

**SMS Maturity Assessment Tool - Organisations**

## Contents

[Introduction](#_Introduction_1)

[Understanding the ongoing concept of PSOE](#_Understanding_the_ongoing)

[How to use the Maturity Assessment](#_How_to_use)

[Component 1 – Safety Policy and Objectives](#_COMPONENT_1_)

[Component 2 – Safety Risk Management](#_COMPONENT_2_SAFETY)

[Component 3 – Safety Assurance](#_COMPONENT_3_SAFETY)

[Component 4 – Safety Promotion](#Component4)

Every effort is made to ensure the information in this Assessment Tool is accurate and up to date at the time of publishing. But numerous changes can occur with time,

for instance, in ICAO documents, rules and other legislation, and in other relevant publications. Users are reminded to check for appropriate, up-to-date information.

Visit the CAA website at: aviation.govt.nz for civil aviation rules, advisory circulars, airworthiness directives, forms, and more safety publications.

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## Introduction

This document is developed for use by participants who are operating a safety management system. It builds upon the tool developed for use during the implementation of an organisation’s Safety Management System (SMS) (form CAA 24100/02). It provides a common evaluation methodology, focusing both on evaluation and continuous improvement of established SMS. It has been developed from guidance material published by the [Safety Management International Collaboration Group (SM ICG)](http://www.skybrary.aero/index.php/SM_ICG_SMS_Evaluation_Tool) and lessons learned from field use of the original SMS Evaluation Tool form CAA 24100/02. This tool, as with other tools used globally to assess SMS, relate back to the ICAO Safety Management Manual (Doc.9859). CAANZ acknowledge and thank the significant efforts of the Safety Management International Collaboration Group (SM ICG) in the development of this and previous SMS Evaluation Tools.

The tool is not designed for initial assessment i.e. new organisations or organisations beginning to implement SMS. The 24100/02 should be used to evaluate and assess when initially implementing SMS into an organisation.

It is developed to be used in an interactive approach e.g. discussions with a cross section of personnel in the organisation, and processes and practices that can be observed and analysed.

**There is** **no requirement by CAANZ that a participant submits this tool to CAA**. Unlike the 24100/02 that was used for initial implementation, this tool is not required to be completed and submitted to CAANZ at any time. It is not required to become part of an organisations Exposition; it not designed to be used as a rule matrix or a questionnaire. CAA hope it provides valuable assistance and guidance for participants who may wish to self-assess and measure their system against these indicators.

Where the term “Indicator” is used, these are essentially word pictures embedded in the document highlighting what good looks like for both an Operating system and an Effective one. This assessment is not intended to generate a score for a participant’s system. Its primary purpose is to help participants understand what good looks like in a maturing system by assessing against the indicators provided. It may be useful as an internal audit tool to evaluate system effectiveness or be used as a gap analysis to inform future planning to improve. Additionally, it may support benchmarking across organisations or the evaluation of third-party safety or management systems.

A maturity assessment tool has also been developed alongside this one for CAANZ Inspectors to use to assess Operating & Effective in an organisation. When conducting assessments, the Inspectors are likely to do so in a “modular” fashion i.e. they may not look at every element within a component, or every component on each occasion. Indicators or word pictures in the Inspector version and this version align creating transparency between the two.

## Understanding the ongoing Concept of PSOE (Present, Suitable, Operating and Effective)

To assist in evaluating the maturity and effectiveness of an SMS, the maturity assessment continues to use the concept of PSOE to describe the different levels of performance. PSOE (*Present, Suitable Operating & Effective*) was introduced at the beginning of implementation of SMS in New Zealand and is used globally. This document focuses on maturing systems hence the performance levels of Operating and Effective (described in **Figure 1** below).

Generally, *Present* and *Suitable* are used for initial approval or certification. *Operating* and *Effective* are expected to be found in a functioning SMS which is why this maturity assessment focuses on them. However, due to the continuously changing and dynamic nature of aviation, and/or changes to an organisation there is a need for ongoing assessment at times of *Present* and *Suitable* in the system.

*Present* cannot be *Present* if it is not documented – documentation changes over time. Documentation ensures that a consistent and repeatable outcome is available, so again, as this form is used – ensure it is kept uppermost in mind as to whether the system or part of it, is still meeting *Present*.

*Suitable* criteria may need to be revisited. Significant change to an organisation’s operation may require a reconsideration of the suitability of the SMS processes. Size, growth, complexity, and other factors alter over time, and what was considered Suitable at time of implementation may have changed considerably. For example, an organisation may have made changes to their reporting methods and platforms because of adding several more bases; or perhaps a senior person has moved to a more remote base and is no longer in the business daily.

