
Bermuda Civil Aviation Authority (BCAA) SMS Assessment Tool

Organisation Name:

Organisation Certificate Number:

Evaluator Name:

Dates of Evaluation:

Purpose

This Assessment Tool has been developed by BCAA to be used by the Regulatory Authority for initial assessment or ongoing surveillance and oversight of an organisation's Safety Management System (SMS) and by organisations to evaluate the maturity and effectiveness of their own SMS for the purpose of continuous improvement. Organisations could use the tool as an SMS gap analysis to develop plans for further implementation. Organisations may use the tool to evaluate another organisation's SMS.

NOTE - This tool is accompanied by BCAA SMS Assessment Tool Guidance document which is to be used in all assessments.

Objectives

Confirm minimum components of a Safety Management System are in place prior to the issuance of approvals.
Support continuous improvement in the Safety Management System of all organisations under the BCAA's authority.

Source

Though the BCAA regulatory framework for SMS is contained in the applicable OTARs and OTACs, the framework of the assessment tool follows that established in ICAO Annex 19 and is comprised of four components and twelve elements for SMS. Organisations may align these elements in any order or manner they choose.

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Form Use

The BCAA may request the regulated organisation to complete the document review portion of the tool as a self-assessment when making application or prior to an onsite visit. It is expected that all elements of the SMS will be present.

Assessing an organisation's SMS is a move from traditional, compliance-based oversight to performance-based oversight that focuses on how the SMS is performing.

In completing document reviews, the "yes / no / question" is utilized to determine when the element is documented (procedures in writing).

- Yes – indicates the documentation includes the element (present).
- No – the documentation does not include the element.
- Question – the documentation is missing items from the "what to look for in the documentation" table in the guidance document

The onsite validation is intended to determine the functionality of the element.

- Operating
 - Yes / No – the organisation is following its own documentation
 - Not Checked – is utilized when there is no opportunity to interview or examine records
- Effective
 - Yes / No – the results appear to be adding value to the program
 - Not Checked – is utilized when there is no opportunity to interview or examine records

In order to give the organisation an overall picture of its SMS performance, an evaluation summary will be completed for each component.

Conclusions – Findings and Observations

When the assessment tool is used by BCAA, BCAA section forms for observations and findings will be utilized as required. When the assessment tool is used by organisations, a finding or observation form utilized by the organisation in its own audit program should be used. The SUMMARY section of each component should not be used as the only record of findings and observations.

Observations will be raised when the assessor recognizes an area of excellence or potential sub-element for improvement.

Findings will be raised if there is substantive proof of an absence or failure of sub-elements.

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Section 1- SAFETY POLICIES AND OBJECTIVES (Annex 19 component 1)

Element 1.1- MANAGEMENT COMMITMENT (Annex 19 element 1.1)

Document Review

#	Description	Organisation document and section reference	Notes	Present (Y/N/Q) Yes/No/Question
1.1.1	There is a safety policy signed by the Accountable Executive / Manager.			
1.1.2	A process for identifying relevant changes to a) Regulations b) State Safety Program			
1.1.3	A process for reviewing the safety policy on a regular basis.			
1.1.4	There is a just culture policy (non-disciplinary) signed by the Accountable Executive / Manager.			

Onsite Validation

#	Description	Evidence (Based upon records review and interviews conducted on site)	Operating Y / N / NC Yes / No / Not Checked	Effective Y / N / NC Yes / No / Not Checked
1.1.5	The Accountable Executive / Manager and the senior management team promote and demonstrate their commitment to the Safety Policy through active and visible participation in the safety management system.			
1.1.6	There is commitment of the organisation's senior management to the development and ongoing improvement of the safety management system.			
1.1.7	There is evidence of decision making, actions and behaviours that reflect a positive safety culture.			

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Section 1 - SAFETY POLICIES AND OBJECTIVES (Annex 19 component 1)

Element 1.2- SAFETY ACCOUNTABILITY AND RESPONSIBILITIES (Annex 19 element 1.2)

Document Review

#	Description	Organisation document and section reference	Notes	Present (Y/N/Q) Yes/No/Question
1.2.1	An Accountable Executive / Manager has been appointed with a) full responsibility and ultimate accountability for the SMS to ensure it is properly implemented and performing effectively. b) control of the financial and human resources required for the proper implementation of an effective SMS.			
1.2.2	Safety accountabilities, authorities and responsibilities are defined and documented throughout the organisation.			

Onsite Validation

#	Description	Evidence (Based upon records review and interviews conducted on site)	Operating Y / N / NC Yes/No/Not Checked	Effective Y / N / NC Yes/No/Not Checked
1.2.3	The Accountable Executive / Manager is aware of their SMS roles and responsibilities in respect of the safety policy, safety standards, and safety culture of the organisation.			
1.2.4	Personnel at all levels are aware of and understand their safety accountabilities, authorities and responsibilities regarding all safety management processes, decisions and actions.			
1.2.5	Safety management is shared across the organisation (and is not just the responsibility of the Safety Manager and their team).			

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Section 1 - SAFETY POLICIES AND OBJECTIVES (Annex 19 component 1)

Element 1.3- APPOINTMENT OF KEY PERSONNEL (Annex 19 element 1.3)

Document Review

#	Description	Organisation document and section reference	Notes	Present (Y/N/Q) Yes/No/Question
1.3.1	A competent person with the appropriate knowledge, skills and experience has been nominated to manage the operation of the SMS.			
1.3.2	There is a direct reporting line between the person managing the SMS and the Accountable Executive / Manager.			
1.3.3	The organisation has outlined the Terms of Reference for appropriate safety committee(s) to discuss and address safety risks and compliance issues.			

Onsite Validation

#	Description	Evidence (Based upon records review and interviews conducted on site)	Operating Y / N / NC Yes/No/Not Checked	Effective Y / N / NC Yes/No/Not Checked
1.3.4	The person managing the operation of the SMS fulfils the required job functions and responsibilities.			
1.3.5	The organisation has allocated sufficient resources to manage the SMS including manpower for safety investigation, analysis, auditing and promotion.			
1.3.6	The organisation has established appropriate safety committee(s) that discuss and address safety risks and compliance issues.			

