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EVROPSKA KOMISIJA
Generalni sekretariat
B - 1049 Bruselj, Belgija

ZADEVA: Odgovor Republike Slovenije na uradni opomin Evropske komisije zaradi neizpolnjevanja nekaterih obveznosti iz Uredbe (EU) št. 216/2008 Evropskega parlamenta in Sveta z dne 20. februarja 2008 o skupnih predpisih na področju civilnega letalstva in ustanovitvi Evropske agencije za varnost v letalstvu (EASA) ter njenih izvedbenih predpisov, iz Uredbe Komisije (EU) št. 748/2012 o začetni plovnosti in Uredbe Komisije (EU) št. 1321/2014 o stalni plovnosti (kršitev št. 2015/2066)

ZVEZA: Dopis Evropske komisije št. SG-Greffe(2015)D/10921 z dne 25. 9. 2015

Spoštovani,
preko Stalnega predstavništva Republike Slovenije pri Evropski uniji smo prejeli uradni opomin Evropske komisije zaradi neizpolnjevanja nekaterih obveznosti iz Uredbe (EU) št. 216/2008 Evropskega parlamenta in Sveta z dne 20. februarja 2008 o skupnih predpisih na področju civilnega letalstva in ustanovitvi Evropske agencije za varnost v letalstvu (EASA) ter njenih izvedbenih predpisov, iz Uredbe Komisije (EU) št. 748/2012 o začetni plovnosti in Uredbe Komisije (EU) št. 1321/2014 o stalni plovnosti (kršitev št. 2015/2066).
Evropska Komisija je, na podlagi izvedenih inšpekcijskih pregledov s strani EASA, zavzela stališče, da so težave neposredno povezane z nezadostno razpoložljivostjo osebja za opravljanje dejavnosti nadzora, kot ga zahtevata Uredba Komisije (EU) št. 748/2012 z dne 3. avgusta 2012 o določitvi izvedbenih določb za certificiranje zrakoplovov in sorodnih proizvodov, delov in naprav glede plovnosti in okoljske ustreznosti ter potrjevanje projektivnih in proizvodnih organizacij (v nadaljnjem besedilu: Uredba 748/2012) in Uredba Komisije (EU) št. 1321/2014 z dne 26. novembra 2014 o stalni plovnosti zrakoplovov in letalskih izdelkov, delov in naprav ter o potrjevanju organizacij in osebja, ki se ukvarjajo s temi nalogami (v nadaljnjem besedilu: Uredba 1321/2014). Zaradi tega je po mnenju Evropske komisije v Republiki Sloveniji prišlo do težav pri izpolnjevanju obveznosti evropskih predpisov na področju varnosti civilnega letalstva, to pa bi lahko povzročilo varnostna tveganja.
Evropska komisija je v uradnem opominu pozvala Republiko Slovenijo, da v skladu s 258. členom Pogodbe o delovanju Evropske unije v dveh mesecih od prejema uradnega opomina predloži svoje pripombe v zvezi z ugotovitvami iz uradnega opomina.
Vlada Republike Slovenije skladno z 258. členom Pogodbe o delovanju Evropske unije v zvezi z zadevo podaja naslednja pojasnila:
Republika Slovenija se zaveda, da je nujno potrebno vzpostaviti dolgoročne, kakor tudi kratkoročne mehanizme za čim prejšnjo izboljšanje stanja z več ukrepi:

- razbremenitev letalskih nadzornikov na področju plovnosti z več ukrepi,
- zagotoviti stabilnost upravljanja Javne agencije za civilno letalstvo RS,
- preveriti ustreznost in primernost trenutne notranje organiziranosti agencije in zagotoviti jasno določitev pristojnosti, odgovornosti in pooblastil ter posredno s tem uskladitev pooblastil s kompetencami posameznikov, kakor tudi stalno spremljanje kompetenc,
- posodobitev programa usposabljanja (predvsem zaradi sprememb v EU predpisih in zaradi uskladitve s sprejšnjo alinejo) in posredno s tem obnovitev letnega načrta usposabljanja,
- izdelava in spremljanje 24-mesečnega kakor tudi 12-mesečnega cikla stalnih nadzorov posameznih organizacij na področju dela 145, CAMO, dela 147, dela 21G na nivoju CAA in v povezavi s razporejanjem resursov (načrt stalnih nadzorov),
- aktivno izvajanje ACAM programa z rednimi inšpekcijskimi nadzori.

Paralelno z izvajanjem zgornjih sistemskih aktivnosti bo Javna agencija za civilno letalstvo RS takoj pristopila tudi k izvedbi aktivnosti, opredeljenih v priloženi tabeli, seveda pa je to povezano s potrebnimi kadrovskimi resursi. Pri tem je potrebno omeniti, da gre za aktivnosti, s katerimi bo potrebno zagotoviti odpravo konkretnih očitanih neskladij, to je 14415-C, 18051-D, 18048-D, 18036-D, 18038-D, 1981-C in 3753-C ter 18045-D.

Ob tem je potrebno poudariti, da je Javna agencija za civilno letalstvo RS (v nadaljnjem besedilu: agencija) v okviru obstoječih resursov sicer že pristopila k odpravi nekaterih ugotovljenih nepravilnosti, kot na primer je pripravila program za izvajanje ACAM inšpekcij, dopolnila postopke za izvajanje teh inšpekcij, vendar teh inšpekcij do pridobitve strokovnega kadra in kadra, ki bo lahko nudil ustrezno administrativno pomoč strokovnjakom, v zadovoljivem obsegu še ni bilo možno izvesti (14415-C). V okviru obstoječega kadrovskega načrta sta bila v mesecu maju in juniju 2014 zaposlena dva letalska nadzornika, zaposlitev še dodatnih treh je predvidena v začetku leta 2016. S pomočjo Austrocontrol GmbH je bilo organizirano tudi usposabljanje za Del 21 (18036-D, 18038-D). Prav tako je agencija, kljub pomanjkanju števila strokovnjakov na področju plovnosti, v drugi polovici leta 2014 in v letu 2015 na podlagi ocene tveganj izvedla večje število stalnih nadzorov, nekateri od teh so povezani tudi z organizacijami, pri katerih je EASA ugotovila večje število neskladij, vzroke za nastalo stanje (18048-D, 18051-D).

V zvezi z opravljenimi nadzori velja izpostaviti, da je bil v zadnjih 18 mesecih poudarek na kvaliteti nadzorov in na evidentiranju presojanih predpisov in ne toliko kvantiteti. Naj navedemo primer, da je bilo na področju pooblaščenih organizacij za vodenje stalne plovnosti po Del-M, Poddelu-G izvedenih 26 nadzorov (22 od teh »full scope«), zabeleženo pa je bilo več kot 160 neskladij. Na področju pooblaščenih vzdrževalnih organizacij po Del-145 in Del-M Poddelu F je bilo izvedeno 13 nadzorov (»full scope«) in 20 nadzorov v zvezi z odobritvijo sprememb, kar pomeni 33 nadzorov, zabeleženo pa je bilo več kot 175 neskladij.

Pravnomočna rešitev sodnega spora glede razrešitve direktorja agencije, ki je do sedaj preprečeval imenovanje novega direktorja in dopuščal samo imenovanje vršilca dolžnosti direktorja, bo omogočila stabilizacijo upravljanja pristojnega nadzornega organa. Razpis za direktorja bo izveden do 30. 11. 2015, imenovanje s strani Vlade RS pa se pričakuje najkasneje do sredine marca 2016, kar bo omogočilo stabilno delovanje in razvoj agencije.

Za takojšnjo razbremenitev letalskih nadzornikov (do sprejema Pravilnika o ultralahkih letalnih napravah, ki bo pristojnost za preglede plovnosti in preverjanje izpolnjevanja okoljevarstvenih zahtev prenesel na pravno ali fizično osebo, ki bo izpolnjevala vnaprej določene pogoje in katerega sprejem se pričakuje v začetku leta 2016), bodo sklenjene tudi pogodbe o sodelovanju z zunanjimi strokovnjaki, ob predhodni preveritvi izpolnjevanja zahtevanih pogojev, predvsem za izvajanje pregledov plovnosti ultralahkih letalnih naprav in Annex 2 zrakoplovov.

K znatni razbremenitvi letalskih nadzornikov bo v naslednjem trimesečju prispevalo tudi sprejetje Uredbe o izvajanju Uredbe 1321/2014, s spremembami. Le ta bo določala, da bodo preglede plovnosti za za vse balone in druge zrakoplove z MTOM 2730 kg in manj, izvajale CAMO organizacije ((točka i)M.A.901).

Na splošno bo ta ukrep že srednjeročno, kakor tudi dolgoročno gledano pripomogel k razbremenitvi zaposlenih letalskih nadzornikov na področju plovnosti. Sprejem uredbe o izvajanju uredbe je predviden v mesecu januarju 2016.

Pri številnih nadzorih, ki jih je opravila EASA se je z odprtimi neskladji pokazalo, da agencija sistema upravljanja varnosti in skladnosti ne vodi na najvišjem, to je na vodstvenem nivoju, zato je bil na podlagi Akta o notranji organizaciji in sistemizaciji delovnih mest v agenciji, oktobra leta 2014 ustanovljen Sektor za upravljanje varnosti in skladnosti agencije, ki je z delovanjem pričel 1. 7. 2015.
Dodatni razlog za vzpostavitev navedenega sektorja kot notranje organizacijske enote je v potrebi po izpolnjevanju zahtev, ki jih določa Uredba (ES) št. 216/2008 in njena izvedbena pravila, pri čemer imamo v mislih predvsem popis in vzpostavitev postopkov za delovanje pooblaščenih uradnih oseb, kontrolo kakovosti izdanih certifikatov, nadzor skladnosti s pomočjo izvajanja notranjih presoj, pretok informacij do nivoja vodstva ter zbiranje in analizo podatkov, ki bodo tvorili podatkovno bazo, ki bo v pomoč pri ugotavljanju tveganj in na tveganjih utemeljenemu planu nadzorov.
Sistem upravljanja zajema tako elemente zagotavljanja zahtev skladnosti s predpisi (Compliance) kot tudi elemente upravljanja varnosti (Safety). Priročnik za upravljanje varnosti in skladnosti (Compliance and Safery Manual), ki je bil sprejet oktobra 2015, vsebuje izvedbeni načrt s predpisanimi ukrepi za doseganje zahtev skladnosti in letalske varnosti in predstavlja osnovni delovni dokument za vse naloge iz pristojnosti agencije. Zajema organizacijsko strukturo, odgovornosti, politiko in postopke. Upravljanje varnosti mora biti pro-aktivno, kar od sedaj naprej zagotavljamo s postopki za identifikacijo tveganj, z ocenjevanjem tveganj in s predlogi ukrepov za njihovo odpravljanje oz. zmanjševanje. Implementacija sistema upravljanja in spremljanja zahtev skladnosti in letalske varnosti bo potekala v letu 2016.
V prilogi vam posredujemo akcijski načrt aktivnosti za odpravo očitkov iz uradnega opomina, ki je sestavljen iz dveh delov in sicer prvi del zajema sistemske aktivnosti in ukrepe, drugi del pa zajema ukrepe, ki se neposredno nanašajo na odpravo očitanih neskladij izpostavljenih v uradnem opominu (to je 14415-C, 18051-D, 18048-D, 18036-D, 18038-D, 1981-C in 3753-C ter 18045-D).
Del teh aktivnosti se bo navezovalo tudi na akcijski načrt aktivnosti v zvezi z zadnjo EASA standardizacijsko inšpekcijo za področje plovnosti, ki je bila v Sloveniji v oktobru 2015 (AIR.SI.10.2015).
Obenem vam sporočamo, da vas bo Ministrstvo za infrastrukturo Republike Slovenije o napredku pri sprejemu zgoraj omenjenih predpisov sprotno obveščalo.

Poudariti je potrebno, da so za izboljšanje nastale situacije ključne sistemske aktivnosti in ukrepi, s katerimi se bo stanje precej izboljšalo do sredine leta 2016, dokončno pa uredilo do konca leta 2016.

Upamo, da smo z navedenimi informacijami zadovoljivo odgovorili na vaš dopis št. SG-Greffe(2015)D/10921 z dne 25. 9. 2015 zaradi neizpolnjevanja nekaterih obveznosti iz Uredbe (EU) št. 216/2008 Evropskega parlamenta in Sveta z dne 20. februarja 2008 o skupnih predpisih na področju civilnega letalstva in ustanovitvi Evropske agencije za varnost v letalstvu (EASA) ter njenih izvedbenih predpisov iz Uredbe 748/2012/EU in Uredbe 1321/2014/EU o stalni plovnosti (kršitev št. 2015/2066).

Za Vlado Republike Slovenije

mag. Darko Krašovec
generalni sekretar

Priloge:
– Akcijski načrt aktivnosti sestavljen iz dveh delov:
  1. Sistemske aktivnosti in ukrepi

2. Izvedba ukrepov, ki se neposredno nanašajo na odpravo očitanih neskladij, to je 14415-C, 18051-D, 18048-D, 18036-D, 18038-D, 1981-C in 3753-C ter 18045-D

– Osnutek Uredbe o izvajanju Uredbe 1321/2014 s spremembami
– Priročnik za upravljanje varnosti in skladnosti

PRILOGA 1

1. **Sistemske aktivnosti in ukrepi:**

začetek aktivnosti	konec aktivnosti	naloga	Odgovorna oseba	Ukrep, končni izsledek (deliverable/ measure)
22. 09. 2015	29. 02. 2016	Dodatne 3 kompetentne osebe na področju plovnosti	Minister za infrastrukturo, VRS in Direktor CAA	3 dodatni zaposleni strokovnjaki na področju plovnosti
05. 11. 2015	15. 01. 2016	Uredba o izvajanju uredbe 1321/2014, s spremembami	Minister za infrastrukturo in VRS	Sprejem in objava omenjene uredbe z namenom prenosa pregledov plovnosti na CAMO organizacije
01.10. 2015	29. 1. 2016	Novi ULN pravilnik	Minister za infrastrukturo	Sprejem in objava pravilnika
20.01. 2016	30.06. 2016	Prenos nalog iz CAA drugo pravno ali fizično osebo.	MzI in CAA	• Potrjen načrt prenosa • Pregled izpolnjevanja zahtevanih pogojev • Prenos zadev (spisi) iz CAA na drugo osebo
02. 11. 2015	15. 01. 2016	Stabiliziranje upravljanja Agencije za civilno letalstvo – razpis za direktorja	Predsednik sveta agencije	Izvedba razpisa in predlog za imenovanje direktorja
16.01. 2016	17.03. 2016	Stabiliziranje upravljanja Agencije za civilno letalstvo – imenovanje direktorja	minister za infrastrukturo in VRS	imenovanje direktorja za 5-letno obdobje
27.10. 2015	15.12. 2015	Program usposabljanja za uradne osebe CAA	Podpora poslovanju, direktor in minister za infrastrukturo	• Potrjen posodobljen program usposabljanja • Usklajen letni načrt usposabljanja 2016 z novim programom
02. 11. 2015	29. 01. 2016	Ocena človeških virov za 2016	Podpora poslovanju, direktor CAA in vodje sektorjev	• potrjena ocena človeških virov (HR Assessment) • Predlog potrebnih človeških virov • Man-hour plan • Uskladitev pooblastil s kompetencami posameznika
20.10. 2015	26.11. 2015	Načrt stalnih nadzorov za 24 mesečni cikel skupaj z letnim načrtom stalnih nadzorov	Koordinatorji, Vodje sektorjev direktor	Potrjen načrt stalnih nadzorov na področju dela 145, CAMO, dela 147, dela 21G
20.10. 2015	26.11. 2015	Letni načrt ACAM Inšpekcij	Koordinator, Vodja sektorja in direktor	Potrjen načrt inšpekcijskih nadzorov
22.10. 2015	29.01. 2016	Sodelovanje z drugimi NAA	direktor	Podpisan Sporazum z eno od NAA
25.08. 2015	30.12. 2016	Administrativno tehnična podpora področju plovnosti	Podpora poslovanju, koordinator, vodja sektorja in direktor	Podpisane pogodbe (podjemne ali o zaposlitvi)

2. **Izvedba ukrepov, ki se neposredno nanašajo na odpravo očitanih neskladij, to je 14415-C, 18051-D, 18048-D, 18036-D, 18038-D, 1981-C in 3753-C ter 18045-D.**

1. Del M.B.303 Priloge I k Uredbi 1321/2014 določa, da Javna agencija za civilno letalstvo Republike Slovenije (CAA-SI) spremlja status plovnosti flote v svojem registru s pripravo in izvajanjem programa za spremljanje stalne plovnosti zrakoplova (program ACAM). Vendar so inšpekcijski pregledi, ki jih je izvedla EASA, pokazali, da je SI-CAA pomanjkljivo izvedla program ACAM glede podrobnih inšpekcijskih pregledov in analize ključnih vzrokov (ugotovitev št. 14415 (C)). Zato SI-CAA nima zadostnega pregleda nad statusom svoje flote in ne more odkriti trendov v zvezi s plovnostjo.

OPOMBA:
Finding No. 14415 (C).: A survey programme (ACAM) has been established, but the execution of it does not ensure that all requirements of the regulation are met. E.g:
• Ramp inspections vs in-depth inspections not clear.
• Physical inspection of aircraft not always done during in-depth inspections.
• Root cause analyses not performed
Ugotovitev št. 14415 (C).: Izdelan je bil program preverjanj (ACAM), vendar izvedba le tega ne zagotavlja, da so izpolnjene vse zahteve iz te uredbe. npr.:
• razmerje preverjanj zrakoplovov v operaciji proti poglobljenim preverjanjem zrakoplovov ni jasno;
• med poglobljenim preverjanjem zrakoplovov ni bil vedno izveden fizični pregled zrakoplova;
• analize glavnih vzrokov niso bile izvedene.

Predlog ukrepov:
1. ACAM program in postopki bodo posodobljeni in izboljšani; Rok za izvedbo 15.11. 2015;
2. Zaradi pomanjkanja letalskih nadzornikov plovnosti ali razpoložljivih strokovnih ur bo zagotovljeno dodatno zaposlovanje na strokovnem področju plovnosti; Rok za izvedbo dodatnih zaposlitev je konec februarja 2016;
3. prenos pooblastil na podlagi pravilnika za področje ultralahkih letalnih naprav na zunanjo pravno oziroma fizično osebo in sprejem uredbe o izvajanju uredbe 1321/2014, na podlagi katere bodo v Republiki Sloveniji za izvajanje pregledov plovnosti za zrakoplove in balone iz točke 2 odstavka (i) M.A. 901 izvajale izključno CAMO organizacije.

Obrazložitev:
1. ACAM program in postopki so bili posodobljeni in izboljšani, pri čemer se je upoštevalo zadnje spremembe, uvedene z Uredbo Komisije 1535/2015 o spremembi Uredbe 1321/2014 in so trenutno v postopku notranje odobritve v agenciji. Kopije posodobljenih in izboljšanih postopkov so bile predane v pregled ekipi EASA standardizacijske inšpekcije tekom zadnje inšpekcije (12.-16. oktober 2015).
2. Konec septembra 2015 je bila dana pisna zaveza ministra, pristojnega za promet, da formalno predlaga Vladi Republike Slovenije, da odobri dodatnih 6 novih delovnih mest v CAA-SI. Vlada Republike Slovenije je z izdajo odločbe št 110-61/2015/26 z dne 10. september 2015, odločila, da potrdi predlagane nove zaposlitve. Po odločitvi direktorja agencije bodo 3 nove zaposlitve na delovno mesto letalski nadzorniki za področje plovnosti, kar bo prispevalo tudi k učinkovitosti na strokovnem področju plovnosti.
3. Za povečanje razpoložlljivih ur letalskih nadzornikov na področju plovnosti bo sprejetih več ukrepov:
   - prenos pooblastil na podlagi pravilnika za področje ultralahkih letalnih naprav na zunanjo pravno oziroma fizično osebo,
   - sprejem uredbe o izvajanju uredbe 1321/2014, na podlagi katere bodo v Republiki Sloveniji za izvajanje pregledov plovnosti za zrakoplove in balone iz točke 2 odstavka (i) M.A. 901 izvajale izključno CAMO organizacije.

2. Del M.B.102(a) Priloge I k Uredbi 1321/2014 določa, da države članice imenujejo pristojni organ, ki je odgovoren za izdajo, podaljšanje, spremembo, začasno ukinitev ali preklic odobritev in za nadzor stalne plovnosti ter da ta pristojni organ vzpostavi organizacijsko strukturo in dokumentirane postopke. Vendar so inšpekcijski pregledi, ki jih je izvedla EASA, pokazali, da CAA-SI ni odkrila neskladnosti v zvezi s pregledi plovnosti in kvalifikacijo osebja za pregled plovnosti pri eni potrjeni organizaciji (ugotovitev št. 18051(D)). Posledično bi lahko bili pregledi plovnosti izvedeni za vrste zrakoplovov, ki niso vključene v obseg dela organizacije za vodenje stalne plovnosti (CAMO), za katere osebje ni usposobljeno.

OPOMBA:
Finding No. 18051(D): The following Undertaking Non-Compliances are not correlated to any specific finding at the Competent Authority level.
The Competent Authority shall further investigate such non-compliances, take appropriate action and report the results to the Agency by means of the provided follow-up form.
Ugotovitev št. 18051(D): Naslednja neskladja pri izvajalcu dejavnosti niso povezana z nobenimi posebnimi ugotovitvami na nivoju nadzornega organa.
Nadzorni organ mora nadalje preveriti taka neskladja, izvesti primerne ukrepe in poročati o rezultatih Agenciji na obrazcu posredovanemu s strani Agencije za spremljanje realizacije.

Predlog ukrepov:

1. Na podlagi ugotovitev, katerih osnova so UNC-i, bo CAA-SI odprla neskladja, o tem pa bo obvestila organizacijo. CAA bo nadalje ugotavljala taka neskladja za vsako organizacijo. Zato predlagamo dva ločena ukrepa:
    1) Na podlagi ugotovitev UNC-ov bodo odprta neskladja in organizacija bo o tem obveščena. Rok za izvedbo je bil 31.10.2014 in je že izveden;
    2) CAA bo nadalje ugotavljala taka neskladja za vse druge organizacije. Rok za izvedbo konec maja 2016 (osredotočen nadzor po tematskem sklopu po prenovljenem internem postopku);
2. Na osnovi rezultatov nadzora bo CAA-SI začasno odvzela/preklicala/omejila potrdilo organizaciji ali pa zaprla neskladja na osnovi dokazil. Rok za izvedbo je bil 31.10.2014. Zaradi kompleksnosti zadev je bilo izvedeno v letu 2015 in sicer, z začasnim odvzemom potrdila M.G. organizacije v aprilu 2015, dokončno pa je bilo preklicano potrdilo organizacije v avgustu 2015;
3. Interni postopek CAMO Pregledi plovnosti in CAMO Osebje za izvajanje pregledov plovnosti-kvalifikacije in usposabljanje (Poddel I) bo pregledan in prenovljen ter spremljan v okviru Sistemu upravljanja varnosti in skladnosti v CAA; Rok za izvedbo tega ukrepa je sredina novembra 2015;
4. Za letalske nadzornike bo zagotovljeno dodatno usposabljanje po predlaganem letnem načrtu usposabljanja;
5. Po dokončanju prenove internega postopka se izvede interno usposabljanje letalskih nadzornikov za konkretni postopek v obliki delavnice. Za letalske nadzornike bo zagotovljeno redno periodično usposabljanje po predlaganem letnem načrtu usposabljanja in sicer tečaj Advanced Human Factors v začetku decembra 2015, tečaj Effective Audit Techniques for Regulators, v sredini decembra 2015 ter Quality Management - Principles & Practice in an Aviation Environment v sredini januarja 2016. Rok za izvedbo je konec novembra 2015 za interno delavnico ter konec januarja 2016 za ostale tečaje.

Obrazložitev:

1. CAA je obvestila organizacijo I2I-145 o neskladju (EASA UNC AIR.SI.02.2014) 20. maja 2014.
2. Sprva je CAA načrtovala izvedbo nadaljnjega ugotavljala takih neskladij za vsako organizacijo v sklopu rednih 24 mesečnih polnih nadzorov organizacij. Ekipa EASA standardizacijske inšpekcije je tekom izvedbe zadnje inšpekcije v oktobru 2015 naletela na podobno situacijo v drugi CAMO organizaciji (PANONIA, UNC 201). CAA-SI bo zato nadalje ugotavljala taka neskladja za vsako organizacijo z izvedbo

osredotočenega nadzora po tematskem sklopu po prenovljenem internem postopku, prej, kot je bilo prvotno predvideno, kjer bo celoten cikel nadzorov zaključen predvidoma do konca maja 2016.

3. Od 13. do 16. januarja 2015 je CAA-SI izvedla presojo CAMO organizacije I2I – G. Zaradi ugotovljenih neskladij je bila izdana odločba št. 06111-2/2015/2, z dne 4. februar 2015, ki je omejila potrdilo organizacije, v aprilu 2015 je prišlo do začasnega odvzema potrdila, v avgustu 2015 pa do preklica potrdila organizacije.
4. Interni postopek CAMO Pregledi plovnosti in CAMO Osebje za izvajanje pregledov plovnosti-kvalifikacije in usposabljanje (Poddel I) bo pregledan in prenovljen predvidoma do sredine meseca novembra 2015 ter nadalje spremljan v okviru sistema upravljanja varnosti in skladnosti CAA.
5. Po dokončanju prenove internega postopka se izvede interno usposabljanje letalskih nadzornikov za konkretni postopek v obliki delavnice predvidoma do konca novembra 2015. Za letalske nadzornike bo zagotovljeno redno periodično usposabljanje po predlaganem letnem načrtu usposabljanja in sicer tečaj Advanced Human Factors v začetu decembra 2015, tečaj Effective Audit Techniques for Regulators, v sredini decembra 2015 ter Quality Management - Principles & Practice in an Aviation Environment v sredini januarja 2016.

3. Del M.B.704(b) Priloge I in del 145.B.30(2) Priloge II določata, da pristojni organ pregleda odobrene organizacije glede izpolnjevanja zahtev iz ustreznih delov v obdobjih, ki ne presegajo 24 mesecev. Vendar so inšpekcijski pregledi, ki jih je izvedla EASA, pokazali, da SI-CAA ni odkrila neskladnosti v zvezi z izvajanjem pregledov plovnosti, usposabljanjem in kvalifikacijo osebja za pregled plovnosti ter pogoji za skladiščenje pri eni potrjeni organizaciji (ugotovitev št. 18048(D)). Zato ni bilo mogoče zagotoviti, da je preglede plovnosti primerno opravilo usposobljeno osebje in da se skladiščeni material ustrezno spremlja, kar posledično vpliva na plovnost zrakoplova, ki ga vodi organizacija.