This maturity assessment has (where felt most appropriate) included indicators that lead and prompt the user into that consideration of reassessing *Present* and *Suitable*, but if a participant wishes to assess fully against *Present* and *Suitable*, they should use the 24100/02 form to do so.

In a proactive sense, participants should be continually referring to what is accepted as *Present* and *Suitable* when managing change in the organisation.

|  |  |
| --- | --- |
| **Present**  | The indicator is clearly visible and is documented within the organisations SMS documentation.This meets the minimum compliance standard established by Part 100 and the SMS Evaluation Tool 24100/02.  |
| **Suitable** | There is evidence that the indicator is suitable based on the size, nature and complexity of the organisation and the inherent risk in the activity, including consideration of the industry sector.This meets the minimum compliance standard established by Part 100 and the SMS Evaluation Tool 24100/02. |
| **Operating** | **There is evidence that the indicator is in use, and an output is being produced.** **This indicates that the participant has embraced SMS and is implementing systems, processes, and practices to achieve safety performance, but that the outputs may not yet be demonstrated to improve safety.**  |
| **Effective** | **There is evidence the indicator is in use and achieving the desired outcome.** **This indicates that the participant has embraced SMS and is using their systems, processes, and practices to achieve greater safety performance. Outcomes have a positive safety impact.**  |

Figure 1: Description of levels of performance (PSOE model)

## How to use the Maturity Assessment

The framework follows AC100-1 – Safety Management, where the four ICAO components (Safety Policy and Objectives, Safety Risk Management, Safety Assurance, and Safety Promotion) have been further broken down into the 13 elements that the CAA considers make an effective SMS. Under the heading of the element is a reference to the 24100/02 original Evaluation Tool explaining what Present and Suitable requirements are. This is a summary statement that reflects the basic certification level an organisation should not drop below.

**“What to Look For” -** the table includes items designed to guide a participant by suggesting how they might go about assessing this part of the system. Items are listed that serve to remind or prompt the user of areas they may want to consider. They are not specific to an individual level of Operating or Effective, and some of these may not be relevant depending on the type or nature of the organisation, however they are designed to result in a focus on outputs (what was produced). When using the tool, the user should also maintain a strong focus on outcomes i.e. what difference that output made to the organisation’s safety.

By working through some of the “what to look for” areas the user should be able to cross reference that information gained to the indicators in the Operating and Effective tables. Users can add items as they wish, the table will expand to allow this.

**“Operating & Effective” Indicator Tables -** two tables follow with indicators (word pictures) that reflect good performance as “Operating” – and in the green tinted table “Effective” indicators. Participants can enter in comments beside the indicators and use the tool as a working document to record actions, notes or record evidence of where in the system they perhaps meet requirements or perhaps partially do so – and use the space to identify areas they may need to focus on.

Naturally, the user may find when focusing just on an element that all is looking good. They must also consider the wider system – how are the components threading into other components. For instance, how are the outputs from safety investigation and audit threading through to the risk management system, and the Management Review? How is the system operating as a whole? There are some indicators included to prompt this, and most definitely CAANZ will focus holistically when assessing also, so users should keep that in mind and take care not to focus on an element in isolation.

**Outputs vs Outcomes** – the SMS in your organisation is self-designed. It has been designed to improve safety and manage risk in the organisation.

**Outputs** from the SMS are such things as reports from audit or investigation, meeting minutes, risk controls following risk assessment, training needs – in other words the “stuff” produced through use of that system - be it physical or virtual for the intent of managing safety. For example, an audit report that has identified findings and corrections needed, or a test of an ERP that has identified all is in order in that area – these are outputs of the process that has been carried out.

**Outcomes** are the difference that “stuff” makes to our actual organisational safety – so did the corrective actions from the audit result in improved safety and removal of some risk? Or prompt us to develop more efficient practices and behaviours? Or perhaps bring about greater control of risk in an area? Was there knowledge transferred, and behaviours changed? That’s an outcome. So, outputs are what we produce – and outcomes are the impacts those outputs have on safety!

**SMS Journey**

There is no scoring or result included in this assessment. It is developed to provide the participant with guidance to understand the levels that their systems would be required to meet to achieve Operating and then Effective. For most organisations, SMS will take time to implement and may take several years to mature to a level where it is fully effective. The following diagram shows the different levels of SMS maturity within an organisation, as that organisation implements, develops, and improves its SMS.

