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| --- | --- | --- | --- |
| Organization:  |  | AOC No.:  |  |
| Date:  |  | Location:  |  |
| Post Holder Quality: |  | Telephone No: |  |
| Email: |  |  |  |

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| ***Instructions*** 1. Check ***YES***column if you determine the document or individual item complies with requirements.
2. Check ***NO***column if you determine that the document or individual line item does not comply (put a marker tab in the manual with a short note opposite the non - complying item).
3. Check ***N/C*** *(Not Checked)*if the item was not checked. Reasons should be given in the ***Remarks*** column.
4. Coordination is required between FOPS and PEL as necessary. The respective inspector shall sign on the last column after reviewing the item.
5. Use the remarks column at the end for overall remarks or observations. For detailed findings inspectors should also use the Audit Inspection Report Form Base-Insp-004. Attach to this checklist.

***Note: The following checklists in this section are designed as a standalone AD- HOC inspection focusing on a certain area, or can be used in conjunction with any AOC Checklists (Section 1) or Base inspection Checklist (Section 2) for the inspector.*** |

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| **SECTION 2: Quality System** |
| ***Contents****The Checklist on Quality has several distinct parts;** *Part 1 – Evaluation of the management of the Quality Assurance Programme (QAP).*
* *Part 2 – Review of the effectiveness of the Quality System via the Management evaluation meetings.*
* *Part 3 - Review of the audits completed as part of the QAP.*
* *Part 4 – Evaluation of the Quality System (QS) as it relates to other Departments.*
 |
| ***Conduct*** * Parts 1, 2 and 3 would normally be addressed in discussions with the Quality Manager
* Part 4 would involve discussions with managers/staff in appropriate departments

**The following notes should be read before completing the check list:*** The questions (all with yes/no answers) should be used as a guide for discussion with the individuals concerned.
* Some questions may not be applicable, and others may raise further questions not on the form**.**
* Where applicable, references to AMC CAR OPS 1.035 and 3.035 have been included in brackets (e.g. 4.7.1), although you may need to read several parts of the AMC to get the complete picture.
* Once again, the references should be taken as a guide only.
* This is based that the Quality Manual and any Company’s Procedures/ Staff Training Manuals have already been written in accordance with CAR-OPS 1 or 3 etc.
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| **Quality Assurance Program (QAP)** |
| **S/N** | **REF CAR OPS 1/3.** |  | **YES** | **NO** | **Remarks** |
| **2.1.1** | AMC 1/3.035 4.7.1 | Is there an audit schedule for the current period? |  |  |  |
| **2.1.2** | AMC 1/3.035-4.7.2 | Does the audit schedule cover all required audit topics within a maximum period of 24 months? |  |  |  |
| **2.1.3** | AMC 1/3.035,3.2.1 b/4.6.1 | Does the QAP include verification that departments are carrying out Quality Control checks in accordance with documented procedures? |  |  |  |
| **2.1.4**  | AMC 1/3.035 3.2.1 b/ 3.3.  | Does the QAP include evaluation of the Safety Management System (SMS)? |  |  |  |
| **2.1.5** | AMC 1/3.035, 3.2.1 b /4.6.1/5 | Does the QAP include a review of the methods used by departments to evaluate (if applicable)  |  |  |  |
| **2.1.6** | AMC 1/3.035 -4.7 | Is the operator in compliance with the audit schedule? |  |  |  |
| **2.1.7**  | AMC 1/3.035-4.8.4a-iv/4.8.5) | Have all Non-Conformance Reports (NCR’s) been action and closed within the published time-scales? (refer to Quality Manual)  |  |  |  |
| **2.1.8** | AMC 1/3.035- 4.8.5c/4.1 0.1 | Is there a procedure for monitoring the target dates for closure of Non-Conformance Reports (NCR’s)? |  |  |  |
| **2.1.9** | SMM | Have any completed audits been pooled with other operators /organisations? |  |  |  |
| **2.1.10**  | AMC 1/3.035 4.10.1 | Are the records for the QAP accessible in an easy to use format? |  |  |  |
| **2.1.11** | AMC 1/3.0 35 - 4.10.2 | Are all QAP records being retained for the 5-year period, or from start of records if less than 5 years? |  |  |  |
| **2.1.12** | AMC 1/3.035 - 6.1.2 | Have those personnel managing the Quality System (QS) received specialised training? |  |  |  |
| **2.1.13** | AMC 1/3.035 - 6.1.2 | Are certificates of training available? |  |  |  |