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Section 1 - SAFETY POLICIES AND OBJECTIVES (Annex 19 component 1)

Element 1.4- CO-ORDINATION OF EMERGENCY RESPONSE PLANNING (Annex 19 element 1.4)

Document Review

#	Description	Organisation document and section reference	Notes	Present (Y/N/Q) Yes/No/Question
1.4.1	An emergency response plan (ERP) that reflects the size, nature and complexity of the operation containing a) procedures and actions b) the roles and responsibilities of key personnel including external agencies			
1.4.2	The organisation has a process to a) distribute the ERP procedures as appropriate b) communicate the content to all personnel			

Onsite Validation

#	Description	Evidence (Based upon records review and interviews conducted on site)	Operating Y / N / NC Yes/No/Not Checked	Effective Y / N / NC Yes/No/Not Checked
1.4.3	The ERP is periodically tested for the adequacy of the plan and the results reviewed to improve its effectiveness.			
1.4.4	Key personnel in an emergency have access to the ERP at all times.			

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Section 1 - SAFETY POLICIES AND OBJECTIVES (Annex 19 component 1)

Element 1.5- SMS DOCUMENTATION (Annex 19 element 1.5)

Document Review

#	Description	Organisation document and section reference	Notes	Present (Y/N/Q) Yes/No/Question
1.5.1	The SMS documentation includes the policies and processes that describe the organisation's safety management system and processes.			
1.5.2	The SMS documentation includes a process for the amendment and control of all documents and related records.			

Onsite Validation

#	Description	Evidence (Based upon records review and interviews conducted on site)	Operating Y / N / NC Yes/No/Not Checked	Effective Y / N / NC Yes/No/Not Checked
1.5.3	SMS documentation is regularly reviewed and updated with appropriate version control in place.			
1.5.4	SMS documentation is available to all personnel.			

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Section 1 - SAFETY POLICIES AND OBJECTIVES (Annex 19 component 1)

SUMMARY

Description	Observation	Finding

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Section 2- SAFETY RISK MANAGEMENT (Annex 19 component 2)

Element 2.1- HAZARD IDENTIFICATION (Annex 19 element 2.1)

Document Review

#	Description	Organisation document and section reference	Notes	Present (Y/N/Q) Yes/No/Question
2.1.1	There is a process that defines how hazards are identified and recorded from multiple sources through reactive and proactive methods.			
2.1.2	The reporting system has a process to provide feedback.			
2.1.3	There is a process in place to analyse safety data and safety information.			
2.1.4	There is a process for investigation to ensure that multiple aspects, including human factors, are considered.			

Onsite Validation

#	Description	Evidence (Based upon records review and interviews conducted on site)	Operating Y / N / NC Yes/No/Not Checked	Effective Y / N / NC Yes/No/Not Checked
2.1.5	Personnel conducting safety investigations have had training.			
2.1.6	Safety reports and investigations are conducted in a timely manner.			
2.1.7	Records indicate that Safety Investigations identify multiple causes / hazards (including Human Factors).			
2.1.8	Personnel have access to the reporting system, understand and are confident of it.			
2.1.9	Safety data is being examined and analyzed for the purpose of identifying hazards.			

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Section 2 - SAFETY RISK MANAGEMENT (Annex 19 component 2)

Element 2.2- SAFETY RISK ASSESSMENT AND MITIGATION (Annex 19 element 2.2)

Document Review

#	Description	Organisation document and section reference	Notes	Present (Y/N/Q) Yes/No/Question
2.2.1	There is a structured process for the management of risk that includes the assessment of risk associated with identified hazards, expressed in terms of severity and probability.			
2.2.2	There are criteria for evaluating the level of risk the organisation is willing to accept.			
2.2.3	There is a process to notify Senior Management of hazards that are assessed as high.			
2.2.4	The organisation has a risk control strategies process (that may include as options hazard elimination, risk avoidance, risk mitigation, or risk acceptance).			

Onsite Validation

#	Description	Evidence (Based upon records review and interviews conducted on site)	Operating Y / N / NC Yes/No/Not Checked	Effective Y / N / NC Yes/No/Not Checked
2.2.5	There are records that justify the risk assessments that were conducted.			
2.2.6	Mitigating actions resulting from the risk assessment, including timelines and allocation of responsibilities are recorded.			
2.2.7	The effectiveness of controls that were implemented is recorded.			
2.2.8	There are records to confirm that Senior Management was notified of hazards assessed as high.			

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Section 2 - SAFETY RISK MANAGEMENT (Annex 19 component 2)

SUMMARY

Description	Observation	Finding

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Section 3- SAFETY ASSURANCE (Annex 19 component 3)

Element 3.1- SAFETY PERFORMANCE MONITORING AND MEASUREMENT (Annex 19 element 3.1)

Document Review

#	Description	Organisation document and section reference	Notes	Present (Y/N/Q) Yes/No/Question
3.1.1	The organisation has an internal audit programme and procedures for audits, reporting, and records.			
3.1.2	The interface between internal audits and the safety risk management processes is described.			
3.1.3	There is a process in place to assess whether the risk controls are applied and effective.			
3.1.4	There is a process in place to set and review organisational Safety Objectives; the process includes Safety Performance Indicators (SPIs) that are tracked to enable effectiveness measurement.			

Onsite Validation

#	Description	Evidence (Based upon records review and interviews conducted on site)	Operating Y / N / NC Yes/No/Not Checked	Effective Y / N / NC Yes/No/Not Checked
3.1.5	The organisation is conducting audits and maintaining records of the audits and follow-up actions.			
3.1.6	The organisation is regularly assessing the effectiveness of risk controls.			
3.1.7	The organisation has set Safety Objectives with Safety Performance Indicators and is monitoring them.			

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Section 3 - SAFETY ASSURANCE (Annex 19 component 3)

Element 3.2- THE MANAGEMENT OF CHANGE (Annex 19 element 3.2)

Document Review

#	Description	Organisation document and section reference	Notes	Present (Y/N/Q) Yes/No/Question
3.2.1	The organisation has established a change management process to identify whether changes have an impact on safety and to manage any identified risks in accordance with existing safety risk management processes. (This includes at minimum major operational changes, major organisational changes and changes in key personnel.)			
3.2.2	The change management process contains a requirement to consider Human Factor (HF) issues.			

