**ATS SMS Initial Implementation and Evaluation Checklist**

Instruction:

1. **Initial implementation.** Before issuing an approval or certificate, the ATSP should make sure that all processes are ‘Present’ and ‘Suitable’, so that all the required enablers of a functioning SMS are implemented by the organization. In this initial phase, a large part of the SMS evaluation could be carried out by desktop review of relevant SMS documentation. However, carrying this out at the organization provides an opportunity for the CAAT to advise and guide the organization on its SMS implementation and support standardized implementation.

2. **Evaluation.** After initial implementation, the organization should start using the SMS as part of its operations. In order to check that SMS processes, remain ‘Operating’ and ‘Effective’, the SMS should be re-evaluated on a regular basis to evaluate how well it is performing. The review should evaluate all of the items in the evaluation tool which can be done by a combination of organizational visits, meetings, and desktop reviews.

3. The ATSP shall assess their current compliance with content in a certain part of the document and provide the details in “How it is achieved” column in table shown below. If the applicant cannot comply with the specified Requirements/Regulations, shall provide the details of actions needed & planned completion date in “How it is achieved” column”.

**Remark 1:** In case of compliance with the content in a certain part of the document, the reference of the part of the document by which it is complied with must be clearly indicated such as page and section

**Remark 2:** Actions needed & planned completion date shall provide action plan that the applicant will put in place in order to meet the specific requirement including an expected date of implementation.

4. In case of an organization holding multiple certificates or approvals, the use of SMS evaluation tool should follow the 1-organisation = 1 evaluation rule. Therefore, if one organization integrates all activities within a single SMS, the evaluation should consider the SMS as a whole.

5. It may be the case that different teams of inspectors oversee that same SMS with regard to different certificates, and single evaluation may be impracticable. In such case, the different evaluations should be shared with the various teams of inspectors and a common message from CAAT should be provided to the organization.

|  |  |
| --- | --- |
| **Organization:** | **Approval/Certification Reference(s):** |
| **SMS Manual Revision:** | **Evaluator(s):** |
| **Scope of Evaluation:** | **Date of Evaluation:** | **Evaluation Reference:** |

| **S/N** | **High Level Checklists** | **Guidance for review** | **Status of Implementation**  | **How it is achieved** | **Note(s) / Remark (s)****(This column is used by CAAT)**  |
| --- | --- | --- | --- | --- | --- |
| 1. **SAFETY POLICIES AND OBJECTIVES (Doc 9859 component 1)**
 |
| * 1. **MANAGEMENT COMMITMENT (Doc 9859 element 1.1)**
 |
| 1.1.1 | There is a safety policy, signed by the Accountable Executive, which includes a commitment to continuous improvement; promote and maintain a positive safety culture within the organization; comply with all applicable regulatory requirements and standards; and ensure safety is primary responsibility of all manager.  | **Present:*** There is a safety policy, signed by the Accountable Executive, which includes a commitment to continuous improvement; observes all applicable legal requirements and standards; and considers best practices.
* The safety policy includes a statement to promote and maintain positive safety culture is encouraged and impacts the overall effectiveness
* There is a means in place for the periodically reviewing the safety policy for content and currency.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The safety policy is easy to read.
* The content is customized to the organization.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** Interview the Accountable Executive to assess their knowledge and understanding of the safety policy.
* Check that the safety policy is reviewed periodically for content and currency.
* Interview staff to determine to what extent the safety policy is known, as well as how readable and understandable it is.

  | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** The Accountable Executive is familiar with the contents of the safety policy and endorses it.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 1.1.2 | The safety policy includes a statement to provide appropriate resources and the organization is managing resources by anticipating and addressing any shortfalls.  | **Present:*** The safety policy includes a statement to provide appropriate resources.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The safety policy is easy to read.
* The content is customized to the organization.

There is a process for assessing resources and addressing any shortfalls.  | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Operating:*** The organization is assessing the resources being provided to deliver a safe service and taking action to address any shortfalls.
* There are sufficient and competent personnel.
* Review available resources including personnel, equipment, and financial.
* Review planned resources versus actual resources.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** The organization is reviewing and taking action to address any forecasted shortfalls in resources.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 1.1.3 | There are policies in place for safety critical roles relating to all aspects of Fitness for Duty (for example, Alcohol and Drugs Policy or Fatigue).  | **Present:*** There is a safety policy, which includes a commitment for safety critical roles relating to all aspects of Fitness for Duty (for example, Alcohol and Drugs Policy or Fatigue).
 | ◻Yes◻No◻Not Applicable |  |  |
| **Suitable:*** The safety policy is easy to read.
* The content is customized to the organization.
* Where an ATSP does not wish to implement an FRMS, the ATSP must use its SMS to manage fatigue-related risks within prescriptive limitations.
 | ◻Yes◻No◻Not Applicable |  |
| **Operating:*** Check that there are implementing in accordance to specified policy relating to all aspects of Fitness for Duty (for example, Alcohol and Drugs Policy or Fatigue).