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# COMPONENT 1 SAFETY POLICY AND OBJECTIVES

Includes NZCAA Elements:

|  |  |  |
| --- | --- | --- |
| **Element 1.1** | Management Commitment and Responsibility | CAR 100.3(a)(1) / ICAO Annex 19, Appendix 2 – 1.1 |
| **Element 1.2** | Safety Accountabilities | CAR 100.3(a)(1) / ICAO Annex 19, Appendix 2 – 1.2  |
| **Element 1.3** | Key Personnel | CAR 100.3(a)(1) / ICAO Annex 19, Appendix 2 – 1.3 |
| **Element 2** | Emergency Response Plan | CAR 100.3(a)2 / ICAO Annex 19, Appendix 2 – 1.4 |
| **Element 3** | SMS Documentation | CAR 100.3(b) / ICAO Annex 19, Appendix 2 – 1.5 |

## 1.1 Management Commitment and Responsibility

**Present and Suitable Requirement:** The organisation is required to define its safety policy, which should be developed in consultation with management and staff representatives and be signed by the chief executive. The safety policy should reflect organisational commitments regarding safety, including a clear statement about the provision of the necessary human and financial resources for its implementation and be communicated, with visible endorsement, throughout the organisation. The safety policy should be regularly reviewed to ensure it remains relevant and appropriate to the organisation.

**Maturity Assessment:**

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| What to look for: |
| Does leadership, including the CEO and management team, have a clear understanding of the safety policy? How are safety decisions made in alignment with the policy? When making these decisions is there consideration of safety culture within the organisation?* When communicating with staff at all levels, is the leadership effectively conveying the safety values and messaging in the policy? Is there a gap between the intended message and its perception among employees?

Has the safety policy been updated? Are reviews occurring regularly, and what is driving revisions when they occur? * Is the just culture process clearly defined and documented within the exposition? Does it remain fit for purpose? Can examples be provided of how this process has been applied in practice?

How is compliance with safety standards ensured? Are outputs such as audit results and recommendations from investigations being acted upon?* Is there a regular review of resources and capability? Does the current resource level align with what was planned to ensure safe operations?
* Have issues related to resource and capability been highlighted in reports, investigations or audits? If so, how have they been addressed?
 |
| **Evaluation** | **Indicators of good performance (Operating)** | **Evidence, Notes and Actions**  |
| The CEO and other management can demonstrate knowledge of the content and intent of the policy and can discuss how it relates to the organisation. |   |
| Staff are aware of the policy and can discuss its values |   |
| Policy is reviewed periodically, is signed by the CEO, is communicated well, and remains suitable for the size, nature, and complexity of the organisation |   |
| There is evidence of the just culture policy and supporting principles being promoted to staff by management. |   |
| The CEO (and other management) can discuss value from the output of the management system and can discuss at an acceptable level what the risks are in the operation and what they are doing about them. |   |
| The CEO has suitable control over resources and there is evidence resource and capability are being assessed. |   |
| **Evaluation** | **Indicators of Effective performance (Effective)** | **Evidence, Notes and Actions** |
| The CEO and management have a clear understanding of the policies in the organisation and there is evidence they are engaged in implementing them. |   |
| The just culture policy is applied in a fair and consistent manner and staff demonstrate trust in the policy. |   |
| There is evidence that the line between acceptable and unacceptable behaviour has been determined in consultation with staff and is understood by all. |   |
| The CEO and management have an elevated level of understanding of the effectiveness of the system and can articulate the significant risks and what they are doing about those. |   |
| Management can demonstrate how the system works to inform them accurately of their risks and their compliance levels. Examples can be demonstrated of actions taken to improve safety based on outputs from the system. |   |
| Proactive forecasting and review of resource and capability is evident, and consistent action is taken and monitored to address any shortfalls. |   |

## 1.2 Safety Accountabilities

**Present and Suitable Requirement:** The chief executive will be identified as the person who, irrespective of other functions, shall have ultimate responsibility and accountability, on behalf of the organisation, for the implementation and maintenance of the SMS. The organisation shall also identify the safety accountabilities of all members of senior management, irrespective of other functions, as well as employees, with respect to the safety performance of the SMS. Safety responsibilities, accountabilities and authorities shall be documented and communicated throughout the organisation and shall include a definition of the levels of management with authority to make decisions regarding safety risk tolerability.