OPOMBA:

Finding No. 18048(D): The sample auditing performed by the EASA Team at the selected Undertaking (I2I – G +145) highlighted that CAA-SI did not identify the non-compliances described in the respective UNCs, related to the following:

- Airworthiness Review performance
- Training and qualification of AR staff
- Storage conditions

Ugotovitev št. 18048(D): vzorčni nadzor izveden s strani EASA ekipe pri izbranem izvajalcu dejavnosti (I2I-G+145) je osvetlil, da CAA-SI ni identificirala neskladij opisanih v predmetnih UNC-jih, ki se nanašajo na:

- izvedbo pregleda plovnosti,
- usposabljanje in kvalifikacije osebja za izvajanje pregledov plovnosti,
- pogoje skladiščenja.

Predlog ukrepov:

1. Na podlagi ugotovitev na osnovi UNC-ov bodo odprta neskladja in organizacija bo o tem obveščena. CAA bo nadalje ugotavljala taka neskladja za vsako organizacijo. Predlaga se dva ukrepa:
    1) Na podlagi ugotovitev na osnovi UNC-ov bodo odprta neskladja in organizacija bo o tem obveščena. Rok za izvedbo je bil 31.10.2014 in je že izvedeno;
    2) CAA bo nadalje ugotavljala taka neskladja za vsako organizacijo; Rok za izvedbo konec maja 2016 (osredotočen nadzor po tematskem sklopu po prenovljenem internem postopku);

1. Na osnovi rezultatov nadzora bo CAA-SI začasno odvzela/preklicala/omejila potrdilo organizaciji ali pa zaprla neskladja na osnovi dokazil. Rok za izvedbo je bil 31.10.2014. Izvedeno je bilo z začasnim odvzemom potrdila M.G. (CAMO) organizacije. Ukrep je s tem realiziran;
4. Interni postopki (CAMO) organizacije, (glej neskladje 2, 18051 (D)), Part 145 and Part M.F., pogoji skladiščenja, bo pregledan in prenovljen ter spremljan v sistemu upravljanja varnosti in skladnosti CAA; Rok za izvedbo je sredina decembra 2015;

5. Za letalske nadzornike bo zagotovljeno dodatno usposabljanje po potrjenem letnem načrtu usposabljanja. Po dokončanju prenove internih postopkov se izvede interno usposabljanje letalskih nadzornikov za konkretni postopek v obliki delavnice. Za letalske nadzornike bo zagotovljeno redno periodično usposabljanje po letnem načrtu usposabljanja in sicer tečaj Advanced Human Factors v začetku decembra 2015, tečaj Effective Audit Techniques for Regulators, v sredini decembra 2015 ter Quality Management - Principles & Practice in an Aviation Environment v sredini januarja 2016. Rok za izvedbo konec decembra 2015 za interno delavnico ter konec januarja 2016 za ostale tečaje.

Obrazložitev:

1. Za M.G. (CAMO) organizacije, glej prejšnje neskladje 2, 18051 (D).
CAA je obvestila organizacijo i2i-145 o neskadju (EASA UNC AIR.SI.02.2014) 20. maja 2014.
2. Za M.G. (CAMO) organizacije, glej prejšnje neskladje 2, 18051 (D).
Sprva je CAA-SI načrtovala izvedbo nadaljnjega ugotavljala takih neskladij za vsako organizacijo v sklopu rednih 24 mesečnih polnih nadzorov organizacij. Ekipa EASA standardizacijske inšpekcije je tekom izvedbe zadnje inšpekcije v oktobru 2015 naletela na podobno situacijo v drugi vzdrževalni organizaciji (Adria Airways Tehnika, UNC-s 109 and 110). CAA bo zato nadalje ugotavljala taka neskladja za vsako organizacijo z izvedbo osredotočenega nadzora po tematskem sklopu po prenovljenem internem postopku, prej, kot je bilo prvotno predvideno, kjer bo celoten cikel nadzorov zaključen predvidoma do konca maja 2016.
3. Za M.G. (CAMO) organizacije, glej prejšnje neskladje 2, 18051 (D).
CAA je izvedla celotno presojo po Del-145 v zadnjem tednu januarja 2015. Obseg potrdila o ustreznosti je bil zadnji dan izvedbe presoje omejen - izdana odločba potrdilo o ustreznosti z omejitvami glede na predhodno.
Med izvedbo presoje je bilo 5 UNC-jev predhodno ugotovljenih s strain EASA inšpekcije dopolnjeno z novih 47 neskladji, skupaj 52 neskladij.
Dne 6. februarja 2015 je CAA SI obvestila vzdrževalno organizacijo SI.145.29 o vseh 52 neskladjih, od katerih jih je bilo veliko povezanih sistemsko-nepravilno delovanje Sistema kakovosti.
Izvedeno je bilo več sestankov na CAA-SI, ampak zaradi nezadostne zavzetosti organizacije, na primer za pristop k sistemskim problemom ter pomanjkanja pripravljenosti organizacije za konstruktivni dialog, se je CAA-SI dne 18. maja 2015 odločila za začasni odvzem potrdila o ustreznosti.
Zaradi dodatnih dveh oseb (in pogodbe z izkušenim presojevalcem) ter veliko sistemskega dela na sistemu kakovosti, je CAA-SI dne 18.6.2015 zaključila začasni odvzem potrdila o ustreznosti in podaljšala rok za zaprtje neskladij do 30. avgusta 2015 (dokazilo izvedenih ukrepov dne 15. avgusta 2015). Tekom tega obdobja je CAA-SI organizacijo nadzorovala zelo natančno, na primer izveden je bil 100% nadzor produkta.
Po izvedenih 3 nadzorih za spremljanje stanja (27. avgusta 2015 - lokacija Brink, 3. septembra 2015 - lokacija Brnik in 9. septembra 2015 – Ljubljana, je CAA zaprla vseh 52 neskladij. Neskladja št. 48, 49, 50, 51 in 52 - povezana z UNC-ji ugotovljenimi s strani EASA AIR.SI.02.2014 so bila zaprta na osnovi dokazil dne 27. avgusta 2015).
4. Za M.G. (CAMO) organizacije, glej prejšnje neskladje 2, 18051 (D).
Interni postopek Part 145 and Part M.F., Pogoji skladiščenja, bo pregledan in prenovljen predvidoma do sredine meseca decembra 2015 ter nadalje spremljan v sistemu upravljanja varnosti in skladnosti CAA.
5. Za M.G. (CAMO) organizacije, glej prejšnje neskladje 2, 18051 (D).
Po dokončanju prenove internega postopka se izvede interno usposabljanje letalskih nadzornikov za konkretni postopek v obliki delavnice predvidoma do konca decembra 2015. Za letalske nadzornike bo zagotovljeno redno periodično usposabljanje po predlaganem 3 letnem načrtu usposabljanja in sicer tečaj Advanced Human Factors v začetku decembra 2015, tečaj Effective Audit Techniques for Regulators, v sredini decembra 2015 ter Quality Management - Principles & Practice in an Aviation Environment v sredini januarja 2016.

4. V točkah (a) in (b) dela 21.B.326 Priloge I k Uredbi 748/2012 je določeno, da pristojni organ države članice registracije izda spričevalo o plovnosti za nov in rabljen zrakoplov ob predložitvi pravilne dokumentacije. Del M.B.301(a) Uredbe 1321/2014 določa, da pristojni organ odobri programe vzdrževanja. Vendar so inšpekcijski pregledi, ki jih je izvedla EASA, pokazali, da SI-CAA ne odobrava programov vzdrževanja za prenesene zrakoplove (ugotovitev št. 18036). Zato ni mogoče zagotoviti pogojev za varno obratovanje, saj ni zagotovljeno, da se zrakoplov vzdržuje v okviru primernega programa vzdrževanja.

OPOMBA:
Finding No. 18036: CAA-SI is not considering the responsibilities deriving from M.1.4(i) when transferring an aircraft into its national register and issuing a Certificate of Airworthiness on the basis of Form 52 or valid ARC from another Member State.
Therefore, there is a potential risk that aircraft is operated without a valid Maintenance Programme (MP), i.e. the authority has not ensured that the a/c is in condition for safe operation.
Ugotovitev št. 18036: CAA-SI ne upošteva obvez izhajajočih iz M.1.4(i) pri prepisu zrakoplova v njen nacionalni register in izdaji Spričevala o plovnosti na osnovi EASA obrazca 52 ali veljavnega Potrdila o pregledu plovnosti (ARC) iz registra druge države članice.
Tako nastane potencialno tveganje, da je zrakoplov v letalski operaciji brez veljavnega programa vzdrževanja (MP), torej nadzorni organ ni zagotovil, da je zrakoplov v stanju za varno letalsko operacijo.

Predlog ukrepov:

1. Izvesti dodaten pregled dokumentacije zrakoplovov s pregledov plovnosti ter ostalih zapisov zrakoplovov ter na podlagi tega pregledati seznam odobrenih programov vzdrževanja; Rok za izvedbo sredina novembra 2015;
2. Interni postopek CAA bo pregledan in po potrebi razvit dodatni postopek in kontrolna lista prenovljen ter implementirana kontrolna točka v postopku; Rok za izvedbo konec novembra 2015;
3. Izvedeno bo interno usposabljanje letalskih nadzornikov za konkretni postopek. Rok za izvedbo konec decembra 2015;

Obrazložitev:

1. Izvedeno je že bilo preverjanje celotne flote zrakoplovov v zvezi z odobritvami programov vzdrževanja. Ugotovljeno je, da noben zrakoplov z veljavnim potrdilom o pregledu plovnosti (ARC), ni brez odobrenega programa vzdrževanja. Predlagano je bilo, da EASA zapre ta ukrep tekom zadnje standardizacijske inšpekcije (oktober 2015). Ekipa EASA standardizacijske inšpekcije pa je tekom izvedbe inšpekcije ugotovila podobno situacijo v CAMO organizaciji (PANONIA, UNC-s 202). Problem je bil migracija med različnimi CAMO organizacijami, kjer se prvotno preverjanje celotne flote zrakoplovov ni pokazalo kot zadosti globoko. Zaradi preklica potrdila o ustreznosti ene od večjih CAMO organizacij v letu 2015, se je zgodilo znatno število migracij med različnimi CAMO organizacijami. Zato je v teku dodatno preverjanje celotne flote v zvezi z ustreznostjo programov vzdrževanja, kjer se preverjajo tudi vse migracije med CAMO organizacijami in zamenjave lastništva zrakoplovov za zasebno uporabo. Zaključek preverjanja je bil konec oktobra 2015.
2. Preverjen je bil interni postopek CAA-SI in ugotovljeno je bilo, da je definiran in dovolj dober, da se prvotno ugotovljeno neskladje ob upoštevanju postopka ne more zgoditi. Ugotovljeno je bilo, da odobreni postopek ni bil pravilno uporabljen (človeški faktor). Kljub temu je postopek v prenovi, razvita je bila dodatna kontrolna lista, ki je v postopku interne odobritve. Kopije postopka in kontrolnih list so bile vročene ekipi EASA standardizacijske inšpekcije tekom zadnje inšpekcije (oktober 2015). Pričakovan zaključek preverjanja je konec novembra 2015.

Po dokončanju prenove internega postopka se izvede interno usposabljanje letalskih nadzornikov za konkretni postopek v obliki delavnice predvidoma do konca decembra 2015. Za letalske nadzornike bo zagotovljeno tudi redno periodično usposabljanje v skladu z letnim načrtom usposabljanja in sicer tečaj Advanced Human Factors v začetku decembra 2015,

tečaj Effective Audit Techniques for Regulators, v sredini decembra 2015 ter Quality Management - Principles & Practice in an Aviation Environment v sredini januarja 2016.

5. Del 21.B.525(b) Priloge I k Uredbi 748/2012 določa, da pristojni organ (v primeru pogojev letenja, povezanih z varnostjo projektiranja) izda dovoljenja za letenje, potem ko so bili pogoji letenja odobreni s strani Evropske agencije za varnost v letalstvu (EASA) ali projektivne organizacije. Vendar so inšpekcijski pregledi, ki jih je izvedla EASA, pokazali, da je SI-CAA izdala dovoljenje za letenje brez odobritve pogojev letenja s strani agencije EASA ali projektivne organizacije (ugotovitev št. 18038(D)). Zato je zrakoplov letel brez ustreznih pogojev letenja.

OPOMBA:
Finding No. 18038(D): The CAA-SI incorrectly approved the flight conditions in one case, even though the safety of design was affected.
Ugotovitev št. 18038(D): CAA-SI je nepravilno odobrila pogoje letenja v enem primeru, čeprav je konkretna zadeva posegala v varnost projekta.

Predlog ukrepov:
1. Organizirati usposabljanje z razpravo o različnih primerih izdanih s strani CAA-SI.; 31.10.2014 – Izvedeno septembra 2014 – Austrocontrol. Predlaga se zaključek tega ukrepa, saj je bil že realiziran;
2. Interni postopek CAA bo pregledan in po potrebi prenovljen. Izvedeno bo interno usposabljanje za letalske nadzornike za konkretni postopek; Rok za izvedbo konec decembra 2015;

Obrazložitev:
1. 11. septembra 2014 je bilo izvedeno interno usposabljanje v obliki delavnice za takratno verzijo postopka za »Del-21, Poddel P (PtF in pogoji letenja)«.
2. Po dokončanju prenove internega postopka se izvede interno usposabljanje letalskih nadzornikov za konkretni postopek v obliki delavnice predvidoma do konca decembra 2015.

6. Del M.B.102(b) Priloge I, del 145.B.10(2) Priloge II, del 66.B.10(b) Priloge III in del 147.B.10(b) Priloge IV k Uredbi 1321/2014 ter del 21.B.25(b) Priloge I k Uredbi 748/2012/EU določajo, da mora imeti SI-CAA dovolj osebja za opravljanje dodeljenih nalog in zagotavljanje skladnosti z ustreznimi zahtevami posameznega dela. Vendar so inšpekcijski pregledi, ki jih je izvedla EASA, pokazali, da SI-CAA nima dovolj ustreznega osebja, tako glede števila kot tudi glede usposobljenosti, da bi lahko izpolnjevala zahteve iz uredb in izvajala zadosten pregled (ugotovitvi št. 1981(C) in št. 3753(C)). Zaradi tega ni mogoče zagotoviti ustreznega izvajanja zakonodaje EU.

OPOMBA:
Findings No. 1981(C) in št. 3753(C): DCA is not appropriately staffed, both in number and competence, in order to carry out the requirements of Part-66/Part-147, Part-145 and Part-M
Ugotovitvi št. 1981(C) in št. 3753(C): DCA nima ustreznega osebja, tako številčno kot tudi po kompetencah, da bi lahko izvajal zahteve Del-66/Del-147, Del-145 in Del-M

Predlog ukrepov:
1. Tri nove zaposlitve na delovno mesto letalski nadzorniki za področje plovnosti;
2. Sprememba zakonskih podlag za prenos izvajanja pregledov plovnosti na CAMO organizacije (točka 2 odstavka i M.A.901) ter na druge fizične ali pravne osebe (annex 2 zrakoplovi) do konca januarja 2016 oziroma do 30.06.2016.
3. Ocena človeških virov za leto 2016 bo izdelana do 29. januarja 2016.

Obrazložitev:

1. Konec septembra 2015 je bila dana pisna zaveza ministrstva pristojnega za promet, da formalno predlaga Vladi Republike Slovenije, da odobri dodatnih 6 novih zaposlitev za CAA. Vlada Republike Slovenije je z izdajo odločbe št. 110-61/2015/26 z dne 10. september 2015, odločila, da potrdi predlagane nove zaposlitve. Po odločitvi direktorja agencije bodo 3 nove zaposlitve za delovna mesta letalski nadzorniki za področje plovnosti, kar bo prispevalo tudi k učinkovitosti na strokovnem področju plovnosti in razbremenitvi obstoječih letalskih nadzornikov.
2. Za povečanje razpoložlljivih ur letalskih nadzornikov na področju plovnosti bo sprejetih več ukrepov:
    - prenos pooblastil na podlagi pravilnika za področje ultralahkih letalnih naprav na zunanjo pravno oziroma fizično osebo,
    - sprejem uredbe o izvajanju uredbe 1321/2014, na podlagi katere bodo v Republiki Sloveniji za izvajanje pregledov plovnosti za zrakoplove in balone iz točke 2 odstavka M.A. 901 izvajale izključno CAMO organizacije.
3. V sklopu ocene človeških virov za področje plovnosti za 2016 se bo izdelal tudi predlog potrebnih človeških virov, kakor tudi man hour plan. Obenem bo ta ukrep obsegal tudi preverjanje obstoječih pooblastil in uskladitev s strokovnimi kompetencami posameznika.

7. Del 147.B.120(a) Priloge IV k Uredbi 1321/2014 določa, da pristojni organ v celoti revidira organizacije za usposabljanje za vzdrževanje glede izpolnjevanja zahtev iz dela 147 v obdobjih, ki ne presegajo 24 mesecev, kar vključuje spremljanje vsaj enega tečaja usposabljanja in enega izpita, ki ju vodi organizacija. Vendar so inšpekcijski pregledi, ki jih je izvedla EASA, pokazali, da SI-CAA pri eni odobreni organizaciji za usposabljanje za vzdrževanje ni ugotovila neskladnosti, povezane s standardom teoretičnega dela izpita, vmesnim obdobjem med zaporednimi poskusi opravljanja izpita in obsegom dela (ugotovitev št. 18045(D)). Posledično usposabljanja in izpiti niso bili v skladu zahtevami iz dela 66 Priloge III, kar bi lahko vodilo do nevarnih okoliščin.

OPOMBA:
Finding No. 18045(D): The sample auditing performed by the EASA Team at the selected Undertaking (Aero A&T) highlighted that CAA-SI did not identify the non-compliances described in the respective UNCs, related to the following:
- Theoretical type examination standard
- The waiting period between consecutive attempts
- Scope of work

Ugotovitev št. 18045(D): Vzorčna presoja izvedena s strani EASA ekipe pri izbranem subjektu (Aero A&T) je pokazala, da CAA-SI ni identificirala neskladij opisanih v predmetnih UNC-jih, ki se nanašajo na:
- Standard izvedbe teoretičnega izpita ta tip zrakoplova
- Obvezno dobo čakanja med dvema zaporednima poskusoma
- Obseg del

Predlog ukrepov:
1. Na podlagi ugotovitev na osnovi UNC-ov bodo odprta neskladja in organizacija bo o tem obveščena. CAA bo nadalje ugotavljala taka neskladja za vsako organizacijo. V zvezi s tem se bosta izvedla dva ukrepa:
    1. Na podlagi ugotovitev na osnovi UNC-ov bodo odprta neskladja in organizacija bo o tem obveščena. Rok za izvedbo je bil 31.10.2014 in je bilo že izvedeno;
    2. CAA bo nadalje ugotavljala taka neskladja za vsako organizacijo; Rok za izvedbo konec marca 2016 (osredotočen nadzor po tematskem sklopu po prenovljenem internem postopku);
2. Na osnovi rezultatov nadzora bo CAA-SI začasno odvzela/preklicala/omejila potrdilo organizaciji ali pa zaprla neskladja na osnovi dokazil. Rok za izvedbo je bil 30.11.2014 in je bil že izveden;
3. Interni postopek Del-147, standard teoretičnega izpita za tip zrakoplova vključno s kontrolo obvezne dobe čakanja med dvema zaporednima poskusoma bo pregledan

in prenovljen ter spremljan v sistemu upravljanja varnosti in skladnosti CAA; Rok za izvedbo konec novembra 2015;

4. Za letalske nadzornike bo zagotovljeno dodatno usposabljanje po letnem načrtu usposabljanja. Po dokončanju prenove internega postopka se izvede interno usposabljanje letalskih nadzornikov za konkretni postopek v obliki delavnice. Za letalske nadzornike bo zagotovljeno redno periodično usposabljanje po letnem načrtu usposabljanja in sicer tečaj Advanced Human Factors v začetku decembra 2015, tečaj Effective Audit Techniques for Regulators, v sredini decembra 2015 ter Quality Management - Principles & Practice in an Aviation Environment v sredini januarja 2016. Rok za izvedbo konec novembra 2015 za interno delavnico ter konec januarja 2016 za ostale tečaje;

Obrazložitev:

1. CAA je obvestila organizacijo AERO A&T o neskladju (EASA UNC AIR.SI.02.2014). Sprva je CAA-SI načrtovala izvedbo nadaljnjega ugotavljanja takih neskladja za vsako organizacijo v sklopu rednih 24 mesečnih polnih nadzorov organizacij. Ekipa EASA standardizacijske inšpekcije je tekom izvedbe zadnje inšpekcije v oktobru 2015 naletela na dodatno situacijo v drugi Del-147 organizaciji (Adria Airways Tehnika, UNC-s 101, 102, 103 and 104). CAA-SI bo zato bo nadalje ugotavljala taka neskladja za vsako organizacijo z izvedbo osredotočenega nadzora po tematskem sklopu po prenovljenem internem postopku, prej, kot je bilo prvotno predvideno, kjer bo celoten cikel nadzorov zaključen predvidoma do konca februarja 2016.
2. CAA-SI se je pripravljala za izvedbo osredotočenega nadzora Delu-147:
   - Organizacija je poslala končno verzijo CAP (načrt korektivnih ukrepov) dne 29.9.2014.
   - CAA je odobrila CAP za vsa neskladja po dokumentiranem postopku odobritve dne 3.10.2014.
   - Organizacija je vrnila potrdilo o ustreznosti MTOA CAA dne 29. oktobra 2014.

Zato so bile vse nadaljnje aktivnosti v zvezi z UNC-ji zaključene.
3. Interni postopek Del-147, standard teoretičnega izpita za tip zrakoplova vključno s kontrolo obvezne dobe čakanja med dvema zaporednima poskusoma bo pregledan in prenovljen predvidoma do konca meseca novembra 2015 ter nadalje spremljan v sistemu upravljanja varnosti in skladnosti CAA.
4. Po dokončanju prenove internega postopka se izvede interno usposabljanje letalskih nadzornikov za konkretni postopek v obliki delavnice predvidoma do konca decembra 2015. Za letalske nadzornike bo zagotovljeno redno periodično usposabljanje v skladu z letnim načrtom usposabljanja in sicer tečaj Advanced Human Factors v začetku decembra 2015, tečaj Effective Audit Techniques for Regulators, v sredini decembra 2015 ter Quality Management - Principles & Practice in an Aviation Environment v sredini januarja 2016.

PRILOGA 2

Osnutek Uredbe o izvajanju Uredbe komisije (EU) št. 1321/2014 z dne 26. novembra 2014 o stalni plovnosti zrakoplovov in letalskih izdelkov, delov in naprav ter o potrjevanju organizacij in osebja, ki se ukvarjajo s temi nalogami – besedilo členov

1. člen
(vsebina)

S to uredbo se določa izvajanje določil točke 2 odstavka (i) v zvezi z odstavkom (g) M.A.901 Poddela I Oddelka A Dela M Uredbe Komisije (EU) št. 1321/2014 z dne 26. novembra 2014 o stalni plovnosti zrakoplovov in letalskih izdelkov, delov in naprav ter o potrjevanju organizacij in osebja, ki se ukvarjajo s temi nalogami, ki je bila nazadnje spremenjena z Uredbo Komisije (EU) 2015/1536 z dne 16. septembra 2015 o spremembi Uredbe (EU) št. 1321/2014 v zvezi z uskladitvijo pravil za stalno plovnost z Uredbo (ES) št. 216/2008, kritičnimi nalogami vzdrževanja ter spremljanjem stalne plovnosti zrakoplovov (v nadaljnjem besedilu: Uredba 1321/2014/EU).

2. člen
(izvajanje pregledov plovnosti)

(1) Preglede plovnosti za balone in druge zrakoplove z MTOM 2730 kg in manj v Republiki Sloveniji opravljajo potrjene organizacije za vodenje stalne plovnosti, odobrene po Poddelu G Dela M s privilegijem po Poddelu I Dela M Uredbe 1321/2014/EU.

(2) Preglede plovnosti za balone in druge zrakoplove z MTOM 2730 kg in manj v Republiki Sloveniji opravlja Javna agencija za civilno letalstvo Republike Slovenije, če v Republiki Sloveniji za določen tip balona ali zrakoplova iz prejšnjega odstavka ni potrjene organizacije za vodenje stalne plovnosti z ustreznim privilegijem.

(3) Drugi zrakoplovi z MTOM 2730 kg in manj iz prejšnjih odstavkov v tej uredbi pomenijo zrakoplove, ki niso navedeni v odstavku (b) do (f) M.A.901 Poddela I Oddelka A Dela M Uredba 1321/2014/EU.

3. člen
(prehodne določbe)

Vloge za pregled plovnosti, prispele na Javno agencijo za civilno letalstvo Republike Slovenije do pričetka uveljavitve te uredbe, se dokončajo v skladu z letalskimi predpisi in pravnimi akti, ki veljajo oziroma se uporabljajo v Republiki Sloveniji.

4. člen
(začetek veljave)

Ta uredba začne veljati naslednji dan po objavi v Uradnem listu Republike Slovenije.

PRILOGA 3

Doc nr.: 3720-8/2015/1

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AGENCIJA ZA CIVILNO LETALSTVO
CIVIL AVIATION AGENCY, SLOVENIA CAA

Compliance and Safety Manual

Revision 02
5.10.2015

Civil Aviation Agency of Slovenia,
2015

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Chapter
0. OVERVIEW OF THE MANUAL

Article
Foreword

This manual was prepared in accordance with legal requirements for NAA, in order to satisfy compliance and safety requirements within Civil Aviation Agency of Slovenia, CAA (Slo: Javna agencija za civilno letalstvo Republike Slovenije).

One of the key elements to satisfy compliance requirements is satisfactory addressing safety management principles. Safety management is therefore another basic topic (beside compliance management) of this manual.

In the aspect of Safety Management this manual is a first milestone in process of establishing Safety Management System, as a systematic approach to managing safety, including the necessary organizational structures, accountabilities, policies and procedures.

Recommendations to appoint safety functions and accountabilities were established. With respect of employees' duties and functions, their tasks were refreshed with safety aspect.

Additionally, the necessity of combining EU and national regulation, standards and practices on everyday posts were taken into consideration, while focusing on assuring compliance, defining safety standards, culture and practice within the CAA.

Chapter two is focused on actual Authority organization.

Part of text is currently copied from applicable legislation as to define requirements. Such content is **coloured grey**. It might be deleted from content when revising this manual.

It should be noted that establishing management system in every organization is a process, thus this manual is expected to be regularly revised, according to arising demands within the organization (Authority), to achieve its purpose of functioning in compliance with legal requirements, practices and safety standards.

Objective of Compliance and Safety Management System (CMS) Policy

This Manual has been developed to direct all CAA personnel, starting with accountable and functioning heads, understanding the necessity to perform any task in respect of safety for the Agency and also its interdependent entities. Further assuring that all internal procedures are established, revised and carried out in safe and fault free manner.

