



# Advisory Circular

CAA-AC-GEN016

June, 2022

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## RESOLUTION OF SAFETY ISSUES

### 1.0 PURPOSE

- 1.1 This Order is issued to provide guidance to inspectors on the processes and procedures to resolve identified deficiencies affecting aviation safety, which may have been residing in the aviation system and have been detected during certification, routine, surveillance and ad-hoc inspections or by any other means. Further the order provides details on the follow-up process to ensure that regulated entities provide Corrective Action Plans (CAPs) to identified deficiencies or non-compliances and that these CAPs are implemented to ensure that regulatory requirements are met. These procedures describe in detail the processes of identification, recording and tracking of deficiencies.
- 1.2 It is important for inspectors to note that resolution of safety concerns would include the ability to analyze safety deficiencies, forward recommendations, support the resolution of identified deficiencies, as well as take enforcement action when appropriate. The resolution of identified deficiencies and safety concerns is therefore a critical element at the core of all safety oversight activities undertaken by the Authority.
- 1.3 Inspectors are also required to note that under SMS regulations service providers are required to implement a safety management systems allow for the effective identification of systemic safety deficiencies and the resolution of safety concerns; further the State Safety Policy re-affirms the commitment to ensure effective interaction with service providers in the resolution of safety concerns and therefore the resolution of safety concerns should be service provider centered with guidance where necessary from the Authority.

### 2.0 REFERENCES

- 2.1 The Civil Aviation Act
- 2.2 Kenya Civil Aviation Regulations
- 2.3 KCAA Enforcement Policy

### **3.0 GENERAL**

- 3.1 The primary objective of the Authority's oversight activities is to facilitate regulatory compliance with the applicable requirements, this is achieved by the evaluation of the regulated entities operational environment and activities for compliance with the regulations. It is not the objective of the Authority to find fault and punish but rather an objective assessment of the regulated entity's compliance and support in addressing any findings of non-compliance.
- 3.2 The role of the Authority therefore is to promote not only compliance but also performance at a level that guarantee aviation safety. The assessment of a regulated entities compliance and performance therefore is fundamental to the identification and resolution of safety issues.
- 3.3 Regulated entities are reminded of the accurate and effective evaluation of their compliance is an important factor of ensuring aviation safety. An open and transparent engagement with the inspectors of the Authority therefore is considered more beneficial than presenting a situation that portrays compliance when the position on the ground may be different.
- 3.4 Additionally, the Authority encourages voluntary compliance rather than compelled compliance through other means by the Authority. Voluntary compliance by regulated entities is a demonstration of system maturity and a positive safety attitude which is a driver for safety within the industry.
- 3.5 While it is the responsibility of the inspector to evaluate the regulated entity's compliance, the Authority has also implemented a voluntary reporting system that would facilitate the self-declaration of hazards that may reside in the operational environment but have not been detected through other means.
- 3.6 All information submitted through the voluntary reporting system are insulated from enforcement process and or any punitive action by the Authority. Regulated entities are encouraged to take advantage and actively make voluntary reports on hazards in the operational environment.
- 3.7 The Authority also requires and encourages the implementation of Safety Management Systems (SMS) by those service providers who are required to do so under the Civil Aviation (Safety Management) Regulations. SMS is expected to facilitate voluntary compliance through the evaluation of the operational environment, identification of hazards and risk and their voluntary mitigation.
- 3.8 This Advisory Circular therefore is issued to provide guidance to the aviation regulated entities (service providers) on the process of resolution of safety issues.
- 3.9 Appendix I of this order summarizes the resolution of safety concern process in a flowchart.

### **4.0 DETECTION OF FINDINGS**

- 4.1 Inspectors by virtue of training and qualification are conversant with all applicable requirements in regulations, additionally, with their industry experience they also possess good knowledge and

understanding of the operating environment of the industry supporting their capacity to effectively evaluate the system.

- 4.2 Inspectors are provided detailed guidance in the evaluation of operator's capability to discharge the responsibilities associated with the license/certificate/approval/authorizations under consideration.
- 4.3 In detection of deficiencies inspectors remain objective and fair in assessing the status of implementation of the requirements by the service provider. The following general principles are applied:
  - 4.3.1 Ethical conduct: the foundation of professionalism. Trust, integrity, confidentiality and discretion are essential to conducting safety oversight activity (inspections);
  - 4.3.2 Fair presentation: the obligation to report truthfully and accurately. Any deficiencies noted during inspections should be presented truthfully and accurately. Significant obstacles encountered during inspections and unresolved diverging opinions between the Authority's inspectors and service provider's representatives shall be documented in the final report of the inspection;
  - 4.3.3 Due professional care: the application of diligence and judgment in the conduct of inspections. Having the necessary competence is an important factor;
  - 4.3.4 Independence: the basis for the impartiality of inspections and the objectivity of the conclusions. Inspectors shall be independent of the activity being audited and be free from bias and conflict of interest, they shall maintain an objective state of mind throughout the process to ensure that deficiencies/findings and conclusions are based only on the assessed evidence; and
  - 4.3.5 Evidence-based approach: the rational method for reaching reliable and reproducible conclusions in a systematic process. Inspection evidence shall be verifiable and based on samples of the information available. The appropriate use of sampling is closely related to the confidence that can be placed in the conclusions.