Interview staff to determine to what extent the safety policy is known, as well as how readable and understandable it is.  | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** The organization is monitoring and reviewing to address any aspects of Fitness for Duty (for example, Alcohol and Drugs Policy or Fatigue.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| 1.1.4 | There is a means in place for the communication of the safety policy.  | **Present:*** There is a means in place for the communication of the safety policy.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The safety policy is clearly visible to all staff (consider multiple sites).
* The safety policy is understandable (consider multiple languages).
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** The safety policy is communicated to all personnel (including relevant contract staff and organizations).
* All managers and staffs are familiar with the key elements of the safety policy.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** People across the organization are familiar with the policy and can describe their obligations in respect of the safety policy.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 1.1.5 | The Accountable Executive and the senior management team promote a positive safety/just culture and demonstrate their commitment to the safety policy through active and visible participation in the safety management system.  | **Present:*** The management commitment to safety is documented within the safety policy.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The Accountable Executive and the senior management team have a well-defined role in the safety management system.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** The Accountable Executive and the senior management team are promoting their commitment to the safety policy through active and visible participation in the safety management system.
* There is evidence of senior management participation in safety meetings, training, conferences, etc.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** Decision making, actions, and behaviors reflect a positive safety/just culture and there is good safety leadership that demonstrates commitment to the safety policy.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 1.1.6 | The safety policy actively encourages safety reporting.  | **Present:*** A just culture policy and principles have been defined.
* A policy on the protection of safety data and safety information, as well as reporters, can have a positive effect on the reporting culture.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The principles ensure that the policy can be applied consistently across the whole organization.
* The just culture policy and principles are understandable and clearly visible.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Operating:*** There is evidence of the just culture policy and supporting principles being applied and promoted to staff.
* Review the number of aviation safety reports appropriate to the activities.
* Safety reports include the reporter’s own errors and events they are involved in (events where no one was watching).
* Review how the organization is monitoring reporting rates.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** The just culture policy is applied in a fair and consistent manner and staff trust the policy.
* Evidence of interventions from safety investigations addressing organizational issues rather than focusing only on the individual.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| 1.1.7 | A just culture policy and principles have been defined that clearly identifies acceptable and unacceptable behaviors to promote a just culture.  | **Present:*** A just culture policy and principles have been defined that clearly identifies acceptable and unacceptable behaviors.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The principles ensure that the policy can be applied consistently across the whole organization.
* The just culture policy and principles are understandable and clearly visible.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** There is evidence of the just culture policy and supporting principles being applied and promoted to staff.
* Feedback on just culture from staff safety culture surveys.
* Interview staff representatives to confirm that they agree with just culture policy and principles.
* Check that staff are aware of the just culture policy and principles.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** The just culture policy is applied in a fair and consistent manner and staff trust the policy.
* There is evidence that the line between acceptable and unacceptable behavior has been determined in consultation with staff and staff representatives.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 1.1.8 | Safety objectives have been established that are consistent with the safety policy and they are communicated throughout the organization.  | **Present:*** Safety objectives have been established that are consistent with the safety policy and there is a means to communicate them throughout the organization.
* Safety objectives are defined that will lead to an improvement in processes, outcomes and the development of a positive safety culture.
* There is a means in place for the periodically reviewing the safety objectives to ensure they remain current.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Safety objectives are relevant to the organization and its activities.
* Safety objective should address its most significant safety risks.
* Safety objectives are being measured to monitor achievement through SPIs and SPTs.
* Safety objectives are understandable and clearly visible.
* Safety objectives are aligned with the SSP.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** Safety objectives are being regularly reviewed and are communicated throughout the organization.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** Achievement of the safety objectives is being monitored by senior management and action taken to ensure they are being met.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 1.1.9 | The State Safety Program (SSP) is being considered and addressed as appropriate.  | **Present:*** The SSP is being considered and addressed safety objectives as appropriate.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Safety objectives are aligned with the SSP.
* Safety objectives have been established (SPIs and SPTs) may link to the CAAT’s SPIs and SPTs for measuring and monitoring the ALoSP.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** Safety objectives are being regularly reviewed and are communicated throughout the organization.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** Achievement of the safety objectives is being monitored by senior management and action taken to ensure they are being met.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| * 1. **SAFETY ACCOUNTABILITY AND RESPONSIBILITIES (Doc 9859 element 1.2)**
 |
| 1.2.1 | An Accountable Executive has been appointed with full responsibility and accountability to ensure the SMS is properly implemented and performing effectively.  | **Present:*** An Accountable Executive has been appointed with full responsibility and ultimate accountability for the SMS.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The Accountable Executive has control of resources.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** The Accountable Executive ensures that the SMS is properly resourced, implemented, and maintained, and has the authority to stop the operation if there is an unacceptable level of safety risk.
* The Accountable Executive is accessible to the staff in the organization.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** The Accountable Executive ensures that the performance of the SMS is being monitored, reviewed, and improved.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 1.2.2 | The Accountable Executive is fully aware of their SMS roles and responsibilities in respect of the safety policy, safety standards, and safety culture of the organization.  | **Present:*** An Accountable Executive has been appointed with full responsibility and ultimate accountability for the SMS.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The Accountable Executive has control of resources.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** The Accountable Executive is fully aware of their SMS roles and responsibilities.
* Look for evidence that Accountable Executive actions are consistent with the active promotion of a positive safety culture in the organization.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** The Accountable Executive ensures that the performance of the SMS is being monitored, reviewed, and improved.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 1.2.3 | Safety accountabilities, authorities, and responsibilities are defined and documented throughout the organization and staff understand their own responsibilities.  | **Present:*** The safety accountability, authorities, and responsibilities are clearly defined and documented.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Individuals have access to their safety accountability, authorities, and responsibilities (for example, through job descriptions or organizational charts).
* Safety accountabilities of managers should include that allocation of the human, technical, financial or other resources necessary for the effective and efficient performance of the SMS.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Operating:*** Everyone in the organization is aware of and fulfil their safety responsibilities, authorities, and accountabilities and are encouraged to contribute to the SMS.