**Maturity Assessment:**

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| What to look for: |
| * Does the structure ensure the CEO has authority to allocate resource for safety improvements?
* Is there evidence of recent unplanned safety related expenditure?
* Are safety related performance targets placed on employees i.e. “your area will produce x amount of safety reports per month.” If so, how is it ensured that these KPIs are not driving safety reporting underground?
* Who else aside from the CEO, is authorised to make risk related decisions and to what extent?
* Is the delegation of this from the CEO defined and are those people aware of this authorisation and understanding of the levels of risk they can accept? Can these individuals demonstrate how they handle this accountability in their daily operations?
* Are there examples of safety improvements made by personnel in the organisation? Do these improvements only occur in response to incidents, or are there cases where proactive measures have been taken? How are management acknowledging these personnel?
* What are staff beliefs at all levels regarding stopping work that is deemed unsafe? Do personnel understand their accountability in these situations, and is this part of the organisational culture messaging?
* Are job descriptions kept up to date with shifts in responsibilities? Is there a process to regularly review job descriptions to ensure alignment with change?
 |
| **Evaluation** | **Indicators of good performance (Operating)** | **Evidence, Notes and Actions**  |
| The CEO has authority and can demonstrate the safety system is being suitably resourced and implemented. |   |
| The management team are aware of the levels of risk they can accept and can demonstrate how they apply accountability in respect of ensuring safe operations. |   |
| There is evidence employees in the organisation are aware of and seek to fulfil their safety responsibilities.  |   |
| The CEO and other management can describe how they make themselves available freely to people in the organisation and can provide examples of involvement with safety communications in the organisation. |   |
| There is a clear acceptance across the organisation that any person in the organisation (or third party) can stop the operation if there are unacceptable levels of risk – this is messaged clearly by management. |   |
| Job descriptions remain relevant and suitable and include safety accountabilities and responsibilities. |   |
| **Evaluation** | **Indicators of Effective performance (Effective)** | **Evidence, Notes and Actions** |
| The CEO can discuss and demonstrate how they ensure that the performance of the safety system is being monitored, reviewed, and improved. |   |
| Management and teams are aware of the substantive/significant risks faced by the organisation and understand their acceptance levels, accountability, and ownership around these.  |   |
| Accountabilities around the concept of reasonably practicable and risk acceptability in relation to that is fully understood by management. There is evidence of management using this concept in decision making.  |   |
| There is evidence everyone in the organisation is aware of and understand the accountabilities they have around their safety responsibilities, and the decisions they make. They can demonstrate how they have contributed to the improvement of safety in the organisation.  |   |
| The CEO can evidence how safety expectations and standards are continuously acknowledged and promoted by them and other managers.  |   |

## 1.3 Appointment of Key Safety Personnel

**Present & Suitable Requirement:** The organisation is required to identify a person who is responsible for the system for safety management, and who will be the focal point for the implementation and maintenance of an effective SMS. In addition, any safety group or committee that supports the chief executive and the safety manager in delivering an effective SMS should be defined and documented.

**Maturity Assessment:**

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| What to look for: |
| * How does the Safety Manager (SM) maintain their competency? Are there examples of recent upskilling opportunities offered to the Safety Manager?
* Is the Safety Manager being provided with sufficient time and resource to perform their duties effectively? Can this be demonstrated?
* Are there indications that audit programmes are failing or that investigations are being deprioritised due to insufficient time or resource allocated to the Safety Manager?
* Is the Safety Manager actively involved in key safety activities, such as management meetings, safety meetings and ERP testing?
* Is the Safety Manager effectively delivering safety-related issues and communications to the wider organisation? Are they engaging with external parties as appropriate?
* How is it ensured that the Safety Manager has access to internal and external safety information? For instance, if the Safety Manager is not on-site, how is it ensured timely notifications regarding events or incidents is occurring?
* How is it being ensured that potential conflicts of interest are being identified and managed involving the Safety Manager, such as responsibilities to other roles?
 |
| **Evaluation** | **Indicators of good performance (Operating)** | **Evidence, Notes and Actions**  |
| The SM is managing and maintaining the SMS and can demonstrate their required inputs are being covered by provision of sufficient time and resource to conduct their duties. |   |
| There is evidence they escalate and follow up on safety issues when appropriate, in a timely manner. |   |
| The SM is an influence in safety meetings and submits relevant inputs to the meeting. There is evidence they manage outputs such as communications, safety issues arising, and records associated with the safety meetings. |   |
| They are in regular communication with the CEO, other key managers and stakeholders and there is a clear process for notifications when not on site.  |   |
| They are accessible to all staff in the organisation and there is no evidence of any conflict of interest causing lapses in the system. |   |
| **Evaluation** | **Indicators of Effective performance (Effective)** | **Evidence, Notes and Actions** |
| The SM demonstrates a high level of competence in maintaining and managing the safety management system and consistently identifies and follows through on improvements across the system in a timely manner.  |   |
| There is a close working relationship with the CEO and the SM is considered a trusted advisor by the management team and given appropriate status in the organisation. |   |
| There is safety structure of key personnel from various operational areas of the organisation supporting the safety management system who work closely with the SM.  |   |
| The SM plays a leading role in the organisations safety committees and meetings and includes key stakeholders.  |   |
| The SM is not taking ownership of safety themselves but rather is leading on safety advice and is ensuring and can demonstrate that management are well informed.  |   |
| The SM can demonstrate consistent and clear messaging is being communicated from them in respect of safety matters across the organisation and that outcomes are being correctly and accurately documented and applied to the system.  |   |

## 2. Co-ordinated Emergency Response Planning

**Present & Suitable Requirements:** Organisations engaged in aircraft operations require an emergency response plan that provides for the orderly and efficient transition from normal to emergency operations and the return to normal operations and is properly coordinated with the emergency response plans of those organisations it must interface with during the provision of its service.