## **5.0 CLASSIFICATION OF FINDINGS**

- 5.1 The Authority recognizes that not all findings have the same bearing on aviation safety and thus has adopted a stratified approach to addressing findings. The objective is to allow the regulated entities put more emphasis on the findings with the greatest risk while findings with lesser impacts can receive commensurate efforts.
- 5.2 In determining the appropriate action to be taken by the Authority when findings are identified a risk assessment is performed to determine their impact on safety, this allows deficiencies that pose imminent safety risk receive immediate attention.
- 5.3 In order to facilitate the determination of the action to be taken and the applicable time frame inspectors apply risk assessment procedures to determine the impact of the deficiencies. As a rule of the thumb the following classification shall be applied:

- 5.3.1 **Severe Deficiency (Level I)** – A severe deficiency poses a very serious safety risk to the public and will necessitate the exercising of immediate action by the regulated entity to mitigate the risks to aviation safety.
- 5.3.2 **Major Deficiency (Level II)** – Major deficiency poses a serious safety risk and should be resolved within 7 days. It will be required of the regulated entity to clear the deficiency before the approval can be renewed, or to submit an acceptable action plan within an agreed time frame to abate the safety risk until the non-conformance can be cleared.
- 5.3.3 **Minor Deficiency (Level III)** – Minor deficiency is any non-compliance with Civil Aviation Regulations which could lower the safety standards. The regulated entity is required to submit an action plan for the rectification of such deficiency within 7 days and fully address the said deficiency within 30 days. Where a regulated entity has not implemented the necessary corrective action and subject to realistic action plan being in place it may be appropriate to grant a further period, however this will be subject to application by the regulated entity with supporting mitigation on preservation of safety during the intervening period (before full compliance is achieved).
- 5.3.4 **Observations** – Means an observation intended to give background information, Observations may be negative or positive; however, they must not include information suggesting non-compliance with Civil Aviation Regulations. Although regulatory action is required to be taken by a regulated entity in the case of observation it may be important to consider such observations for system improvement.

5.4 Where it is determined that safety is compromised by the continued existence of a condition the regulated entities are expected to take appropriate action to preserve safety. In taking this action it is important that the inspector is briefed to ensure that the action mitigates the safety issues identified.

5.5 In determining the level of deficiencies inspectors evaluate the impact of such deficiency on safety. As a rule of thumb inspectors assess the likelihood of such a deficiency resulting into an accident or incident and the impact or severity of such an accident or incident. The table below may be applied in determining the level of deficiency:

		<b>SEVERITY</b>		
		MINOR	SERIOUS	CATASTROPHIC
LIKELIHOOD	HIGH	HM	HS	HC
	MEDIUM	MM	MS	MC
	LOW	LM	LS	LC

**Key;**

HM - High Minor

HS- High Serious

HC- High Catastrophic

MM- Medium Minor

MS- Medium Serious

MC- Medium Catastrophic

LM- Low Minor

LS- Low Serious

LC- Low Catastrophic

- 5.5.1 Interpretation of the above matrix of the above matrix shall be as follows:
- (a) Deficiencies categorized as **HS, HC** and **MC** shall be treated as Level I Deficiency;
  - (b) Deficiencies categorized as **HM, MS** and **LC** shall be treated as Level II Deficiency;  
and
  - (c) Deficiencies categorized as **MM, LM** and **LS** shall be treated as Level III Deficiency.
- 5.5.2 In the event of Level I, II and III deficiencies the operator /service provider must advise the Authority in writing on the completion of the corrective action.
- 5.5.3 Other factors to be considered in the categorization of deficiencies the inspector may also include, the aircraft, facilities, documents, procedures, programmes and any other issues.
- 5.5.4 Where the deficiency cannot be resolved within 90 days, the applicant may apply for an exemption from the requirements using the appropriate exemption application procedures providing suitable mitigation measures that will ensure safety is preserved. Exemptions shall be granted for a period not exceeding that specified in the regulations.