Onsite Validation

#	Description	Evidence (Based upon records review and interviews conducted on site)	Operating Y / N / NC Yes/No/Not Checked	Effective Y / N / NC Yes/No/Not Checked
3.2.3	The change management process has been utilized when required and Human Factors was considered.			

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Section 3 - SAFETY ASSURANCE (Annex 19 component 3)

Element 3.3- CONTINUOUS IMPROVEMENT OF THE SMS (Annex 19 element 3.3)

Document Review

#	Description	Organisation document and section reference	Notes	Present (Y/N/Q) Yes/No/Question
3.3.1	There is a process in place to regularly monitor and review the effectiveness of the SMS using the available data and information.			

Onsite Validation

#	Description	Evidence (Based upon records review and interviews conducted on site)	Operating Y / N / NC Yes/No/Not Checked	Effective Y / N / NC Yes/No/Not Checked
3.3.2	The review process has been utilized and changes have been incorporated.			

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Section 3 - SAFETY ASSURANCE (Annex 19 component 3)

SUMMARY

Description	Observation	Finding

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Section 4- SAFETY PROMOTION (Annex 19 component 4)

Element 4.1- TRAINING AND EDUCATION (Annex 19 element 4.1)

Document Review

#	Description	Organisation document and section reference	Notes	Present (Y/N/Q) Yes/No/Question
4.1.1	There is an initial and recurrent SMS training programme for all personnel.			
4.1.2	There is an initial and recurrent training program on human and organisational factors.			
4.1.3	A competency framework is defined for all personnel, including trainers and a process for tracking all training.			

Onsite Validation

#	Description	Evidence (Based upon records review and interviews conducted on site)	Operating Y / N / NC Yes/No/Not Checked	Effective Y / N / NC Yes/No/Not Checked
4.1.4	The training program is specific to the organisation's SMS.			
4.1.5	Human and organisational factors training is being conducted.			
4.1.6	Records of required training is on file.			
4.1.7	Personnel have knowledge of Human Factors, the organisation's Safety Policies, Safety Reporting and their responsibilities.			

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Section 4 - SAFETY PROMOTION (Annex 19 component 4)

Element 4.2- SAFETY COMMUNICATION (Annex 19 element 4.2)

Document Review

#	Description	Organisation document and section reference	Notes	Present (Y/N/Q) Yes/No/Question
4.2.1	There is a process to determine and communicate safety critical information.			

Onsite Validation

#	Description	Evidence (Based upon records review and interviews conducted on site)	Operating Y / N / NC Yes/No/Not Checked	Effective Y / N / NC Yes/No/Not Checked
4.2.2	Safety critical information has been identified and communicated.			
4.2.3	Personnel have knowledge of the organisation's safety communications.			

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Section 4 - SAFETY PROMOTION (Annex 19 component 4)

SUMMARY

Description	Observation	Finding

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ASSESSMENT SUMMARY

Description	Detail
Overview	
Strengths	
Areas for Improvement	

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Guidance Material

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Guidance Material

How to use the Guidance Material

This document is used in conjunction with the current version of the BCAA SMS Assessment Tool (form number SO_001). Notes and results of review are kept on the Assessment Tool.

An organisation must have four functioning Components to have a fully functional SMS. The Components listed on the Assessment Tool form follow the ICAO structure. Each component has elements to check both in documentation review and in onsite validation. Under each element there are sub-elements.

It is suggested that when doing document review the assessment is done in order of components 1, 2, 3, 4, as the elements and sub-elements of component one need to be in place to build the structure of the SMS. However, when doing onsite validation many of the things that prove the SMS is working (component 1) are manifested in the other components, and it may be easier to leave component one to the end with an order of components 2, 3, 4, 1.

Descriptions listed in the Assessment Tool (form number SO_001) are **required** in the SMS of the organisation being reviewed. If this is not present the assessor should also review the information from this guidance document to ensure a complete assessment of the sub-element is included in any resulting finding.

Items listed in this guidance document:

- within the table "What to look for in documentation" missing items should be explained in the notes column of the assessment tool and marked as a "Question",
- under "What to look for in onsite validation" outside of the table are meant as task prompts for the assessor and are not all inclusive,
- within the table "What to look for in onsite validation" missing items should be explained in the evidence column of the assessment tool and require the assessor to exercise their judgement to determine whether a "Yes" or "No" will be appropriate to the missing items.

Details listed in this guidance document require the assessor to examine the applicable OTAR(s) and utilize discretionary power to determine if a finding or observation is to be issued.

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COMPONENT #1 - SAFETY POLICIES AND OBJECTIVES

MANAGEMENT COMMITMENT (Annex 19 element 1.1)

What to look for in documentation:

Section	Present
1.1.1	- Commitment to observe all applicable legal requirements and standards. - Commitment towards achieving the highest safety standards and best practice. - Includes a commitment to continuous improvement. - Includes a statement to provide appropriate resources and a process for assessing resources and addressing any shortfalls. - The safety policy is easy to read. - The content is customised to the organisation. - Actively encourages safety reporting.
1.1.2	- SMS aligns with current regulations. - SMS aligns with the State Safety Programme (SSP).
1.1.3	- The process includes a review of the communication of the safety policy – considering the visibility to all staff (and considering multiple sites). - The process includes a review of the safety policy’s understandability (consider multiple languages).
1.1.4	- The just culture policy clearly identifies acceptable and unacceptable behaviours. - The just culture policy and principles are understandable and clearly visible. - The principles ensure that the policy can be applied consistently across the whole organisation.

What to look for in onsite validation:

Potential auditor activities to determine status of Operating and/or Effective:

- Interview the Accountable Executive/Manager to assess:
 - o their knowledge and understanding of the safety policy,
 - o how a positive safety and just culture are promoted.
- Interview staff, including Senior Management, to determine:
 - o what extent the safety policy and just culture policy is known,
 - o how well they understand it, and if they agree with it,
 - o if they have examples of positive safety culture (i.e.: good response to concerns they raised, good response to events they were involved in).
- Check that the safety policy is reviewed periodically for content and currency.
- Review available resources including personnel, equipment, and financial.