Furthermore, steering the industry towards safe operation and behaviour within their organizations.

Methods to achieve the target includes functions of Compliance Monitoring (compliance with regulation and where applicable recommendations) by strictly obey regulations, and meanwhile adhere to safety management principles.

A safety management part of this manual should be a pro-active, integrated approach to safety, as every day way of functioning on all CAA levels (from inspectors to management) in order to ensure that the goals of the organization and its interdependent entities can be accomplished safely. It embraces the principle that the identification and management of risk increases the likelihood of accomplishing the mission. Hazards can be identified and dealt with systematically through the Reporting Program that facilitates continuing improvement and professionalism.

CAA Compliance Monitoring System is put in place to improve CAA safety performance, thereby improve and maintain safety standards in national aviation industry in general.

As pro-active (safety) system, it is desired to be alert on any possible arising safety hazards within CAA processes and instruct how to mitigate risks.

This manual is further ensuring that all supervised/interdependent entities are stimulated and regulated towards safe operations and functioning and moreover to be self-motivated to establish and maintain effective CSM.

Note: See 0.6. Abbreviations, Explanations, Definitions for detailed meaning of "interdependent entities".

Table of contents

CHAPTER / **Subchapter** / Article

Management commitment and responsibility – General policy

Assuring and promoting safety is one of our core business functions.

We are committed to developing, implementing, maintaining and constantly improving strategies and processes to ensure that all our aviation activities are aimed at achieving the highest level of safety performance and meeting national and international standards, as well as promoting safety culture among interdepended entities.

All levels of management are accountable for the delivery of this highest level of safety performance, starting with the Managing Director.

Our commitment is to:

- Enforce the management of safety among the primary responsibility of all managers.
- Clearly define for all staff their accountabilities and responsibilities for the delivery of safety performance.
- Support a “just culture”.
- Implement an effective Management System to ensure that service providers and regulatory requirements (Compliance Management) are met, and ensure that all employees are aware that Safety is Everyone’s Responsibility.
- Establish and implement hazard identification and risk management processes in order to eliminate or mitigate the risks to a point which is As Low as Reasonably Practicable.
- Comply with (and wherever possible exceed) legislative requirements and standards.
- Ensure that all staff are provided with adequate and appropriate aviation safety information and training, are competent in safety matters and are only allocated tasks commensurate with their skills.
- Establish and measure our safety performance against realistic objectives and/or targets.
- Continually improve our safety performance and conduct safety/compliance audits to ensure relevant safety action is taken and is effective.

Signed by:

Acting director,
Mr. Rok Marolt Signature and stamp:_____

Management of this manual

Acceptance

This manual was approved by:	**Date**	**Signature/Stamp**
Mr. Rok Marolt Acting Director	_____	_____

This manual is supported by:

Mrs. Polonca Vagaja Hribar Head of Support Services	_____	_____
Mrs. Nataša Bešter Head of Safety, Security & Quality Control	_____	_____
Mr. Andrej Perc Head of Personnel Licensing and Registers	_____	_____
Mr. Sebastjan Sevčnikar Head of Certification & Continuous Oversight	_____	_____
Mr. Valter Premate Head of Inspection and Minor Offence Proceedings, and Aerodromes and Airfields Coordinator	_____	_____
Mrs. Ana Hožič Head of Regulation	_____	_____

Revision list

Revision	**Date**	**Filled by and Date**		**Note to revision**
00 - initial	05.09.2014	A. Kodrun		Initial issue
01	05.04.2015	A. Kodrun		FCL, ATO, MED and ENG procedures amended.
02	05.10.2015	A. Kodrun		Revised risk assessment, derogation procedure, FSTD. CSM extended to cover all CAA departments.

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Personal digital copy *	Accessed by Each Employee	Digital Personal copy – e-mailed notification	Each owner after notification from Safety Manager

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List of effective pages

Page	Rev	Date	Rem
1	02	05.10.2015	
2	02	05.10.2015	
3	02	05.10.2015	
4	02	05.10.2015	
5	02	05.10.2015	
6	02	05.10.2015	
7	02	05.10.2015	
8	02	05.10.2015	
9	02	05.10.2015	
10	02	05.10.2015	
11	02	05.10.2015	
12	02	05.10.2015	
13	02	05.10.2015	
14	02	05.10.2015	
15	00	05.09.2014	
16	00	05.09.2014	
17	00	05.09.2014	
18	00	05.09.2014	
19	02	05.10.2015	
20	02	05.10.2015	
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22	00	05.09.2014	
23	02	05.10.2015	
24	02	05.10.2015	
25	02	05.10.2015	
26	02	05.10.2015	
27	02	05.10.2015	
28	02	05.10.2015	
29	02	05.10.2015	
30	02	05.10.2015	
31	02	05.10.2015	
32	02	05.10.2015	
33	02	05.10.2015	
34	02	05.10.2015	
35	02	05.10.2015	
36	02	05.10.2015	
37	02	05.10.2015	
38	02	05.10.2015	
39	02	05.10.2015	
40	02	05.10.2015	
41	02	05.10.2015	
42	02	05.10.2015	
43	02	05.10.2015	
44	01	05.04.2015	
45	02	05.10.2015	
46	02	05.10.2015	
47	02	05.10.2015	
48	02	05.10.2015	
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50	02	05.10.2015	
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52	02	05.10.2015	
53	02	05.10.2015	
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58	02	05.10.2015	
59	02	05.10.2015	
60	02	05.10.2015	
61	02	05.10.2015	
62	02	05.10.2015	
63	02	05.10.2015	
64	02	05.10.2015	
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75	02	05.10.2015	
76	02	05.10.2015	
77	02	05.10.2015	
78	02	05.10.2015	
79	02	05.10.2015	
80	02	05.10.2015	
81	02	05.10.2015	
82	02	05.10.2015	
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84	02	05.10.2015	
85	02	05.10.2015	
86	02	05.10.2015	
87	02	05.10.2015	
88	02	05.10.2015	
89	02	05.10.2015	
90	02	05.10.2015	
91	02	05.10.2015	
92	02	05.10.2015	
93	02	05.10.2015	
94	02	05.10.2015	
95	02	05.10.2015	
96	02	05.10.2015	
97	02	05.10.2015	
98	02	05.10.2015	
99	02	05.10.2015	
100	02	05.10.2015	
101	02	05.10.2015	
102	02	05.10.2015	
103	02	05.10.2015	
104	02	05.10.2015	
105	02	05.10.2015	
106	02	05.10.2015	
107	02	05.10.2015	
108	02	05.10.2015	
109	02	05.10.2015	
110	02	05.10.2015	
111	02	05.10.2015	
112	02	05.10.2015	
113	02	05.10.2015	
114	02	05.10.2015	
115	02	05.10.2015	
116	02	05.10.2015	
117	02	05.10.2015	
118	02	05.10.2015	
- End of List -			

Note for revision 02: Due to extensive changes that resulted in added pages, consequently several page contents were shifted. A general rule were followed: on pages where no changes in its content took place, and a page was only shifted forward, the page has previous revision number, although it is not the same combination and page number and its content.

Abbreviations, explanations, definitions

AER	Aerodromes
Acting Director	takes on duties and responsibilities of Managing Director temporarily (until the nomination of Managing Director by the Government of the Republic of Slovenia)
Agency	European Aviation Safety Agency (EASA)
AIB	Accident Investigation Board
AIR	Airworthiness
AMC	Acceptable Means of Compliance
AltMoc	Alternative Means of Compliance
ANS	Air Navigation Services
Authority	Competent Authority – Civil Aviation Agency of Slovenia
CAA	Civil Aviation Agency of Slovenia
Consequence	The degree of injuries to personnel, damage to equipment or structures, loss of material, or reduction of ability to perform a prescribed function arising from an outcome. Consequences have a magnitude.
CM	Compliance Manager
CMS	Compliance Monitoring System
CSM	Compliance and Safety Manual (also SMS/CMS)
EC	European Commission
FCL	Flight Crew Licensing
GM	Guidance Material
Hazard	A condition or an object with the potential to cause death, injuries to personnel, damage to equipment or structures, loss of material, or reduction of ability to perform a prescribed function.
HoD	Head of Division
i.a.w.	In accordance with…
Interdependent entity	(also “undertaking”) is referring to any organization or individual that is dependent on the activity of the Authority, both organizations (profit or non-profit) or persons, that operates according to any certificates, attestations, licenses, decisions or other legal acts, or being supervised or inspected by Authority.
IR	Implementing Rules
ISM	Inspecting Staff Manual
MD	Managing Director
NAA	National Aviation Authority
OPS	Operations
Outcome	A potential end point of an accident scenario which can be assigned a consequence severity.
Risk controls	(Barriers and Mitigation) a system, activity, action or procedure that is put in place to reduce the risks associated with a hazard.
RS	Republic of Slovenia
Safety	the state in which risks associated with aviation activities are reduced and controlled to an acceptable level.

Safety event	A failure condition, causal factor, threat or precursor event which in isolation or in combination with other safety events could result in an undesirable event.
Safety risk	The predicted likelihood and severity of the consequences or outcomes of a hazard.
SEC	Security
Service provider	Any organization providing aviation related services. The term encompasses aircraft operators, maintenance organizations, air traffic service providers and aerodrome operators, as applicable.
SM	Safety Manager
SMA	Safety Manager Assistants
SMS	Safety Management System – A systematic approach to managing safety, including the necessary organizational structures, accountabilities, policies and procedures.
SSP	State Safety Program
Undesirable event	A stage in the escalation of an accident scenario where the accident will occur, unless an active recovery measure is available and is successfully used.

Use of following terms:
"Shall" or an action verb in the imperative sense means that the application of the rule or procedure or provision is mandatory (Must is used as an alternative to "Shall").
"Should" means that the application of a procedure or provision is recommended.
"May" means that the application of a procedure or provision is optional.

Chapter

1. SAFETY MANAGEMENT FUNDAMENTALS

Basics of Safety

The concept of safety

Within the context of aviation, safety is the state in which the possibility of harm to persons or of property damage is reduced to, and maintained at or below, an acceptable level through a continuing process of hazard identification and safety risk management.

While the elimination of aircraft accidents and/or serious incidents remains the ultimate goal, it is recognized that the aviation system cannot be completely free of hazards and associated risks. Human activities or human-built systems cannot be guaranteed to be absolutely free from operational errors and their consequences. Therefore, safety is a dynamic characteristic of the aviation system, whereby safety risks must be continuously mitigated. It is important to note that the acceptability of safety performance is often influenced by domestic and international norms and culture. As long as safety risks are kept under an appropriate level of control, a system as open and dynamic as aviation can still be managed to maintain the appropriate balance between production and protection.

The evolution of safety

The history of the progress in aviation safety can be divided into three eras:

Technical era – from the early 1900s until the late 1960s
Aviation emerged as a form of mass transportation in which identified safety deficiencies were initially related to technical factors and technological failures. The focus of safety endeavours was therefore placed on the investigation and improvement of technical factors. By the 1950s, technological improvements led to a gradual decline in the frequency of accidents and safety processes were broadened to encompass regulatory compliance and oversight.

Human Factors era - from the early 1970s until the mid-1990s
In the early 1970s, the frequency of aviation accidents was significantly reduced due to major technological advances and enhancements to safety regulations. Aviation became a safer mode of transportation and the focus of safety endeavours was extended to include human factors issues including the man/machine interface. This led to a search for safety information beyond that which was generated by the earlier accident investigation process. Despite the investment of resources in error mitigation, human performance continued to be cited as a recurring factor in accidents. The application of Human Factors science tended to focus on the individual, without fully considering the operational and organizational context. It was not until the early 1990s that it was first acknowledged that individuals operate in a complex environment, which includes multiple factors having the potential to affect behaviour.

Organizational era – from the mid-1990s to the present day
During the organizational era, safety began to be viewed from a systemic perspective, to encompass organizational factors in addition to human and technical factors. As a result, the notion of the “organizational accident” was introduced, considering the impact of organizational culture and policies on the effectiveness of safety risk controls. Additionally, traditional data collection and analysis efforts were limited to the use of data collected through investigation of accidents and a serious incident was supplemented with a new proactive approach to safety. This new approach is based on routine collection and analysis of

data using proactive as well as reactive methodologies to monitor known safety risks and detect emerging safety issues. These enhancements formulate the rationale for moving towards a safety management approach.

Accident causation

The Swiss-Cheese Model, developed by Professor James Reason, illustrates that accidents involve successive breaches of multiple system defences. These breaches can be triggered by a number of enabling factors such as equipment failures or operational errors. Since the Swiss-Cheese Model contends that complex systems such as aviation are extremely well defended by layers of defences, single-point failures are rarely consequential in such systems. Breaches in safety defences could be a delayed consequence of decisions made at the highest levels of the system, which could remain dormant until their effects or damaging potential are activated by specific operational circumstances. Under such specific circumstances, human failures or active failures at the operational level act to breach the system‘s inherent safety defences. The Reason’s model proposes that all accidents include a combination of both active and latent conditions.

Active failures are actions or inactions, including errors and violations, which have an immediate adverse effect. They are generally viewed, with the benefit of hindsight, as unsafe acts. Active failures are generally associated with front-line personnel (pilots, air traffic controllers, aircraft mechanical engineers, etc.) and may result in a harmful outcome.

Latent conditions are those that exist in the aviation system well before a damaging outcome is experienced. The consequences of latent conditions may remain dormant for a long time. Initially, these latent conditions are not perceived as harmful, but will become evident once the system’s defences have been breached. These conditions are generally created by people far removed in time and space from the event. Latent conditions in the system may include those created by a lack of safety culture; poor equipment or procedural design; conflicting organizational goals; defective organizational systems or management decisions. The perspective underlying the organizational accident aims to identify and mitigate these latent conditions on a system-wide basis, rather than through localized efforts to minimize active failures by individuals.

Figure 1 shows how the Swiss-Cheese Model assists in understanding the interplay of organizational and managerial factors in accident causation. It illustrates that various defences are built into the aviation system to protect against fluctuations in human performance or decisions at all levels of the system. While these defences act to protect against the safety risks, breaches that penetrate all defensive barriers may potentially result in a catastrophic situation. Additionally, Reason’s Model represents how latent conditions are ever present within the system prior to the accident and can manifest through local triggering factors.

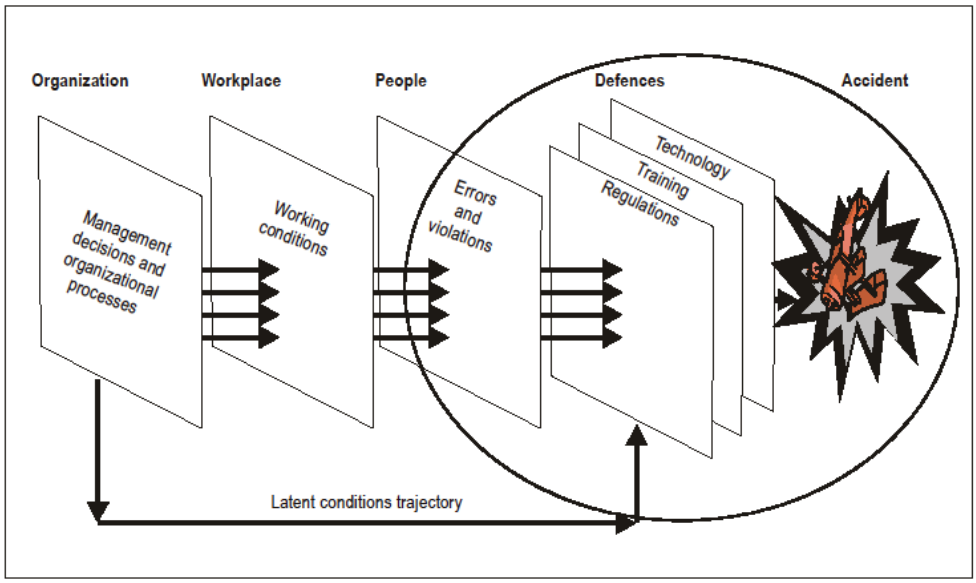

Figure 1: Swiss-Cheese Model

The organizational accident

The notion of the organizational accident underlying Reason's Model can be best understood through a building-block approach, consisting of five blocks (Figure 2). The top block represents the organizational processes. These are activities over which any organization has a reasonable degree of direct control. Typical examples include policy making, planning, communication, allocation of resources, and supervision. Unquestionably, the two fundamental organizational processes as far as safety is concerned are allocation of resources and communication. Downsides or deficiencies in these organizational processes are the breeding grounds for a dual pathway towards failure.

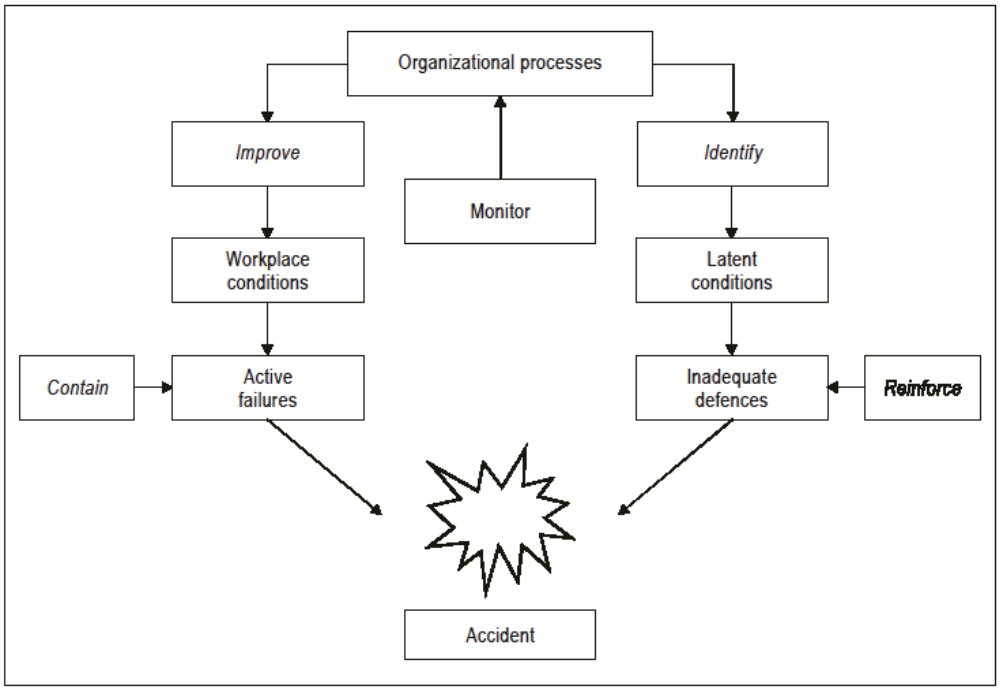

Figure 2: The Organizational Accident

Safety culture

Culture is characterized by the beliefs, values, biases and their resultant behaviour that are shared among members of a society, group or organization. An understanding of these cultural components, and the interactions among them, is important to safety management. Among the most influential cultural components are organizational, professional, and national. A reporting culture is key component of these different cultures. The mix of cultural components may vary greatly among organizations and can negatively influence effective hazard reporting, collaborative root cause analysis, and acceptable risk mitigation. Continuous improvement in safety performance is possible when safety becomes a value within an organization as well as a priority at the national or professional level.

Safety culture encompasses the commonly held perceptions and beliefs of an organization's members pertaining to the public's safety and can be a determinant of the members' behaviour. A healthy safety culture relies on a high degree of trust and respect between personnel and management and must therefore be created and supported at the senior management levels.

A healthy safety culture actively seeks improvements, vigilantly remains aware of hazards, and utilizes systems and tools for continuous monitoring, analysis, and investigation. It must exist in State aviation organizations as well as in product and service provider organizations. Other foundations of a healthy safety culture include a shared commitment by personnel and management to personal safety responsibilities, confidence in the safety system, and a documented set of rules and policies. The ultimate responsibility for the establishment and adherence to sound safety practices rests with the management of the organization. A safety culture cannot be effective unless it is embedded within an organization's own culture.

Reporting Culture emerges from personnels' beliefs and attitudes toward the benefits and potential detriments associated with reporting systems and the ultimate effect on the acceptance or utilization of such systems. It is greatly influenced by the organizational, professional, and national cultures, and is one criterion for judging the effectiveness of a safety system. A healthy reporting culture aims to differentiate between intentional and unintentional deviations and determine the best course of action for both the organization as a whole and the individuals directly involved.

The success of a reporting system depends upon the continuous flow of information from front-line personnel. Policies that distinguish wilful acts of misconduct from inadvertent errors, providing for an appropriate punitive or non-punitive response, are essential to assure the effective reporting of systemic safety deficiencies. An "absolute no blame" culture is both unreasonable and unfeasible. While management gains safety information, the system will be ineffective if it interferes with appropriate punitive actions. Conversely, a culture that fails to distinguish unintentional errors/mistakes from acts of wilful misconduct will inhibit the reporting process. If personnel avoid reporting for fear of punishment, management does not gain important safety information.

Overall, personnel must believe that they will be supported in any decisions made in the interest of safety but must also understand that intentional breaches of safety policy will not be tolerated. Therefore, a voluntary reporting system should be confidential and operated in accordance with appropriate non-punitive policies. The system should also provide feedback to personnel on safety improvements achieved as a result of the reports received.

This objective requires secure and easy access to safety reporting systems, active safety data collection, and management's proactive treatment of the data.

Errors and violations

Effective Safety Management System (SMS) implementation by the product or service provider as well as effective SMS oversight by the State are both dependent upon a clear, mutual understanding of errors and violations and the differentiation between the two. The difference between errors and violations lies in intent. While an error is unintentional, a violation is a deliberate act or omission to deviate from established procedures, protocols, norms or practices.

Errors or violations may result in non-compliance with regulations or approved operating procedures. Punitive measures taken in response to acts of non-compliance may lead to a reduction in the reporting of errors in the absence of other processes. Accordingly, the State and the product or service provider must consider whether acts of non-compliance are the result of a violation or inadvertent error when determining whether punitive action is appropriate, with the criteria normally being whether non-compliance is the result of wilful misconduct or gross negligence.

Errors

As indicated previously, an error is defined as "an action or inaction by an operational person that leads to deviations from organizational or the operational person's intentions or expectations". In the context of an SMS, both the State and the product or service provider must understand and expect that humans will commit errors regardless of the level of technology used, the level of training or the existence of regulations, processes and procedures. An important goal then is to set and maintain defences to reduce the likelihood of errors and, just as importantly, reduce the consequences of errors when they do occur. To effectively accomplish this task, errors must be identified, reported and analysed so that appropriate remedial action can be taken. Errors can be divided into the two following categories:

a) Slips and lapses are failures in the execution of the intended action. Slips are actions that do not go as planned, while lapses are memory failures. For example, operating the flap lever instead of the (intended) gear lever is a slip. Forgetting a checklist item is a lapse.
b) Mistakes are failures in the plan of action. Even if execution of the plan were correct, it would not have been possible to achieve the intended outcome.

Safety strategies must be put into place to control or eliminate errors. The strategies to control errors leverage the basic defences within the aviation system. These include the following:

a) Reduction strategies provide direct intervention to reduce or eliminate the factors contributing to the error. Examples of reduction strategies include improvement of ergonomic factors and reduction of environmental distractions.
b) Capturing strategies assume the error will be made. The intent is to "capture" the error before any adverse consequences of the error are felt. Capturing strategies are different from reduction strategies in that they utilize checklists and other procedural interventions rather than directly eliminating the error.
c) Tolerance strategies refer to the ability of a system to accept that an error will be made but without experiencing serious consequences. The incorporation of redundant systems or multiple inspection processes are examples of measures that increase system tolerance to errors.

Since the performance of personnel is generally influenced by organizational, regulatory and environmental factors, safety risk management must include consideration of organizational

policies, processes and procedures related to communication, scheduling of personnel, allocation of resources and budgeting constraints that may contribute to the incidence of errors.

Violations

A violation is defined as "a deliberate act of wilful misconduct or omission resulting in a deviation from established regulations, procedures, norms or practices". Nonetheless, non-compliance is not necessarily the result of a violation because deviations from regulatory requirements or operating procedures may be the result of an error. To further complicate the issue, while violations are intentional acts, they are not always acts of malicious intent. Individuals may knowingly deviate from norms, in the belief that the violation facilitates mission achievement without creating adverse consequences. Violations of this nature are errors in judgment and may not automatically result in disciplinary measures depending on the policies in place. Violations of this type can be categorized as follows:

a) Situational violations are committed in response to factors experienced in a specific context, such as time pressure or high workload.
b) Routine violations become the normal way of doing business within a work group. Such violations are committed in response to situations in which compliance with established procedures makes task completion difficult. This may be due to practicality/workability issues, deficiencies in human-technology interface design and other issues that cause persons to adopt "workaround" procedures, which eventually become routine. These deviations, referred to as "drift," may continue without consequence, but over time they may become frequent and result in potentially severe consequences. In some cases routine violations are well grounded and may result in the incorporation of the routine violation as an accepted procedure after a proper safety assessment has been conducted and it is shown that safety is not compromised.
c) Organizationally induced violations may be considered as an extension of routine violations. This type of violation tends to occur when an organization attempts to meet increased output demands by ignoring or stretching its safety defences.

Hazard identification tools and techniques

Following tools and methods are, among others, available to all employees, especially one that are performing professional tasks, to provide them basic knowledge and tools about hazard/risk identification.

Since they are daily in indirect contact with industry and personnel, they are the best tools for CAA SMS to provide first hand feedback including risk/hazard identification. Therefore it is especially important that they are constantly vigilant and prone also to monitor and report any possible fault, risk or hazard, that might be masked into routine and/or specific, unique tasks.

They are as well available to management when evaluating any changes and/or assessing current situation.

Using those tools and methods should encourage motivation and self-awareness about the constant need to perform tasks in fault free manner, as this being the final goal of CAA SMS.

Brainstorming

Brainstorming is an unbounded but facilitated discussion within a group of experts. A facilitator prepares prompts or issues ahead of the group session and then encourages imaginative thinking and discussion between group members during the session. The facilitator initiates a thread of discussion and there are no rules as to what is in or out of scope from the subsequent discussion. All contributions are accepted and recorded and no view is challenged or criticized. This provides an environment in which the experts feel comfortable in thinking laterally.

Advantages

- Good for identifying new hazards in novel systems.
- Involves all key stakeholders.
- Relatively quick and easy to undertake.
- Can be applied to a wide range of types of systems.

Disadvantages

- Relatively unstructured and therefore not necessarily comprehensive.
- Depends on the expertise and profile of the participants.
- May be susceptible to the influence of group dynamics.
- Can rely heavily on the skills of the facilitator for success.

Hazard and Operability (HAZOP) Study

HAZOP is a systematic and structured approach using parameter and deviation guidewords.