- Look for active participation of the management team in the SMS. - Evidence of appropriate risk mitigation, action, and ownership. - The levels of management authorized to make decisions on risk acceptance are defined and applied. - Check for any conflicts of interest and that they have been identified and managed.  | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** The Accountable Executive and the senior management team are aware of the risks faced by the organization and SMS principles exist throughout the organization so that safety is part of the everyday language.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| * 1. **APPOINTMENT OF KEY PERSONNEL (Doc 9859 element 1.3)**
 |
| 1.3.1 | A competent safety manager who is responsible for the implementation and maintenance of the SMS has been appointed with a direct reporting line to the Accountable Executive.  | **Present:*** A safety manager who is responsible for the implementation and maintenance of the SMS has been appointed with a direct reporting line to the Accountable Executive.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The safety manager is competent, sufficient time and resources are allocated to maintain the SMS.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Operating:*** The safety manager has implemented and is maintaining the SMS. The safety manager is in regular communication with the Accountable Executive and escalates safety issues when appropriate
* Review safety manager role including credibility and status.
* Review the training that the safety manager has received.
* Review the safety manager’s workload/allocated time to fulfil role.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** The safety manager is competent to manage the SMS and identifies improvements in a timely manner.
* There is a close working relationship with the Accountable Executive and the safety manager is considered a trusted advisor and given appropriate status in the organization.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| 1.3.2 | The organization has allocated sufficient resources to manage the SMS including, but not limited to, competent staff for safety investigation, analysis, auditing, and promotion.  | **Present:*** There is allocating sufficient resources to manage the SMS including, but not limited to, competent staff for safety investigation, analysis, auditing, and promotion.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The safety manager is competent, sufficient time and resources are allocated to maintain the SMS.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** There are sufficient resources for SMS activities such as safety investigation, analysis, auditing, safety meeting attendance, and promotion (Check current manpower against manpower needed.)
* Review how the safety manager gets access to internal and external safety information.
* Review how the safety manager communicates and engages with operational staff and senior management.
* Review of safety report action and closure timescales.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** The safety manager is competent to manage the SMS and identifies improvements in a timely manner.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 1.3.3 | The organization has established appropriate safety committee(s) that discuss and address safety risks and compliance issues and includes the Accountable Executive and the heads of functional areas.  | **Present:*** The organization has established safety committee(s).
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Safety committee(s)’ structure and frequency supports the SMS functions across the organization.
* The scope of the safety committee(s) includes safety risks and compliance issues.
* The attendance of the highest-level safety committee includes at least the Accountable Executive and the heads of functional areas.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Operating:*** There is evidence of meetings taking place detailing the attendance, discussions, and actions.
* The safety committee(s) monitor the effectiveness of the SMS and compliance monitoring function by reviewing there are sufficient resources.
* Actions are being monitored and appropriate safety objectives and SPIs have been established.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** Safety committees include key stakeholders.
* The outcomes of the meetings are documented and communicated and any actions are agreed, taken, and followed up in a timely manner.
* The safety performance and safety objectives are reviewed and actioned as appropriate.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| * 1. **CO-ORDINATION OF EMERGENCY RESPONSE PLANNING (Doc 9859 element 1.4)**
 |
| 1.4.1 | An appropriate emergency response plan (ERP) has been developed and distributed that defines the procedures, roles, responsibilities, and actions of the various organisations and key personnel.  | **Present:*** A coordinated ERP has been developed and defined.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Key personnel have easy access to the relevant parts of the ERP at all times.
* The ERP defines the procedures, roles, responsibilities, and actions of the various organizations and key personnel.
* The frequency and methods for testing the ERP are defined.
* The coordination with other organizations (including non-aviation organizations) is defined with appropriate means.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:**- Review emergency response plan. - Review how coordination with other organizations is planned. - Review how ERP is distributed and where copies are held. - Interview key personnel and check they have access to the ERP. - Check that different types of foreseeable emergencies have been considered.  | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** The results of the ERP review and testing are assessed and actioned to improve its effectiveness.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| 1.4.2 | The ERP is periodically tested for the adequacy of the plan and the results reviewed to improve its effectiveness.  | **Present:*** An ERP defines the procedures for periodically review and testing for the adequacy of the plan.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Key personnel have easy access to the relevant parts of the ERP at all times.
* The ERP defines the procedures, roles, responsibilities, and actions of the various organizations and key personnel.
* The frequency and methods for testing the ERP are defined.
* The coordination with other organizations (including non-aviation organizations) is defined with appropriate means.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** The ERP is reviewed and tested to make sure it remains up-to-date. There is evidence of coordination with other organizations as appropriate.
* Review when the plan was last reviewed and tested and actions taken.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** The results of the ERP review and testing are assessed and actioned to improve its effectiveness.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| * 1. **SMS DOCUMENTATION (Doc 9859 element 1.5)**
 |
| 1.5.1 | The SMS documentation includes the policies and processes that describe the organization’s safety management system and processes and is readily available to all relevant personnel.  | **Present:*** The SMS documentation includes the policies and processes that describe the organization’s SMS and processes. The SMS documentation defines the SMS outputs and which records of SMS activities will be stored.