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- Review how the safety policy is communicated:
 - o check the distribution/visibility of the Safety policy (staff and relevant contracted staff and third-party organisations).
- Evidence of senior management participation in safety meetings, training, conferences, etc.
- Review feedback from safety surveys to confirm if they include specific just culture aspects.
- There is evidence of communication with regulator and other stakeholders.
- Check records for evidence of when the just culture principles have been applied following an event.
- Evidence of interventions from safety investigations addressing organisational issues rather than focusing only on the individual.
- Review how the organisation is monitoring reporting rates.
- Safety reports include the reporter's own errors and events they are involved in (events where no one was watching).

Section	Operating	Effective
1.1.5	- There are sufficient and competent personnel. - The Accountable Manager/Executive is familiar with the key elements of the safety policy. - People across the organisation are familiar with the policy and can describe their obligations in respect of the safety policy. - Objectives are defined that will lead to an improvement in processes, outcomes, and the development of a positive safety culture. - The safety policy is reviewed periodically to ensure it remains relevant to the organisation. - The safety policy is communicated to all personnel (including relevant contract staff and organisations).	- Management reviews planned resources versus actual resources and takes corrective actions. - Management assesses whether the safety objectives are appropriate and relevant.
1.1.6	- Management has allocated adequate resources to the SMS.	- The organisation is assessing opportunities to streamline SMS processes for ease of the users. - The organisation is reviewing and taking action to address any forecasted shortfalls in resources.
1.1.7	- The supporting principles of the just culture policy is being applied and promoted to staff.	- The just culture policy is applied in a fair and consistent manner and staff trust the policy. - The line between acceptable and unacceptable behaviour has been determined in consultation with staff and staff representatives.

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COMPONENT #1 - SAFETY POLICIES AND OBJECTIVES

SAFETY ACCOUNTABILITY AND RESPONSIBILITIES (Annex 19 element 1.2)

What to Look for in documentation:

Section	Present
1.2.1	No additional details required
1.2.2	- Individual job safety responsibilities can be documented through any means for example: - o Job descriptions - o Organisation charts - o Safety Policy - o Manual section - Job descriptions / responsibilities for safety committee members (which may be done in terms of reference for the applicable committees).

What to look for in onsite validation:

Potential auditor activities to determine status of Operating and/or Effective:

- Interview the Accountable Executive/Manager and Senior Management to assess:
 - o their knowledge of their responsibilities and accountabilities (including when to recuse themselves from investigations),
 - o their knowledge of any high-risk assessments that have occurred,
 - o understanding of the top safety issues within the organisation.
- Interview staff to determine:
 - o their knowledge of their responsibilities and accountabilities.
- Evidence that the Accountable Executive/Manager has the authority to provide sufficient resources for relevant safety improvements.
- Evidence of activities being stopped due to unacceptable level of safety risk.
- Evidence that Accountable Executive/Manager actions are consistent with the active promotion of a positive safety culture in the organisation.
- Evidence of managers having safety related performance targets.
- Evidence of active participation of the management team in the SMS.
- Evidence of appropriate risk mitigation, action, and ownership.
- The levels of management authorised to make decisions on risk acceptance are applied.
- Check that no individuals investigated events that they were involved in (conflicts of interest).

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Section	Operating	Effective
1.2.3	- The Accountable Executive/Manager can outline: - o any high-risk assessments that have occurred, - o what the top safety issues/risks in the organisation are, - o what their day-to-day involvement in the SMS is, - o is accessible to the staff in the organisation.	- The Accountable Executive/Manager ensures that the performance of the SMS is being monitored, reviewed, and improved.
1.2.4	- Individuals have access to their safety accountability, authorities, and responsibilities (for example, through job descriptions or organisational charts). - Individuals interviewed can describe their responsibilities and accountabilities.	- Everyone in the organisation fulfil their safety responsibilities, authorities, and accountabilities.
1.2.5	- Everyone in the organisation is encouraged to contribute to the SMS. - Mitigations are assigned to responsible managers in appropriate departments.	- SMS principles exist throughout the organisation so that safety is part of the everyday language.

COMPONENT #1 - SAFETY POLICIES AND OBJECTIVES

APPOINTMENT OF KEY PERSONNEL (Annex 19 element 1.3)

What to Look for in documentation:

Section	Present
1.3.1	- There is an appropriate job description for the position. - A resume (for the individual nominated) is presented with the requirements to fulfil the job description: - o if there are some deficiencies an appropriate gap analysis and plan of rectification is also presented.
1.3.2	No additional details required.
1.3.3	The appropriate safety committees have been established with the necessary Terms of Reference.

What to look for in onsite validation:

Potential auditor activities to determine status of Operating and/or Effective:

- Interview the Accountable Executive/Manager and the safety manager to assess:
 - o The safety manager's workload and allocated time to fulfil role.
- Interview Safety Committee members to determine:
 - o Their understanding of their role and responsibilities in the committee.
- Review the safety manager has competency that fits the position.

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- Review the training that the safety manager has received, and if gaps the plan of rectification.
- Review the plan for maintaining the safety manager competency.
- Review how the safety manager gets access to internal and external safety information.
- Review how the safety manager communicates and engages with operational staff and senior management.
- Check there are sufficient resources for SMS activities such as safety investigation, analysis, auditing, safety meeting attendance, and promotion.
- Review of safety report action and closure timescales.
- Review safety committee and meeting structure and Terms of Reference for each committee/meeting.
- Review meeting attendance levels.
- Review meeting records and actions.
- Check that outcomes are communicated to the rest of the organisation.
- Evidence of safety objectives, safety performance, and compliance are being reviewed and discussed at meetings.
- Participants challenge what is being presented when there is limited evidence.

