



# ADVISORY CIRCULAR

**CAA-AC-AGA204**  
**December 2022**

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## PREPARATION, SUBMISSION AND FOLLOW-UP OF CORRECTIVE ACTION PLAN (CAP)

### 1.0 PURPOSE

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

### 2.0 REFERENCES

- 2.1 Civil Aviation Regulations, as amended
- 2.2 Advisory Circulars
- 2.3 ICAO Annexes'
- 2.4 ICAO Docs on Certification of Operators

### 3.0 GUIDANCE INFORMATION

#### 3.1 Introduction

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

Non compliances may also be identified from a variety of sources including specific operational event, internal assessment or investigation and observation during daily

work performance. All these constitute findings and must be recorded and addressed as if they were identified during safety audits even if they do not warrant notification to the Authority.

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

### **3.2 Developing the Corrective Action Plan**

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

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

### **3.3 Approval and Implementation of Corrective Action Plans**

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

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

### **3.4 Types of Corrective Action**

3.4.1 **Short-term corrective action** This action corrects the specific non-conformance specified in the inspection/audit finding and is preliminary to the long-term action that prevents recurrence of the problem. Short-term corrective action will be completed:

- a) by the date/time specified in the corrective action section of the finding form; or
- b) per the accepted corrective action plan.

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

Some long-term corrective actions may require time periods in excess of 90 days (e.g. major equipment purchases). In this case, refer to 3.6.5.4, which explains how to deal with inspection/audit findings both beyond 90 days and closure of findings within 12 months. Where applicable, the CAP will include milestones or progress review points at 90 day intervals leading up to the proposed completion date for each inspection/audit finding.

Where the short-term corrective action taken meets the requirements for long-term corrective action, this shall be so stated in the long-term corrective action section on the corrective action form.

### **3.5 Corrective Action Plan Submission**

The covering letter of the inspection/audit report will require the operators to submit:

- a) where applicable, corrective action forms for each finding requiring corrective actions by the date specified in the corrective action section of the finding form; and
- b) a corrective action plan addressing all other findings within 30 days from the date of receipt of the report. This deadline will not be extended without the approval of the Director of Safety ;

Corrective action plans received from the operators should include completed corrective action forms and where applicable, supporting documentation that may take the form of technical record entries, purchase orders, memoranda, revised inspection/audit procedure cards, manual amendments, etc. A sample corrective action form is attached as **Appendix A** of this AC.

### **3.6 Corrective Action Acceptance**

Where the corrective action plan is acceptable, the operators shall be so advised and the appropriate information (administrative/on-site follow-up, proposed completion date) will be entered on the corrective action form or where applicable, the corrective action tracking form, for the purpose of follow-up. Functional databases should also be used to track the progress of inspection/audit follow up.

Before accepting plans for findings that include long-term corrective actions exceeding 90 days, the Director of Safety Regulation must be satisfied that the proposed corrective action is reasonable and that safety will not be jeopardized.

If the operator's corrective action plan is not acceptable, the responsible Inspector/Auditor or other assigned person will request the plan to be revised and re-submitted within 10 days of the request. Where the operator is non-responsive to this action, an alternative course of action may be pursued, such action could include the sending of a Notice of Suspension to the organisation by the Director of Safety.

### **3.7 Corrective Action Follow-up**

#### **3.7.1 Follow-up process**

- a) Where the inspection/audit findings are of a minor nature and no threat to aviation safety exists an “administrative follow-up” may be acceptable. All other findings require “on-site follow-up” to ensure that non-conformances have been rectified and that corrective actions are effective;
- b) Progress will be monitored as the operators completes inspection/audit finding corrective actions. This will be accomplished by using the follow-up section on the corrective action form, the corrective action tracking form or functional database. Both forms identify the finding number, the type of inspection/audit follow-up (administrative or on-site) and the date upon which the corrective action was completed;
- c) Long-term corrective actions that have been accepted will be followed-up by the applicable Inspector/Auditor or other assigned person, who will advise the Director of Safety when the item is complete. This follow-up will be confirmed through routine surveillance activities.