**Maturity Assessment:**

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| What to look for: |
| * Is the ERP up to date? Have changes been assessed for inclusion in the ERP? Is the ERP accessible to all relevant personnel?
* Do key personnel – including managers, flight followers, loader drivers – understand their responsibilities during an emergency? How is this ongoing awareness being achieved?
* How is the ERP training conducted? Is this occurring regularly and does it follow immediately after updates to the ERP?
* Is there coordination with other parties (including non-aviation organisations) and how is this being managed? Are the points of contact defined in these organisations and their roles explained? Have other parties been included in the ERP testing where appropriate?
* Testing of the plan is a requirement and should be defined in the exposition. Are tests conducted as specified? When the last test and what were its outcomes? Were those outcomes communicated across personnel and other parties?
* Did those outcomes influence and improve other areas of the SMS such as risk management processes, training amendments or audit inclusions?
* Are the scenarios in the ERP relevant to the current operations? Is there a consideration to explore a range of activities to test? Are different types of foreseeable emergencies included and is it evidence that scenarios are varied in testing rather than repeating the same approach?
* Does risk information get used as a driver when determining the types of emergencies to include in the ERP? Are outputs from other parts of the SMS – such as investigation findings, externally sourced data, risk register insights, and controls – integrated into ERP considerations?
 |
| **Evaluation** | **Indicators of good performance (Operating)** | **Evidence, Notes and Actions**  |
| The ERP is available to easily access and clearly defines the procedures, roles, and responsibilities across the organisation and where applicable with third parties. |   |
| The ERP is trained to personnel and third parties were applicable, reviewed, and tested regularly to make sure it remains up to date. |   |
| Different scenarios with variations are used to test the robustness of the ERP, and where appropriate there is evidence of co-ordination with other organisations. |   |
| It is evident tests have relevance to the activities taking place within the organisation. |   |
| Outputs of a test are communicated and discussed with employees and where applicable third parties. |   |
| Actions are taken to improve the ERP following test or changes to the organisation for effectiveness, and employees where applicable participate in development. |   |
| **Evaluation** | **Indicators of Effective performance (Effective)** | **Evidence, Notes and Actions** |
| Training of the ERP is ongoing, and training material and sources are focused on for continual improvement of the plan and its relevant scenarios.  |   |
| There is evidence of proactive coordination with other organisations through regular drills or crisis exercises, which are analysed for further improvement |   |
| The results of the ERP review and test are assessed and actioned with appropriate input from employees and third parties to improve its effectiveness.  |   |
| The ERP is integrated and considered in other processes of the SMS such as hazard identification, change management, audit, and training.  |   |
| Updates to the ERP are communicated throughout the organisation and stakeholders.  |   |
| The organisation consistently uses risk data and information to apply to testing of emergency situations and ensures diverse types of foreseeable emergencies are being considered. |   |

## 3. Development, Control and Maintenance of Safety Management Documentation

**Present & Suitable Requirements:** The organisation is required to develop and maintain SMS documentation. This should describe the safety policy and safety objectives, the SMS requirements, the SMS processes and procedures, the accountabilities, responsibilities and authorities for processes and procedures, and the SMS outputs. The organisation can incorporate the SMS documentation into its existing organisation documentation (exposition) or develop and maintain a stand-alone SMS manual to communicate its approach to the management of safety throughout the organisation.