The technique relies on a very detailed system description being available for study and usually involves breaking down the system into well-defined subsystems and functional or process flows between subsystems. Each element of the system is then subjected to discussion within a multidisciplinary group of experts against the various combinations of the guidewords and deviations.

Advantages

- Systematic and rigorous.
- Involves interaction of views from multidisciplinary experts.
- Can be applied to a wide range of types of system.
- Creates a detailed and auditable record of the hazards identification process.

Disadvantages

- Requires a considerable amount of preparation.
- Can rely heavily on the skills of the HAZOP Chairman.
- Can be time consuming and therefore expensive.
- Can inhibit imaginative thinking and so certain kinds of hazards.

Checklist

Checklists are lists of known hazards or hazard causes that have been derived from past experience. The past experience could be previous risk assessments of similar systems or operations, or from actual incidents that have occurred in the past.

This technique involves the systematic use of an appropriate checklist and the consideration of each item on the checklist for possible applicability to a particular system.

Checklists should always be validated for applicability prior to use.

Advantages
- They can be used by non-system experts.
- They capture a wide range of previous knowledge and experience.
- They ensure that common and more obvious problems are not overlooked.

Disadvantages
- They are of limited use when dealing with novel systems.
- They can inhibit imagination in the hazards identification process.
- They would miss hazards that have not been previously seen.

Structured What-if (SWIFT)
The SWIFT technique was originally developed as a simpler and more efficient alternative technique to HAZOP. Like HAZOP, SWIFT involves a multidisciplinary team of experts under the facilitation of a Chairman. It is a facilitated brainstorming group activity but is typically carried out on a higher level system description, having fewer sub elements, than for HAZOP and with a reduced set of prompts.

Ahead of the group session the Chairman prepares a suitable list of prompts such as:
- What if…?
- Could someone…?
- Has anyone ever…?

Advantages
- Creates a detailed and auditable record of the hazards identification process.
- Is less time consuming than other systematic techniques such as HAZOP.

Disadvantages
- Careful thought is required in preparation for the application of the technique.
- Relies heavily on the expertise and experience of the team members.
- Relies heavily on the skills of the Chairman.

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Chapter
2. CAA MANAGEMENT SYSTEM

Overview of the Authority

CAA Organization

Slovenian Competent Authority – "Civil Aviation Agency of Slovenia" – CAA (Slo: Javna agencija za civilno letalstvo Republike Slovenije) was established according to Decision on the establishment of Civil Aviation Agency of Slovenia, published in Official Gazette No. 81/2010. (Slo: Sklep o ustanovitvi Javne agencije za civilno letalstvo RS, Ur. l. 81/2010).

General description is described in Act on the internal organization and the system of job descriptions of the Civil Aviation Agency of the Republic of Slovenia (No.: 1000-1/2014/1, Date: 29 October 2014), (Slo: Akt o notranji organizaciji in sistemizaciji delovnih mest Javne agencije za civilno letalstvo RS, sprejet dne 29.10.2014).

CAA positions are defined in Organizational structure diagram (Figure 3) including working posts.

Responsibility sharing

New task oriented matrix systemization consists of professional areas (horizontals) and processes (verticals). Professional areas have its own coordinators, who are responsible for corresponding processes, its execution and performance and daily interpersonal cooperation and communication where process requires participation of employees from different areas and/or processes.

Heads of Divisions are responsible for establishing, administrating and managing processes, including but not limited to: manuals, procedures, checklists, forms, applications, ISMs, SOPs, and other controlled documentation). By managing is it to: keeping them up-to-date, fully coherent and complete, including compliance check, and tracking its effectiveness.

Final accountability lies with Managing Director (MD).

Horizontals/Professional areas:

- Flight Operations and Personnel Licensing
  (Slo: Strokovno področje Letalske operacije in licenciranje osebja)
- Aerodromes and Airfields
  (Slo: Strokovno področje Letališča in vzletišča)
- Airworthiness
  (Slo: Strokovno področje Plovnost)
- Air Navigation Services
  (Slo: Strokovno področje Navigacijske službe zračnega prometa)
- Civil Aviation Security
  (Slo: Strokovno področje Varovanje)

Verticals/Divisions:

- Personnel Licensing and Registers
  (Slo: Licenciranje osebja in vodenje registrov)
- Certification and Continuous Oversight
  (Slo: Certificiranje sredstev in organizacij ter stalni nadzor)
- Inspection and Minor Offence Proceedings
  (Slo: Inšpekcijski in prekrškovni postopki)
- Regulation
  (Slo: Strokovno in regulativno področje)
- Own Activity
  (Slo: Lastna dejavnost)
- Support Services
  (Slo: Podpora poslovanju)
- Safety, Security & Quality Control
  (Slo: Varnost, varovanje in kontrola kakovosti)

Organizational diagram

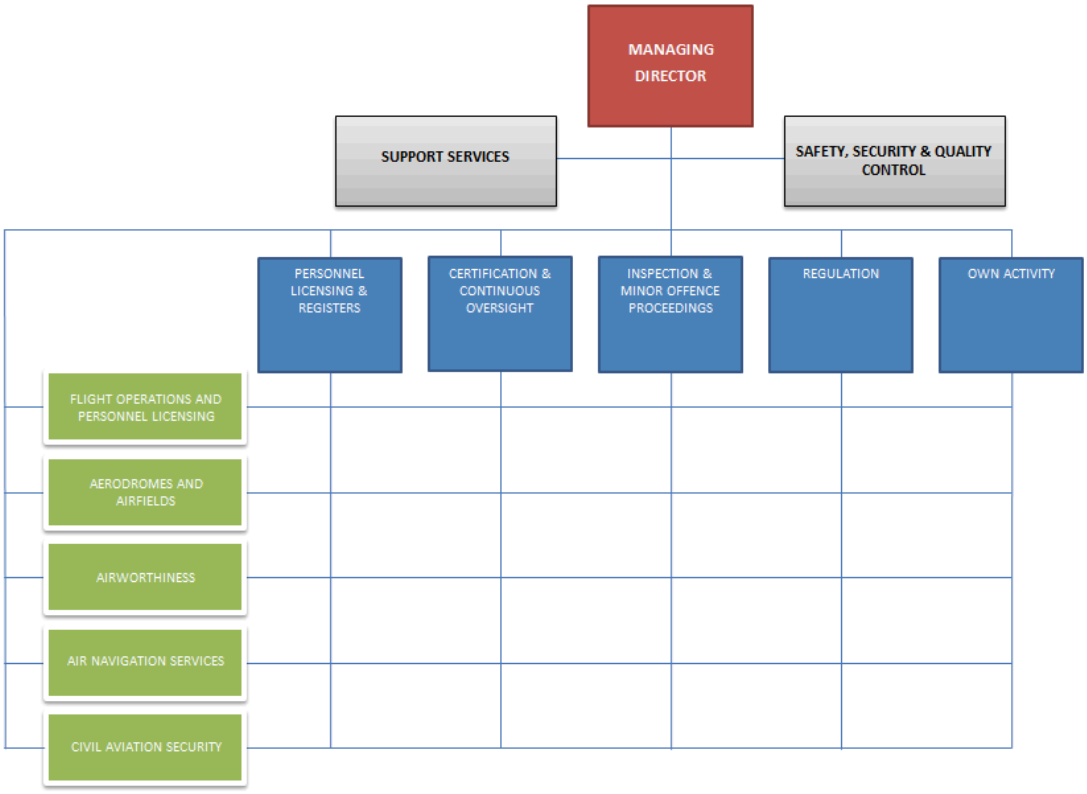

Figure 3: Organizational structure diagram of the CAA

Task delegation within responsibility of professional area

Tasks within professional areas are further segregated into task groups according to tasks nature. Based on the nature and (actual and planned/expected) amount of work, Head of Division delegate tasks to its staff so that each employee is as specialized on its task group as possible. This assures the highest familiarity of processes and in depth knowledge of its field and tasks as possible.

Main task groups are the following:

1) Flight operations and personnel:
   - Operations (OPS),
   - Aircrew (FCL),
   - Training organizations (ATO),
   - Simulators (FSTD),
   - Medical or AeroMedical (MED), and
   - English (ENG).

2) Aerodromes and Airfields:
   - Infrastructure and Systems,
   - Services,
   - Obstacles,
   - Training Organizations.

3) Airworthiness
   - CAMO,
   - AMO,
   - POA,
   - DOA,
   - ACAM,
   - MTO,
   - ARC.

4) Air Navigation Services
   - ATS,
   - CNS,
   - AIS,
   - MET,
   - ASM,
   - ATFM.

5) Civil Aviation Security:
   - Entities applying security standards,
   - Technical standards for airports and security equipment,
   - Approval of security programmes (airports, air carrier, security staff),
   - Organizations inspection of training security staff.

Within those groups, tasks may be further segregated, if deemed necessary.

For task classification see Chapter 0. (Task segregation, delegation and prioritization).

Safety Manager

Appointment of Safety Manager (SM) is initial step of CAA against establishing pro-active safety management system. Safety Manager was appointed for safety and compliance tasks within entire CAA, with his assistants (named Safety Manager Assistants – see next pages for task sharing), experts and competent on topics, within each professional area.

Safety Manager holds overall responsibility for managing Compliance and Safety Manual, while Safety Manager Assistants are focused on division specific technical aspects of safety (within each individual division).

Managing Director appoints Head of Safety, Security & Quality Control. That person is also appointed as Safety Manager according to this manual.

Duties and responsibilities
The Safety Manager is responsible to the Managing Director for providing guidance and direction for the planning, implementation and operation of the organization's SMS.

The Safety Manager provides SMS-related services to the certificated, non-certificated and third party areas of the organization that are included in the SMS and may have delegated responsibilities on behalf of persons holding positions required by regulations.

Authority
Regarding safety matters, the Safety Manager has direct access to the Managing Director and appropriate senior and middle management.

The Safety Manager is authorized under the direction of the Managing Director to conduct audits, surveys and inspections of any aspect of the operation in accordance with the procedures specified in the safety management system documentation.

The Safety Manager is authorized under the direction of the Managing Director to conduct investigations of internal safety events in accordance with the procedures specified in the organization's safety management system documentation.

The Safety Manager should not hold other positions or responsibilities that may conflict or impair his role as a Safety Manager. This should be a senior management position not lower than or subservient to other operational functions of the organization.

Qualifications Requirements
To qualify as a Safety Manager the person should have:
- extensive knowledge of Safety Management System,
- completed appropriate SMS training,
- knowledge of the organization's operations, procedures and activities,
- an detailed knowledge of Risk Management principles and techniques to support the SMS,
- experience implementing and/or managing Safety Management System,
- experience and qualifications in aviation accident/incident investigation and human factors,
- experience and qualifications in conducting safety/quality audits and inspections,
- sound knowledge of aviation regulatory frameworks, including ICAO Standards and Recommended Practices (SARPS) and relevant Civil Aviation Regulations,
- ability to communicate at all levels both inside and outside the company,

- ability to be firm in conviction, promote a "just and fair culture" and yet advance an open and non-punitive atmosphere for reporting,
- ability and confidence to communicate directly to the Managing Director as his advisor,
- well-developed communication skills and demonstrated interpersonal skills of a high order, with the ability to liaise with a variety of individuals and organizational representatives, including those from differing cultural backgrounds,
- computer literacy and analytical skills.

Key Roles

- **Safety advocate**; Demonstrates an excellent safety behaviour and attitude, follows regulatory practices and rules, recognizes and reports hazards and promotes effective safety reporting.
- **Leader**; Models and promotes an organizational culture that fosters safety practices through effective leadership.
- **Communicator**; Acts as an information conduit to bring safety issues to the attention of management and to deliver safety information to the organization's staff, contractors and interdependent entities. Provides and articulates information regarding safety issues within the organization.
- **Developer**; Assists in the continuous improvement of the hazard identification and safety risk assessment schemes and the organization's SMS.
- **Relationship builder**; Builds and maintains an excellent working relationship with the organization.
- **Ambassador**; Represents the organization on government, international organization and industry committees (e.g. ICAO, IATA, interdependent entities, etc.).
- **Analyst**; Analyses technical data for trends related to hazards, events and occurrences.
- **Process management;** Effectively utilizes applicable processes and procedures to fulfil roles and responsibilities, investigates opportunities to increase the efficiency of processes and measures the effectiveness and seeks to continually improve the quality of processes.

Safety Manager Assistant

Managing Director appoints Safety Manager Assistants (SMA) that are responsible for each professional area. They should be accepted by Safety Manager.

Duties and responsibilities

Main duties of Safety Manager Assistants are to assist Safety Manager with professional areas specific technical issues, advising on specific topics or giving professional opinion, and generally ensuring that the part of Safety and Compliance Monitoring System related to professional area is functioning, including establishment and maintenance of this manual, procedures and safety environment within its professional area.

The Safety Manager Assistant is responsible for following actions:

1) managing the operation of the applicable part of CMS,
2) collecting and analysing safety information in a timely manner,
3) administering any safety-related surveys,
4) monitoring and evaluating the results of corrective actions,
5) ensuring that risk assessments are conducted when applicable,
6) monitoring the industry for safety concerns that could affect the organization,
7) involvement with actual or practice emergency responses,
8) involvement in the development and updating of emergency response plan and procedures, and

9) ensuring safety-related information, goals and objectives, are made available to all personnel through established communication processes.

All above mentioned actions shall be coordinated and supervised by Safety Manager.

Qualifications Requirements
To qualify as a Safety Manager Assistant the person should have:
- knowledge of Safety Management System,
- completed appropriate SMS training,
- knowledge of the organization's operations, procedures and activities,
- broad aviation technical knowledge,
- an understanding of Risk Management principles and techniques to support the SMS,
- experience implementing and/or managing Safety Management System,
- experience and qualifications in aviation accident/incident investigation and human factors,
- understanding of aviation regulatory frameworks, including ICAO Standards and Recommended Practices (SARPS) and relevant Civil Aviation Regulations,
- ability to be firm in conviction, promote a "just and fair culture" and yet advance an open and non-punitive atmosphere for reporting,
- computer literacy and analytical skills.

CSM auditing function

General
Safety Auditor function is an ad-hoc, on demand, element of compliance and safety management system functioning check. Responsible to provide independent systematical and critical evaluation of CSM activities. It might be recommended to use someone not being part of day to day CAA tasks.

Safety Auditor acts at the initiative of, or on behalf of, Managing Director, Safety Manager or his Assistants. Main focal point shall be Safety Manger (or his Assistants), to whom auditor present his activities and conclusions.

Duties and responsibilities
Main task of Auditor function is to audit a Safety and Compliance System, monitoring its performance and detection of possible flaws on all levels of system. His duty is also to provide professional support, suggest changes and improvements on request.

All his reports, conclusions, findings or suggestions shall be submitted to Safety Manager, and in case of annual report or any report deemed necessary by auditor, a copy to a Managing Director.

As well, any:
- findings or remarks to the Safety and Compliance Monitoring System functioning, or
- suggestion to its amendments, or
- any issues, that cannot be completely satisfactory resolved within Safety and Compliance System, or
- any report deemed necessary by auditor,

shall be immediately brought to the Managing Director attention.

Qualifications Requirements
To qualify as a Safety Auditor the person should have:

- extensive knowledge of Safety Management System,
- completed appropriate SMS training,
- knowledge of the organization's operations, procedures and activities,
- an detailed knowledge of Risk Management principles and techniques to support the SMS,
- broad aviation technical knowledge, or at least extensive knowledge of audited field
- sound knowledge of aviation regulatory frameworks, including ICAO Standards and Recommended Practices (SARPS) and relevant Civil Aviation Regulations,
- ability to be firm in conviction, promote a "just and fair culture" and yet advance an open and non-punitive atmosphere for reporting,
- ability and confidence to communicate directly to the Managing Director as his advisor,
- well-developed communication skills and demonstrated interpersonal skills of a high order, with the ability to liaise with a variety of individuals and organizational representatives, including those from differing cultural backgrounds.

Compliance Manager

The compliance managing function is joint with Safety Manager function, and is performed by same person being nominated as Safety Manager.

Nomination, duties and responsibilities
Compliance Manager (CM) is responsible for appropriate feedback to the senior management regarding compliance system, especially any difficulties, findings or observations within Compliance Monitoring function, and for functioning of compliance function within CAA, including tasks, responsibilities and execution of CM defined in "Compliance Monitoring" (4.3.).

Competence requirements and training(s)
TBD

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Chapter
3. COMPLIANCE TO LEGAL REQUIREMENTS

Applicable requirements

Regulation 216/2008, ARO.GEN.200 of Regulation 965/2012 as amended, ARA.GEN.200 of Regulation 1178/2011 as amended, ADR.AR.B of Regulation 139/2014, Subpart A, Section B, Part 21 of Regulation 748/2012 as amended, Subpart A, Section B, Part M of Regulation 1321/2014, Article 12 of Implementing Regulation 1043/2011, ATCO.AR.B of Regulation 2015/340, Article 3 of Regulation 1035/2011 in relation with Regulation 2014/2011 including Acceptable Means of Compliance (AMC) and guidance material (GM) in accordance with Rules on the application of AMC EU, GM EU, CS EU, IEM JAA, TGL JAA and Eurocontrol specifications (Official Gazette of Republic of Slovenia No. 21/14).

This Compliance and Safety Manual is used also for Civil Aviation Security professional area where applicable.

Flexibility provision (Article 14 of Regulation 216/2008)

According to flexibility provisions, stated in Article 14 of the Regulation (EC) No. 216/2008, the CAA may grant exemptions or approval derogations in circumstances as set out in the Regulation.

Immediate notification of a safety problem (Article 14)

CAA shall react immediately to a safety problem which involves a product, person or organisation subject to the provisions of Regulation (EC) No. 216/2008 and it's Implementing Rules (IR).

CAA shall immediately notify the Agency, the European Commission (EC) and the other Member States of the measures taken and the reasons therefore.

Notification provided by the CAA shall include at least:
a) a description of the safety problem;
b) the affected requirements of Basic Regulation and its Implementing Rules;
c) the identification of the product, part, appliance, person or organisation concerned;
d) the identification of the affected activity;
e) the measure required and its justification;
f) the time limit for compliance with the measure required; and
g) the date or period of applicability of the measure.

Notification to the Member States and the EC shall be sent via Competent Ministry and a Permanent Representation of the Republic of Slovenia to the EU, and shall give reasons demonstrating the need to derogate from the rule concerned, as well as the conditions laid down to ensure that an equivalent level of protection is achieved.

EASA is notified on Exemptions Notification Form via exemptions@easa.europa.eu.

The Agency shall assess whether the safety problem can be addressed within the powers conferred on it in accordance with Article 18(d). In this case it shall, within one month of being notified by CAA, take the appropriate decision.

If the Agency concludes that the safety problem cannot be addressed in accordance with mentioned procedure, it shall, within the period referred to in that point, issue a recommendation in accordance with Article 18(b) of Regulation 216/2008 as to whether this Regulation or its Implementing Rules should be amended and whether the notified measures should be withdrawn or maintained.

Exemptions

The CAA may grant exemptions from the substantive requirements laid down in the Regulation (EC) No. 216/2008 and it's Implementing Rules in the event of unforeseen urgent operational circumstances or operational needs of a limited duration, provided the level of safety is not adversely affected. The EASA, the EC and the other Member States shall be notified of any such exemptions as soon as they become repetitive or where they are granted for periods of more than two months.

An organization/person shall apply for an approval of an exemption, providing detailed information and justified reasons why the exemption is necessary. An operator shall also satisfy the CAA that the equivalent safety level as required by the Regulation (EC) No. 216/2008 and its Implementing Rules will be maintained. Information shall include at least:

a) the affected requirements of the Basic Regulation and its Implementing Rules;
b) a description of the unforeseen urgent operational circumstances or of the needs being the reason for granting the exemption;
c) the identification of the product, part, appliance, person or organisation to which the exemption applies, including a description of the type of operation or activity concerned;
d) the type of operation or the activity concerned;
e) the date or period of applicability of the exemption;
f) a reference to previous similar exemptions, if any; and
g) an assessment and evidence demonstrating that the level of safety is not adversely affected, including, if applicable, a description of the related mitigation measures.

Procedures shall only be done in accordance with "Management of change" (4.7.).

As soon as an exemption becomes repetitive or granted for a period of more than two months, the EC and the other Member States shall be informed via Competent Ministry and a Permanent Representation of the Republic of Slovenia to the EU. EASA is notified on Exemptions Notification Form via exemptions@easa.europa.eu. In such case, the EASA will issue a recommendation on whether the exemption complies with the required safety objectives. If the exemption does not comply with the required safety objectives, the EC will not permit the exemption. The exemption has to be revoked and all the parties involved have to be informed accordingly.

Derogations

The CAA may, without discrimination on grounds of nationality, grant an approval derogating from the Implementing Rules to the Regulation (EC) No. 216/2008, when the equivalent level of protection to that can be achieved by other means.

Before notifying the EASA and the EC on the intention to grant such an approval, the CAA shall evaluate whether justified reasons for such an approval exist, whether the level of safety can be achieved equivalent to the one attained by the application of the Implementing Rules, and all other relevant circumstances related to granting such an approval. Information shall include at least:

a) the requirements for which the Member State intends to grant a derogation;
b) the reason(s) demonstrating the need to derogate;
c) the identification of the product, part, appliance, person or organisation to which the derogation applies, including a description of the type of operation or activity concerned;
d) the conditions that the Member State has put in place to ensure that an equivalent level of protection is achieved; and
e) an assessment and evidence demonstrating that an equivalent level of protection is ensured.

Procedures shall only be done in accordance with “Management of change” (4.7.).

Notification to the Member States and the EC shall be sent via Competent Ministry and a Permanent Representation of the Republic of Slovenia to the EU, and shall give reasons demonstrating the need to derogate from the rule concerned, as well as the conditions laid down to ensure that an equivalent level of protection is achieved. EASA is notified on Exemptions Notification Form via exemptions@easa.europa.eu.

Within two months of being notified, the EASA will issue a recommendation on whether the approval proposed fulfils the required conditions. Whenever EASA's recommendation states additional requirements or finds that the approval does not fulfil the required conditions, the CAA shall modify or withdraw the approval, accordingly.

Oversight documentation

The competent authority shall provide all legislative acts, standards, rules, technical publications and related documents to relevant personnel in order to allow them to perform their tasks and to discharge their responsibilities.

Following “basic working material” shall be available for use by employees of CAA or subcontracted experts when performing tasks for the CAA. Material shall be regularly kept up-to-date. (See Procedures to keep legislative material up-to-date).

List of legislation is found on:

- CAA website (http://www.caa.si/index.php?id=75),
- EASA website (https://www.easa.europa.eu/regulations), and
- EUR-Lex (http://eur-lex.europa.eu/homepage.html?locale=sl).

See also “Proactive functions to ensure compliance – planning function” (4.3.2.).

A) Legislative acts

a. EU Regulations:
   i. Directives;
   ii. Regulations;
   iii. Recommendations;

b. National Regulations:
   i. Process acts:
      1. General Administrative Procedure Act (Slo: Zakon o splošnem upravnem postopku – ZUP);
      2. Inspection Act (Slo: Zakon o inšpekcijskem nadzoru – ZIN);
      3. Minor Offences Act (Slo: Zakon o prekrških – ZP);
   ii. Material acts:
      1. Aviation Act (Slo: Zakon o letalstvu – ZLet);
      2. National rules and regulations;

c. Other (ICAO docs, technical documents, …);

d. Internal Acts:
   i. Internal rules and regulations;
   - Operative technical requirements (Slo: Operativno tehnične zahteve);
   - Airworthiness directive (Slo: Plovnostne zahteve);
   - Safety directive (Slo: Direktive o varnosti);
   - Circulars and notices (Slo: Okrožnice in obvestila).

B) Internal procedures

Internal procedures of certain professional area are in compliance with applicable legislation and this manual.

List of controlled procedures (incl. prescribed procedures, checklists and other forms) is a part of this manual.

Changes to those procedures shall only be done in accordance with “Management of change”.

Internal prescribed documents (above) shall be available to all staff and contracted coworkers at CAA headquarters. Currently on internal server(s) CAA_SKUPNO.

C) Qualification basis — available at:

a. Acceptable means of compliance — EASA website
b. Alternative means of compliance — CAA_SKUPNO
c. Certification Standards — EASA website

Above mentioned documents are available at EASA website, with exception of Alternative means of compliance which are available on internal CAA_SKUPNO (see Chapter 7 “Documentation”).

AMCs are used in accordance with Rules on the application of AMC EU, GM EU, CS EU, IEM JAA, TGL JAA and Eurocontrol specifications (Official Gazette of Republic of Slovenia No. 21/14).

D) Internal documentation charts

General overview of document hierarchy. See chapter 4. Prescribed and controlled procedures for description and detailed list of controlled procedures and its applicable document (manuals, checklists etc.).

OPS + FCL	AER	AIR	ANS	SEC

CSM - Compliance and Safety Manual
Procedures, SOPs, ISMs, OIMs, Handbooks Checklists Forms Applications Registers

E) Common internal acts (original, Slovene names):

- Akt o notranji organizaciji in sistemizaciji delovnih mest CAA
- Politika varovanja dostojanstva zaposlenih
- Pravilnik o delovnem času
- Pravilnik o dopustu
- Pravilnik o stalnem strokovnem izpopolnjevanju in vzdrževanju izurjenosti letalskih nadzornikov in nadzornikov na področju letalskih operacij in licenciranja osebja
- Pravilnik o uporabi službenih mobilnih telefonov
- Pravilnik o uporabi službenih vozil
- Pravilnik o povračilu stroškov prevoza na delo
- Interni pravilnik o osebni zaščitni opremi
- Pravilnik o rabi pečatov
- Evidenca žigov
- Seznam imetnikov žigov
- Pravilnik o računovodstvu
- Pravilnik o zavarovanju osebnih podatkov
- Katalog delovnih mest
- Pravilnik o sprejemanju daril v Agenciji za civilno letalstvo
- Navodilo za izdajanje naročilnic

Employee/inspectors authorizations

In order for management to provide control over critical activities or tasks performed by employees, the system of authorizations is in place where each aviation expert (inspector, employee) is entitled to perform certain tasks. Authorization is issued by Managing Director based on each employee's experiences, proficiency and trainings.

Authorizations are stored in personnel dossier. Access to personnel dossiers is limited to authorized persons.

Procedures to keep legislative material up-to-date

Above mentioned "applicable requirements" is subject to constant change by its legislator such as EU Commission, EASA, national legislator… It is required for the CAA and its employees to perform its tasks in accordance with actual/updated legislation.

There are no direct notification (to CAA) about changes neither in EU nor national legislative, therefore it is vitally important for CAA to regularly and constantly monitor official sources for any changes (Official Gazette, official websites, standardization meetings attendance, etc.) and update its manuals, standards, technical documentation, procedures and/or other related documents.