#### **3.7.2 Inspection/Audit follow-up** Personnel assigned inspection/audit follow-up responsibilities will:

- a) monitor the operators to ensure that the 30 day response time for corrective action plan submission is observed or, where applicable, that corrective actions required by a specific date (indicated on the corrective action section of the finding form) have been completed;
- b) ensure that the corrective action plan addresses the most critical findings first;
- c) ensure that each proposed corrective action will rectify the root cause of the finding to prevent its recurrence;
- d) determine that the operator has developed a reasonable timetable for long-term corrective action and ensure that the proposed completion date is indicated on the appropriate section of the corrective action form, entered on the corrective action tracking form or entered in the applicable functional database;
- e) accept the corrective action plan in co-ordination with the Director of Safety Regulation and appropriate team leader and/or team member;
- f) determine for each corrective action plan item whether the follow-up is to be administrative or on-site and indicate so on the corrective action form, corrective action tracking form or applicable functional database;
- g) monitor the progress of the corrective action plan by maintaining the follow-up section of the corrective action form, the corrective action tracking form or applicable functional database and ensuring that the appropriate follow-up (administrative or on-site) has been conducted;
- h) ensure that all completed corrective action forms and corrective action tracking forms, together with any supporting documentation are placed in the Inspection/audit file; and
- i) advise the Director of Safety when all corrective actions have been completed.

#### **3.7.3 Inspection/Audit closure** To enable the Director of Safety Regulation to close regulatory inspection/audits within 12 months following Corrective Action Plan (CAP) acceptance, the following process should be applied. The CAP should aim at having all

corrective action in place within 90 days of acceptance by the responsible Inspector/Auditor or other assigned person. If it is not possible to meet the set deadline, special consideration may be required to ensure a timely closure of the inspection/audit.

Inspection/audit findings will be categorized as follows:

- a) **An immediate safety issue** - corrective action must be carried out immediately in order for the operator to continue with its activities. The finding should be written into the report. Should long-term corrective actions be required, depending on the circumstances, this will be dealt with as identified in (b), (c) or (d) below.
- b) **Corrected within 90 days** - the majority of findings should fall into this category. The accepted CAP must indicate that the long and short-term corrective action will be in place within 90 days. The applicable Inspector/Auditor or other assigned person will ensure follow-up.
- c) **Corrected between 90 days and twelve months** - where it is anticipated that the corrective action will take more than 90 days after CAP acceptance, a risk assessment shall be completed by the applicable Inspector/Auditor or other assigned person before acceptance by the Director of Safety Regulation.
- d) **Longer than 12 months** - where it is not possible or reasonable to implement the corrective action within 12 months of acceptance of the CAP, a risk assessment study may be conducted by the responsible Inspector/Auditor or other assigned person in order to assess safety risks.


The inspection/audit can be closed by the Director of Safety 12 months after acceptance. The Director of Safety will confirm that all follow-up actions have been completed, entered in the functional database and will then forward a letter to the operator informing that the inspection/audit is closed.



A handwritten signature in blue ink, appearing to be 'K. O. O.', is written over a horizontal line.

**Director Safety, Security and Economic Regulation**

**Appendix A – SAMPLE CORRECTIVE ACTION PLAN FORM**

	Form No:	CAA/D-----/007
	Title:	Corrective Action Plan Form
	Issue date:	2012-04-02
	Issue No:	01

<b>Name of Operator:</b>	<b>Date:</b>	<b>Finding No:</b>
<b>Inspector/Auditor: Name:</b>	<b>Signature:</b>	
<b>Area Inspected/Audited:</b>	<b>Date:</b>	
<b>Operator's Representative: Name:</b>	<b>Signature:</b>	
<b>Part 1: Description of Finding:</b>		
<b>Classification of Finding: (Major/Minor/Observation)</b>		<b>Reference number of Regulation, standard or Procedure:</b>
<b>Part 2: Suggested Corrective Action Plan(s):</b> <i>Note: (Corrective Action shall follow root cause analysis to be indicated overleaf and also indicate the action office)</i>		
<b>Proposed date of realisation:</b>	<b>Sign: (Operator Representative):</b>	
<b>Preventive Action:</b> <i>(Actions to prevent recurrence)</i>		
<b>Part 3: Corrective Action Plan evaluation and close-out by the Inspector/Auditor:</b> <b>Satisfactory (Yes/No):</b>		
<b>Date:</b>	<b>Sign:</b>	
<b>Part 4: Inspector/Auditor's Comments</b>		
<b>Date:</b>	<b>Sign:</b>	
<b>Closed out date:</b>	<b>Signed by Inspector:</b>	<b>Signed by Operator:</b>