision.

Flight Operations Inspectorate