Sections	Operating	Effective
1.3.4	- The safety manager has implemented and is maintaining the SMS. - The safety manager is accessible to staff in the organisation.	- The safety manager is competent to manage the SMS and identifies improvements in a timely manner. - There is a close working relationship with the Accountable Executive/Manager and the safety manager is considered a trusted advisor and given appropriate status in the organisation.
1.3.5	- Resources have been assigned to accomplish the SMS tasks.	- The organisation reviews the resources are sufficient and takes action if there is evidence to show deficiencies.
1.3.6	- Safety committees include key stakeholders as appropriate. - There is evidence of meetings taking place detailing the attendance, discussions, and actions. - Actions are being monitored and appropriate safety objectives and SPIs have been established.	- The results of the safety committees can be tracked from meeting to meeting with actions taken to ensure progress. - The safety performance and safety objectives are reviewed and action taken as appropriate.

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COMPONENT #1 - SAFETY POLICIES AND OBJECTIVES

CO-ORDINATION OF EMERGENCY RESPONSE PLANNING (Annex 19 element 1.4)

What to Look for in documentation:

Section	Present
1.4.1	- The ERP defines the procedures, roles, responsibilities, and actions of the various organisations and key personnel. - The ERP considers different types of foreseeable emergencies. - The coordination with other organisations (including non-aviation organisations) is defined with appropriate means. - The frequency and methods for testing the ERP are defined.
1.4.2	- Key personnel always have easy access to the relevant parts of the ERP. - The distribution process includes both internal and external involved parties. - There is a process for communicating the content of the plan that includes training.

What to look for in onsite validation:

Potential auditor activities to determine status of Operating and/or Effective:

- Interview key personnel and check:
 - o they have access to the ERP,
 - o understand their role in the plan.
- Review emergency response plan.
- Review how coordination with other organisations is conducted.
- Review how ERP is distributed and where copies are held.
- Review when the plan was last reviewed and tested, and any follow up actions taken.

Section	Operating	Effective
1.4.3	- There are records of the ERP reviews and tests. - Other organisations actively participate in the ERP exercises.	- The results of the ERP review and testing are assessed and actioned to improve its effectiveness.
1.4.4	- There is a current and accurate distribution list for the plan.	- ERP training and testing includes review of access to all parts of the plan and associated checklists/tasking.

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COMPONENT #1 - SAFETY POLICIES AND OBJECTIVES

SMS DOCUMENTATION (Annex 19 element 1.5)

What to Look for in documentation:

Section	Present
1.5.1	- SMS documentation is consistent with other internal management systems and is representative of the actual processes in place. - SMS documentation is comprehensible. - There is a process to distribute the documentation to all relevant personnel. - Data protection and confidentiality rules have been defined.
1.5.2	- The SMS documentation defines the SMS outputs and which records of SMS activities will be stored. - Records to be stored, storage period, and location are identified.

What to look for in onsite validation:

Potential auditor activities to determine status of Operating and/or Effective:

- Interview staff in charge of documents and records to check awareness of:
 - o document control procedures and version control,
 - o record management and procedures,
 - o where to find safety-related documentation including procedures appropriate to their role.
- Review records the SMS documentation and amendment procedures.
- Check for cross references to other documents and procedures.
- Check availability of SMS documentation to all staff.
- Review the supporting SMS records (hazard logs, meeting minutes, safety performance reports, risk assessments, etc.).
- Check how safety documents are stored and version controlled.

Section	Operating	Effective
1.5.3	- There are records of the changes to the SMS documentation.	- SMS documentation is proactively reviewed for improvement. - SMS records are routinely used as inputs for safety management-related tasks and continuous improvement of the SMS.
1.5.4	- Everyone is familiar with the relevant parts of the SMS documentation.	- Everyone follows the relevant parts of the SMS documentation.

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COMPONENT #2 - SAFETY RISK MANAGEMENT

HAZARD IDENTIFICATION (Annex 19 element 2.1)

What to Look for in documentation:

Section	Present
2.1.1	- The system captures mandatory occurrences and voluntary reports. - The reporting system is accessible and easy to use by all personnel (internal and external). - Data protection and confidentiality is ensured. - Multiple sources of hazards (internal and external) are considered and reviewed, as appropriate. - Hazards are documented in an easy-to-understand format.
2.1.2	- Responsibilities, timelines, and format for the feedback are meaningful and well defined.
2.1.3	- The data analysis process enables gaining useable safety information. - Responsibilities with regards to occurrence analysis, storage, and follow-up are clearly defined.
2.1.4	- The process identifies how reports are actioned, and timescales are specified and addressed. - The triggers for safety investigations are identified. - The level of sign-off for safety investigations is defined and adequate to the level of risk. - A model that includes reference to human and organisational factors is part of the investigative process.

What to look for in onsite validation:

Potential auditor activities to determine status of Operating and/or Effective:

- Interview staff to ensure that there is:
 - o competence to use the reporting system (how to report, what to report – mandatory and voluntary),
 - o trust in the confidentiality of the system,
 - o trust in the feedback portion of the system.
- Review the reporting system for access and ease of use.
- Review how data protection and confidentiality is achieved.
- Confirm if there is evidence of feedback to reporter, the organisation, and third parties.
- Assess volume and quality of reports, including whether personnel are reporting their own errors and mistakes.
- Review report closures, time frame and effectiveness.
- Check whether contracted organizations and customers are able to make reports.
- Review how reports in the system are analysed.
- Assess how senior management engage with the outputs of the reporting system.
- Review how hazards are identified, analysed, addressed, and recorded.
- Review structure and layout of hazard log.
- Review what internal and external sources of hazards are considered such as safety reports, audits, safety surveys, investigations, inspections, brainstorming, management of change activities, commercial and other external influences, etc.

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- Review whether safety investigations identify human and organisational contributing factors.

Section	Operating	Effective
2.1.5	- Training records confirm that personnel that have conducted safety investigations have had appropriate training.	- Safety investigations that have been conducted have identified root causes (why it happened, not just what happened).
2.1.6	- Reports are processed within the defined timescales.	- Safety reports identify causal/contributing factors that are acted upon in a timely manner.
2.1.7	- Hazards are identified and recorded. - Human and organisational factors related to hazards are being identified. - Safety investigations are carried out and recorded.	- The organisation has a register of the hazards that is maintained and reviewed to ensure it remains up-to-date. - Hazards are continuously assessed in a systematic and timely manner. - Safety investigations identify causal/contributing factors that are acted upon.
2.1.8	- Staff are aware of and fulfil their responsibilities in respect to the reporting system. - There is feedback to the reporter of any actions taken (or not taken) and, where appropriate, to the rest of the organisation.	- Personnel express confidence and trust in the organisations' reporting policy and process. - There is a healthy reporting system based on the volume of reporting and the quality of reports received. - The reporting system is available for third parties to report (partners, suppliers, and contractors).
2.1.9	- Reports are evaluated, processed, analysed, and stored.	- The reporting system is being used to make better management decisions and continuously improve.