## 6.0 CORRECTIVE ACTION PLANS

- 6.1 Following identification of findings, the Authority shall issue Corrective Action Requests (CAR) Form: GEN016/001 is attached to this order as *Appendix II* and the regulated entities are required to expeditiously develop and submit Corrective Action Plans (CAPs) to the Authority.
- 6.2 In order to facilitate service providers' preparation of acceptable corrective action plans the inspector shall ensure that the CAR forms bear the specific requirement not met by the service provider.
- 6.3 Inspectors are responsible for evaluating the acceptability of CAPs presented by the regulated entities. This is to ensure that the CAPs submitted address the findings identified and if implemented would resolve the deficiencies.
- 6.4 Where the findings are classified as Level I there may be no time to submit and implement Caps, the regulated entity is therefore required to take immediate (short term action) to mitigate the effects of the findings and notify the inspector concerned, once this has been done the level may be reclassified at a lower level and thus facilitate resolution by submission of CAPs.
- 6.5 In accepting service provider CAPs the following has to be considered:
- 6.5.1 The corrective CAP must have a defined action;
  - 6.5.2 The CAP must have an implementation timeline that is reasonable and commensurate to the level of deficiency; and
  - 6.5.3 The CAP must have a definite action office responsible for its implementation.
- 6.6 Failure by a regulated entity to submit an acceptable CAP may result in the deficiency being referred for enforcement action and/or imposition of sanctions as provided for under the applicable regulations.

## 7.0 FOLLOW-UP AND CLOSURE OF FINDINGS

### 7.1 Follow-up of CAPs

- 7.1.1 The Authority requires that all accepted Caps be implemented within the stipulated timelines, the concerned regulated entity is required to advise the Authority on the implementation of such CAPs. Inspectors responsible for regulated entity keep track of all CAPs submitted by the regulated entities
- 7.1.2 The Authority has established a system for monitoring and follow-up on the implementation of accepted CAPs, it is the responsibility of the regulated entity to ensure that CAPs are implemented within the prescribed timelines, where challenges exist notification to the Authority should be done without delay and be accompanied by appropriate mitigation measures and/or revised CAPs for consideration.
- 7.1.3 Inspectors will monitor the progress of the corrective action plan by maintaining the follow-up section of the corrective action form or the corrective action tracking form and ensuring that the appropriate follow-up (administrative or on-site) has been conducted.
- 7.1.4 Inspectors, in preparation for surveillance activity and/or ad-hoc audits, shall review all pending CAPs for the concerned operator and assess their level of implementation.

### 7.2 Closure of Corrective Action

- 7.2.1 While Inspectors will undertake follow-up of all CAPs to ensure implementation, it is the responsibility of the regulated entity to report to the Authority closure of CAPs.
- 7.2.2 Where the CAP submitted by the regulated entity does not meet acceptability requirements the same will be returned to the regulated entity pointing out the fault in the CAP.