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| **S/N** | **REF CAR OPS 1/3** | **(Contd.) Quality Assurance Program (QAP)** | **YES** | **NO** | **Remarks** |
| **2.1.14** | AMC 1/3.035 - 6.1.1 | Have all personnel been given briefings as to their role within the Quality System? (should be verified – see later) |  |  |  |
| **2.1.15** | AMC 1/3.035 - 6.1.1 | Are records of such briefings kept? |  |  |  |
| **Management Evaluation Meetings** |
| **2.2.1** | AMC 1/3.035-4.9.3 | Did this meeting take place in accordance with the timetable and procedures set out in the Quality Manual? |  |  |  |
| **2.2.2** | AMC 1/3.035 - 4.9.3 | Did all the key personnel as defined in the Quality Manual attend? |  |  |  |
| **2.2.3** | AMC 1/3.035 - 4.9.2 | Are minutes available? |  |  |  |
| **2.2.4** | AMC 1/3.035 - 4.9.2 | Were any recommendations raised as a result of the meeting passed to an appropriate manager? |  |  |  |
| **2.2.5** | AMC 1/3.035/4.9.2 | Were these recommendations action? |  |  |  |
| **AUDITS -** (Analysis of a minimum of two recently completed audits that have raised Non - Compliance Reports (NCR)) |
| **2.3.1**  | AMC 1/3.035 -4.7.1 | Was the Audit conducted in accordance with the Audit Schedule? |  |  |  |
| **2.3.2** | AMC 1/3.0354.4.1/4.5.1 | Did the auditors used have the necessary experience and independence to complete the audit? |  |  |  |
| **2.3.3** | AMC 1/3.035 –43.2a/4.3. 3c | Was the scope of the audit sufficient? |  |  |  |
| **2.3.4** | AMC 1/3.035/4.3.2c/4.8.2/4.8.4a-i | Was the report written up in a timely manner, raised in the correct format and on the correct forms? |  |  |  |
| **2.3.5** | AMC 1/3.035- 4.3.2d/4.8. 2/4.8.4a-ii | Were any NCR raised meaningful and understood? |  |  |  |
| **2.3.6** | AMC 1/3.035 | Was the categorisation of the NCR’s realistic?(refer to QM for categorisation scale) |  |  |  |
| **2.3.7** |  AMC 1/3.035-4.8.4a-v | Were the NCR’s passed to an appropriate manager for action? |  |  |  |
| **2.3.8** | AMC 1/3.035-4.8.4a-iii/ 4.10.2c | Has the corrective action taken or proposed been recorded on the form? |  |  |  |

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| **S/N** | **REF CAR OPS 1/3** | **AUDITS** | **YES** | **NO** | **Remarks** |
|  | AMC 1.035/3.035-4.8.1/4.8.4a-iii | Would the corrective action taken be likely to prevent a re- occurrence of the non- conformity? |  |  |  |
|  | AMC 1/3.0354.8.5e/4.10.2e | Did any follow-up/verification action take place prior to closure? |  |  |  |
|  | AMC 1/3.035 -4.10.2e | Has the NCR been signed as closed by the Quality Manager? |  |  |  |
|  | AMC 1/3.035-4.8.4a-i/iv/4.8.5 | Did the closure of the NCR take place within the published time- scales based on the seriousness of the finding? (Refer to QM) |  |  |  |
|  | AMC 1/3.03 - 4.10 | Have the audit records been updated? |  |  |  |
| **Quality Control**(Discussions with the manager of a particular department; e.g. operations/training) |
| **Department 1** | **Department 2** |
| Dept name: | Dept name: |
| Contact name: | Contact name |
| Contact position: | Contact position: |
| Date: | Date: |