COMPONENT #2 - SAFETY RISK MANAGEMENT

SAFETY RISK ASSESSMENT AND MITIGATION (Annex 19 element 2.2)

What to Look for in documentation:

Section	Present
2.2.1	- Severity and likelihood criteria are clearly defined and fit the service provider's actual circumstances. - The risk matrix and acceptability criteria are clearly defined and usable. - There is a process for the analysis and assessment of safety risks.
2.2.2	- The level of risk the organisation is willing to accept is defined. - Responsibilities and timelines for accepting the risk are clearly defined.
2.2.3	- Senior management have visibility of high-risk hazards and their mitigation and controls.
2.2.4	- The organisation has a process in place to decide and apply risk controls.

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What to look for in onsite validation:

Potential auditor activities to determine status of Operating and/or Effective:

- Review the risk classification scheme and procedures.
- Check that severity and likelihood criteria are being used.
- Review whether risk assessments are carried out consistently.
- Sample identified hazards and review how they are processed and documented.
- Review what triggers a risk assessment.
- Check any assumptions made and whether they are reviewed.
- Review how issues are classified when there is insufficient quantitative data available.
- Check that the risk register is being reviewed and monitored by the appropriate safety committee(s).
- Evidence of risk acceptability being routinely applied in decision making processes.
- Risk controls consider human and organisational factors.
- Evidence of risk controls being actioned and follow up.
- Check whether the risk controls have reduced the residual risk.
- Risk controls are clearly identified.
- Review the use of risk controls that rely solely on human intervention.
- Check that new risk controls do not create additional risks.
- Check whether the acceptability of the risks is made at the right management level.

Section	Operating	Effective
2.2.5	- Risk analysis and assessments are carried out in a consistent manner based on the defined process.	- Risk analysis and assessments are reviewed for consistency and to identify improvements in the processes. - Risk assessments are regularly reviewed to ensure they remain current.
2.2.6	- Appropriate risk controls are being applied to reduce the risk to an acceptable level including timelines and allocation of responsibilities. - Human Factors are considered as part of the development of risk controls.	- Risk controls are practical and sustainable, applied in a timely manner, and do not create additional risks.
2.2.7	- The defined risk acceptability is being assessed once risk controls have been implemented.	- Risk acceptability criteria are used routinely and applied in management decision making processes and are regularly reviewed.
2.2.8	- There is evidence that shows Senior Management is made aware of medium and high-risk events.	- Senior Management tracks and analyses medium and high-risk events for mitigation and inclusion into the risk register, when appropriate.

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COMPONENT #3 - SAFETY ASSURANCE

SAFETY PERFORMANCE MONITORING AND MEASUREMENT (Annex 19 element 3.1)

What to Look for in documentation:

Section	Present
3.1.1	- A person or group of persons with responsibilities for internal audits has been identified and they have direct access to the Accountable Executive/Manager. - The internal audit programme covers all applicable regulations. - The programme includes details of the schedule of audits. - Compliance monitoring includes contracted activities.
3.1.2	- Independence of the internal audit function is achieved. - Coordination of safety risks is outlined.
3.1.3	- The process for the identification and follow-up of corrective/preventive actions are defined. - Responsibilities and timelines for determining, accepting, and following-up the corrective/preventive action are defined.
3.1.4	- The process of identifying SPIs is focused on risk level rather than what is easy to measure. - Reliability of data sources is considered in the design of SPIs. - SPIs are linked to the identified risks and safety objectives. - Frequency and responsibility for the trend monitoring of SPIs are appropriate. - Realistic targets have been set. - State SPIs are considered, as applicable.

What to look for in onsite validation:

Potential auditor activities to determine status of Operating and/or Effective:

- Evidence that SPIs are based on reliable sources of data.
- Evidence of when SPIs were last reviewed.
- The defined SPIs and targets are appropriate to the organisation's activities, risks, and safety objectives.
- Consideration of any State SPIs.
- Review whether any action has been taken when an SPI is indicating a negative trend (reflecting a risk control or an inappropriate SPI).
- Evidence that results of safety performance monitoring are discussed at the senior management level.
- Evidence of feedback provided to the Accountable Executive/Manager.
- Evidence of risk controls being assessed for effectiveness (e.g., audits, surveys, reviews, SPIs and safety performance targets [SPTs], reporting systems).
- Evidence of risk controls applied by contracted organisations being assessed and overseen (e.g., quality check, reviews, and regular meetings).
- Information from safety assurance and compliance monitoring activities feeds back into the safety risk management process.

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- Review where risk controls have been changed as a result of the assessment.
- Review how senior management ensure the organisation remains in compliance.
- Evidence that senior management take action on internal and external audit results.
- Review how independence of the internal audit function is achieved.
- Review how the internal audit function interacts with:
 - o senior management,
 - o line managers,
 - o the safety management staff.
- Assess the contents of the programme against any regulatory requirements.
- Review the methods used for causal analysis.
- Check that the method is used consistently.
- Review any repeat findings and check for actions have not been implemented or are overdue.
- Check for timely implementation of actions.
- Review senior management awareness of the status of significant findings and related corrective/preventive actions.
- Check that appropriate personnel participate in the determination of causes and contributing factors.
- Look for consistency between internal audit results and external audit results.
- Review whether causal factors are considered as potential hazards.
- Review how safety objectives are communicated throughout the organisation.
- Assess if safety objectives are being measured to monitor achievement through Safety Performance Indicators (SPIs) and Safety Performance Targets (SPTs).
- Assess if the safety objectives have considered the State safety objectives in the SSP.