**Maturity Assessment:**

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| What to look for: |
| * Is the entire suite of SMS documentation – such as the Exposition, reporting platforms, risk management procedures and platforms, ERP, and audit processes – still relevant and appropriate, considering any changes since implementation? What process is in place for review to ensure this?
* How were significant changes, if any, made to the SMS documentation? Were these changes deemed “Material” under the rule and subsequently notified to the CAA?
* When amendments have been made how are the potential impacts of the amendment assessed and managed? Are the changes evaluated for their effects on other components of the SMS (e.g. risk management, training requirements), and are these considerations effectively communicated across the organisation?
* Have changes to the SMS documentation been authorised in alignment with procedures set out in the Exposition? Is it evidence who assessed the change and approved it, and were they qualified to do so?
* How are compliance requirements regarding the control, amendment and storage of documentation being ensured? Are the records being generated by the SMS such as audit reports, safety reports and investigation reports stored in accordance with the exposition?
* How is it ensured that personnel have access to the most current documents? How is version control effectively managed? Do personnel know where to locate the most up to date versions of the documents they rely on?
* Can personnel clearly articulate which parts of the SMS documentation are relevant to their roles and responsibilities? For example, do they understand how the risk register pertains to their work? Can they demonstrate awareness of the procedures for requesting changes to organisational processes? Have there been changes requested by personnel outside of management?
 |
| **Evaluation** | **Indicators of good performance (Operating)** | **Evidence, Notes and Actions**  |
| The SMS documentation remains suitable for the size, complexity, and nature of the organisation and is reviewed. |   |
| Changes to the SMS documentation are authorised appropriately, managed, and communicated throughout the organisation where applicable. |   |
| SMS documentation is appropriately controlled, and compliance requirements as per the rule are being met. |   |
| SMS supporting documents and records are appropriately stored and found to be complete and consistent with data protection and confidentiality requirements. Where appropriate the records are stored in a way that enables the extraction of safety data for ongoing analysis of the SMS. |   |
| Samples show that employees are familiar with the SMS documentation relevant to them and follow the relevant parts of the SMS documentation. |   |
| **Evaluation** | **Indicators of Effective performance (Effective)** | **Evidence, Notes and Actions** |
| The SMS documentation describes the approach to the management of safety; it is used throughout the organisation and is regularly reviewed and appropriately updated particularly following an event or identification of hazards. |   |
| SMS Documentation is proactively reviewed for improvement and employees are encouraged and participate in suggestions for change.  |   |
| The documentation supports the safety objectives of the organisation, is accessible and effort is made to ensure it is logical and easy to use |   |
| SMS records are routinely used as inputs for safety management related tasks and continuous improvement of the SMS. |   |

# COMPONENT 2SAFETY RISK MANAGEMENT

Includes NZCAA Elements:

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| --- | --- | --- |
| **Element 4** | Hazard Identification  | CAR 100.3(a)(2) / ICAO Annex 19, Appendix 2 – 2.1 |
| **Element 5** | Risk Management  | CAR 100.3(a)(2) / ICAO Annex 19, Appendix 2 – 2.2 |

## 4. Hazard Identification

**Present & Suitable Requirements:** The organisation is required to develop and maintain processes that ensure hazards to aviation safety are identified. Hazard identification should be based on a combination of reactive, proactive and predictive methods of safety data collection.

**Maturity Assessment:**

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| What to look for: |
| * How is it ensured that the reporting system is accessible and easy to use? Are personnel adequately trained to navigate the system, as evidenced by training records?
* How is it ensured that personnel have familiarity with the reporting system? Are employees able to walk through their previous reports and demonstrate understanding of what should be reported, including mandatory reporting requirements?
* Is feedback provided to the reporters? Does the feedback process extend beyond initial submission to include updates on actions taken?
* How is proactive reporting promoted? Is there a clear breakdown of proactive and reactive reports?
* What percentage of reports are submitted anonymously? Does management recognise and act on this as potentially being indicative of a cultural issue?
* How are the volume and quality of reports being assessed – is there clear evidence of self-reporting?
* Does the hazard list encompass a diverse range of hazards, including technical, human, organisational and third party?
* Are hazards sourced from both internal and external channels, such as safety reports, flight data monitoring, audits, investigations and management of change processes?
* How is the analysis, addressing, recording and sharing of hazard information managed? Is this process consistent, and does it engage a broad group of personnel? How are significant hazards communicated?
* How are report closure rates being tracked? Is there an effective mechanism in place to alert management when closures are delayed?
 |
| **Evaluation** | **Indicators of good performance (Operating)** | **Evidence, Notes and Actions**  |
| The reporting system is being used by a range of personnel who have been trained, and there is a feedback mechanism that is operating to the reporter and where appropriate to the rest of the organisation. |   |
| Hazards are identified and documented and there is evidence they are being raised from both reactive and proactive sources.  |   |
| Hazards that are related to human and organisational factors, and those related to specific critical tasks, are being considered. |   |
| Hazards are being raised or updated due to outputs from the wider SMS i.e. audit, investigation, management of change, ERP testing etc. |   |
| Hazard reports are being evaluated, processed, and analysed in a timely manner with a range of personnel involvement where appropriate. |   |
| Inputs and changes to the hazard register are communicated frequently in the organisation via methods such as safety meetings. Significant hazards are communicated immediately and training provided as appropriate. |   |
| The processes are accurately documented and remains suitable for the size, nature, and complexity of the organisation.  |   |
| **Evaluation** | **Indicators of Effective performance (Effective)** | **Evidence, Notes and Actions** |
| There is a healthy reporting culture based on the volume and quality of reports received, and personnel express confidence and trust in the organisation's reporting processes. The reporting system is available for third parties. |   |
| Hazards, including near misses and errors are being identified and reported throughout the organisation and self-reporting is evident.  |   |
| Hazards identified are managed and triaged for how training and comms will apply, with a method to communicate significant hazards and any associated training put into place in the shortest time possible. |   |
| Consistent capture of hazards from the wider SMS is occurring.  |   |
| The organisation involves all key personnel at all levels of the organisation in hazard assessment and involves other key stakeholders including external organisations. |   |
| The organisation is consistently and proactively identifying hazards related to its activities and the operational environment and are using the outputs of the reporting system to make informed management decisions to continuously improve safety. |   |