CAA procedure to change its material:

1) Identification of change
   Within CAA Regulation division is finally responsible to identify and notify respective Head of division about the (upcoming) change. However, to be noted again, every employee, especially professional area coordinators, should be wary on such changes as well, and should notify Head of Regulation division about (upcoming) change.
   In this stage changed material should be studied in general only, in order to address appropriate Head of division (who is responsible for actual material revision).

   E-mail is preferred way for such notification. It is acceptable to send notification monthly, with exception for immediate safety related material, where the information should be forwarded immediately.

2) Substantive change and implementation
   Head of division and Safety Management Assistants are responsible for revisions in its related documentation and implementing any change in its procedures should they are required.

3) Verification and conformation phase
   Based on the nature of change and type of document change should be properly verified and confirmed/accepted by management (HoD, MD, where required by law, etc.).

   Management of change (chapter of this CSM) should be respected.

Acceptable means of compliance

In order to facilitate compliance with the Implementing Rules, EASA developed Acceptable Means of Compliance which should be used by the CAA and organizations/persons in order to establish compliance with Regulation (EC) No. 216/2008 and its Implementing Rules. Referring to the above mentioned, the Rules on the application of AMC EU, GM EU, CS EU, IEM JAA, TGL JAA and Eurocontrol specifications (Official Gazette of Republic of Slovenia No. 21/14) have been developed in order to regulate, inter alia, the direct use of AMCs.

When it is established, during the certification, oversight or inspection procedures, that the AMCs are complied with, it is to be considered that the requirements of the Regulation (EC) No. 216/2008 and its Implementing Rules are met.

Alternative means of compliance (AltMoc) approval procedure

CAA has established the system to process, analyse, store and exchange information on any Alternative means of compliance, used by itself or by organizations and persons under its oversight, should it be required.

Approval process of AltMoc for internal application form within CAA or oversighted entity

1) Following an application for Alternative means of compliance an internal team of experts, nominated and lead by Head of Division, shall be formed. In case of application where more divisions should participate, Managing Director should nominate Head of Team (according to nature of task).
   Preferably use prepared form Form_AltMoc_int.
   *Reception of Application from oversighted entity shall be notified to MD as the Team is formed.
2) Procedure shall be clearly established regarding its intention/purpose. Reason, execution and performance impact are described. Involved persons, duties and responsibilities shall be clearly and completely defined.
3) Requested procedure shall be evaluated against regulative requirements.
4) Expected outcomes shall be evaluated.
5) Safety aspect of procedure and its outcome shall be addressed specifically.
6) A trial period shall be established, if required/determined by Head of Team.
   a. During it, an applicant shall be allowed to use alternative procedure only when:
      - backed upped by approved procedure, as regulative/leading/decisive procedure, or/and (as required by CAA or applicable “standard” regulation),
      - under supervision of CAA personnel, where applicable.
   b. CAA shall evaluate written Final report (by applicant, or employee in case of internally required AltMoc).
7) Managing Director shall be presented with application and if assessment demonstrates that IRs are met, AltMoc shall approve the use of procedure.
8) Approval shall be granted to applicant or internal procedure shall be revised and (safety) note or reminder or briefing shall be issued/held to introduce the new procedure.

9) The Agency, Competent Ministry (informing other Member States) and interdependent entities shall be notified without undue delay about the existence and usage of alternative means of compliance and availability to use it. Agency is notified on AltMoc notification form via altmoc@easa.europa.eu.
10) Procedure shall be stored in Safety and compliance record keeping and official CAA record keeping system.
11) AltMoc procedure shall be verified*1 by Safety Manager.

Note: See AltMoc procedure form Variant A: New approval (Chapter 7).

*1 - Instructions to SM (SMA) regarding verification procedure; intention of verification is not to interfere with content of process, not to verify material facts and verdict of group decision, but to verify proper following of procedure (items).

Approval process of AltMoc used or accepted by other NAA and to be used by CAA Slovenia or oversighted entity

1) Following an initiative (or application) for use of alternative means of compliance a internal team of experts, nominated and lead by Head of Division, shall be formed. In case of application where more divisions should participate, Managing Director should nominate Head of Team (according to nature of task).
2) Approved alternative procedure shall be evaluated against national regulative requirements.
3) Implementation and its outcome(s) – safety aspect, in country(ies) where it has been approved and used, may be studied.
4) Expected implementation, use and consequences in Slovenian Legal and Aeronautical environment shall be evaluated.
5) Possible safety hazards or possible safety risks shall be determined and assessed. If the risk analysis has been done by issuing state, it should be assessed should such analysis is appropriate/suitable for Slovenian environment.
6) Trial period is normally not required, unless the national conditions or legislation significantly differs from origin country.
7) Managing Director shall be presented with application and if assessment demonstrates that IRs are met, AltMoc shall approve the use of procedure.
8) Approval shall be granted (to applicant) and/or internal procedure shall be revised and (safety) note or reminder or briefing shall be issued/held to introduce the new procedure.
9) The Agency and Competent Ministry shall be notified without undue delay about the usage of Alternative means of compliance (by CAA or oversighted/interdependent entity). Agency is notified on AltMoc notification form via altmoc@easa.europa.eu.
10) Procedure shall be stored in Safety and compliance record keeping and official CAA record keeping system.
11) AltMoc procedure shall be verified*1 by Safety Manager (or auditor if SM is Head of AltMoc group).

Note: See AltMoc procedure form Variant C: Acceptance of existing AltMoc (Chapter 7).

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*1 – Instructions to SM (SMA) regarding verification procedure; intention of verification is not to interfere with content of process, not to verify material facts and verdict of group decision, but to verify proper following of procedure (items).

Information to the Agency

Managing Director is responsible for notification to the Agency about undue delay in case of any significant problems with the implementation of Regulation No. 216/2008 and its Implementing Rules.

Internal reporting should be used to collect such information within CAA.

Immediate reaction to a safety problem (e.g. GEN.135)

Without prejudice to Directive 2003/42/EC of the European Parliament and of the Council the competent authority shall implement a system to appropriately collect, analyse and disseminate safety information.

Measures that might be taken as result of immediate safety problem:

Regulative, legal, administrative actions:

CAA inspector should take appropriate measures as prescribed by Aviation act (articles 171-174, and 179) and other national legislation when applicable and measures prescribed by Regulation 216/2008 and its IRs, that is:

- Issue a decision to correct finding;
- Revoke, suspend, limited certificate, license or attestation (;
- Ground the aircraft (the procedure is defined in various manuals, e.g. SAFA manual and will be transferred to this manual with its next revision);
- Request additional competence assessment;
- Request intoxication (alcohol or drugs) test;
- Bann the operations;
- Issue a decision on minor offence or penalty;
- Express any other decision in accordance with legislation.

The CAA shall immediately notify the Agency, Member states and the Commission, about any immediate safety issue, including CAA actions taken and the recommendations, if applicable.

Within CAA a several groups/functions are in place in order to response immediately in case of any accident or serious incident or incident and in other urgent cases (e.g. issuing permit to fly) involving entities that are supervised by CAA. See 3.10 CAA safety data.

The team of qualified aviation inspectors is operating on 24h standby.

Main purpose is to support incident investigators, with possibility to temporary suspend any authorization (license, certificate, attestation) issued by CAA, and to collect safety data (described in next chapter).

CAA safety data

RAMP system

RAMP system (inspections and reports) is another method of implementing control and monitor safety performance of aviation industry. Follow up and corrective actions are available to provide compliance with regulative and safety standards.

System is used as well for disseminate safety information within Member States.

National SAFA coordinator has a continuous obligation to check ramp database and publish any information (on SKUPNO (I:)/CAA_SKUPNO/01-CSM/RAMP_FINDINGS) about performed inspections on operators under Slovenian oversight.
In case of any significant safety issue (any finding cat.2 or cat.3) national coordinator shall immediately notify operations and airworthiness professional area inspectors and SM via company email.
However, inspectors from operations and airworthiness professional area has constant access to mentioned published information (on SKUPNO), and should regularly check applicable operator data for safety performance of the operator. They shall check it always before auditing applicable operator.

Occurrence reporting system

CAA uses Occurrence reporting system to collect and analyse safety information.
See “Occurrence reporting system – occurrences within industry” (4.5.).

Accident investigation data

Step 1:
Receipt of a draft final report on an aircraft accident or serious incident from the investigating body. The Safety, Security & Quality Control division registers the receipt of a draft final report on an aircraft accident or serious incident and forwards it to the Coordinators of professional areas the earliest possible time.

Step 2:
Coordinators of professional areas examine the draft report and give their observations and remarks about the report within 15 days. The Safety, Security & Quality Control division collects observations and remarks, writes an answer and sends it to the investigating body no later than 60 days after the receipt of the draft final report.

Step 3:
Receipt of a final report on an aircraft accident or serious incident and safety recommendations from the investigating body. The Safety, Security & Quality Control division records the receipt of a final report on an aircraft accident or serious incident and safety recommendations, forwards them to the Coordinators of professional areas as soon as possible and calls a meeting with the Coordinators of professional areas within 7 days.

Step 4:
At a joint meeting, the Coordinators of professional areas (at their discretion, the meeting can be attended by employees responsible for a particular professional area) analyse the report

on an aircraft accident or serious incident and safety recommendations and designate the professional area or areas to which the safety recommendations refer. The Safety, Security & Quality Control division registers the participants and takes note of the agreements of the meeting.

Step 5:
Coordinators of professional areas to which the safety recommendations apply introduce the measures related to the adopted safety recommendations into their professional areas (measures referring directly to the aircraft accident or serious incident, corrections of action plans, corrections of the content of inspections, initiatives for changes of procedures, regulations, etc.). They inform the Safety, Security & Quality Control division about the introduced measures and deadlines for their implementation no later than 14 days after the joint meeting. The Safety, Security & Quality Control division in turn informs the investigating body, the Competent Ministry (aviation sector), Heads of Divisions and the Managing Director about the adopted measures no later than 30 days after the receipt of the safety recommendations.

Based on the adopted measures, the Coordinators of professional areas implement the adopted measures in their professional areas and inform the Safety, Security & Quality Control division about the introduction within 7 days.
The Safety, Security & Quality Control division monitors and records work of the Coordinators of professional areas. If coordinators do not perform their tasks according to these instructions and within the time limits, the sector, after prior reminder, informs the Managing Director about it.

Step 6:
After receipt of the notification of acceptance or implementation of planned measures, the Safety, Security & Quality Control division archives the final report and other documents that can be created in relation to the report at a professional area level, and terminates the proceeding.

At the same time, the Safety, Security & Quality Control division continuously monitors and analyses the content of final reports on aircraft accidents or serious incidents and safety recommendations. It informs Heads of Divisions and the Managing Director about the analysis at least once a year and, if necessary, proposes the adoption of systematic measures it considers appropriate and necessary in the light of the analysis.

Data from audit findings/reports
(e.g. minor offence register which is on CAA_SKUPNO)

Data from safety studies

Safety data from other states (for example ARA.FCL.300)

Internal reporting system

Internal reporting system (see “Internal safety and compliance reporting” – 4.10.2.) is established to collect, analyses and disseminate safety information arising from CAA activities, tasks and observations/findings.

Procedures to address and distribute safety related information or regulation

CAA has established procedures to address or distribute safety related information or regulation to entities under its responsibility, with:

A) Issued publications/directives:
- Aviation circulars;
- Airworthiness directives;
- Operational technical requirements;
- Decisions; more directed to single operator or individual;
- Safety bulletins;
- Notice to aircrew (http://www.caa.si/index.php?id=449);
- Manuals and guidance (http://www.caa.si/index.php?id=449&L=#c784);
- within RAMP system: Reports (standard and RAMP report).

B) Methods used for distributing such information depend on nature and urgency of such information to reach recipient(s), and should respect provisions of Aviation Act.
They consist of:
- Direct telephone contact; used for urgent cases, and normally followed by regular official mail;
- Direct e-mail or FAX notification;
- Post mail;
- Personal acquisition;
- Letters;
- Publications in Official Gazette.

Management System

The competent authority shall establish and maintain a management system, including as a minimum: Documented policies and procedures to describe its organization, means and methods to achieve compliance with Regulation (EC) No 216/2008 and its Implementing Rules. The procedures shall be kept up to date and serve as the basic working documents within that competent authority for all related tasks;

This manual describes required processes, methods and systems (already functioning or not) to approach safety related and other general tasks regarding functioning and addressing tasks within CAA. Procedures shall be kept up to date, by any means of continuous CAA improvement (internal reporting system, internal auditing system, compliance and quality checks…).

Adequate facilities and office accommodation to perform the allocated tasks

Each post, department and division should have adequate facilities (according to national standards) and equipment to perform the allocated tasks accurately and in safe manner. The agency is located in Ljubljana, Kotnikova ulica 19a. The premises of CAA are in 2nd and 3rd floor, and in the first cellar, all together 1358.70 m^2.

Assistance procedure from other competent authorities or the Agency

If deemed necessary CAA or its personnel may request assistance from other Member State (MS) Authority or Agency on certain specific task or question. Following procedure shall be respected as much as possible using common sense depending on the professional content and entities involved. Generally, procedure shall be:

Employee/staff shall:

1) Clearly identify the issue (question, weakness, lack of resources).
2) Describe the starting point and the boundary conditions for the case to the Head of Division.

Head of Division shall:

1) Thoroughly asses internal resources and legislation in order to find internal capabilities/solutions/(technical) answers.
2) Consider the use of contracted counsellors.
3) Describe the need to MD and get approval to start/request assistance from other MS Authority or the Agency.
4) Communicate and actively lead the communication process, or if deemed suitable hand over the communication/assistance process to employee (in this case HOD shall be aware and responsible for assistance process and its best possible outcome).

Note: If required, working group might be established for each issue.

Sufficient number of personnel and main tasks

Since no other Competent National Authorities exercise operational, supervision or similar tasks in RS, CAA is the only organization responsible in above-mentioned fields. Tasks are defined in "Čistopis akta o notranji organizaciji in sistemizaciji delovnih mest Javne agencije za civilno letalstvo RS".

Assessing required staff number general provisions

The following should be considered:

A. **Quantitative** elements:
   1) the estimated number of initial certificates to be issued;
   2) the number of organizations certified by the competent authority;
   3) the number of persons to whom the competent authority has issued a license, certificate, rating, authorization or attestation;
   4) the estimated number of persons and organizations exercising their activity within the territory of the Member State and established or residing in another Member State.

B. **Qualitative** elements:
   1) The size, nature and complexity of activities of certified organizations, taking into account:
      a) privileges of the organization;
      b) type of approval, scope of approval, multiple certification;
      c) possible certification to industry standards;
      d) types of aircraft/flight simulation training devices (FSTDs) operated;
      e) number of personnel; and
      f) organizational structure, existence of subsidiaries;

   2) National regulatory requirements;

   3) The safety priorities identified;

   4) The results of past oversight activities, including audits, inspections and reviews, in terms of risks and regulatory compliance, taking into account:
      a) number and level of findings;
      b) timeframe for implementation of corrective actions; and
      c) maturity of management systems implemented by organizations and their ability to effectively manage safety risks, taking into account also information provided by other competent authorities related to activities in the territory of the Member States concerned; and
   5) The size and complexity of the Member State's aviation industry and the potential growth of activities in the field of civil aviation, which may be an indication of the number of new applications and changes to existing certificates to be expected.

Reporting capability to perform tasks

Head of Support Services is responsible for regular quantitative assessment of main tasks, quantitative elements within scope of work, manpower and competence, and report any changes affecting capability to perform tasks and discharge its responsibilities to Managing Director. MD is responsible to notify the Competent Ministry about changes affecting capability to perform task of CAA.

The MD shall notify the Agency of changes affecting its capability to perform its tasks and discharge its responsibilities as defined in Regulation (EC) No 216/2008 and its Implementing Rules.

Procedure used for assessment of required FTEs

Based on existing data from previous oversight planning cycles and taking into account the situation within the Slovenian aviation industry, CAA estimate:

A) the standard working time required for processing applications for new certificates (for persons and organizations);
B) the number of new certificates to be issued for each planning period; and
C) the number of changes to existing certificates to be processed for each planning period.

In line with the competent authority's oversight policy, the following planning data should be determined specifically for each type of organization certified by the competent authority:

A) standard number of audits to be performed per oversight planning cycle;
B) duration of each audit;
C) standard working time for audit preparation, on-site audit, reporting and follow-up, per inspector;
D) standard number of ramp and unannounced inspections to be performed;
E) standard duration of inspections, including preparation, reporting and follow-up, per inspector;
F) minimum number and required qualification of inspectors for each audit/inspection.

Standard working time could be expressed either in working hour per inspector or in working days per inspector. All planning calculations should then be based on the same unit (hours or working days).

For each type of organization certified by the competent authority the number of working hours/days per planning period for each qualified inspector that may be allocated for certification, oversight and enforcement activities should be determined, taking into account:

A) purely administrative tasks not directly related to oversight and certification;
B) training;
C) participation in other projects;
D) planned absence and substitution; and
E) the need to include a reserve for unplanned tasks or unforeseeable events.

The determination of working time available for certification, oversight and enforcement activities should also consider:

A) the possible use of qualified entities (contracted counsellors); and
B) possible cooperation with other competent authorities for approvals involving more than one Member State.

Based on the elements listed above, the competent authority should be able to:

A) monitor dates when audits and inspections are due and when they have been carried out;
B) implement a system to plan the availability of personnel; and
C) identify possible gaps between the number and qualification of personnel and the required volume of certification and oversight.

Actual required number of personnel

TBD

Note for revision 02: Separate document exists for division that has CSM in place before revision 02. It was removed from CSM since, new for entire CAA is in preparation.

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Qualification of personnel

Personnel shall be qualified to perform their allocated tasks and have the necessary knowledge, experience, initial and recurrent training to ensure continuing competence. A system shall be in place to plan the availability of personnel, in order to ensure the proper completion of all tasks;

Qualification and required knowledge, experience

According to division personnel structure CAA has defined working places (posts). They are defined in detail in Systemization of working places, where professional knowledge and experiences as required knowledge/experiences for each post are specified.

NOTE: This structure and requirements were established before introducing Safety Management System, so it is recommended that it will be revised in aspect of safety management on first occasion or when next revising document (Systemization of working places).

Trainings

General

CAA has established Professional training programme for officials of Civil Aviation Agency of Slovenia (Decision No. 007-282/2011/5-0041801 of Ministry of Transport) where detailed description of training system for CAA staff may be found.

The CAA may provide training within its self (in house trainings) with qualified trainers or through another qualified training source.

Records are kept of such training and of the assessments in human resource office.

Note: This chapter describes initial qualification training only. For "SMS training" see "Training and education" (5.2.) under Chapter 5 "Safety Promotion and Communication".

Initial trainings

It is required for each individual to complete initial training(s) before he begins independent work within scope of professional duties.

For inspectors, at least the following topics shall be covered as well, as appropriate to their role, current knowledge, experience and skills:

- aviation legislation organization and structure,
- the Chicago Convention, relevant ICAO Annexes and documents,
- the applicable requirements and procedures,
- management system, including auditing, risk assessment and reporting techniques,
- human factors principles,
- rights and obligations of inspecting personnel of the competent authority,
- 'on-the-job' training,
- suitable technical training appropriate to the role and tasks of the inspector, in particular for those areas requiring approvals.

New employee should be introduced to detailed CAA structure and other employees' delegated tasks, especially of those he will be cooperating with.

It is also required to perform such “familiarization” to contracted co-workers, but may limited to persons he will cooperate with.
Periodical/recurrent trainings
Each department should have resources and time available to attend and perform required trainings associated with task performed. The recurrent training programme should reflect, at least, changes in aviation legislation and industry. The programme should also cover the specific needs of the inspectors and the competent authority.

Inspectors need to undergo at least 40 hours of recurrent training each calendar year according to the Professional training programme for officials of Civil Aviation Agency of Slovenia.

Absence and substitution of personnel

Short-term absence

In case of short-term absence of employee, work is organized in such way that urgent tasks are carried undisrupted by co-workers or his superior.

Long-term absence

CAA should have resources (manpower) available to substitute absent co-worker in order to continue performing all tasks undisrupted.

Average planned absence is considered when planning minimum sufficient number of personnel.

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Chapter
4. COMPLIANCE AND SAFETY MANAGEMENT SYSTEM PRINCIPLES

Safety Assurance

As in any organization within CAA management controls the activities of personnel and the use of resources for the delivery of a product or service. The organization's exposure to safety hazards is a consequence of these activities.

Management mitigates the related risks by:

A) Setting the organizational priorities and tasking,
B) Prescribing procedures on how to perform activities or processes,
C) Hiring, training and supervising employees,
D) Using the skills of its personnel,
E) Allocating the necessary resources,
F) Using reporting and (internal) investigation systems,
G) Safety surveys, questionnaires, analyses,
H) Supporting "Just culture".

Task segregation, delegation and prioritization

Task segregation

Tasks of the divisions and professional areas are defined in Act on the internal organization and the system of job descriptions of the Civil Aviation Agency of the Republic of Slovenia. According to nature and amount of work, Head of Division delegate tasks to its staff so that each employee is as specialized on its task group as possible. This assures the highest familiarity of processes and in depth knowledge of its field and tasks as possible.

Priority tasks

Priority tasks are defined as any task related to arising safety issue that require, by any legislation or common practices, any response or intervention by CAA, among them:

1) accident or serious incident,
2) any kind of task or activity that has grater immediate influence on aviation safety,
3) tasks with greater impact on CAA overall rating and reputation, or public interest,
4) any other emergency that require involvement of CAA.

Internal Safety/Compliance Directive by Head of Division

In order to react to immediate safety or compliance issue Head of Division has authority to issue Internal Safety/Compliance Directive to employees. Form may be used to disseminate information within different CAA divisions as notification of safety/compliance related issue.

Directive may be also issued verbally. In this case it shall be addressed directly to person/employee in question (forwarding of information/directive via colleagues or other persons is not allowed). Following content shall be notified:

- title of directive,
- content, which shall be as short, direct and undoubtedly as possible,
- addressed case/interdepended entity (if applicable),
- time of duration of directive.

Employee shall confirm reception and understanding of content, and might require sufficient time to write it down.

Verbal directive shall be followed by its written form, as soon as possible, in any case within 12 hours and also send by e-mail to SM. E-mail distribution is accepted as written form, if addressee is contacted verbally and notified about directive.

See Chapter 7 for Safety/Compliance directive form.

Compliance Monitoring

A function to monitor compliance of the management system with the relevant requirements and adequacy of the procedures including the establishment of an internal audit process and a safety risk management process. Compliance monitoring shall include a feedback system of audit findings to the senior management of the competent authority to ensure implementation of corrective actions as necessary.

Compliance Monitoring means a continuous check of the organisational structure, procedures, processes and documentation which is needed to ensure that all operations/tasks are conducted in accordance with all applicable requirements, standards and operational procedures.

Despite called Compliance Audits to indicate their primary role in the CAA, CMS Compliance Audits may contain also Safety, Quality or Security Audits and/or audit items, as applicable and considered necessary and practical by the Compliance Manager.

Compliance, Safety, and Security Audits use the same auditing process, methods and techniques, but they are different in their focus, as shown in table below.

Audit Type	Audit Focus
Compliance Audit	Compliance with applicable regulations and standards on documented and implemented level. Periodical verification of compliance in accordance with Compliance Audit Schedule or by ad-hoc unscheduled compliance audit when considered necessary by Compliance Manager due to previous audit findings or other inputs.
Safety Audit	Effectiveness of mitigation measures implemented to minimize safety risk. Checked periodically, usually integrated into applicable process of Compliance Audit, or by ad-hoc unscheduled safety audit, when considered necessary by the Compliance Manager.
Quality Audit	Customer satisfaction. TBD
Security Audit	As Safety Audit, except Security related.

CAA Compliance Monitoring System was put in place in order to properly address legal requirements. It consists of:

1) Compliance Manager and Compliance Auditors
2) Proactive functions to ensure compliance – planning function
3) Scheduled auditing plan
4) Continuous monitoring function
5) Compliance assuring principles on daily tasks
6) CSM system audits

Compliance Manager and Compliance Auditors

Function of Compliance Monitoring is combined with safety function, and is delegated to Head of Safety, Security & Quality Control division.

Compliance Monitoring System (CMS) is assured basically with internal audits, conducted by Compliance Auditors. Internal audit process includes the following elements:

- Compliance audit schedule development,
- Compliance audit planning,
- Compliance audit performance (examination, finding analysis and classification),
- Finding definition,
- Compliance and remedial action (corrective action plan, corrective action, follow-up audit),
- Compliance audit closure.

Those elements will be defined in details in the next revision of CSM.

Before starting performing audits, each Compliance Auditor shall receive at least the following initial training:

- Regulatory auditing techniques training course or
- Compliance audit management course or
- Advanced aviation lead auditor training course.

To maintain his auditor status valid, each Compliance Auditor must fulfil the following requirements: to perform at least one full day internal audit in the last 24 months period or at least two full days audits in the organization under CAA's supervision.

In addition to professional competences all Compliance Auditors should have high personal integrity.

In some circumstances it may be necessary to make use of company or external specialist for a particular audit. In such circumstances, it is essential that the specialist is familiar with the activity conducted by the audited professional area of the CAA. As difference to Compliance Auditors, the fulfilment of training imposed for a Compliance Auditors is not required for external company or specialist. For this reason specialist is always accompanied by one of the CAA Compliance Auditor. External company or specialist reports directly to the Compliance Manager.

The independence of the Compliance Monitoring function is established by insuring that audits are carried out by personnel not responsible for the function or procedure being audited. All auditors report directly to the Compliance Manager.

Proactive functions to ensure compliance – planning function

A function to properly analyse and assess new/upcoming regulations, to reflect any change to Regulation (EC) No 216/2008 and its Implementing Rules in a timely manner is incorporated into procedures. Head of Regulation is responsible to monitor new regulative and together with Safety Manager Assistants for its proper implementation into internal procedures. Task may be delegated.

As assistance to this function, any proactive Safety Management methods or principles shall be used.

Scheduled auditing plan of internal procedures

Compliance Manager will develop formal compliance audit plan in accordance with the needs arising from (new) legislation.

Internal audits shall be conducted periodically, at each professional area of the CAA at least once per 24 months. Compliance Manager shall inform the Managing Director on the progress and findings raised by compliance auditors.

Continuous monitoring function

CAA uses a form of reporting systems in order to address any arising/found safety and/or compliance faults. All employees are obliged to report such issues, should they discover one or suspect of one, on the formal form – CAA Safety and Compliance Report. It must be noted that time critical safety or miss compliance issues should be immediately reported directly to CM but the formal form must still be submitted in 24 hours.

Compliance assuring principles on daily tasks

Everyday tasks shall only be executed in the way prescribed by formal instructions that is this with provisions of this manual and/or controlled procedures and checklists, assuring them to be done in compliant and safe manner.