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| **S/N** | **REF CAR OPS 1/3** | **Question** | **YES** | **NO** | **Remarks** |
| **2.4.1** | Appendix 2 to CAR-OPS 1/3.175 (c)(2)(i) & CAR-OPS 1/3.205 | Has all staff been trained in accordance with published procedures? |  |  |  |
| **2.4.2** | Appendix 2 to CAR-OPS 1/3.17 (c)(2)(i) & CAR-OPS 1/3.205 | Are records of such training available? |  |  |  |
| **2.4.3** | CAR-OPS 1/3.195 & CAR-OPS1/3.210(a) | Does all staff in the department have access to procedures manuals that are applicable to their job? |  |  |  |
| **S/N** | **REF CAR OPS 1/3** | **Question** | **YES** | **NO** | **Remarks** |
| **2.4.4** | IEM OPS 1.175-/2.1(d) | Are quality control checks being carried out by the department in accordance with published procedures? |  |  |  |
| **2.4.5** | IEM OPS 1.175-2.1(d) | Are the results of these checks being documented, including corrective action by management to prevent re-occurrence? |  |  |  |
| **2.4.6** | AMC1.035/3.035 - 6.1.1 | Have all personnel in the department received briefings as to their role within the Quality System? |  |  |  |
| **Document and Data Control (AMC OPS 1/.035/3.3.2j)**(Would normally involve discussions with the individual responsible for document and data control; To inspect compliance with Flight Safety Document System) |
| Contact Person Title/Name: |  |
| **S/N** | **REF CAR OPS 1/3** | **Question** | **YES** | **NO** | **Remarks** |
| **2.5.1** | Appendix 1 to CAR- OPS 1/3.1045-A0.2(a) | Is this person the same as that nominated in the Operations Manual |  |  |  |
| **2.5.2** | Appendix 1 to CAR- OPS 1/3.1045-A0.2(h) | Is there a full listing of manuals, manual holders and manual revision status? |  |  |  |
| **2.5.3** | Appendix 1 to CAR- OPS 1/3.1045-A0.2(b) | Is there a process to confirm that all amendments have been incorporated? |  |  |  |
| **2.5.4**  | Appendix 1/3 to CAR-OPS 1.1045- A0.2(f) | Is the nature of any changes clearly identifiable? |  |  |  |
| **Quality Manual (QM) Review** |
| **Organisation** |  |
| **QM Issue No/Date** |  |
| **Contact Person Title/Name** |  |
| **Date Reviewed** |  |
| **Check compliance with** | Flight Safety Document System Requirements CAR OPS 1.037 e |
| **S/N** | **REF CAR OPS 1/3** | **Question** | **YES** | **NO** | **Remarks** |
| **2.6.1**  | Subpart P | Does it contain a list of effective pages and a record of amendments?**Note: This may only be required if the QM is a separate volume.** |  |  |  |
| **2.6.2**  | Subpart P | Does it contain procedures for administration and control?  |  |  |  |
| DISTRIBUTION (controlled copies held by distribution list, use of uncontrolled copies).**Note: This may only be required if the QM is a separate volume.** |
| **2.6.3** | AMC 1/3.035-2.1 | Does it contain Terms and Definitions?(Accountable Manager, Quality Manager, Quality Assurance etc). |  |  |  |
| **2.6.4** | AMC 1/3.035-2.2.1 | Does it contain a Quality Policy Statement, and signed by the Accountable Manager? |  |  |  |
| **2.6.5** | AMC 1/3.035-2.2.3 | Does it state that the Accountable Manager has overall responsibility for the AOC Holders Quality System? |  |  |  |
| **2.6.6** | AMC 1/3.035-2.3 | Does it state the purpose/aim of the Quality System? |  |  |  |
| **2.6.7** | AMC 1/3.035 - 2.4.1 to 2.4.4 | Are the responsibilities of the Quality Manager clearly defined? |  |  |  |
| **2.6.8** | AMC 1/3.035 -3.1.2 | Does it contain a Quality System Organisation chart? |  |  |  |
| **2.6.9** | AMC 1/3.035 -3.2.1 | Does it contain the Operator’s organisation structure? (including terms of reference).**Note:** **The QM may cross refer to Part A.** |  |  |  |
| **2.6.10** | AMC 1/3.035-3.2.2 | Does it refer to the feedback system to the Accountable Manager? |  |  |  |
| **2.6.11** | AMC 1/3.035-3.3.2 h ii, 4.3.2 & 4.3.3 | Does it contain Audit Procedures? (planning, preparation, performance and techniques). |  |  |  |