## 5. Risk Management

**Present & Suitable Requirements:** The organisation is required to develop and maintain processes for risk management that ensures analysis, assessment and control of safety risks.

**Maturity Assessment:**

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| What to look for: |
| * How is it ensured that management are fully aware of medium and high risks? Are they informed about the effectiveness of controls in place, and how do they justify the acceptability of those risks?
* Is the risk management process establishing acceptable risk levels and defining who is responsible for accepting those levels?
* Are personnel involved in risk management trained, do their records demonstrate that?
* Is the risk register actively updated and used? Can it be evidenced that new data from the safety reporting system has resulted in risk level adjustments or modifications to controls?
* How is risk analysis conducted – are different safety perspectives considered when determining likelihood, consequence, resulting risk levels and proposed controls?
* When risk appears to shift from high to low after controls are applied, how it is verified that those risks are being effectively managed? Are there assurance processes that can be demonstrated to show the risk is as well controlled as it is shown to be?
* Is there evidence that new controls are properly implemented and followed up? Is there a structured process for checking whether controls are genuinely reducing risk?
* What methods are in use for the monitoring of the effectiveness of risk controls? Is there a clear focus on significant controls?
* How is As Low as Reasonably Practicable (ALARP) being applied? Is there a continuous process to review this and can it be demonstrated that a risk has been or is being reduced to ALARP?
* Is the risk classification process still suitable for the nature of activity being undertaken? Are consequence and likelihood criteria clearly defined and relevant (aligned with current operations)?
 |
| **Evaluation** | **Indicators of good performance (Operating)** | **Evidence, Notes and Actions**  |
| Management is actively involved in medium and high risks and their mitigation and controls. |   |
| Those agreeing to the "acceptable" level are authorised to do so, the defined risk acceptability is being applied, and people understand the levels they are accepting ownership of. |   |
| Those analysing risk understand and can demonstrate the application of likelihood and consequence criteria in relevance to the activity or situation they are assessing, and risks are showing logical application of the criteria. |   |
| Risk analysis and assessments are carried out in a consistent manner based on the defined process and involve a suitable range of stakeholders. |   |
| Operational, technical, human, and organisational factors are considered as part of the development of risks controls. |   |
| Risk controls are being monitored and checked for effectiveness, where found ineffective action is taken. |   |
| Appropriate risk controls are being applied to reduce the risk to an acceptable level. Various stakeholders participate in the process. |   |
| The risk management processes are documented and remain suitable for the size, nature, and complexity of the organisation. |   |
| **Evaluation** | **Indicators of Effective performance (Effective)** | **Evidence, Notes and Actions** |
| Risk acceptability criteria are used routinely and applied in management decision making processes. These criteria are reviewed regularly to ensure they are relatable to the activity being undertaken.  |   |
| Significant risks are accurately shown in the risk register - where controls are critical these are emphasised and are being monitored in an ongoing basis as critical.  |   |
| Risk controls are developed and monitored by a variety of personnel and expertise as normal practice in the organisation. Controls are practical and sustainable, applied in a timely manner and do not create additional risk |   |
| Risk controls are continually assessed and actions taken to ensure they are effective and delivering a safe service |   |
| The effectiveness of the risks controls is addressed at regular safety meetings and safety review meetings. Where risk controls are found ineffective, the reasons for this are investigated by the organisation  |   |
| Risk analysis and assessments are reviewed for currency and consistency and to identify improvements - the organisation include a variety of personnel and expertise in reviews.  |   |
| Procedures and processes are reviewed to embed risk controls where appropriate. |   |

# COMPONENT 3SAFETY ASSURANCE

Includes NZCAA Elements:

|  |  |  |
| --- | --- | --- |
| **Element 6** | Safety Investigation | CAR 100.3(a)(3)(i) / ICAO Annex 19, Appendix 2 – 3.1 |
| **Element 7** | Monitoring & Measuring Performance | CAR 100.3(a)(3)(ii) / ICAO Annex 19, Appendix 2 – 3.1 |
| **Element 8** | Management of Change | CAR 100.3(a)(2) / ICAO Annex 19, Appendix 2 – 3.2 |
| **Element 9** | Continuous Improvement and Interface Management\* | CAR 100.3(a)(3)(iii) / ICAO Annex 19, Appendix 2 – 3.3 |
| **Element 10** | Internal Audit Programme | CAR 100.3(a)(3)(iii) / ICAO Annex 19, Appendix 2 – 3.3 |
| **Element 11** | Management Review | CAR 100.3(a)(3)(iii) / ICAO Annex 19, Appendix 2 – 3.3 |

\*Interface Management – Interfaces with other organisations and how these are managed can have a significant contribution to safety. These indicators have been added to Element 9 to replace the similar indicators in the 24100/02 referring to “third parties”.