Section	Operating	Effective
3.1.5	- The compliance monitoring programme is being followed and regularly reviewed. - The identification and follow-up of corrective/preventive actions is carried out in accordance with the procedures including causal analysis to address root causes - Internal and external audit results are reported to the Accountable Executive/Manager and senior management.	- The Accountable Executive/Manager and senior management actively seek feedback on the status of internal and external audit activities.
3.1.6	- Risk controls are being verified to assess whether they are applied. - The status of corrective/preventive actions is regularly communicated to relevant senior management and staff.	- The organisation investigates the systemic causes and contributing factors of findings. - Risk controls are assessed and actions taken to ensure they are effective and delivering a safe service. - The organisation proactively reviews the status of corrective/preventive actions.

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Section	Operating	Effective
		- Effectiveness of the corrective/preventive actions is verified.
3.1.7	- The safety performance of the organisation is being measured and meaningful SPIs are being continuously monitored and analysed for trends. - Safety objectives are being regularly reviewed and are communicated throughout the organisation.	- SPIs are demonstrating the safety performance of the organisation and the effectiveness of risk controls based on reliable data. - SPIs are reviewed and regularly updated to ensure they remain relevant. - Where the SPIs indicate that a risk control is ineffective, appropriate action is taken. - Achievement of the safety objectives is being monitored by senior management and action taken to ensure they are being met.

COMPONENT #3 - SAFETY ASSURANCE

THE MANAGEMENT OF CHANGE (Annex 19 element 3.2)

What to look for in documentation:

Section	Present
3.2.1	- Triggers for the change management process are defined. - The process also considers business related changes and interfaces with other organisations/departments. - The process is integrated with the risk management and safety assurance processes. - Responsibilities and timelines are defined.
3.2.2	- No additional details required

What to look for in onsite validation:

Potential auditor activities to determine status of Operating and/or Effective:

- Key stakeholders are involved in the process.
- Review what triggers the process.
- Review recent changes that have been through the risk assessment process.
- Check that change is signed off by an appropriately authorised person.
- Transitional risks are being identified and managed.
- Review follow up actions such as whether any assumptions made have been validated.
- Review whether there is an impact on previous risk assessments and existing hazards.
- Review whether consideration is given to the accumulative effect of multiple changes.
- Review that business-related changes have considered safety risks (organisational restructuring, upsizing or downsizing, IT projects, etc.).

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- Evidence of HF issues being addressed during changes.
- Review impact of change on training and competencies.
- Review previous changes to confirm they remain under control.
- Consider how the changes are communicated to those people impacted by the change.

Section	Operating	Effective
3.2.3	- The change management process is being used and includes hazard identification and risk assessments with appropriate risk controls being put in place before a decision to make the change is taken. - HF issues have been considered and been addressed as part of the change management process. - The change is communicated to those affected.	- The change management process is used for all changes that may impact safety, including HF issues, and considers the accumulation of multiple changes. It is initiated in a planned, timely, and consistent manner and includes follow up action that ensures the change was implemented safely. - Risk control and mitigation strategies associated with changes are achieving the planned effect.

COMPONENT #3 - SAFETY ASSURANCE

CONTINUOUS IMPROVEMENT OF THE SMS (Annex 19 element 3.3)

What to Look for in documentation:

Section	Present
3.3.1	- There is a process where the SMS is periodically reviewed that requires consideration of both safety information and safety assurance activities. - Senior management and different departments are involved. - External information is considered in addition to internal information.

What to look for in onsite validation:

Potential auditor activities to determine status of Operating and/or Effective:

- Review the information and safety data used for management decision making and continuous improvement.
 - o information from external occurrences, investigation reports, safety meetings, hazard reports, audits, and safety data analysis all contribute towards continuous improvement of the SMS.
- Evidence of:
 - o lessons learnt being incorporated into SMS and operational processes,
 - o best practices being sought and embraced,
 - o surveys and assessments of organisational culture being carried out and acted upon,
 - o data being analysed and results shared with Safety Committees,

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- follow-up actions.

Section	Operating	Effective
3.3.2	- There is evidence of the SMS being periodically reviewed to support the assessment of its effectiveness. - The review is data informed.	- Changes that are identified during the review are incorporated into the SMS and operational processes for continuous improvement.

COMPONENT #4 - SAFETY PROMOTION

TRAINING AND EDUCATION (Annex 19 element 4.1)

What to look for in documentation:

Section	Present
4.1.1	The programme covers individual safety duties (including roles, responsibilities, and accountabilities.) The programme covers how the organisation's SMS functions. The programme has a process for identifying all personnel (internal and external) that require training. There is a process for measuring the effectiveness of training and to take appropriate action to improve subsequent training.
4.1.2	The programme includes human and organisational factors with the intent of reducing human error. The programme has a process for identifying all personnel (internal and external) that require training. There is a process for measuring the effectiveness of training and to take appropriate action to improve subsequent training.
4.1.3	The competency framework includes both technical and non-technical requirements. There is a process in place to periodically assess the actual competency of personnel against the framework.

What to Look for in Onsite validation:

Potential auditor activities to determine status of Operating and/or Effective:

- Review the SMS training programme including course content and delivery method.
 - Check it includes safety duties and responsibilities and is updated when those change.
 - Check it has been translated into a training plan/schedule for delivery.
- Review the Human Factors training programme including course content and delivery method.
 - Check it has been translated into a training plan/schedule for delivery.
- Check training records against the training programme.
- Review how the competence of the trainers is being assessed and maintained.
- Determine if the training considers feedback from external occurrences, investigation reports, safety meetings, hazard reports, audits, safety data analysis, training, course evaluations, etc.
- Review how training is assessed for new staff and changes in position.

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- Review any training evaluation.
- Ask staff about their own understanding of their role in the organisation's SMS and their safety duties.
- Check that all staff are briefed on regulatory compliance appropriate to their level of involvement.
- Check that all staff are aware of their requirements for compliance with organisational procedures appropriate to their level of involvement.
- Review how competence assessment is carried out on initial recruitment and recurrently.