| **2.6.12** | AMC 1/3.035-3.3.2h.iii | Does it contain reporting procedures? (non conformance reports, classification of findings, audit report). |  |  |  |
| **S/N** | **REF CAR OPS 1/3** | **(Contd.) Question** | **YES** | **NO** | **Remarks** |
| **2.6.13** | AMC 1/3.035-3.3.2 h. | Does it contain the recording system? |  |  |  |
| **2.6.14** | AMC 1/3.035-3.3.2 j | Does it contain company procedures for Document and Data Control? (Responsibility, Method, Approval, Issuance and control, Revision and Amendments). |  |  |  |
| **Note: This should be a description of the company procedures for all manuals.** **This information could be held elsewhere.** |
| **2.6.15** | AMC1/3.035 - 4.2.1 and 4.2.2 | Does it describe Quality Inspections and its purpose? |  |  |  |
| Note: Quality Inspection is the observation of a particular event or action. Typical subject areas are: * Actual flight operations.
* Ground De-icing/Anti-icing.
* Training Standards.
 |
| **2.6.16** | AMC1/3.035-4.4.1 | Does it contain information on the resources to be used? (dedicated auditors, part-time auditors, external auditors?) |  |  |  |
| **2.6.17** | AMC 1/3.035-4.4.1, 4.4.2 and 4.5.2 | Does it contain auditors’ responsibilities? (description, responsibilities, qualifications and experience) |  |  |  |
| **2.6.18** | AMC1/3.035-4.5.1 | Does it refer to auditors’ independence?(no day-to-day involvement in the area of the operation to be audited). |  |  |  |
| **2.6.19** | AMC1/3.035-4.6.1 | Does it contain the audit scope and describe the audit areas? |  |  |  |
| Note: The scope of each audit area should be fully described and may be supported by checklists. |
| **2.6.20** | AMC 1/3.035-4.7.1 and4.7.2 | Does it contain the Audit Schedule? If yes, does it contain all the areas required to be audited? |  |  |  |
|  |  |  |
| **2.6.21** | AMC1/3.035-4.7.1 and 4.7.2 | Is the Audit Schedule realistic in terms of frequency of audits? |  |  |  |
| **Note:** It is considered unlikely that an interval between audits greater than 24 months would be acceptable for any audit topic. |
| **2.6.22** | AMC1/3.035-4.7.1 and 4.7.2 | If the Audit Schedule is not contained in the QM, is it held separately as a controlled document?Is it available for review? (request if necessary). |  |  |  |
| **2.6.23** | AMC1/3.035-4.7.1 and4.7.2 | If the Audit Schedule is held separately is there a statement in the QM as to where and by whom? |  |  |  |
| **2.6.24** | AMC1/3.035-4.7.2 | Does it state that the operator should not decrease the frequency of audits without the agreement of the Authority? |  |  |  |
| **2.6.25** | AMC1/3.035-4.8.1 and4.8.2 | Is there a description of an established and published quality procedure to monitor regulatory compliance on a continuing basis? |  |  |  |
| Note: This refers to internal/departmental monitoring, the results of which should be documented and directed to the responsible manager for corrective action, as appropriate. |
| **2.6.26** | AMC 1/3.035-4.8.3 and 4.8.4 | Does it contain a Corrective Action (CA) Procedure? (CA, Report on CA taken, CA confirmed, CA not taken) |  |  |  |
| **2.6.27** | AMC1/3.035-4.8.3 and4.8.4 | Does it contain a Preventive Action (PA) Procedure?(PA to a non-conformance (NC), PA to betaken and reporting of PA completed). |  |  |  |
| **Note: The procedure should consider the following:**1. Could the same NC be found in other areas?
2. Has the NC occurred before?
3. Is the NC due to a lack of training?
4. Are procedures not followed because they are not adequately described?
5. Is the NC caused by absence of procedures?
6. Is the person assigned to the function not qualified to perform the task?
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| **2.6.28** | AMC1/3.035-4.8.5 | Does it contain a follow-up/verification procedure? (follow-up audit or verification request). |  |  |  |
| **2.6.29** | AMC1/3.035-4.9 | Does it state the purpose/intent of the Management Evaluation Review (MER)? |  |  |  |