* Records to be stored, storage period (minimum 5 years), and location are identified.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** SMS documentation is readily available to all relevant personnel.
* SMS documentation is comprehensible.
* SMS documentation is consistent with other internal management systems and is representative of the actual processes in place.
* Data protection and confidentiality rules have been defined.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Operating:*** Changes to the SMS documentation are managed.
* Everyone is familiar with and follows the relevant parts of the SMS documentation.
* SMS activities are appropriately stored and found to be complete and consistent with data protection and confidentiality control rules.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** SMS documentation is proactively reviewed for improvement.
* SMS records are routinely used as inputs for safety management-related tasks and continuous improvement of the SMS.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 1.5.2 | SMS documentation, including SMS related records, are regularly reviewed and updated with appropriate version control in place.  | **Present:*** The SMS documentation includes the policies and processes that describe the organization’s SMS and processes. The SMS documentation defines the SMS outputs and which records of SMS activities will be stored.
* Records to be stored, storage period, and location are identified.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** SMS documentation is readily available to all relevant personnel.
* SMS documentation is comprehensible.
* SMS documentation is consistent with other internal management systems and is representative of the actual processes in place.
* Data protection and confidentiality rules have been defined.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** Check availability of SMS documentation, including cross references to other documents and procedures, to all staff.
* Changes to the SMS documentation are managed.
* Everyone is familiar with and follows the relevant parts of the SMS documentation.
* SMS activities are appropriately stored and found to be complete and consistent with data protection and confidentiality control rules.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** SMS documentation is proactively reviewed for improvement.
* SMS records are routinely used as inputs for safety management-related tasks and continuous improvement of the SMS.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 1. **SAFETY RISK MANAGEMENT (Doc 9859 component 2)**
 |
| * 1. **HAZARD IDENTIFICATION (Doc 9859 element 2.1)**
 |
| 2.1.1 | There is a confidential reporting system to capture errors, hazards, and near misses that is simple to use and accessible to all staff.  | **Present:*** There is a confidential reporting system to capture mandatory occurrences and voluntary reports that includes a feedback system and stored on a database.
* The process identifies how reports are actioned, and timescales are specified and addressed.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The reporting system is accessible and easy to use by all personnel.
* Responsibilities, timelines, and format for the feedback are meaningful and well defined.
* Data protection and confidentiality is ensured.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** The reporting system is being used by all personnel.
* Review the reporting system for access and ease of use.
* Review how data protection and confidentiality is achieved.
* Reports are evaluated, processed, analyzed, and stored.
* Reports are processed within the defined timescales.
* Assess how senior management engage with the outputs of the reporting system.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** There is a healthy reporting system based on the volume of reporting and the quality of reports received.
* Safety reports are acted on in a timely manner.
* The reporting system is being used to make better management decisions and continuously improve.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 2.1.2 | There is a confidential reporting system that provides appropriate feedback to the reporter and, where appropriate, to the rest of the organisation.  | **Present:*** There is a confidential reporting system to capture mandatory occurrences and voluntary reports that includes a feedback system and stored on a database.
* The process identifies how reports are actioned, and timescales are specified and addressed.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The reporting system is accessible and easy to use by all personnel.
* Responsibilities, timelines, and format for the feedback are meaningful and well defined.
* Data protection and confidentiality is ensured.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** There is feedback to the reporter of any actions taken (or not taken) and, where appropriate, to the rest of the organisation.
* Evidence of feedback to reporter, the organisation, and third parties.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** The reporting system is available for third parties to report (partners, suppliers, and contractors).
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| 2.1.3 | Personnel express confidence and trust in the organization’s reporting policy.  | **Present:*** There is a confidential reporting system to capture mandatory occurrences and voluntary reports that includes a feedback system and stored on a database.
* The process identifies how reports are actioned, and timescales are specified and addressed.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The reporting system is accessible and easy to use by all personnel.
* Responsibilities, timelines, and format for the feedback are meaningful and well defined.
* Data protection and confidentiality is ensured.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** Check staff’s trust of and familiarity with the reporting system, and whether they know what should be reported.
* Check that relevant staff are aware of which occurrences should be mandatory.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** There is a healthy reporting system based on the volume of reporting and the quality of reports received.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 2.1.4 | There is a process that defines how hazards are identified from multiple sources through reactive and proactive methods (internal and external).  | **Present:*** There is a process that defines how hazards are identified though reactive and proactive methods.
* The triggers for safety investigations are identified.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Multiple sources of hazards (internal and external) are considered and reviewed, as appropriate.
* There may be a need to filter reports on entry when there are a large number of safety reports. This may involve an initial safety risk assessment to determine whether further investigation is necessary and what level of investigation is required.
* The data analysis process enables gaining useable safety information.
* Hazards are documented in an easy-to-understand format.
* The level of sign-off for safety investigations is defined and adequate to the level of risk.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Operating:*** The hazards are identified and documented.
* Review what internal and external sources of hazards are considered such as safety reports, audits, safety surveys, investigations, inspections, brainstorming, management of change activities, commercial and other external influences, etc.
* Consider hazards related to:

o Possible accident scenarios; o Human and organizational factors; o Business decisions and processes; o Third party organizations; and o Regulatory factors.  | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** The organisation has a register of the hazards that is maintained and reviewed to ensure it remains up-to-date. It is continuously and proactively identifying hazards related to its activities and the operational environment and involves all key personnel and appropriate stakeholders including external organizations.

  | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 2.1.5 | The hazard identification process identifies human performance related hazards.  | **Present:*** There is a process that defines how hazards are identified though reactive and proactive methods.
* The triggers for safety investigations are identified.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Multiple sources of hazards (internal and external) are considered and reviewed, as appropriate.
* The data analysis process enables gaining useable safety information.
* Hazards are documented in an easy-to-understand format.
* The level of sign-off for safety investigations is defined and adequate to the level of risk.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** The hazards are identified and documented. Human and organizational factors related to hazards are being identified.
* Review whether safety investigations identify human and organizational contributing factors.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** Hazards are continuously assessed in a systematic and timely manner.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 2.1.6 | There is a process in place to analyze safety data and safety information to look for trends and gain useable management information.  | **Present:*** There is a process that defines how hazards are identified though reactive and proactive methods.
* The triggers for safety investigations are identified.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Multiple sources of hazards (internal and external) are considered and reviewed, as appropriate.
* The data analysis process enables gaining useable safety information.
* Hazards are documented in an easy-to-understand format.
* The level of sign-off for safety investigations is defined and adequate to the level of risk.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Operating:*** There is implementation a process in place to analyze safety data and safety information to look for trends and gain useable management information.
* Review that hazards are identified, analyzed, addressed, and recorded.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** The analyzing safety data and safety information are conducted in a systematic and used to look/monitor for trends and gain useable management information for improvement.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 2.1.7 | Safety investigations are carried out by appropriately trained personnel to identify root causes (why it happened, not just what happened).  | **Present:*** There is a process that defines how hazards are identified though reactive and proactive methods.
* The triggers for safety investigations are identified.
* The investigator(s) are knowledgeable (trained) and skilled (experienced) in service provider safety investigations.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Multiple sources of hazards (internal and external) are considered and reviewed, as appropriate.
* The data analysis process enables gaining useable safety information.
* Hazards are documented in an easy-to-understand format.
* The level of sign-off for safety investigations is defined and adequate to the level of risk.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** Safety investigations are carried out and recorded.
* The safety investigation is conducted by competent personnel.
* Look for evidence knowledgeable (trained) and skilled (experienced) of investigator(s).
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** Safety investigations identify causal/contributing factors that are acted upon.
* The investigator is competent to conduct the safety investigation in a timely manner.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| * 1. **SAFETY RISK ASSESSMENT AND MITIGATION (Doc 9859 element 2.2)**
 |
| 2.2.1 | There is a process for the management of risk that includes the analysis and assessment of risk associated with identified hazards expressed in terms of likelihood and severity (or alternative methodology).  | **Present:*** There is a process for the analysis and assessment of safety risks.
* The level of risk the organisation is willing to accept is defined.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Severity and likelihood criteria are clearly defined and fit the service provider’s actual circumstances.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Operating:*** Risk analysis and assessments are carried out in a consistent manner based on the defined process.
* Sample an identified hazard and review how it is processed and documented.
* Review how issues are classified when there is insufficient quantitative data available.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** Risk analysis and assessments are reviewed for consistency and to identify improvements in the processes.
* Risk assessments are regularly reviewed to ensure they remain current.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 2.2.2 | There are criteria for evaluating the level of risk the organisation is willing to accept and risk assessments and ratings are appropriately justified.  | **Present:*** There is a process for the analysis and assessment of safety risks.
* The level of risk the organisation is willing to accept is defined.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The risk matrix and acceptability criteria are clearly defined and usable.
* Responsibilities and timelines for accepting the risk are clearly defined.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** The defined risk acceptability is being applied.
* Check that the process defines who can accept what level of risk.
* Check that the risk register is being reviewed and monitored by the appropriate safety committee(s).
* Evidence of risk acceptability being routinely applied in decision making processes.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** Risk analysis and assessments are reviewed for consistency and to identify improvements in the processes.
* Risk assessments are regularly reviewed to ensure they remain current.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| 2.2.3 | The organisation has a process in place to make decisions and apply appropriate and effective risk controls.  | **Present:*** The organisation has a process in place to decide and apply risk controls.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Responsibilities and timelines for determining and accepting the risk controls are defined.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** Appropriate risk controls are being applied to reduce the risk to an acceptable level including timelines and allocation of responsibilities.
* Human Factors are considered as part of the development of risk controls.
* Evidence of risk controls being actioned and follow up.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** Risk controls are practical and sustainable, applied in a timely manner, and do not create additional risks.
* Risk controls take Human Factors into consideration.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| 2.2.4 | Senior management have visibility of medium and high risk hazards and their mitigation and controls.  | **Present:*** The organisation has a process in place to decide and apply risk controls.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Responsibilities and timelines for determining and accepting the risk controls are defined.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** Appropriate risk controls are being applied to reduce the risk to an acceptable level including timelines and allocation of responsibilities.
* Check whether the acceptability of the risks is made at the right management level.
* Evidence of medium and high risk hazards and their mitigation and controls visible by Senior management.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** Risk controls are practical and sustainable, applied in a timely manner, and do not create additional risks.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| 1. **SAFETY ASSURANCE (Doc 9859 component 3)**
 |
| * 1. **SAFETY PERFORMANCE MONITORING AND MEASUREMENT (Doc 9859 element 3.1)**
 |
| 3.1.1 | Safety performance indicators (SPIs) linked to the organization’s safety objectives have been defined, promulgated, and are being monitored and analyzed for trends.  | **Present:*** There is a process in place to measure the safety performance of the organisation including SPIs and targets linked to the organization’s safety objectives and to measure the effectiveness of safety risk controls.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** SPIs are focused on what is important rather than what is easy to measure.
* Reliability of data sources is considered in the design of SPIs.
* SPIs are linked to the identified risks and safety objectives.
* Frequency and responsibility for the trend monitoring of SPIs are appropriate.
* Realistic targets have been set.
* State SPIs are considered, as applicable.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Operating:*** The safety performance of the organisation is being measured and meaningful SPIs are being continuously monitored and analyzed for trends.
* Evidence that SPIs are based on reliable sources of data.
* Evidence of when SPIs were last reviewed.
* Evidence that results of safety performance monitoring are discussed at the senior management level.
* Evidence of feedback provided to the Accountable Executive.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** SPIs are demonstrating the safety performance of the organisation and the effectiveness of risk controls based on reliable data.
* SPIs are reviewed and regularly updated to ensure they remain relevant.
* Where the SPIs indicate that a risk control is ineffective, appropriate action is taken.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| 3.1.2 | Risk mitigations and controls are being verified/audited to confirm they are working and effective.  | **Present:*** There is a process in place to assess whether the risk controls are applied and effective.

  | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Responsibilities, methods, and timelines for assessing risk controls are defined.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** Risk controls are being verified to assess whether they are applied and effective.
* Evidence of risk controls being assessed for effectiveness (e.g., audits, surveys, reviews, SPIs and safety performance targets [SPTs], reporting systems).
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** Risk controls are assessed and actions taken to ensure they are effective and delivering a safe service.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| 3.1.3 | Safety assurance takes into account activities carried out by all directly contracted organizations.  | **Present:*** There is a process in place to assess whether the risk controls are applied and effective.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Contracted organizations are included in the safety assurance process.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** Risk controls are being verified to assess whether they are applied and effective.
* Evidence of risk controls applied by contracted organizations being assessed and overseen (e.g., quality check, reviews, and regular meetings).
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** Risk controls are assessed and actions taken to ensure they are effective and delivering a safe service.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| 3.1.4 | Responsibilities and accountability for ensuring compliance with safety regulations are defined and applicable requirements are clearly identified in organisation manuals and procedures.  | **Present:*** Responsibilities and accountabilities for compliance are defined.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Independence of the internal audit function is achieved.
* Review job descriptions for compliance responsibilities.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** The compliance monitoring program is being followed and regularly reviewed.
* All staff are aware of their responsibilities and accountabilities for compliance and to follow processes and procedures.
* Assess the contents of the program against any regulatory requirements.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** Individuals are proactively identifying and reporting potential non-compliances.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| 3.1.5 | There is an internal audit program including details of the schedule of audits and procedures for audits, reporting, follow up, and records.  | **Present:*** The organisation has an internal audit program and procedures for audits, reporting, and records.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The internal audit program covers all applicable regulations and includes details of the schedule of audits reporting, follow up, and records.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** Internal and external audit results are reported to the Accountable Executive and senior management.
* Review how independence of the internal audit function is achieved.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** Individuals are proactively identifying and reporting potential non-compliances.
* The Accountable Executive and senior management actively seek feedback on the status of internal and external audit activities.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 3.1.6 | Responsibilities and accountabilities for the internal audit process are defined and there is a person or group of persons with responsibilities for internal audits with direct access to the Accountable Executive.  | **Present:*** A person or group of persons with responsibilities for internal audits has been identified and they have direct access to the Accountable Executive.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Independence of the internal audit function is achieved.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** Internal and external audit results are reported to the Accountable Executive and senior management.
* Review how the internal audit function interacts with:

o Senior management, o Line managers, and o The safety management staff. * Evidence that senior management take action on internal and external audit results.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** The Accountable Executive and senior management actively seek feedback on the status of internal and external audit activities.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 3.1.7 | After an audit, there is appropriate analysis of causal factors and corrective/preventive actions are taken.  | **Present:*** The process for the identification and follow-up of corrective/ preventive actions are defined.
* The interface between internal audits and the safety risk management processes is described.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Responsibilities and timelines for determining, accepting, and following-up the corrective/ preventive action are defined.
* Compliance monitoring includes contracted activities.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** The identification and follow-up of corrective/preventive actions is carried out in accordance with the procedures including causal analysis to address root causes.
* The status of corrective/preventive actions is regularly communicated to relevant senior management and staff.
* Review any repeat findings and check for actions have not been implemented or are overdue.
* Check for timely implementation of actions.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** The organisation investigates the systemic causes and contributing factors of findings.
* The organisation proactively reviews the status of corrective/preventive actions.
* Effectiveness of the corrective/preventive actions is verified.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| * 1. **THE MANAGEMENT OF CHANGE (Doc 9859 element 3.2)**
 |
| 3.2.1 | The organisation has a process to identify whether changes have an impact on safety and to manage any identified risks in accordance with existing safety risk management processes.  | **Present:*** The organisation has established a change management process to identify whether changes have an impact on safety and to manage any identified risks in accordance with existing safety risk management processes.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Triggers for the change management process are defined.
* The process also considers business related changes and interfaces with other organizations/departments.
* The process is integrated with the risk management and safety assurance processes.
* Responsibilities and timelines are defined.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Operating:*** The change management process is being used and includes hazard identification and risk assessments with appropriate risk controls being put in place before a decision to make the change is taken.
* Review recent changes that have been through the risk assessment process.
* Transitional risks are being identified and managed.
* Consider how the changes are communicated to those people impacted by the change.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** The change management process is used for all changes that may impact safety and considers the accumulation of multiple changes. It is initiated in a planned, timely, and consistent manner and includes follow up action that ensures the change was implemented safely.
* The change is communicated to those affected.
* Risk control and mitigation strategies associated with changes are achieving the planned effect.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| 3.2.2 | Human Factor (HF) issues have been considered as part of the change management process and, where appropriate, the organisation has applied the appropriate HF/human-centered design standards to the equipment and physical environment design.  | **Present:*** The organisation has established a change management process to identify whether changes have an impact on safety and to manage any identified risks in accordance with existing safety risk management processes.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** Triggers for the change management process are defined.
* The process also considers business related changes and interfaces with other organizations/departments.
* The process is integrated with the risk management and safety assurance processes.
* Responsibilities and timelines are defined.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Operating:*** HF issues have been considered and been addressed as part of the change management process.
* Evidence of HF issues being addressed during changes.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** The change management process is used for all changes that may impact safety, including HF issues.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| * 1. **CONTINUOUS IMPROVEMENT OF THE SMS (Doc 9859 element 3.3)**
 |
| 3.3.1 | The organisation is continuously monitoring and assessing its SMS processes to maintain or continuously improve the overall effectiveness of the SMS.  | **Present:*** There is a process in place to monitor and review the effectiveness of the SMS using the available data and information.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The SMS is periodically reviewed, and the review is supported by safety information and safety assurance activities.
* Senior management and different departments are involved.
* The decision making is data informed.
* External information is considered in addition to internal information.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** There is evidence of the SMS being periodically reviewed to support the assessment of its effectiveness and appropriate action being taken.
* Information from external occurrences, investigation reports, safety meetings, hazard reports, audits, and safety data analysis all contribute towards continuous improvement of the SMS.
* Evidence of:

o Lessons learnt being incorporated into SMS and operational processes; o Best practices being sought and embraced; o Surveys and assessments of organizational culture being carried out and acted upon; o Data being analyzed and results shared with Safety Committees; and o Follow-up actions.  | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** The assessment of SMS effectiveness uses multiple sources of information including the safety data analysis that supports decisions for continuous improvements.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| 1. **SAFETY PROMOTION (Doc 9859 component 4)**
 |
| * 1. **TRAINING AND EDUCATION (Doc 9859 element 4.1)**
 |
| 4.1.1 | There is a training program for SMS in place that includes initial and recurrent training. The training covers individual safety duties (including roles, responsibilities, and accountabilities) and how the organization’s SMS operates.  | **Present:*** There is an SMS training program in place that includes initial and recurrent training.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The training covers individual safety duties (including roles, responsibilities, and accountabilities) and how the organization’s SMS operates.
* Training material and methodology are adapted to the audience and include human factors.
* All staff requiring training are identified.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** The SMS training program is delivering appropriate training to the different staff in the organisation and is being delivered by competent personnel.
* Review the SMS training program including course content and delivery method.
* Check training records against the training program
* Training considers feedback from external occurrences, investigation reports, safety meetings, hazard reports, audits, safety data analysis, training, course evaluations, etc.
* Review how training is assessed for new staff and changes in position.
* Ask staff about their own understanding of their role in the organization’s SMS and their safety duties.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** SMS training is linked to the competency assessment.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 4.1.2 | There is a process in place to measure the effectiveness of training and to take appropriate action to improve subsequent training.  | **Present:*** There is an SMS training program in place that includes initial and recurrent training.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The training covers individual safety duties (including roles, responsibilities, and accountabilities) and how the organization’s SMS operates.
* Training material and methodology are adapted to the audience and include human factors.
* All staff requiring training are identified.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** Review any training evaluation and measuring the effectiveness of training and to take appropriate action to improve subsequent training.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** SMS training is evaluated for all aspects (learning objectives, content, teaching methods and styles, tests, etc.) and is linked to the competency assessment.
* Training is routinely reviewed to take feedback from different sources into consideration.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 4.1.3 | Training includes human and organizational factors including just culture and non-technical skills with the intent of reducing human error.  | **Present:*** There is a training program in place that includes human and organizational factors including just culture and non-technical skills with the intent of reducing human error.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The training covers individual safety duties (including roles, responsibilities, and accountabilities) and how the organization’s SMS operates.
* Training material and methodology are adapted to the audience and include human factors.
* All staff requiring training are identified.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** Check that the training includes human and organizational factors including just culture and non-technical skills with the intent of reducing human error.
* Review the training program that including course content includes human and organizational factors including just culture and non-technical skills with the intent of reducing human error.
* Check training records against the training program.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** Training is routinely reviewed to take feedback from different sources into consideration.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| 4.1.4 | There is a process that evaluates the individual’s competence and takes appropriate remedial action when necessary.  | **Present:*** A competency framework is defined for all personnel, including trainers.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** There is a process in place to periodically assess the actual competency of personnel against the framework.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** There is evidence of the process being used and being recorded.
* Check it includes safety duties and responsibilities, as well as compliance management.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** The competence assessment program and process is routinely reviewed and improved.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| 4.1.5 | The competence of trainers is defined and assessed and appropriate remedial action taken when necessary.  | **Present:*** A competency framework is defined for all personnel, including trainers.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** There is a process in place to periodically assess the actual competency of personnel against the framework.
 | ◻ Yes◻ No◻ Not Applicable |  |
| **Operating:*** There is evidence of the process being used and being recorded.
* Review how competence assessment is carried out on initial recruitment and recurrently.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| **Effective:*** The competence assessment takes appropriate remedial action when necessary and feeds into the training program.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |
| * 1. **SAFETY COMMUNICATION (Doc 9859 element 4.2)**
 |
| 4.2.1 | There is a process to determine what safety critical information needs to be communicated and how it is communicated throughout the organisation to all personnel, as relevant. This includes contracted organizations and personnel where appropriate.  | **Present:*** There is a process to communicate safety critical information.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** The process determined what, when, and how safety information needs to be communicated.
* The process includes contracted organizations and personnel where appropriate.
* The means of communication are adapted to the audience and the significance of what is being communicated.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Operating:*** Safety critical information is being identified and communicated throughout the organisation to all personnel, as relevant, including contracted organizations and personnel where appropriate.
* Review the methods used to communicate safety information (e.g., meetings, presentations, emails, website access, newsletters, bulletins, posters, etc.).
* Assess whether the means of communication is appropriate.
* Review whether information from occurrences are timely communicated to all relevant personnel (internal and external) and has been appropriately identified.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** The organization analyses and communicates safety critical information effectively through a variety of methods as appropriate to maximize it being understood.
* Safety communication is assessed to determine how it is being used and understood and to improve it where appropriate.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| 1. **INTERFACE MANAGEMENT (Doc 9859 Appendix 2 note 2)**
 |
| 5.1 | The organisation has identified and documented the relevant internal and external interfaces and the critical nature of such interfaces.  | **Present:*** The organisation has identified and documented the relevant internal and external interfaces and the critical nature of such interfaces.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Suitable:*** All relevant interfaces are addressed.
* The way the interfaces are managed is appropriate to the criticality in terms of safety.
* The means for communicating safety information is defined.
 | ◻ Yes◻ No◻ Not Applicable |  |  |
| **Operating:*** The organisation is managing the interfaces through hazard identification and risk management.
* There is an assurance activity to assess risk mitigations being delivered by external organizations.
* Evidence that:

o Safety critical issues, areas, and associated hazards are identified; o Safety occurrences are being reported and addressed; o Risk control actions are applied and regularly reviewed; and o Interfaces are reviewed periodically. * Training and safety promotion sessions are organized with relevant external organizations.
* External organizations participate in SMS activities and share safety information.
* Check the identified interfaces (e.g., interfaces with aerodromes, airlines, Air Traffic Control [ATC], training organizations, contracted organizations, and the State).
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |
| **Effective:*** The organisation has a good understanding of interface management and there is evidence that interface risks are being identified and acted upon.
* Interfacing organizations are sharing safety information and take actions when needed.
 | ◻ Satisfactory◻ Not Satisfactory◻ Not Applicable |  |  |