Section	Operating	Effective
4.1.4	- The SMS training programme is delivering appropriate training to the different staff in the organisation and is being delivered by competent personnel.	- SMS training is evaluated for all aspects (learning objectives, content, teaching methods and styles, tests, etc.) and is linked to the competency framework and assessment. - Training is routinely reviewed to take feedback from different sources into consideration.
4.1.5	- The human and organisational factors training programme is delivering appropriate training to the different staff in the organisation and is being delivered by competent personnel.	- Human and organisational factors training is evaluated for all aspects (learning objectives, content, teaching methods and styles, tests, etc.) and is linked to the competency framework and assessment. - Training is routinely reviewed to take feedback from different sources into consideration.
4.1.6	- There is evidence of the process being used and being recorded.	- The records are routinely reviewed to confirm that the training for personnel do not lapse.
4.1.7	- Personnel can answer basic questions regarding the SMS subjects they are required to understand. - Personnel can answer basic questions regarding subjects from their competency framework.	- The organisation's competence assessment takes appropriate remedial action when necessary and feeds into the training programme.

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COMPONENT #4- SAFETY PROMOTION

SAFETY COMMUNICATION (Annex 19 element 4.2)

What to Look for in Documentation:

Section	Present
4.2.1	- The process determines what, when, and how safety information needs to be communicated. - The process includes contracted organisations and personnel where appropriate. - The means of communication can be adapted to the audience and the significance of what is being communicated.

What to look for in onsite validation:

Potential auditor activities to determine status of Operating and/or Effective:

- Review the sources of information used for safety communication.
- Review the methods used to communicate safety information (e.g., meetings, presentations, emails, website access, newsletters, bulletins, posters, etc.).
- Assess whether the means of communication is appropriate.
- Check for the means for safety communication and determine if it is reviewed for effectiveness and material used to update relevant training.
- Significant events, changes, and investigation outcomes are being communicated.
- Check accessibility to safety information.
- Ask staff about any recent safety communication.
- Review whether information from occurrences is timely communicated to all relevant personnel (internal and external) and has been appropriately deidentified.

Section	Operating	Effective
4.2.2	- Safety critical information is being identified and communicated throughout the organisation to all personnel, as relevant, including contracted organisations and personnel where appropriate.	- The organization analyses and communicates safety critical information effectively through a variety of methods as appropriate to maximise it being understood.
4.2.3	- Personnel can answer basic questions regarding the communication / safety notification process. - If there have been safety communications in recent time personnel can answer basic questions about them.	- Safety communication is assessed to determine how it is being used and understood and to improve it where appropriate.

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Glossary

Term	Definition	Guidance
Causal Factor	When an event or report or circumstance of any kind is investigated all items identified as potentially contributing in any way to the event/report/circumstance shall be identified as being a causal factor / root cause / contributory cause (evidence). Evidence can be used to establish identifiable hazards.	
Competency Framework	A structure that sets out and defines each individual competency (such as problem-solving, people management or technical knowledge) required by individuals working in an organisation or part of that organisation. A dimension of human performance that is used to reliably predict successful performance on the job.	This may be contained in training documents, in job descriptions, or elsewhere. It must be detailed enough to set a standard to measure against.
Correction	A Correction is action, usually immediately or shortly after identification, taken to mitigate or respond to a particular hazard.	This is also sometimes called a Short-Term Corrective Action Plan.
Corrective Action Plan (CAP)	A Corrective Action Plan is action taken to address a cause(s) which allowed the issue to occur. This action is aimed at preventing further occurrences of a similar type.	This is also sometimes called a Long-Term Corrective Action Plan.
Document	A written outline of what the organisation does – the process and methods to be followed. What the organization intends should occur.	The policies, procedures, tasks that outline details including who, what, when, how, where. It includes manuals, SOPs, Job Descriptions, Task/Work Cards.
Hazard	An event, condition, or circumstance, which can lead to a loss.	When evidence / causal factors are identified in an investigation as having the potential to lead to a loss (damage or injury) they are then identified as a hazard and entered into

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Term	Definition	Guidance
		the hazard log / registry
Hazard Log / Registry	Hazard Registry is a document listing of identified (proactively and/or reactively) hazards from the SMS outputs in chronological order based upon date identified. This listing will indicate the initial assessed risk prior to any mitigation and the active risk.	Hazard reports, hearsay reports and intentionally anonymous reports. The Hazard Log / Registry is used in both the Initial and Active Safety Risk Profiles.
Mitigation	Steps taken to reduce risk either in severity or in probability.	It is easier and more common to reduce the probability than it is to reduce the severity.
Record	Written historical proof of what was done. What actually occurred	It includes audits, safety reports, investigations, hazard registers, meeting minutes, training certificates.
Report	A summary of the records or physical observation of task completion.	It is a comparison (or gap analysis) between the records and observation and the documentation (the difference between what the documented process intended and what was actually done)
Risk	The consequence of a hazard measured in terms of probability and severity.	
Risk Acceptance / Tolerance	Acceptance of a particular course of action after considering the probability and severity.	Normally an organizational or managerial decision.
Risk Management	Responding to an identified Risk by: • Eliminating • Avoiding • Mitigating • Transferring • Accepting / Tolerating the Risk.	
Risk Matrix	A visual representation of the Probability and Severity the Risk poses.	Usually has associated actions or time frames for different areas of the graph.
Risk Profile / Safety Risk Profile	The Safety Risk Profile is normally the same documented data as the Hazard Registry, but its order will reflect priority based upon the risk assessment.	The most effective Risk Profile allows the organisation to track both the initial risk assessment and the current risk assessment (to track the improvement in risk).
Risk Registry	The sorted by risk hazard log/registry.	
Safety Data Protection	The protection of safety data and safety	The objective of protecting safety data, safety

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Term	Definition	Guidance
	information captured by or derived from safety reporting systems.	information and their related sources is to ensure their continued availability, with a view to using it for maintaining or improving aviation safety, while encouraging individuals and organizations to report safety data and safety information
Safety Objectives	A short high-level statement of a desired outcome/safety achievement to be accomplished by the service provider's SMS or the State's SSP.	Organizations may use the term "Goals" interchangeably with Objectives
Transitional Risk	Risk that is only present during a change or transition.	