Mutual exchange of information including RAMP system

(Article 10 and 15 of Regulation 216/2008)

The competent authority shall establish procedures for participation in a mutual exchange of all necessary information and assistance with other competent authorities concerned including on all findings raised and follow-up actions taken as a result of oversight of persons and organizations exercising activities in the territory of a Member State, but certified by or making declaration the competent authority of another Member State or the Agency.

Article 10 and 15 of Regulation 216/2008 provide that Member States shall cooperate between themselves, with the EC and with the EASA with the goal to ensure compliance with Regulation 216/2008 and its Implementing Rules.

Mutual exchange

CAA has established a protocol to allow mutual exchange of information with other NAAs and/or EASA.

Information to be send to other NAAs or EASA:

1) When another NAA or organization/person under other NAA's authority is involved.
2) Should the information be send is (usually) notified within the procedure/checklist.
3) The procedure is defined in Chapter 4.7. "Management of change".
4) Document and performed notification should be recorded as required by procedure and stored in official CAA system.

There is a list of EU CAAs on CAA_SKUPNO.

Information received from other MS and/or EASA:

1) Incoming mail is registered in CAA Lotus Notes and Head of Division is (should be) notified about reception of such information.
2) HoD should properly forward information to (division) employee. Recommended is via e-mail notice and on regular division meetings. HoD should act in accordance with procedure defined in Chapter 4.7. "Management of change".

RAMP information exchange system

Within CAA "RAMP system" is in place to oversight persons and organizations exercising activities in Slovenia, but are certified or making declaration the competent authority of another states (incl. other Member States).

System is designed to allow immediate mutual exchange of necessary information with other Member States (safety report).

If there are or could be persons or organizations certified by CAA/CAA of another MS and performing activities or operating from bases established in the territory under the jurisdiction of one of this authority, the Memorandum of Understanding or other form of cooperation should be signed to ensure cooperation and exchange of information, including: oversight records, copies of relevant correspondence, details of any enforcement measures and/or penalties, any report of other competent authority relating to the oversight of thus persons/organizations including any no compliances.

Occurrence reporting system – occurrences within industry

CAA uses occurrence reporting system to collect and analyse safety information. According to the national "Decree on the civil aviation occurrence reporting" any significant safety issue arisen shall be provided to the CAA which is obligated to send them to the AIB immediately. For dealing with occurrence reports CAA has established a group of experts from each professional area. The group meets on a monthly basis. Reports are analysed and classified based on nature of occurrence and safety risks involved. Selected safety related occurrences are sent to the Head of Division for further analysis and any required action. Following actions are taken on individual case and conclusions summarized in appropriate method.

Safety performance monitoring and measurement

CAA shall develop and maintain the means to verify the safety performance of the organization compared to the safety policy and objectives, and to validate the effectiveness of safety risks controls. The safety reporting procedures related to safety performance and monitoring shall clearly indicate which types of operational behaviours are acceptable or unacceptable, and include the conditions under which immunity from disciplinary action would be considered.

Execution of performance monitoring

The Safety Manager is responsible to assure timely and adequate performance monitoring is initially executed by Head of Divisions. Outcomes shall be presented on joint meetings, held on regular basis.

Frequency is based on Safety Manager's opinion, preferred monthly – indicators shall reflect monthly situation. Meeting is intended to:

1) Review of Safety system and situation within each division and CAA as organization,
2) Process shared safety issues,
3) Review Safety risk and hazard identification process,
4) Evaluate Adherence to safety objective and safety assurance,
5) Analyse Reporting system(s),
6) Prepare safety performance monitoring report and conclusion,
7) Review this manual.

Safety performance monitoring and measurement shall be assessed using table found in Chapter 7 "Documentation", "Internal Performance monitoring and measurement".

Safety Manager shall further process and analyse reports and performance indicators. Any observations, conclusions and especially safety trends shall be presented to Managing Director regularly.

Those can be used as well for promoting safety among CAA staff and interdependent entities.

Management of change

CAA shall develop and maintain a formal process to identify changes within the organization which may affect established processes and services; to describe the arrangements to ensure safety performance before implementing changes; and to eliminate or modify safety risk controls that are no longer needed due to changes in the operational environment.

Aviation organizations, including regulatory authorities, experience change due to expansion and contraction as well as changes to existing systems, equipment, policies, programs, services and regulations. Hazards may inadvertently be introduced into the aviation system whenever change occurs. Existing baseline safety risk mitigation processes may also be impacted. Safety management practices require that hazards resulting from change be systematically identified and strategies to manage the consequential safety risks be developed, implemented and subsequently evaluated. Sound management of safety risks associated with change is a critical requirement of an SMS.

The management of safety risks resulting from change should take into account the following three considerations:

a) Criticality of systems and activities. Criticality relates to the potential consequences of safety risk, whether a consideration during the system design process or during a situation related to systemic change. Changes to equipment and activities associated with relatively high safety risks should be reviewed to make sure that necessary corrective actions can be taken to control potentially emerging safety risks.
b) Stability of systems and operational environments. Changes may be planned and under direct control of the organization. Planned changes may be associated with organizational growth or contraction, as well as the introduction of new equipment, products or services. Unplanned changes, including those that are operational, political or economic in nature, may also create risks that require a mitigating response by the organization. Instances in which frequent systemic or environmental changes occur dictate that managers update key risk assessments and related information more frequently than in more stable situations.
c) Past performance. Past performance of critical systems may be a reliable indicator of future performance. Trend analyses in the safety assurance process should be employed to track safety performance measures over time and to factor this information into the planning of future activities under situations of change. Moreover, where deficiencies have been found and corrected as a result of past audits, evaluations, data analyses, investigations or reports, it is essential that such information is considered to assure the effectiveness of corrective actions.

Identification of changes

Shall be done by Safety Manager in cooperation with Heads of Divisions or Safety Manager Assistants, and changes should be assessed based on:

- type of change; tightening, relief or any other alternation,
- background of change; legislation change, introduction of new procedures, complains, recommendations from reporting systems, internal optimization recommendation,
- size of change (including people, resources,…),
- safety issue,
- safety aspect of planned outcome,
- overall safety situation and general issues on field concerning.

Classification of changes

Based on size and complexity of change, they are categorized:

1) Negligible change

Examples: no change of requirements, qualifications, core process, required resources, expected outcome, minor changes of outlook of forms, changes in internal non-profession related procedures,…).

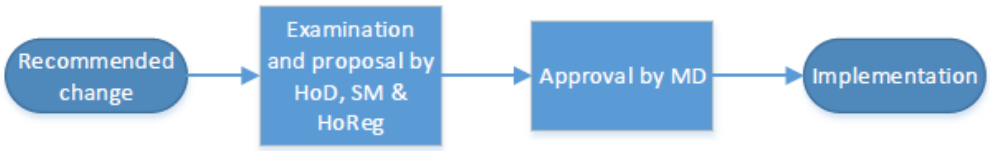
Change procedure: change may be performed directly by employee.

Documentation shall be revised and updated to CAA public server or any other required action may be performed and recorded. Head of Division and co-workers shall be notified.

2) Minor change

Examples: changes in requirements, procedures, without final significant impact on associated entities, or resources changes.

Change procedure:
Recommended change --> Examination and proposal from Head of Division + Safety Manager + Head of Regulation (HoReg) --> Approval from Managing Director --> Implement change into all applicable documents and procedures.

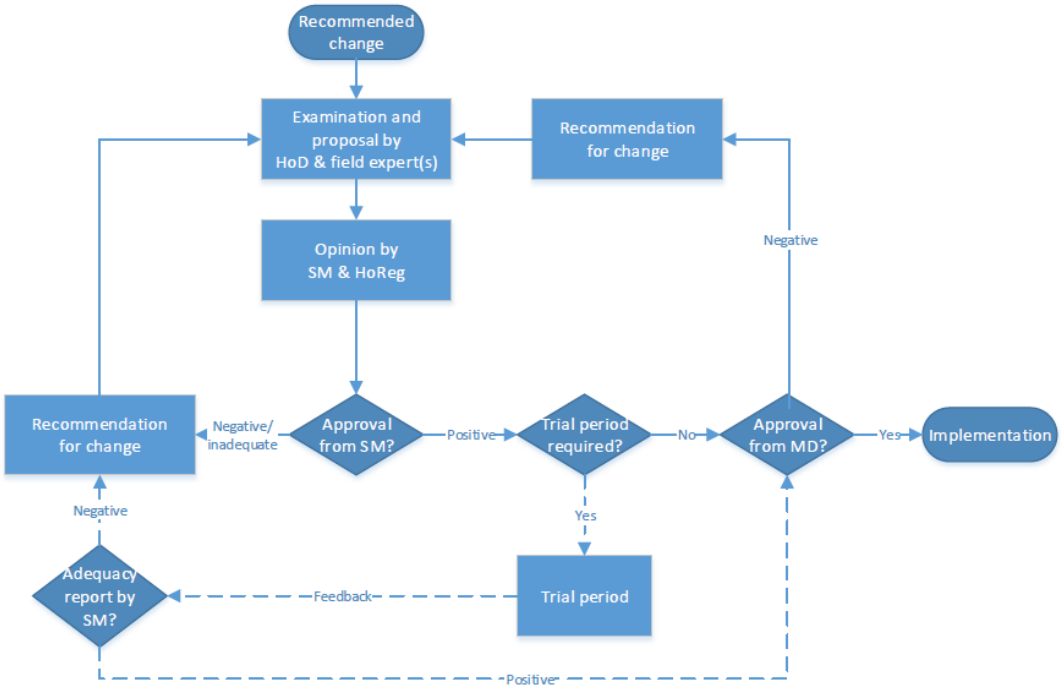


3) Major change

Examples:

- alternative procedures,
- exemption, derogation, immediate reaction to a safety problem,
- reissue or completely new procedures,
- alternation in task delegation,
- new working places systemization,
- establishment of new bodies (agencies, divisions, working groups…).

Change procedure:
Recommended change --> Examination and proposal from Head of Division + field expert(s) --> Opinion by Safety Manager and Head of Regulation (HoReg) -->
If required by Managing Director or Safety Manager (--> trial period --> feedback to Safety Manager --> adequacy report by Safety Manager) --> Managing Director approval --> Implement change into all applicable documents and procedures



Note:
Mentioned procedures might be performed using written or verbal communication methods, in order to avoid unnecessary delays.
Major change flow form will be established to ease the administrative part of the procedure.

Safety risk management

Risk management

Risk management is about controlling risks. This is done by placing barriers to prevent certain undesirable events from happening. A control can be any measure taken that acts against some undesirable force or intention, in order to maintain a desired state. In the Bow-Tie methodology there are preventive or proactive barriers that prevent the Undesirable Event from happening. There are also corrective or reactive controls that prevent the Undesirable Event from resulting into unwanted Outcomes or reduce the consequence severity of the Outcomes.
Risk management is:

- the identification of hazards associated with the day-to-day operations or associated with changes to the operations of an organization;
- the assessment of the risks associated with those hazards; and
- the implementation and management of measures to reduce those risks to an acceptable level (hazard removal; or the application of barriers and/or mitigations – i.e. risk control).

Risk Management Process

Following flow or table to manage safety risks is used, to mitigate risk, where:

- Identified hazard – Hazard (potential safety risk) is identified by Hazard identification process(es) or arisen from reporting system(s) or their conclusions.
- Associated risk – possible undesired consequence.
- Existing Mitigation Measures – any existing methods to mitigate risk.
- Current level of risk – Severity and probability of risk.
- Mitigation Measures – Action(s) taken to control or minimize risk.
- Revised Level of Risk – Risk assessment after mitigation process.
- Action by and when – In order to mitigate risk some actions (Mitigation Measures) should be taken. SM should appoint responsible person to execute procedure/action and expected deadline.

Risk mitigation flow:

1) Identification of hazard (F_01_CAA Internal Safety and Compliance report),
2) Assessment of associated risk (i.a.w. “Risk assessment”),
3) Decide on initial actions (in case of unacceptable or high “review” risk),
4) Adopt mitigation measures (F_02_Mitigation process and Corrective Action Protocol),
5) Verify action, and if required reassess risk.

Forms can be found in Chapter 7 “Documentation”.

Hazard identification process

Authority shall develop and maintain a formal process for collecting, recording, acting on and generating feedback about hazards in operations, based on a combination of reactive, proactive and predictive methods of safety data collection.

Hazards identification is the act of recognizing the failure conditions or threats (Safety Events), which could lead to Undesirable Events and defining the characteristics of theses undesirable events in terms of their potential Safety Outcomes and of the magnitude of these safety outcomes' Consequences. This gives rise to the following definitions:

Potentially hazardous situation or events shall be identified by following methods:

- Identification of safety hazards within daily operations by employees. Form "CAA internal Safety and Compliance report" shall be used.
- Systematically planned audit processes where all existing procedures shall be audited in terms of SMS assessment/compliance.
- Safety surveys are in place to identify potential system hazards.
- Case by case investigations following internal reports.
- Investigations followed by occurrence reporting system recommendations or conclusions.
- Recommendations to CAA procedures from RAMP system.
- Other indications about possible safety issue/event.
- Other known predictive methods, especially when applying change, CAA uses methods: Brainstorming, Hazard and Operability (HAZOP) Study, Structured What-if (SWIFT),… (See description of methods in "Hazard identification tools and techniques" – 1.4.).

Not all situations can be addressed or appointed in advance as safety hazard. It is therefore

the most important to be vigilant, to apply and use knowledge and safety management principles in any day-to day tasks/operations,

and to constantly exchange and update safety related knowledge and occurrence database and hazard identification methods.

Risk assessment

Risk shall be assessed based on Likelihood of occurrence and Severity of consequences tables. Third table (Acceptable level of risk) shall be used to determine level of risk as "Unacceptable", "Review" or "Acceptable". Furthermore, there is a Numerical assessment of risk level and associated table, where further risk procedure is defined based on numerical value of risk (= severity x likelihood).

LIKELIHOOD OF OCCURRENCE		
Qualitative definition	**Description of Meaning**	**Value**
Frequent; > 1x per month (12 per year)	Likely to occur many times (has occurred frequently)	5
Occasional; 12x – 1x per year	Likely to occur sometimes (has occurred infrequently)	4
Remote; 1x / year – 1x / 3 years	Unlikely to occur but possible (has occurred rarely)	3
Improbable; 1x / 3 years – 1x / 100 y	Very unlikely to occur (not known to have occurred)	2
Extremely improbable; < 1x / 100 years	Almost inconceivable that the event will occur	1

SEVERITY OF CONSEQUENCES		
Definition	**Meaning**	**Value**
Catastrophic	Any irregularity within CAA, internal finding or observance, failure to comply with the procedure, procedure missing/fault/being outdated/ failure to oversight, lack of resources, CAA system failure, lack of competence, serious miss practice, where it might lead to an accident, death or equipment destroyed within interrelated entities. Generally: complete lack of regulation, supervision, legislation, intentional ignorance of obvious.	5
Hazardous	Any irregularity within CAA, internal finding or observance, failure to comply with the procedure, procedure missing/fault/being outdated/ failure to oversight, lack of resources, CAA system failure, lack of competence, serious miss practice, where it might lead to a large reduction in safety margins, physical distress or a workload such that organizations cannot be relied upon to perform their tasks accurately or completely. Serious injury or death to a number of people. Major equipment damage in industry.	4
Major	A significant reduction in safety margins, a reduction in the ability of organizations to cope with adverse operating conditions as a result of an increase in workload, or as a result of conditions impairing their efficiency. Serious incident. Injury to persons.	3
Minor	No reduction to existing safety margins, some discrepancies on procedural and/or legal matters.	2
Negligible	Nuisance of little consequence. Administrative issues with no effect on procedure, its outcome, nor substantive, safety or legal related consequences.	1

Acceptable level of risk

The risk assessment process requires a Risk Tolerability Matrix to be defined for assessing hazards.

Risk Likelihood	Risk Severity				
	Catastrophic 5	Hazardous 4	Major 3	Minor 2	Negligible 1
Frequent 5	Unacceptable 25	Unacceptable 20	Unacceptable 15	Review 10	Review 5
Occasional 4	Unacceptable 20	Unacceptable 16	Review 12	Review 8	Review 4
Remote 3	Unacceptable 15	Review 12	Review 9	Review 6	Acceptable 3
Improbable 2	Review 10	Review 8	Review 6	Acceptable 4	Acceptable 2
Extremely improbable, 1	Review 5	Acceptable 4	Acceptable 3	Acceptable 2	Acceptable 1

UNACCEPTABLE: The likelihood and/or severity of the consequence is intolerable. Major mitigation will be necessary to reduce the likelihood and severity of the consequences associated with the hazard.

REVIEW: The level of risk is of concern and mitigation measures are required to reduce the level of risk to as low as reasonably practicable. Where further risk reduction/mitigation is not practical or viable, the risk may be accepted, provided that the risk is understood and has the endorsement of the Managing Director.

ACCEPTABLE: Risk is considered acceptable but should be reviewed if it reoccurs or changes that affect the risk are made.

See next section for required/proposed actions to be followed after risk assessment.

Risk mitigation actions

Risks should be managed to as low as reasonably practicable. Risk must be balanced against the time, cost and difficulty of taking measures to reduce or eliminate the risk.

The level of risk can be lowered by reducing the severity of the potential consequences, reducing the likelihood of occurrence or by reducing exposure to that risk. Corrective action will take into account any existing defences and their inability to achieve an acceptable level of risk. Corrective action should be subject to further risk assessment, in order to determine that the risk is now acceptable and that no further risk has been introduced into operational activities. Risk mitigations and controls will need to be verified/audited to ensure that they are effective.

Classified hazard or risk shall be mitigated depending on assigned severity number as follows:

Numerical value of risk level	**Level of risk**	**Action**	**Time to take action**	**Time to close finding**
20 and above	Unacceptable	Stop entire operation/process immediately, issue Safety Directive within CAA and/or appropriate measures (articles of Aviation Act 171-174, 179) to stop operation within interdepended entities. Verbal official decision should be considered.	Immediately, max 12 hours from risk identification. **Ensure its effectiveness!**	30 days
15 to 19	Unacceptable	Stop and/or limit the operation/process to the extent where no doubt about safe continuation of operation/process exist. Issue Safety Directive within CAA and/or appropriate measures (articles of Aviation Act 171-174, 179) to stop operation within interdepended entities.	Immediately, max 12 hours from risk identification. Review of its effectiveness is required within 48 hours.	45 days
10 to 14	Review	Limit the operation/process if no mitigation actions are immediately available. Mitigate immediately to that extend where no doubt about safe operation/ process exist. The use of directive or other means shall be considered to spread information effectively in suitable time manner.	7 working days from risk identification.	60 days
5 to 9 (+Occas.-negligible)	Review	Adopt mitigation measures as required to control identified risk initially. Mitigation actions and/or amended procedure should lead into changes to operations/processes to lower risk into “acceptable” category as low as reasonably practical.	14 day from risk identification.	90 days
1 to 4	Acceptable	Note risk/hazard to Register of identified hazard in order to track any subsequent occurrence.	Not applicable.	

Note: Finding should be considered closed ("time to close finding") only after successful verification that proposed/required actions reached the objective pursued.

Just Culture

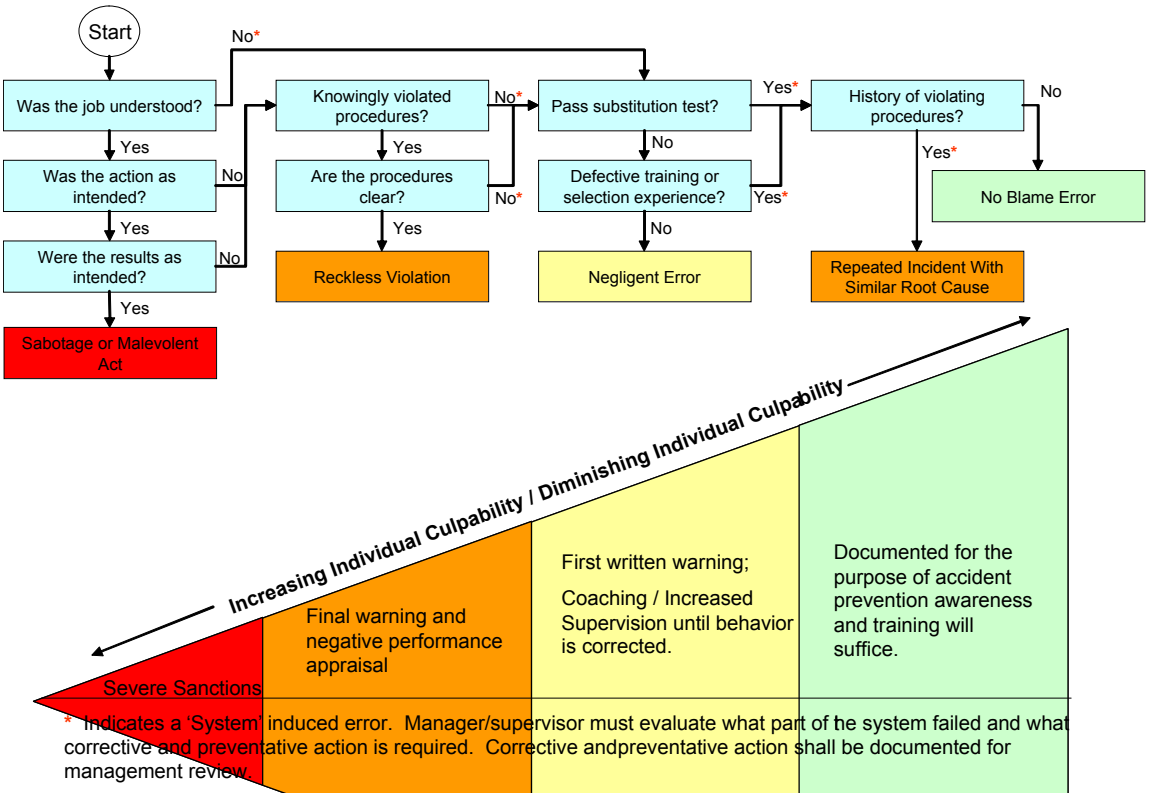
A “Just Safety Culture” fosters an atmosphere of trust in which people are encouraged, even rewarded, for providing essential safety related information, but in which they are also clear about where the line must be drawn between acceptable and unacceptable behaviour. A “Just Safety Culture” does the following:

a) Eliminates the notion that blame is a useful concept. The root cause for error will never be identified if the only goal is to find someone to blame. Holding individuals responsible for their actions is different than laying blame.

b) Defines clear lines between acceptable and unacceptable performance. Once the lines have been drawn, individuals need to know what is expected of them and understand that they will be held accountable for their performance.

c) In cases of non-compliance, there should be clear guidelines about what should happen. We often fail to determine the reason for the non-compliance. Before sanctions are applied, it is imperative that the reason(s) for the non-compliance be identified. Only then can appropriate action be taken.

The “Just Culture” Process shown below is used when deciding if disciplinary action is appropriate.



The purpose of a Just Culture and the CAA goals:

- individuals are not punished for actions, omissions or decisions taken by them that are commensurate with their experience and training but which result in a reportable event; but
- gross negligence, wilful violations and destructive acts are not tolerated.

At the moment paragraph 2 of article 1 of Regulation on occurrence reporting (Official Gazette of RS, 110/05) defines just culture in occurrence reporting system.

Internal reporting and investigation

Effective safety reporting

Accurate and timely reporting of relevant information related to hazards, incidents or accidents is a fundamental activity of safety management. The data used to support safety analyses are reported by multiple sources. One of the best sources of data is direct reporting by front-line personnel since they observe hazards as part of their daily activities. A workplace in which personnel have been trained and are constantly encouraged to report their errors and experiences is a prerequisite for effective safety reporting.

There are five basic characteristics that are universally associated with effective safety reporting systems (See Figure 4). Effective hazard reporting is a key component of safety management. Once reported, data on hazards can be analysed with other data sources to support the Safety Risk Management (SRM) and Safety Assurance (SA) processes.

Key elements for effective safety reporting:

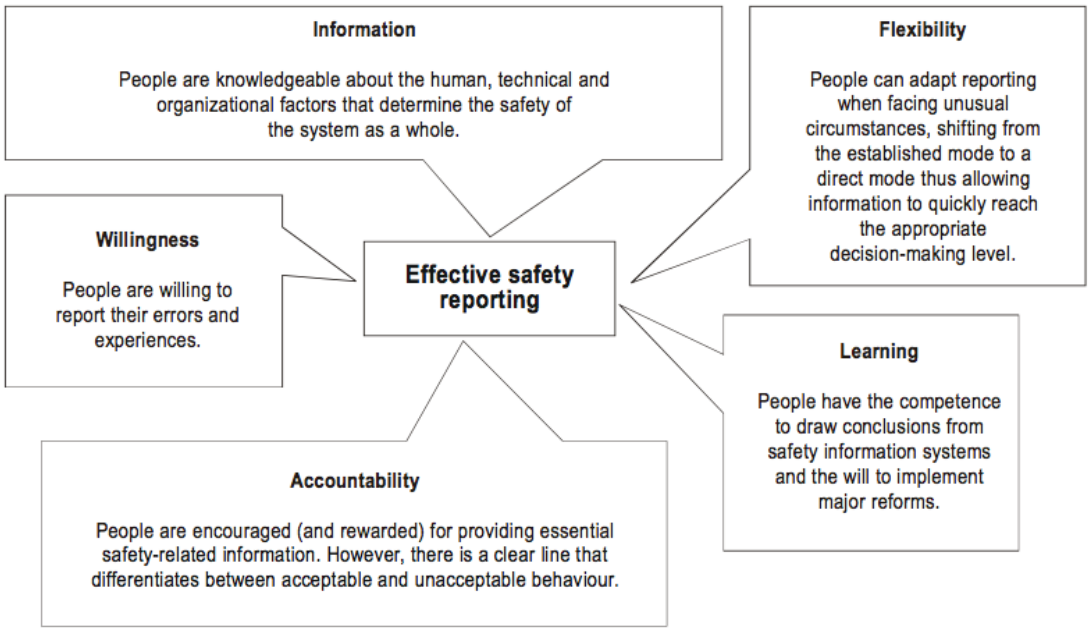


Figure 4: Effective safety reporting

Internal safety and compliance reporting

CAA uses both mandatory and voluntary reporting scheme to report any safety and/or compliance related occurrences or discoveries (together events).

Mandatory events, whether actual occurrences or discoveries, to be reported are any of those that can be identified with any of following characteristic:

1) Actual procedural failures – occurrences or discovery of procedural faults – discovery where nature of possible event might represent imminent or direct treat to aviation safety (loss of life, accident or serious incident with safety risk or good reputation of CAA).
2) Occurrence (or accident) with impact on safety within/related with interdependent entity resulting from procedural or any other CAA system failure.
3) Absence of procedure with major safety impact within interdependent entities.
4) Procedure with regulatory non-compliance.
5) Change in background law (legislation) that passed without being noticed, and has essential influence on CAA task(s).