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| **S/N** | **REF CAR OPS 1/3** | **(Contd.) Question** | **YES** | **NO** | **Remarks** |
| **2.6.30** | AMC1/3.035-4.9 | Does it state the frequency of MER’s?**Note: At least one per year is considered adequate.** |  |  |  |
| **2.6.31** | AMC 1/3.035-4.9 | Does it contain a list of attendees? |  |  |  |
| **2.6.32** | AMC 1/3.035-4.9 | Does it state all MER meetings are minuted? |  |  |  |
| **2.6.33** | AMC 1/3.035-4.10.2 | Does it state those records to be maintained, and for a minimum of 5 years? |  |  |  |
| **2.6.34** | AMC 1/3.035-5.1.1 | Does it list those activities to be subcontracted? |  |  |  |
| **2.6.35** | AMC 1/3.035-5.1.2, 5.1.3 | Does it contain a sub - contractor evaluation procedure? (audit, questionnaire, reputation, acceptability/rejected lists). |  |  |  |
| **2.6.36** | AMC 1/3.035-6.1.1 | Does it state that quality related briefings shall be given to all personnel? |  |  |  |
| **2.6.37** | AMC 1/3.035- 6.1.2, 6.1.3 and 6.2.1 | Does it describe the training to be given to the Quality Manager and Auditors and the sources of such training? |  |  |  |
| **2.6.38** | N/A | Is the audit report form contained in the Quality Manual? If yes, does it contain provision for the following: - Audit Scope?  |  |  |  |
| Audit Findings (including auditors’ signature and date)?  |  |  |  |
| Corrective/Preventative action (including responsible manager’s signature and date)?  |  |  |  |
| Timescale for corrective action?  |  |  |  |
| Follow-up/Verification action (including Quality Manager’s signature and date)? |  |  |  |

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| **S/N** | **REF CAR OPS 1/3** | **(Contd.) Question** | **YES** | **NO** | **Remarks** |
| **2.6.39** | N/A | If the audit report form is not contained in the QM, is it held separately as a controlled document? Is it available for review? (request, if necessary). |  |  |  |
| **2.6.40** | N/A | Are checklists contained in the QM? If yes, are they adequate? |  |  |  |
| **2.6.41** | N/A | If checklists are not contained in the QM, are they held separately as controlled documents? Are they available for review? (request, if necessary). |  |  |  |
| **SECTION 3: RESULT** |
| ***S*atisfactory ☐** | **Unsatisfactory ☐ \*see note below** |
| ***\*NOTE: INSPECTOR MUST FILL BASE INSPECTION AUDIT / INSPECTION REPORT Form BASE INSP–004*** |
| **Flight Operations Inspector’s Name:** |  |
| **Signature:** |  |
| **Date:** |  |