### 7.3 Lack of Implementation of Corrective Action

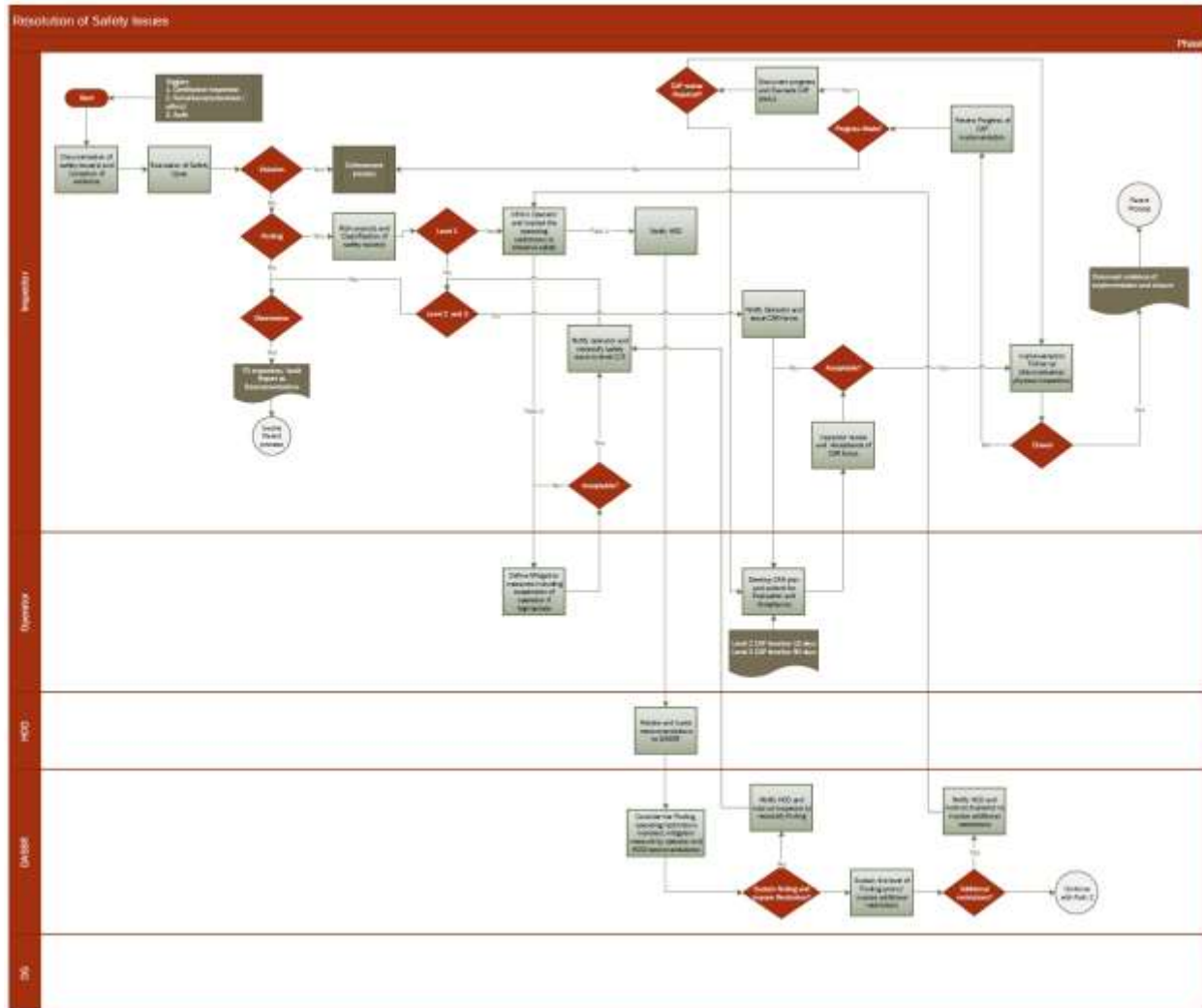
- 7.3.1 Where an regulated entities provider fail to adhere to the accepted CAP the responsible the Authority shall engage the entity with a view of establishing the challenges in implementation of the CAPs. It is however the responsibility of the regulated entity to voluntarily report to the Authority challenges in implementation of accepted CAPs and seek to:
- (d) vary the implementation timelines; and/or
  - (e) review the CAP details to align to the operational requirements.
- 7.3.2 The Authority shall in the interest of preserving safety institute operational restrictions in view of the un-implemented CAPs.
- 7.3.3 Enforcement action shall be instituted where continued non-implementation of CAPs continued breach of regulatory requirement and/or continued threat to aviation safety persists.



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**Civil Aviation Authority**

**RESOLUTION OF SAFETY ISSUES FLOW CHART**





CORRECTIVE ACTION REQUEST (CAR)		
<b>File Reference:</b>		<b>Level of Finding:</b> <input type="checkbox"/> Level I <input type="checkbox"/> Level II <input type="checkbox"/> Level III
<b>Name of Operator: Date of Audit:</b>		
<b>Area Audited:</b>		
<b>Applicable Requirement Reference:</b>		
<b>Description of Finding/deficiency:</b>		
<b>Name of KCAA Inspector:</b>	<b>Signature:</b>	<b>Date:</b>





<b>OPERATOR CORRECTIVE ACTION PLAN</b>			
<b>Name of Operator:</b>	<b>Location:</b>	<b>Date:</b>	<b>File Ref:</b>
<b>Details of Finding:</b>			
<b>Immediate or Short Term Corrective Action:</b>			
<b>Completion Date:</b>			
<b>Long Term Corrective Action:</b>			
<ol style="list-style-type: none"> <li>1. Cause(s) of Problem</li>   <li>2. Action taken / to be taken</li> </ol>			
<b>Proposed Completion Date:</b>	<b>Operator Representative:</b>		<b>Date:</b>
	<b>Name:</b>  <b>Signature:</b>		



**CORRECTIVE ACTION PLAN EVALUATION & TRACKING**

**CAA RESPONSE/COMMENTS:**

CAP Accepted

**Proposed Follow-Up:**

On-site

Administrative

**Proposed Follow-Up Date:**

CAP Rejected

**New CAP Target Date:**

<p><b>Inspectors Name:</b></p>	<p><b>Inspectors Signature:</b></p>	<p><b>Date:</b></p>
<p><b>Finding Closed:</b></p> <p><input type="checkbox"/> Yes</p>	<p><b>Finding Closed By:</b></p> <p><b>Name:</b></p> <p><b>Signature</b></p>	<p><b>Date of closure:</b></p>