

	<b>TANZANIA CIVIL AVIATION AUTHORITY</b> DIRECTORATE OF SAFETY REGULATIONS AIR NAVIGATION INSPECTORATE	Revision: 4 <b>Advisory Circular</b>
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## 1.0 PURPOSE

- 1.1 This Advisory Circular provides service providers with guidance for the development of corrective action plans to be implemented in order to clear findings generated during safety audits of air navigation services facilities and personnel.
- 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, measurable, and implementable and of timely significance taking into consideration the safety concerns addressed.

## 2.0 REFERENCES

- 2.1 The Civil Aviation (Certification of ANSP's) Regulations, 2017
- 2.2 Air Navigation Services Advisory Circulars

## 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 an operator 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 reports and provide a summary of the audit findings.

Non compliances may also be identified from a variety of sources including specific operational event, internal assessments 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 will be submitted to ANSP using the Corrective Action Request (CAR) form, the accountable manager shall develop a corrective action plan for approval by the Authority. The plan will outline how the organization proposes to correct the deficiencies.

### 3.2 DEVELOPING THE CORRECTIVE ACTION PLAN

- 3.2.1 As an initial step the accountable manager must have a clear understanding on the Levels of the finding as specified on the advisory circular TCAA-QSP-SR-AC-ANS- 19 Mechanism for Elimination of Deficiencies, also shall define the finding by collecting and evaluating relevant information to determine the facts and causal factors (including root causes) that led 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 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. More than one action may be required to correct a single deficiency. 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 and 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 IMMEDIATE CORRECTIVE ACTION (LEVEL I)**

This action corrects immediately upon identification of the inspection finding to remove an immediate threat to aviation safety.

#### **3.4.2 SHORT-TERM CORRECTIVE ACTION (LEVEL II)**

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) Within 30 days from the date the auditee receives the audit report.

#### **3.4.3 LONG-TERM CORRECTIVE ACTION (LEVEL III)**

Long-term corrective action has two components. The first component will involve identifying the root cause of the problem and indicating the measures the ANSP 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). 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.

### **3.5 SUBMISSION OF CORRECTIVE ACTION PLAN**

The covering letter of the inspection/audit report will require the ANSP to submit corrective actions in the prescribed forms.

Corrective action plans shall 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.

### **3.6 CORRECTIVE ACTION ACCEPTANCE**

Where the corrective action plan is acceptable, the ANSP shall be so advised and the appropriate information will be entered on the corrective action form or where applicable, the corrective action tracking form, for the purpose of follow-up.

If the corrective action plan is not acceptable, the applicable Inspector/Auditor or other assigned person will request that the plan be revised and re-submitted within 10 days of the request. Where the ANSP is unresponsive to this action, an alternative course of action may be pursued. Such action may include the sending of a Notice of Suspension to the organisation by the Director of Safety Regulation.

### **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 ANSP completes inspection/audit finding corrective actions. This will be accomplished by using the follow-up section on the corrective action form or the corrective action tracking form.
- 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 Regulation when the item is complete. This follow-up will be confirmed through routine surveillance activities.

#### **3.7.2 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 applicable Inspector/Auditor or other assigned person. If it is not possible to meet the deadlines, special consideration may be required to ensure a timely closure of the inspection/audit.

Corrected between 90 days and twelve (12) months - where it is anticipated that the corrective action will take more than 90 days after CAP acceptance, a risk assessment shall be completed before acceptance by the Director of Safety Regulation. If the risk assessment confirms that the proposed period is justified, an exemption shall be issued.

### **3.8 AVIATION ENFORCEMENT ACTION**

Once the inspection/audit report has been sent to the ANSP, a copy will be sent to the appropriate aviation enforcement officer. The necessity or extent of any enforcement action will be determined jointly by the Director of Safety Regulation and aviation enforcement officers. A decision record shall highlight those inspection/audit findings that are to be investigated by Aviation Enforcement.



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**Tanzania Civil Aviation Authority**