CAA internal safety and compliance reporting system is non-punitive, confidential occurrence and hazard reporting system. It provides a channel for mandatory/voluntary reporting of aviation occurrences or hazards relevant to our organization.

Form “CAA safety and compliance Report” is used as both mandatory and voluntary reporting, and can be found online and in common shared folder (“CAA_SKUPNO/SMS”).

See CAA Internal Safety and Compliance Reporting Form under Chapter 7 “Documentation”.

Internal safety and compliance reporting process

After receiving the report every report will be read and validated by the SM. The SM may contact the reporter to make sure he understands the nature and circumstances of the occurrence/hazard reported and/or to obtain the necessary additional information and clarification. When the SM is satisfied that the information obtained is complete and coherent, he will de-identified the information and enter data into Register of known/identified hazards. Should there be a need to seek input from any third party, only the de-identified data will be used.

The information obtained will be processed according to the “Safety risk management” (4.8.).

All employees are welcome to call the SM to enquire about the internal reporting system or to request preliminary discussion with the SM before making a report.

Internal safety investigations

The scope of internal safety investigations should include occurrences that are not required to be investigated or reported. Though often of a supposed minor nature, they could be indicative of a potential hazard or trend that would only be revealed through systematic investigation and data analysis, ideally undertaken by trained investigators.

The scale and scope of any investigation should be suitable to determine why an event occurred and validate or identify the underlying hazards. The level of investigation should be proportional to the identified hazard and risk.

The investigation process should take place as soon as possible after the event. The objective of the investigation is to understand why an event happened and the contributing causes and not to apportion blame. The investigation may include:

(a) Review of documentation and processes;
(b) Operational data monitoring;
(c) Interviews;
(d) Data analysis.

Prescribed and controlled procedures

General policy

The following content is deemed as crucial technical material and shall be controlled by safety principles, thus it might not be changed in other way than prescribed under “Management of change” (4.7.).

In order to minimize any errors, CAA procedures has been described and theirs execution has been recorded, or checklists were developed for completing them in separate manuals.

Employees shall be familiarized with their working material. Prescribed procedures, including its forms and checklists, shall be strictly followed during task execution. It is not allowed for CAA personnel to use unauthorized, out dated or not approved (personal) procedures and/or check lists.

Should a requirement for new or revised procedure arises, management of change procedure shall be used in order to revise or establish one.

Each task/process shall be executed following proper task procedure. Exception might be granted individually based on unambiguous agreement with Head of Division.

Alternation must then be monitored for adequacy where at least safety impact must be assessed. Should such alternation request repeats, this procedure shall be recorded (see form).

List of controlled and prescribed procedures

Personnel Licensing and Registers

Common to all following task groups:
SOP.GEN – Standard Operating procedures – Part General Separate register

1. FCL task group:
   1) SOP.FCL *1
   2) Flow Forms – list of current revisions online.
      a. Motor plane pilots; http://www.caa.si/index.php?id=330
      b. Helicopter pilots; http://www.caa.si/index.php?id=331
      c. Ultra-light aircraft pilots (national); http://www.caa.si/index.php?id=332
      d. Glider pilots; http://www.caa.si/index.php?id=470
      e. Paraglide pilots; http://www.caa.si/index.php?id=474
      f. Balloon pilots; http://www.caa.si/index.php?id=453
      g. Skydivers; http://www.caa.si/index.php?id=332#c587

2. ATO task group:
   a. SOP.ATO *1 Separate register

3. MED task group:
   a. SOP.MED *1 Separate register

4. ENG task group:
   a. SOP.ATO *1 Separate register

_____
*1 - List of current procedures is included in its manual.

Certification and Continuous oversight
AOC task group:
1) FOPM – Flight operations Procedures Manual *1 Separate register

_____
*1 - List of current procedures is included in its manual.

Inspections and Minor offence Proceedings
TBD

Regulation
TBD

Own activity
TBD

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Chapter

5. SAFETY PROMOTION AND COMMUNICATION

Safety promotion

Safety promotion encourages a positive safety culture and creates an environment that is conducive to the achievement of the safety objectives. A positive safety culture is characterized by values, attitudes and behaviour that are committed to the organization's safety efforts. This is achieved through the combination of technical competence that is continually enhanced through training and education, effective communications and information sharing. Senior management provides the leadership to promote the safety culture throughout an organization.

An organizational safety effort cannot succeed solely by mandate or strict adherence to policies. Safety promotion affects both individual and organizational behaviour and supplements the organization's policies, procedures and processes, providing a value system that supports safety efforts.

It should be noted that CAA employees has constant and direct contact with industry key persons for implementing and exercising SMS policies within their organizations, therefore it is the most important to promote safety to them.

Training and education

All staff should receive safety training as appropriate for their safety responsibilities.
This should involve initial training as well as continued maintenance of competence – yearly recurrent training/review/workshop.
Additional training in a form of workshops should be planned for each implementation phase.

Safety communication principles

Safety communication is an essential foundation for the development and maintenance of an adequate safety culture. Safety communication should be promoted on all levels of employees communication; within CAA, CAA – to other regulative bodies (international, national), CAA – interdependent entities.

Safety communication should:

- ensure that all staff are fully aware of the CMS/SMS and the organization's safety culture,
- disseminate safety critical information internally and externally,
- explain why certain actions are taken,
- explain why safety procedures are introduced or changed,
- complement and enhance the organization's safety culture,
- contain a process for assessing the suitability of safety communication and its effect on the organization.

Those communication methods normally include:

- safety policies and procedures (internal),
- newsletters, safety bulletins and notices,
- presentations, workshops,
- websites and e-mails,
- informal workplace meetings between staff and the Managing Director or Senior Managers.

Chapter

6. GAP ANALYSIS AND IMPLEMENTATION PLAN

Note to revision 02: Due to major change in CSM scope (extension its applicability from division to whole CAA) cross-section (gap analysis) and implementation plan, both are showing significant difference between divisions.
It is to be emphasized that implementation should continue separately and at different levels within different divisions. It is not recommended to slow down or delay implementation where it has already achieved several steps.
However, initial gap analysis within division that has recently been introduced to CSM, has to be done as primary task. As well as compliance analysis (compliance to regulative requirements checklist) shall be done immediately.

Gap analysis

The implementation of a CMS requires a CAA to conduct an analysis of its system to determine which components and elements of an SMS are currently in place and which components and elements must be added or modified to meet the implementation requirements. This analysis is known as gap analyses, and it involves comparing the CMS/SMS requirements against the existing resources in the service provider.

Gap analysis should be done in the Phase 2 – Collection phase.

Current situation

Some divisions has already performed Gap analysis, other shall do that within first stage of implementation.

GAP analysis checklist was prepared for compliance assessment in those division. Document can be found under Chapter 7 “Documentation”, “GAP analysis”. A Compliance Monitoring System and its appointed person(s) shall have responsibility to perform initial GAP analysis as well.

CMS implementation plan – recently joined divisions and valid from rev 02 on.

CAA divisions CMS implementation plan is divided into 4 phases:
Phase 1 – Initial phase
Phase 2 – Collection phase
Phase 3 – Constructive phase
Phase 4 – Continuous improvement phase

Phase 1 – Initial phase – recently joined divisions

Currently within each CAA division some documents exist and is being used for several procedures. Manuals should be revised, completed, incorporated into CSM (as reference), and implemented in daily work.

Phase goals:
1) Create/extend CMS to all divisions in CAA.
2) To present it to all employees, familiarize them with content, principles, and the policy.
3) Introduce the need to actively participate in following development of SMS (participate in reporting and investigation systems).

Phase 2 – Collection phase

Phase goals:
1) Collect and analyse internal reports and recommendations.
2) Appoint any additional arising procedures that might be controlled and revise them.
3) Perform GAP and compliance analysis.
4) Establish/review safety indicators and safety performance monitoring system.
5) Make list of all procedures that are required to be controlled.

Phase 3 – Reconstruction phase

Phase goals:
1) Revise CMS regarding outcomes from compliance and safety related recommendations gathered mainly from active participation of all employees (reporting and investigation systems, surveys, SMS workshops).
2) Revise all current procedures on List of controlled procedures within CAA.
3) Implement any possible legislation change on CSM field.
4) Bring Safety Management System Manual to “fully operational level”, being coherent and solid document.

Phase 4 – continuous improvement of SMS

Continuous Improvement of the CMS
The CAA should continually seek to improve their safety performance. Continuous improvement should be achieved through:
1) Proactive evaluation of day to day operations, facilities, equipment, documentation and procedures through safety audits and surveys.
2) Evaluation of an individual’s performance to verify the fulfilment of their safety responsibilities.

3) Reactive evaluations in order to verify the effectiveness of the system for control and mitigation of risk e.g. incidents, accidents and investigations.
4) Tracking organizational changes to ensure that they are effective.

CMS implementation plan – CSM already in place before revision 02

Note from revision 02 and on: Chapter contains some outdated expressions, since major organizational changes took place after revision 01. It was intentionally left unchanged.

Division CMS implementation plan is divided into 4 phases:
Phase 1 – Initial phase
Phase 2 – Collection phase
Phase 3 – Constructive phase
Phase 4 – Continuous improvement phase

Phase 1 – Initial phase

Current situation – based on initial 00 revision.

With the implementation of EASA Part FCL, a functioning CMS/SMS is required.

Currently within CAA FOPLD an FOPM (Flight Operations Procedures Manual) is being used for several procedures. Manual mostly contains checklists used for extensive procedures managing AOC holders procedures (issue, change, revoke of AOC, special approval, nomination, trainings, documentation, inspections/checking…).

Personnel licensing tasks are mostly performed using specific Forms prepared in a way to serve as a procedural flow, where all required tasks, performed by all involved persons (including applicant, inspector, supervisor or director) are mentioned. They mostly contain checklists for items and/or attached documents and/or requirements to be met.

An employee of FOPLD is a member of Occurrence reporting group.

RAMP system is operated by FOPLD employee.

Systemization of working posts is done by HR management not reflecting actual situation in division profession.

Phase goals:
1) Create CMS/SMS.
2) To present it to all employees, and familiarize them with content, principles, and the policy.
3) Introduce the need to actively participate in following development of SMS (participate in reporting and investigation systems).

Phase 2 – Collection phase

Phase goals:

1) Collect and analyse internal reports and recommendations.
2) Appoint any additional arising procedures that might be controlled and revise them.
3) Perform GAP analysis.
4) Establish/review safety indicators and safety performance monitoring system.

Phase 3 – Reconstruction phase

Phase goals:

1) Revise CMS/SMS regarding outcomes from compliance and safety related recommendations gathered mainly from active participation of all employees (reporting and investigation systems, surveys, SMS workshops).
2) Revise all current procedures within FOPM and on controlled procedures Flow Forms list.
3) Implement any possible legislation change on SCS/SMS field.
4) Bring Compliance and Safety Manual to "fully operational level", being coherent and solid document.

Phase 4 – continuous improvement of CMS

Continuous Improvement of the CMS

The CAA should continually seek to improve their safety performance. Continuous improvement should be achieved through:

1) Proactive evaluation of day to day operations, facilities, equipment, documentation and procedures through safety audits and surveys.
2) Evaluation of an individual's performance to verify the fulfilment of their safety responsibilities.
3) Reactive evaluations in order to verify the effectiveness of the system for control and mitigation of risk e.g. incidents, accidents and investigations.
3) Tracking organizational changes to ensure that they are effective.

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Chapter
7. DOCUMENTATION

Working forms, registers and lists are prepared in a separate files. Hereby attached documents might not have the same form, but the contents shall be the same.

Always use working PDFs that are published as separate PDF in CAA intranet location.

General Index of Forms, Registers and other documents:

7.1 – CSM development and auditing related
- 7.1.1 – Compliance checklist
- 7.1.2 - GAP
- 7.1.3. – Internal performance monitoring

7.2 – Directives

7.3 – Forms

7.4 – Registers and Lists

7.5 – Safety promotion

CSM development and auditing related

7.1.1. Compliance to regulative requirements checklist

Following checklist was established to check requirements based on (EU) No. 965/2012 Annex II (Part ARO), Subpart GEN and (EU) No. 1178/2011 Annex VI (Part-ARA), Subpart GEN.

Note: Checklist was completed based on CSM revision 1. Some references (chapter numbers) may be alternated since.

ARO, ARA reference	**Requirement**	**CAA reference**
GEN.115	Oversight documentation	
	The competent authority shall provide all legislative acts, standards, rules, technical publications and related documents to relevant personnel in order to allow them to perform their tasks and to discharge their responsibilities.	CSM 3.2 C (list 4.11), FOPM, Flow forms
GEN.120	Means of compliance	
a)	Develop Acceptable Means of Compliance (AMC) that may be used to establish compliance with Regulation (EC) No 216/2008 and its Implementing Rules. When the AMC are complied with, the related requirements of the Implementing Rules are met.	EASA AMC material
b)	Alternative means of compliance	CSM 3.7
c)	System to consistently evaluate that all alternative means of compliance used by itself or by organizations and persons under its oversight allow the establishment of compliance with Regulation (EC) No 216/2008 and its Implementing Rules.	CSM 3.4 FOPM 7.15
e)	When the competent authority itself uses alternative means of compliance: (1) make alternative means of compliance available to all organizations and persons under its oversight; and	CSM 3.4 FOPM 7.15
	(2) without undue delay notify the Agency.	CSM 3.4
	ARA: inform other MS about alternative means of compliance that were accepted.	CSM 3.4
GEN.125	Information to the Agency	
a)	CAA shall without undue delay notify the Agency in case of any significant problems with the implementation of Regulation (EC) No 216/2008 and its Implementing Rules.	CSM 3.5
b)	The competent authority shall provide the Agency with safety-significant information stemming from the occurrence reports it has received.	CSM 4.5 CSM 3.6
GEN.135	Immediate reaction to a safety problem	
a)	Authority shall implement a system to appropriately collect analyses and disseminate safety information.	CSM 3.6
b)	Implement system to analyse and provide any information to Member states and commission.	CSM 3.9

c)	Upon receiving the information referred to in (a) and (b), the competent authority shall take adequate measures to address the safety problem.	CSM 3.7 (ZLet 171-174, ZLet 179 I)
d)	Measures taken under (c) shall immediately be notified to all persons or organizations (interdependent entities).	CSM 3.7
	The competent authority shall also notify those measures to the Agency and, when combined action is required, the other Member States concerned.	CSM 3.6
GEN.200	Management system	
a)	The competent authority shall establish and maintain a management system, including as a minimum:	
1)	Documented policies and procedures to describe its organization, means and methods to achieve compliance with Regulation (EC) No 216/2008 and its Implementing Rules.	CMS Ch 2, (CMS 2.1.2) CMS 4.3
	The procedures shall be kept up-to-date and serve as the basic working documents within that competent authority for all related tasks;	CMS 3.8
AMC1 ARO.GEN.200(a)(1)	Management system	
c)	The documented procedures should cover, all of the following aspects:	
	policy and objectives	CMS 0.2, 0.4
	organizational structure	CMS 2.1
	responsibilities and associated authority	CMS 4.3
	procedures and processes	CMS 4.3.5, 3.7, 3.8, 3.10
	internal and external interfaces *1-cooperation within CAA (airworthiness),	CMS 3.10, contracted experts
	internal control procedures;	CMS 4.3
	training of personnel;	CMS 3.12
	cross-references to associated documents;	FOPM, CMS
	assistance from other competent authorities or the Agency (where required).	CMS 3.10
2)	a sufficient number of personnel to perform its tasks and discharge its responsibilities.	CSM 3.11
	Such personnel shall be qualified to perform their allocated tasks,	CSM 3.12
	have the necessary knowledge, experience,	CSM 3.12.1
	initial and recurrent training to ensure continuing competence,	CSM 3.12.2
	A system shall be in place to plan the availability of personnel, in order to ensure the proper completion of all tasks;	CSM 3.12, 3.13
3)	adequate facilities and office accommodation to perform the allocated tasks,	CSM 3.9
4)	a function to monitor compliance of the management system with the relevant requirements and adequacy of the procedures,	CSM 4.3
	the establishment of an internal audit process,	CMS 4.3.3
	a safety risk management process,	CSM 4.9
	Compliance monitoring shall include a feedback system of	CMS 2.1.6

	audit findings to the senior management of the competent authority to ensure implementation of corrective actions as necessary,	

5)	a person or group of persons, ultimately responsible to the senior management of the competent authority for the compliance monitoring function.	CSM 2.1.5, 2.1.6
b)	The competent authority shall, for each field of activity, including management system, appoint one or more persons with the overall responsibility for the management of the relevant task(s).	Systemization of working places, 2.1.1
c)	The competent authority shall establish procedures for participation in a mutual exchange of all necessary information and assistance with other competent authorities concerned including on all findings raised and follow-up actions taken as a result of oversight of persons and organizations exercising activities in the territory of a Member State, but certified by the competent authority of another Member State or the Agency.	CSM 4.5 (SAFA system)
d)	A copy of the procedures related to the management system and their amendments shall be made available to the Agency for the purpose of standardization.	Intranet library
GEN.210	Changes in the management system	
a)	The competent authority shall have a system in place to identify changes that affect its capability to perform its tasks and discharge its responsibilities as defined in Regulation (EC) No 216/2008 and its Implementing Rules. This system shall enable it to take action as appropriate to ensure that its management system remains adequate and effective.	CSM 3.11 CSM 4.3.2
b)	The competent authority shall update its management system to reflect any change to Regulation (EC) No 216/2008 and its Implementing Rules in a timely manner, so as to ensure effective implementation.	CSM 4.3.2.
c)	The competent authority shall notify the Agency of changes affecting its capability to perform its tasks and discharge its responsibilities as defined in Regulation (EC) No 216/2008 and its Implementing Rules.	CSM 3.11.3
GEN.220	Record-keeping	
a)	The competent authority shall establish a system of record-keeping providing for adequate storage, accessibility and reliable traceability of:	
1	the management system's documented policies and procedures	Lotus Notes
2	training, qualification and authorization of its personnel	HR department, personal files
3	the allocation of tasks, covering the elements required by ARO.GEN.205 as well as the details of tasks allocated;	HR dep., CMS 3.3
4	certification processes and continuing oversight of certified organizations	Lotus Notes, Uredba o upravnem

		poslovanju
5	details of training courses provided by certified organizations, and if applicable, records relating to FSTDs used for such training,	HR department, personal files
ARA 5	processes for issuing personnel licenses, ratings, certificates and attestations and for the continuing oversight of the holders of those licenses, ratings, certificates and attestations	CSM 4.12 (Flow forms) SOP.FCL
ARA 6	processes for issuing FSTD qualification certificates and for the continuing oversight of the FSTD and of the organization operating it;	TBD
6 (ARA 7)	oversight of persons and organizations exercising activities within the territory of the Member State, but overseen or certified by the competent authority of another Member State or the Agency, as agreed between these authorities	Not applicable
7 (ARA 8)	the evaluation and notification to the Agency of alternative means of compliance proposed by organizations subject to certification and the assessment of alternative means of compliance used by the competent authority itself;	Lotus Notes
8 (ARA 9)	findings, corrective actions and date of action closure,	Database of Findings *1
9	enforcement measures taken	Lotus notes
(ARA 10)		Directory of enforcement measures
10	safety information and follow-up measures	Lotus Notes
(ARA 11)		TBD
11	the use of flexibility provisions in accordance with Article 14 of Regulation (EC) No 216/2008	Not in use
(ARA 12)		Lotus Notes
b)	The competent authority shall maintain a list of all organization certificates it issued,	Registers Online lists
c)	All records shall be kept for the minimum period specified in this Regulation. In the absence of such indication, records shall be kept for a minimum period of 5 years subject to applicable data protection law.	FOPM 7.6

*1 – Location
FCL; I:\CAA_SKUPNO\OLOLM\00-SOP.AIRCREW\01-PART.GEN\05-ATO-Oversight_Programme
OPS; I:\CAA_SKUPNO\OLOLP\Oversight 2013-2014.xls

7.1.2. GAP analysis – initial checklist

Note to revision 02: Situation analysis before introducing formal SMS (before phase 1) – divisions where CSM was introduced before revision 02. It should be re-evaluated.

Aspects to be analyzed or question to be answered	Answer	Status of implementation
Component 1 – SAFETY POLICIES AND OBJECTIVES		
Element 1.1 – Management commitment and responsibility		
Is a safety management system with defined components established, maintained and adhered to?	☑ Yes * ☐ No	Yes; Implementation in currently in phase 2 – collecting reports, revising procedures, Gap analysis, initial performance monitoring.
Is the safety management system appropriate to the size and complexity of the service provider?	☑ Yes * ☐ No	Yes. * According to initial system setup, it is appropriate. During following phases some adjustments might be required.
Is there a safety policy in place?	☑ Yes ☐ No	Yes, included within this CSM.
Is the safety policy approved and promoted by the accountable executive?	☐ Yes ☑ No	No. Nevertheless it is approved and promoted by head of division.
Is there a formal process to develop a coherent set of safety objectives?	☐ Yes ☑ No	No. Set of safety objectives were initially developed according to our mission and responsibilities.
Are the safety objectives publicized and distributed?	☑ Yes ☐ No	Yes. CSM is available to employees in digital version on intranet.
Is there a policy in place that ensures effective safety reporting of safety deficiencies, hazards or occurrences including the conditions under which protection from disciplinary and /or administrative action applies?	☑ Yes ☐ No	Yes. CSM internal reporting and investigation, safety reporting, just culture.
Element 1.2 – Safety accountabilities of managers		
Has the Authority identified an accountable executive who shall have ultimate responsibility and accountability, on behalf of the service provider, for the implementation and maintenance of the SMS?	☐ Yes ☑ No	
Does the accountable executive have responsibility for ensuring that the safety management system is properly implemented and performing to requirements in all areas of the service provider?	☐ Yes ☑ No	
Does the accountable executive have full control of the financial resources required for the operations authorized to be conducted under the operations certificate?	☐ Yes ☑ No	
Does the accountable executive have full control of the human resources required for the operations authorized to be conducted under the operations certificate?	☐ Yes ☑ No	
Does the accountable executive have final authority over operations/tasks/responsibilities authorized to be conducted?	☐ Yes ☑ No	

Element 1.3 – Appointment of key safety personnel		
Has a qualified person been appointed to manage and oversee the day-to-day operation of the SMS?	☑ Yes ☐ No	Yes. Safety manager assistant (Head of division) and External safety auditor. CSM CAA management system.
Does the person overseeing the operation of the SMS fulfil the required job functions and responsibilities?	☑ Yes ☐ No	Yes. Head of division.
Are the safety authorities, responsibilities and accountabilities of personnel at all levels of the organization defined and documented?	☑ Yes * ☐ No	Yes. CSM CAA management system. *TBD for External auditor.
Element 1.4 – Documentation		
Has the service provider developed and does it maintain SMS documentation, in paper or electronic form?	☑ Yes ☐ No	Yes. In paper and electronic form.

Component N° 2 –SAFETY RISK MANAGEMENT		
Element 2.1 – Hazard identification process		
Does the service provider have a formal safety data collection and processing system (SDCPS) of effectively collecting information about hazards in operations?	☑ Yes ☐ No	Yes. CSM Internal reporting and investigation.
Does the service provider SDCPS include a combination of reactive, proactive and predictive methods of safety data collection?	☑ Yes * ☐ No	Yes/no. Reactive and proactive included in CSM internal safety and comp. reporting, * Predictive shall be derived from performance monitoring.
Has the service provider developed training relevant to reactive methods of safety data collection?	☑ Yes ☐ No	Yes. Employees received introductory training on all topics of CSM, and short briefing about reporting.
Has the service provider developed communication relevant to reactive methods of safety data collection?	☑ Yes ☐ No	Yes. Reporting form (incl mandatory and immediate reporting scheme).
Is there a feedback process to notify contributors that their reports have been received and to share the results of the analysis?	☐ Yes ☑ No	No. TBD.
Is there training relevant to proactive methods of safety data collection?	☑ Yes * ☐ No	Yes/no. Employees received introductory training on all topics of CSM. Special and recurrent training expected.
Element 2.2 – Risk assessment and mitigation process		
Are there criteria for assessing risks and establishing risk tolerability (i.e., the acceptable level of risk the organization is willing to accept?	☐ Yes ☑ No	Yes. CSM 4.8.4.

Is there a structured process for the analysis of the risk associated to the consequences of identified hazards, expressed in terms of probability and severity of occurrences?	☑ Yes ☐ No	Yes. CSM and risk mitigation form.

Component N° 3 –SAFETY ASSURANCE		
Element 3.1 – Safety performance monitoring and measurement		
Are regular and periodic planned reviews conducted regarding company safety performance?	☑ Yes* ☐ No	Yes*. Internal performance monitoring system. * it should be revised.
Is there a process to evaluate the effectiveness of corrective actions?	☑ Yes ☐ No	Yes. CSM reporting form and CSM mitigation process.
Are safety reports reviewed at the appropriate level of management?	☐ Yes ☑ No	No. Managing director not included.
Is there a feedback process to notify contributors that their reports have been received and to share the results of the analysis?	☐ Yes ☑ No	No. TBD.
Is there a process in place to monitor and analyze trends?	☐ Yes ☑ No	Yes/no. Performance monitoring system. After some samples, trends should be formed.
Element 3.2 – The management of change		
Has the service provider developed and does it maintain a formal process for the management of change?	☐ Yes ☑ No	No. Established in CSM. Not implemented.
Does the formal process for the management of change analyze changes to operations or key personnel for risks?	☐ Yes ☑ No	Yes/no. Established in CSM. *Some discrepancies found in following it.

Component N° 4 – SAFETY PROMOTION		
Element 4.1 – Training and education		
Is there a documented process to identify training requirements so that personnel are trained and competent to perform the SMS duties?	☐ Yes ☑ No	Yes/No. Requirement included in CSM. Syllabus and training goals shall be included/revised.
Is the safety training incorporated into indoctrination training upon employment?	☐ Yes ☑ No	Should be revised.
Element 4.2 – Safety communication		
Are there communication processes in place within the organization that permit the safety management system to function effectively?	☑ Yes ☐ No	Yes. CSM Safety communication principles.
Are communication processes (written, meetings, electronic, etc.) commensurate with the size and scope of the service provider?	☑ Yes* ☐ No	Yes*. Some additional methods should be made available.
Is information established and maintained in a suitable medium that provides direction regarding relevant SMS documents?	☐ Yes ☑ No	Yes/No. Partially. CSM folder shall be revised.

Is there a process for the dissemination of safety information throughout the organization and a means of monitoring the effectiveness of this process?	☑ Yes ☐ No	Yes. Dissemination methods established, monitoring the effectiveness suitable for CAA size.

Note: Where "Yes" is marked with *, item is not completely completed, some (minor) actions are required and shall be done as soon as practically. Item should not be considered closed/done.

