



RWANDA

CIVIL AVIATION AUTHORITY

**ADVISORY CIRCULAR
RCAA-AC-GEN- ATS 006**

DEVELOPMENT OF CORRECTIVE ACTION PLANS

1.0 PURPOSE

- 1.1 This Advisory Circular provides service providers with guidance for the development of corrective action plans to be implemented in order to rectify findings generated during safety audits of air navigation services facilities, procedures and personnel.
- 1.2 Considering the diversity of personnel and organizations involved it is necessary to standardize the procedures and ensure that the corrective actions provided by the service providers are objective, measurable, and implementable and of timely significance taking into consideration the safety concerns addressed.

2.0 REFERENCES

- 2.1 Part 21- Aeronautical Telecommunication
- 2.2 Part 22- Air Traffic Services
- 2.3 Part 23- Instrument flight procedures
- 2.4 Part 24- Aeronautical Meteorological
- 2.5 Part 25- Aeronautical Information Service
- 2.6 Part 30- Safety Management
- 2.7 Part 31- Aeronautical Charts
- 2.8 Part 38- Units of Measurements
- 2.9 Part 40- Rules of the Air
- 2.10 Related Rwanda Technical Standards

3.0 GUIDANCE INFORMATION

3.1 Introduction

Safety audit is an in-depth review of the activities of an organization that is carried out to verify conformance to regulatory requirements. A non-conformance to a specified regulatory requirement or company approved procedure identified during an audit is referred to as a finding and is documented for action. The severity of audit findings may range from minor to significant (level1). Following each audit, the inspectors will make comprehensive reports and provide a summary of the audit findings.

Non compliances may also be identified from a variety of sources including specific operational event, internal assessments or investigation and observation during daily work performance. All these constitute findings and must be recorded and addressed as if they were identified during safety audits even if they do not warrant notification to the Authority.

For each finding generated during the safety audit, the accountable manager shall develop a corrective action plan for approval by the Authority. The plan will outline how the organization proposes to correct the deficiencies.

3.2 Developing the corrective action plan

3.2.1 As an initial step the accountable manager shall define the finding by collecting and evaluating relevant information to determine the facts and causal factors (including root causes) that lead to non compliance. The unit responsible for the function or activity where non compliance was identified should have a clear understanding and description of the finding supported by facts and causal factors in order to develop the most appropriate and timely corrective actions to resolve the finding and prevent recurrence.

3.2.2 The second step in the process is to identify the action that must be taken in order to clear the finding. More than one action may be required to correct a single deficiency. Corrective actions must be overt and constructed in the style of performance objectives. A performance objective typically consists of an action verb (a word describing an action) and a direct object (the person, facility or procedure affected by the action expressed by the verb). The criterion for performance will be the prescribed regulatory requirement and time frame for accomplishment of the set objective. It is necessary to ensure that the performance is measurable in the safety oversight context.

3.3 Approval and implementation of corrective action plans

3.3.1 All corrective action plans shall be submitted to the Authority for approval. Approved corrective action plans shall be sent to the organization concerned for implementation and copies kept in appropriate inspection/audit files to facilitate follow up actions.

3.3.2 The inspectors will follow up the implementation of the corrective action plans until the Authority is sure that the finding has been cleared and a letter is forwarded to the organization concerned that the inspection/audit is closed.

3.4 Types of corrective action

3.4.1 Short-term corrective action

This action corrects the specific non-conformance specified in the inspection/audit finding and is preliminary to the long-term action that prevents recurrence of the problem. Short-term corrective action will be completed by the date/time specified in the corrective action section of the finding form or as per the accepted corrective action plan.

3.4.2 Long-term corrective action

Long-term corrective actions have two components. The first component will involve identifying the root cause of the problem and indicating the measures the ATS Provider will take to prevent a recurrence. These measures should focus on a system change. The second component is a timetable for the implementation of the long-term corrective action. Subject to the following paragraph, long-term corrective action will take place within 90 days and will include a proposed completion date.

Some long-term corrective actions may require time periods in excess of 90 days (e.g. major equipment purchases). In this case, a risk assessment study shall be completed by the applicable Inspector/Auditor or other assigned person. If the risk assessment confirms that the proposed period is justified, an exemption shall be issued.

3.5 Submission of corrective action plan

The covering letter of the inspection/audit report will require the ATS provider to submit corrective actions in the prescribed forms.

Corrective action plans shall include completed corrective action forms and where applicable, supporting documentation that may take the form of technical record entries,

purchase orders, memoranda, revised inspection/audit procedure cards, manual amendments, etc.

3.6 Corrective action acceptance

Where the corrective action plan is acceptable, the ATS Provider shall be so advised and the appropriate information will be entered on the corrective action form or where applicable, the corrective action tracking form, for the purpose of follow-up.

If the corrective action plan is not acceptable, the applicable Inspector/Auditor or other assigned person will request that the plan be revised and re-submitted within 10 days of the request. Where the ATS Provider is unresponsive to this action, an alternative course of action may be pursued. Such action may include the sending of a Notice of Suspension to the organisation by the Director of Flight Safety Services.

3.7 Corrective action follow-up

3.7.1 Follow-up process

- a) Where the inspection/audit findings are of a minor nature and no threat to aviation safety exists an “administrative follow-up” may be acceptable. All other findings require “on-site follow-up” to ensure that non-conformances have been rectified and that corrective actions are effective.

- b) Progress will be monitored as the ATS Provider completes inspection/audit finding corrective actions. This will be accomplished by using the follow-up section on the corrective action form or the corrective action tracking form.

- c) Long-term corrective actions that have been accepted will be followed-up by the applicable Inspector/Auditor or other assigned person, who will advise the Director of Flight Safety Services when the item is complete. This follow-up will be confirmed through routine surveillance activities.

3.7.2 Inspection/Audit follow-up

Personnel assigned inspection/audit follow-up responsibilities will:

- a) ensure that the 30-day response time for corrective action plan submission is observed or, where applicable, that corrective actions required by a specific date (indicated on the corrective action section of the finding form) have been completed;
- b) ensure that the corrective action plan addresses the most critical findings first;
- c) ensure that each proposed corrective action will rectify the root cause of the finding to prevent its recurrence;
- d) determine that the ATS Provider has developed a reasonable timetable for long-term corrective action and ensure that the proposed completion date is indicated on the appropriate section of the corrective action form, entered on the corrective action tracking form or entered in the applicable functional database;
- e) determine for each corrective action plan item whether the follow-up is to be administrative or on-site and indicate so on the corrective action form or corrective action tracking form; and
- f) advise the Director of Flight Safety services when all corrective actions have been completed.

3.7.3 Inspection/Audit closure

To enable the Director of Flight Safety Services to close regulatory inspection/audits within 12 months following Corrective Action Plan (CAP) acceptance, the following process should be applied. The CAP should aim at having all corrective action in place within 90 days of acceptance by the applicable Inspector/Auditor or other assigned person. If it is not possible to meet the deadlines, special consideration may be required to ensure a timely closure of the inspection/audit.

Inspection/audit findings will be categorized as follows:

- a) An immediate safety issue - corrective action must be carried out immediately in order for the ATS Provider to continue with its activities. Should long-term corrective actions

be required, depending on the circumstances, this will be dealt with as identified in (b), (c) or (d) below.

b) Corrected within 90 days - the majority of findings should fall into this category. The accepted CAP must indicate that the long-term corrective action will be in place within 90 days. The applicable Inspector/Auditor or other assigned person will ensure follow-up.

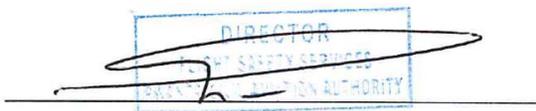
c) Corrected between 90 days and twelve months - where it is anticipated that the corrective action will take more than 90 days after CAP acceptance, a risk assessment shall be completed before acceptance by the Director of Flight Safety Services.

d) Longer than 12 months - where it is not possible or reasonable to apply the corrective action within 12 months of acceptance of the CAP, a risk assessment study shall be completed. If the risk assessment confirms that the proposed period is justified, an exemption shall be issued.

The inspection/audit can be closed by the Director of Flight Safety Services 12 months after acceptance, since the corrective action has either been completed or assessed to the point whereby an exemption could be issued.

3.8 Aviation enforcement action

Once the inspection/audit report has been sent to the ATS Provider, a copy will be sent to the appropriate aviation enforcement officer. The necessity or extent of any enforcement action will be determined jointly by the Director of Flight Safety Services and aviation enforcement officers. A decision record shall highlight those inspection/audit findings that are to be investigated by Aviation Enforcement.



Director Flight Safety Services
Rwanda Civil Aviation Authority