7.1.3. Internal Performance monitoring and measurement table

	Item	Objectives	Year _____ Performance											
			1	2	3	4	5	6	7	8	9	10	11	12
			Qtr1			Qtr2			Qtr3			Qtr4		
			1st Half						2nd Half					
Level 1 of SMS implementation: Compliance														
Quantitative indicators	number of safety reviews performed,													
	number of staff who received training in SMS,													
	number of internal audits performed versus number of audits planned,													
	number of voluntary safety reports per staff member per year,													
	number of safety reports raised by customers per year.													
Qualitative indicators	feedback received from staff on the safety policy,													
	feedback received from staff on new procedures implemented in the area of internal occurrence reporting or hazard identification,													
Level 2 of SMS implementation: Improvement														
	number of risk assessments performed following organizational changes,													
	percentage of standard operating procedures that have been subject to hazard identification,													
	average lead time for completing corrective actions following internal audit,													
	number of suggestions for safety improvements,													
	frequency and effectiveness of safety briefings,													
	number of additional procedural controls implemented.													
Level 3 of SMS implementation: Learning														
Quantitative indicators	number of high risk occurrences (coded amber and red)													
	mean value of risk ratings (over a reference period, e.g. 1 year)													
	sum of risk ratings (over a reference period, e.g. 1 year)													
	solidity of risk controls (defences) (rated from 0 to 5; over a reference period, e.g. 1 year)													


AGENCIJA ZA CIVILNO LETALSTVO
CIVIL AVIATION AGENCY, SLOVENIA
CAA

Compliance and Safety Directives (CSD)

7.1.4. Forms for directives

List of CSM directives forms and their location on intranet:

CSM	Form Name Location of file on CAA internal	Current version	Date of version
D_01	Internal Safety/compliance Directive by Head of division or Safety Manager	ver 02	05.10.2015
	//CAA/Skupno/01-CSM/02 Directives/ CSM_D_00_SM Directive-BLANK_ver02(oct15)		

Note: List above is the list of available forms for directives, list of issued directives can be found below.

7.1.5. List of issued Compliance and safety Directives:

List of issued directives should contain following columns:

Directive	Date of directive	Directive title	Effective till
CSD_01			

The actual working document/List of issued CS directives is separate document found in:
//CAA/Skupno/01-CSM/02 Directives/ CSM_D_00_List of CSD_ver02(oct15)

7.1.6. CAA Safety and compliance directive forms

Internal Safety/Compliance directive by SM or HoD:

CAA Safety and compliance system

Internal Safety/compliance Directive
by Head of division or Safety Manager

Reference Number (filled by SM):
Directive Nr.: SC-_____/201_
Date of directive:
Time:

1. Directive title

2. Directive author			
name		position	

3. Directive is directed to					
☐entire CAA					
☐Division	☐PL&R	☐CER&CO	☐INSP	☐REG	☐OWN
☐Professional Area	☐FO&P	☐AER	☐AIR	☐ANS	☐SEC
☐directly to person					

4. Description
Use back side if required, or attach description page.

5. Related entities / persons:

6. **Signature**		
Name: _____	date	Signature / stamp:

- Intentionally left blank -

Forms

List of controlled CSM forms and their location on intranet:

CSM	Form Name Location of file on CAA internal	current version	date of version
F_01	CAA Safety And Compliance Report	ver 02	05.10.2015
	//CAA/Skupno/01-CSM/03 Forms/CSM_CAASafetyAndCompReport		
F_02	Risk mitigation form	ver 02	05.10.2015
	//CAA/Skupno/01-CSM/03 Forms/CSM_F_02_MitigationProcess		
F_03	Procedure recording	ver 02	05.10.2015
	//CAA/Skupno/01-CSM/03 Forms/CSM_F_03_ProcRecording_ver02(oct15)		
F_04.1	Alternative Means of Compliance Approval procedure Variant A and B: New approval	ver 02	05.10.2015
	//CAA/Skupno/01-CSM/03 Forms/ CSM_F_04.1_AltMocApproval-AandB		
F_04.2	Alternative Means of Compliance Approval procedure Variant C: Acceptance of existing AltMoc	ver 02	05.10.2015
	//CAA/Skupno/01-CSM/03 Forms/ CSM_F_04.2_AltMocApproval-C		
F_05.1	Exemption Granted Notification Form Variant C: Acceptance of existing AltMoc	ver 02	05.10.2015
	//CAA/Skupno/01-CSM/03 Forms/ CSM_F_05.1_ ExemptionGrantedNotificationForm		
F_05.2	Obvestilo o odobritev izjeme	ver 02	05.10.2015
	//CAA/Skupno/01-CSM/03 Forms/ CSM_F_05.2_ObvestiloOdobritevIzjeme_ver02(oct15)		

7.1.7. CAA Safety and Compliance Report (F_01)

Actual form is stored in PDF format under folder and name:
//CAA/Skupno/01-CSM/03 Forms/CSM_CAASafetyAndCompReport

CAA Safety and Compliance Report

Reference Number (filled by SM):	
	Date closed:

Type of report:	☐Voluntary	☐Mandatory	☐Initial report: **Date of report:**_____
	☐Time critical *	☐Non-critical	☐Follow up report: Previous nr/date:_____

* - where assessed as time critical report shall be handed over directly to Division Safety manager

1. SUBMITTER'S DETAILS (may be voluntary)

1.1 Name of Submitter	**1.2 E-mail Address**	**1.3 Telephone Number**

2. EVENT TITLE

3. TYPE OF EVENT

☐Discovery / finding – Safey risk / hazard discovered ☐Occurrence – Event, incident, accident

☐Other

4. TYPE OF OBSERVATION OR OCCURENCE (as the consequence of)

☐Procedural (safety) deficiencies, non-compliance ☐Procedure outdated (background law change)

☐Procedural shortcoming ☐Procedure is missing (recommendation to established one)

☐Fault in regulation compliance ☐CAA internal system failure

☐Failure to oversight ☐Training failure

☐Inadequate resources ☐Miss practice observed

☐Other

5. OCCURENCE ATTACHEMENTS

☐Reports ☐Files ☐Legalization material

☐Email

☐Photo

☐Other

7. DESCRIPTION
☐Content is followed on the next page

Please send this report to either: 1) E-Mail: **sms@caa.si** 2) Put it directly to **SMS BOX** (or **hand over** to Head of division- **mandatory for time critical reports**!) 3) Public address of CAA Slovenia, In case of confidential report, write »CSM – zaupno! Ne odpiraj!«	Signature of Submitter (optional):

End of report

To be filled by SM / CM

6. CORRECTIVE AND FOLLOW UP ACTION (action assessed by SM or CM)							
Entered into database by (Name and signature):				Date entered: (into register)			
Report was processed on:	☐this table below only	☐Form "CAA CSM; Mitigation process and Corrective Action Protocol" (no filling below)			Number:_____		
Assessed as (i.a.w. Risk assessment , 4.8.4:)	Risk Severity: ☐Catastrophic - 5 ☐Hazardous - 4	☐Major - 3 ☐Minor - 2 ☐Negligible - 1		Risk Likelihood: ☐Frequent - 5 ☐Occasional - 4	☐Remote - 3 ☐Improbable - 2 ☐Extr. Improbable - 1		
Level of risk:	☐Immediate safety risk	☐Unacceptable risk		☐Review		☐Acceptable	
Corrective action:	☐Procedural action	☐Continuous monitoring		☐Inspection		☐Not required	
Actions :							
Until date:		By person (name):			Signature:		

7. FOLLOW UP ASSESSED: ☐Suitable. Case Closed: ☐Yes, date:	SM/CM Name:
Conclusion: ☐Separate notice. ☐Safety Circular. ☐Team meeting. ☐None.	SM/CM Signature:

7.1.8. Risk mitigation form (F_02)

Actual Risk mitigation form is stored in PDF format under location and name:
//CAA_Skupno/01-CSM/03 Forms/CSM_F_02_MitigationProcess

CAA Safety and compliance system

Mitigation process and

Corrective Action Protocol

Reference Number (filled by SM):

	Date closed:

A) PRE ACTION SITUATION

1. EVENT TITLE (as in original report)

2. TYPE OF EVENT – assessed by SM

☐Discovery / finding – Safey risk / hazard discovered ☐Occurrence – Event, Safety fence failure

☐Other

3. TYPE OF OBSERVATION OR OCCURENCE - assessed by SM

☐Procedural (safety) deficiencies, non-compliance ☐Procedure outdated (background law change)

☐Procedural shortcoming ☐Procedure is missing (recommendation to established one)

☐Fault in regulation compliance ☐CAA internal system failure

☐Failure to oversight ☐Training failure

☐Inadequate resources ☐Miss practice observed

☐Other

4. CORRECTIVE AND FOLLOW UP ACTION (action assessed by SM or CM)

Entered into database by (Name and signature):		Date entered: (into register)	
Assessed as (i.a.w. Risk assessment , 4.8.4:)	Risk Severity: ☐Catastrophic - 5 ☐Major - 3 ☐Minor - 2 ☐Hazardous - 4 ☐Negligible - 1	Risk Likelihood: ☐Frequent - 5 ☐Remote - 3 ☐Improbable - 2 ☐Occasional - 4 ☐Extr. Improbable - 1	
Level of risk:	☐Immediate safety risk	☐Unacceptable risk	☐Review ☐Acceptable
Corrective action:	☐Procedural action ☐Continuous monitoring	☐Inspection required	☐Not required

Actions :

Until date:		By person (name):		Signature:	

5. DESCRIPTION OF REQUIRED ACTION AND EXPECTED OUTCOME
☐Content is followed on the next page

B) POST ACTION VERIFICATION

1. CORRECTIVE AND FOLLOW UP ACTION CLOSURE (action assessed by SM or CM)	
Follow up assessed: ☐Suitable. Case Closed: ☐Yes, date:	SM/CM name:
Conclusion: ☐Separate notice. ☐Safety Circular. ☐Team meeting. ☐None.	SM/CM Signature:

2. DESCRIPTION OF POST ACTION OUTCOME
☐Content is followed on the next page

7.1.9. Procedure Recording Form (F_03)

Form for procedure recording is stored under location and name:
//CAA/Skupno/01-CSM/03 Forms/CSM_F_03_ProcRecording_ver02(oct15)

CAA Safety and Compliance system

Procedure CODE (filled by SM/CM):
____.PRC._____

Procedure recording

1. (Recommended) procedure name	**Assigned name** (filled by SM/CM)

2. Task group					
☐Division	☐PL&R	☐CER&CO	☐INSP	☐REG	☐OWN
☐Professional Area	☐FO&P	☐AER	☐AIR	☐ANS	☐SEC

3. Regulation reference – reference to National, EASA or other legislation

4. Applicant forms - applications name, if any – to be send by interdependent entities

5. Applicable checklists / forms, if any - to be used by CAA staff

6. Task description – short description of procedure

7. Time frame (note: following resources are for user planning only and do not count as background for FE calculation)
☐none, not relevant ☐less than 3 days, ☐the application shall be send to CAA _____ days before requested approval (by applicant) ☐expected duration time for CAA to process task: _____ days, ☐expected total number of days from application to approval: _____ days.

8. Task procedure – list task items to be done during procedure excecution (content and procedural)
1) Application recieved (initial action), 2) Registry of request in CAA system – appointed to HoD + Focal point assignment (by HoD), 3) Check Application material complete, integral and consistent, 4) 5) 6) 7) 8) 9) 10) …. 15) Issue an certificate/license + close working record, 16) Archive records.

9. Procedure description, additional guidance, recommended material

10. Final document and record keeping	*1	*2
☐none,	☐	☐
☐official work tracking record only	☐	☐
☐official Decision	☐	☐
☐Checklist(s): _____	☐	☐
☐Certificate / License / Attestation: _____	☐	☐
☐Internal record / procedure:_____	☐	☐
☐other: _____	☐	☐
☐other: _____		

*Note: *1 – to be permanently stored in CAA record system, *2 – send to applicant officially.*

7.1.10. Alternative means of compliance Forms (F_04.1, F04.2)

Variant A and B: New approval (F_04.1)
Form is stored in PDF format under location and name:
//CAA/Skupno/01-CSM/03 Forms/ CSM_F_04.1_AltMocApproval-AandB

Safety and compliance system

Reference Number (filled by SM):
AltMoc Nr.: A-_____/2015
Date of application:
Date of conclusion:

Alternative Means of Compliance Approval procedure

Variant A and B: New approval

A) APPLICATION PART (filled by applicant)

1. Application title (as recommended by applicant)

2. Applicant

☐ Internal CAA employee — Name / position (optional): _____

☐ Oversighted entity company/individual _____

name _____

address _____

contact

3. Short description

Use back side if required, or attach description page.

3. Legal references

B) PROCESS PART (filled by CAA AltMoc group)

Application title (as confirmed by CAA AltMoc group)

AltMoc working group
Head of group (name): _____
Member 1 of group (name): _____
Member 2 of group (name): _____
Member (optional): _____
Member (optional): _____

PROCESS PROTOCOL

Item 2. **Procedure Integrity**		
2.1) AltMoc clearly defines its intention / purpose	☐ found suitable	☐non-compliance
Explanation / description / record:		

2.2) Reason for AltMoc Is defined and found justified	☐ found suitable	☐non-compliance
Explanation / description / record:		

2.2) AltMoc execution and performance impact are described	☐ found suitable	☐non-compliance
Explanation / description / record:		

Item 3. **Evaluation against regulative requirements**

3.1) Proposed AltMoc checked against EASA legislation		
	☐foun suitable	☐non-compliance
Explanation / description of verification process / record:		

3.2) Proposed AltMoc checked against National legislation		
	☐found suitable	☐non-compiance
Explanation / description of verification process / record:		

Item 4. **Evaluation of expected outcome.**

4.1) Expected outcome suitably defined by applicant		
	☐suitable	☐non-complance
Explanation / description of verification process / record:		

4.2) Expected outcome evaluation by CAA group		
	☐suitable	☐non-cmpliance
Explanation / description of verification process / record:		

Item 5. **Safety impact**

5.1) Expected safety impact		
Explanation / description of verification process / record:		
	☐suitable	☐non-compliance

5.2) **Possible mitigation process**		
	☐not required	☐ required
Explanation / description of verification process / record:		

Item 6. **Trial period**	
☐not required	☐ required

6.1) Trial period requirement / reason:

6.2) Trial period limitations:		
	☐not require	☐ reqired

6.3) Trial period duariation		
☐not defined	☐ until date:_____	☐ until condition (defined below)
Trial period is required until:		

Trial Period Final report:		
	☐satisfactory	☐ non-satisfactory
Explanation / further actions (in case of non-satisfactory):		

Item 7. **APPROVAL**		
7.1) **AltMoc group final report / Decision**	☐satisfactory	☐ non-satisfactory
Final comment (recommendation, limitations):		
With signature below I confirm proper execution of AltMoc procedure against CSM AltMoc approval process. Head of group: _____	date	Signature
7.2) **CAA Accountable manager approval**		
Presented with application (reason, intention…)	☐satisfactory	☐ non-satisfactory
Possible remark		
Presented and Agree with approval process	☐satisfactory	☐ non-satisfactory
Possible remark		
Presented and Agree with expected (safety) outcome	☐satisfactory	☐ non-satisfactory
Possible remark		
CAA Accountable manager final **APPROVAL** Name: _____ Official remark / nr.:_____	date	Signature / stamp:

Item 8. **APPROVAL administrative process**			
8.1) Approval send to applicant	Name of person:		Date:
8.2) Internal process(es) required to be revised		☐not required	☐ required
8.3) Safety note / briefing shall be held		☐not required	☐ required
On topics:			
SM (SMa) signature on briefing execution / notification.	Signature:	☐completed	Date:
Remark:			

Item 9. **Notifications**			
Notification to EASA and other Member States			☒ required
Notified by:		Signature:	Date:
Remark:			

Item 10. **Documentation and record keeping**			
Record shall be stored in official CAA record keeping system			☒ required
Stored by:		Signature:	Date:
Remark:			

C) VERIFICATION PART (filled by SM / SMa / auditor)

Item 10. **Safety manager / auditor verification. Alt Moc process verified:**		
process verified – procedure items followed	☐checked	☐ missing
Approvals granted / Head of group	☐checked	☐ missing
Approvals granted / AM approval	☐checked	☐ missing
EASA / Member States notified	☐checked	☐ missing
Procedure documented and stored	☐checked	☐ not stored
Safety impact analised by SM / SMa /auditor	☐checked	☐ safety risk
Remarks on future safety impact / mitigation:		
Name:		Signature: / Date:

Variant C: Acceptance of existing AltMoc (F_04.2)
Form is stored in PDF format under location and name:
//CAA/Skupno/01-CSM/03 Forms/ CSM_F_04.2_AltMocApproval-C

CAA Safety and compliance system

Reference Number (filled by SM):
AltMoc Nr.: C-_____/201_
Date of application:
Date of conclusion:

Alternative Means of Compliance Approval procedure

Variant C: Acceptance of existing AltMoc

A) APPLICATION PART

1. AltMoc title (as named by origin country)

2. Short description and its purpose

Use back side if required, or attach description page.

3. Legal references

B) PROCESS PART (filled by CAA AltMoc group)

Item 1. **AltMoc acceptance working group**
Head of group (name): _____
Member 1 of group (name): _____
Member 2 of group (name): _____

PROCESS PROTOCOL

Item 2. **Evaluation against regulative requirements**		
3.1) Proposed AltMoc checked against National legislation		
	☐found suitable	☐non-compliance
Explanation / description of verification process / record:		

Item 3. – N/A

Item 4. **Evaluation of expected outcome.**		
4.1) Expected outcome suitably in Slovenian environment - evaluation by CAA		
	☐suitable	☐non-compliance
Explanation / description of verification process / record:		

Item 5. **Safety impact**

5.1) Expected safety impact – specialty in Slovenian environment

Explanation / description of verification process / record:

	☐suitable	☐non-compliance

5.2) Possible mitigation process – specialty in Slovenian environment

	☐not required	☐ required

Explanation / description of verification process / record:

Item 6. **Trial period** – if required

☐not required	☐ required

6.1) Trial period requirement / reason:

6.2) Trial period limitations:

	☐not required	☐ required

6.3) Trial period duariation:

☐not defined	☐ until date:_____	☐ until condition (defined below)

Trial period is required until:

Trial Period Final report:

	☐satisfactory	☐ non-satisfactory

Explanation / further actions (in case of non-satisfactory):

Item 7. **APPROVAL**		
7.1) **AltMoc group final report / Decision**	☐satisfactory	☐ non-satisfactory
Final comment (recommendation, limitations):		
With signature below I confirm proper execution of AltMoc procedure against CSM AltMoc approval process. Head of group: _____	date	Signature
7.2) **CAA Accountable manager approval**		
Presented sugested AltMoc, its purpose and impact in Slovenian environment	☐satisfactory	☐ non-satisfactory
Possible remark		
Presented with expected safety outcome	☐satisfactory	☐ non-satisfactory
Possible remark		
CAA Accountable manager final **APPROVAL** Name: _____ Official remark / nr.:_____	date	Signature / stamp:

Item 8. **APPROVAL Post-process**			
8.2) Internal process(es) required to be revised		☐not required	☐ required
8.3) Safety note / briefing shall be held		☐not required	☐ required
On topics:			
SM (SMa) signature on briefing execution / notification.	Signature:	☐completed	Date:
Remark:			

Item 9. **Notifications**			
Notification to the Agency (EASA) and Competent Ministry,			☒ required
Notified by:		Signature:	Date:
Remark:			

Item 10. **Documentation and record keeping**			
Record shall be stored in official CAA record keeping system			☒ required
Stored by:		Signature:	Date:
Remark:			

C) Item 11. **VERIFICATION PART** (filled by SM/SMA/Auditor)

Item 10. **Safety manager / auditor verification. Alt Moc process verified:**		
process verified – procedure items followed	☐checked	☐ missing
Approvals granted / Head of division	☐checked	☐ missing
Approvals granted / AM approval	☐checked	☐ missing
EASA / Competent Ministry notified	☐checked	☐ missing
Procedure documented and stored	☐checked	☐ not stored
Safety impact analised by SM / SMa /auditor	☐checked	☐ safety risk
Remarks on future safety impact / mitigation:		
Name:		Signature: / Date:

7.1.11. Exemption Granted Forms (F_05.1, F_05.2)

Exemption Granted Notification Form (F_05.1)
Form is stored in PDF format under location and name:
//CAA/Skupno/01-CSM/03 Forms/ CSM_F_05.1_ ExemptionGrantedNotificationForm

AGENCIJA ZA CIVILNO LETALSTVO
CIVIL AVIATION AGENCY, SLOVENIA CAA

Ref.No.:
Date:

Exemption granted for more than 2 months
(in accordance with Article 14.4 of Regulation (EC) 216/2008)

EASA Member State: **SLOVENIA**
Civil Aviation Agency of Slovenia
Kotnikova ulica 19a, 1000 Ljubljana

Exemption issued to:

Exempted requirements:

Period of exemption:

Description:
.....

Applicable for:
....

Compliance with applicable level of safety:
....

ROK MAROLT
V.D. DIREKTOR

Recipients:
- organization/person – to whom it may concern,
- Ministry of Infrastructure (Commission, Permanent Representation and Member states informed via the Ministry)
- European Aviation Safety Agency (e-mail exemptions@easa.europa.eu) + EXEMPTION NOTIFICATION FORM AVAILABLE ON http://easa.europa.eu/regulations/flexibility-provisions

JAVNA AGENCIJA ZA CIVILNO LETALSTVO REPUBLIKE SLOVENIJE
KOTNIKOVA ULICA 19 A SI-1000 LJUBLJANA SLOVENIJA
T:+386 1 244 66 00
F:+386 1 244 66 99
info@caa.si
www.caa.si

Obvestilo o odobritev izjeme (F_05.2)
Form is stored in PDF format under location and name:
//CAA/Skupno/01-CSM/03 Forms/ CSM_F_05.2_ObvestiloOdobritevIzjeme_ver02(oct15)

AGENCIJA ZA CIVILNO LETALSTVO
CIVIL AVIATION AGENCY, SLOVENIA CAA

Številka:
Datum:

Ministrstvo za infrastrukturo
Direktorat za infrastrukturo
Sektor za letalstvo
Langusova ulica 4
1000 Ljubljana

Zadeva: Obvestilo o odobritvi izjeme[1]

Spoštovani!

obveščamo vas, da je Javna agencija za civilno letalstvo Republike Slovenije (v nadaljevanju agencija) dne ... odobrila podaljšanje izjeme za zrakoplov/organizacijo/osebo ..., skladno s priloženim dopisom.

Agencija je namreč izdala odločbo št. ... z dne ... , s katero je dovolila izjemo v skladu s 4. odstavkom 14. člena Uredbe (ES) št. 216/2008 Evropskega Parlamenta in Sveta z dne 20. februarja 2008 o skupnih predpisih na področju civilnega letalstva in ustanovitvi Evropske agencije za varnost v letalstvu in razveljavitvi Direktive Sveta 91/670/EGS, Uredbe (ES) št. 1592/2002 in Direktive 2004/36/ES, s spremembami, s trajanjem 2 mesecev. Na to je na podlagi vloge ... izjemo podaljšala z odločbo št. ... z dne ... še za .... *(obdobje)* z veljavnostjo do vključno ..... Ker bo izjema na podlagi navedenega podaljšanja trajala več kot dva meseca oziroma se je začela ponavljati, je na osnovi 4. odstavka 14. člena Uredbe (ES) št. 216/2008 potrebno o tem obvestiti Evropsko agencijo za varnost v letalstvu (EASA), Evropsko komisijo ter države članice.

Glede na navedeno vam v prilogi pošiljamo obvestilo, za katerega vas prosimo, da ga čim prej posredujete skladno s prejšnjim odstavkom.

Hvala za sodelovanje in lep pozdrav!

Rok Marolt
v.d. direktor

Priloga: - obvestilo Exemption granted for a period of more than 2 months,
- obrazec Exemption notification.

Vročiti:
- MZI, Direktorat za infrastrukturo, Sektor za letalstvo, e-pošta mzip.letalstvo@gov.si
- zbirka dokumentarnega gradiva, tu.

[1] OBRAZEC SE LAHKO UPORABI TUDI ZA OBVESTILO O ODSTOPANJU (6. ODSTAVEK 14. ČLENA UREDBE (ES) ŠT. 216/2008).

JAVNA AGENCIJA ZA CIVILNO LETALSTVO REPUBLIKE SLOVENIJE
KOTNIKOVA ULICA 19 A SI-1000 LJUBLJANA SLOVENIJA
T:+386 1 244 66 00 info@caa.si
F:+386 1 244 66 99 www.caa.si

Registers and Lists

Official list of CSM Registers and Lists:

CSM	Register and List Name Location of file on CAA internal	current version of content	Access
R_01	RegisterOfIdentifiedHazards_current	ver 02	/
	//CAA/Skupno/01-CSM/04 Registers and lists/CSM_R_01_RegisterOfIdentifiedHazards_current		
R_02	RecordOfEnforcementMeasures_CLASSIFIED	ver 02	RESTRICTED
	//CAA/01-CSM Manager Classified/04 Registers and Lists/CSM_R_02_RecordOfEnforcementMeasures_CLASSIFIED		
R_03	AltMocRecord	ver 02	/
	//CAA/Skupno/01-CSM/04 Registers and Lists/CSM_R_03_AltMocRecord		

Actual (working files) registers shall have revision number changed only after change of its prescribed content, NOT after each entry. However, date of print shall be visible on each paper version, should register or list is printed.

Registers are prepared on separate editable (docx) file. Theirs contend is prescribed below. Registers marked as CLASSIFIED shall never be part of this CSM manual. Restricted access shall be assured!

They are published separately in CAA internal location.

7.1.12. Register of known/identified hazards

CAA uses list below to summarize identified hazards that can reappear or should be considered more often in future hazard identification processes and risk assessment stages.

The table shall include the following contents:

ISCR nr/ year. Date entered	Date of Report	Volun/M and Time critical	Event Title	Type of event / observation	Initial risk (likelihood / severity)	ISR*	Follow up		Report closed date
							until	by	

Initial (safety) risk level shall be assessed in accordance with “Risk assessment” (4.8.4.).

7.1.13. Alternative Means of Compliance Record

The table shall include the following contents:

Nr	Date received	Title	Requested/ submitted by	Status		
				Official by date	Distributed date	Place stored

7.1.14. Record of enforcement measures

The table shall include the following contents:

Nr	Date of finding	Applicable person	Violence title	Status		
				CAA inspector	Closed date	Place stored

Remark: under “Closed date” enter “Opened” until case is closed.

Safety promotion

Following chapter should contain attached different material (circulars, leaflets…) issued within CAA intended to promote safety and compliance in accordance with this manual.

- Intentionally left blank -

- Intentionally left blank -