## 6. Safety Investigation

**Present & Suitable Requirements**: The organisation is required to develop and maintain a process to conduct internal safety investigations in response to reported accidents, incidents and hazards for identifying causal factors to establish what went wrong, why, and how to prevent any recurrence.

**Maturity Assessment:**

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| What to look for: |
| * Is the process for assigning investigators clearly defined in the Exposition and can this be evidenced in an investigation that has taken place?
* Are investigations led or supported by qualified subject matter experts when applicable? Are diverse perspectives i.e. operational and technical included in investigation processes?
* Are there documented criteria guiding which events required full investigations? Is this evidenced in samples?
* Are CAA reports submitted on time and consistent with internal reports?
* Is Root Cause Analysis (RCA) applied consistently and effectively? How is it ensured that it produced a reasonable cause for the selected case?
* Is the RCA method suitable for the size, scope and complexity of the organisation? If a reporting platform is used is the use of it and the allocation of cause well understood and trained?
* Have the investigations examined systemic/organisational issues and not just individual accountability?
* Are investigation findings feeding back into the SMS? Are hazards from investigations assessed through the established risk process?
* Are safety actions tracked to completion and escalated if overdue?
* Are investigation outcomes being communicated in the organisation?
* Are investigation records stored in a format suitable for retrieval and analysis?
 |
| **Evaluation** | **Indicators of good performance (Operating)** | **Evidence, Notes and Actions**  |
| Appropriately trained personnel conduct safety investigations. Investigators include input from stakeholders both within the organisation and external if appropriate. |   |
| The criteria for safety investigations are identified and applied (triage of what is to be investigated and to what depth) and these are appropriate to the level of risk. |   |
| Regulatory requirements around mandatory reporting are defined and applied. |   |
| Investigations establish causal/contributing factors (why it happened, not just what happened) and identify human and organisational contributing factors.  |   |
| Outputs of that analyses are fed back into the wider SMS processes, including the safety review. Hazards are being assessed through the risk process. |   |
| Actions are carried out, recorded, and monitored within any defined timescales. Actions resulting from investigation recommendations are communicated appropriately. |   |
| Reports and subsequent investigation outcomes are being stored in a manner that enables data to be captured and analysed. |   |
| The process for safety investigation is documented, matches what is occurring in practice, and remains suitable for the size, nature, and complexity of the organisation. |   |
| **Evaluation** | **Indicators of Effective performance (Effective)** | **Evidence, Notes and Actions** |
| As well as reported incidents and accidents, safety investigations are conducted in response to significant reported hazards, unexplained increases in safety events, proactive reports, and regulatory non-compliance.  |   |
| Regulatory reporting occurs consistently, in a timely manner and reports are detailed and hold appropriate root cause analysis. |   |
| Investigations identify causal/contributing factors that are acted upon AND considered as potential hazards.  |   |
| Resulting interventions address organisational issues, not just focus on individuals.  |   |
| The outcomes of safety investigations are analysed and fed back into the organisation’s SMS, including risk management, safety assurance and safety promotion activities.  |   |
| Required actions resulting from an investigation are being monitored in an ongoing fashion to ensure that actions put in place are effective |   |

## 7. Monitoring and Measuring Performance

**Present & Suitable Requirements:** The organisation is required to develop and maintain the means to verify the safety performance of the organisation and to validate the effectiveness of safety risk controls. The safety performance of the organisation shall be verified in reference to the safety performance indicators and safety performance targets of the SMS.

**Maturity Assessment:**

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| What to look for: |
| * Is management aware of the current safety performance? Can they demonstrate familiarity with recent dashboards? Can they describe the details of what they are measuring and why?
* Are SPIs aligned with the organisation’s key activities, risks, and objectives? Are they based on significant risks rather than what’s easy to measure? Are they relevant?
* Are there clear plans in place to achieve these objectives? Do these plans outline what actions are required, who is responsible, and when completion will occur?
* Are significant risk controls being tracked? If significant compliance issues arise for examples from audit, investigation or reporting - are these reflected in safety measures?
* Are safety objectives communicated effectively throughout the organisation? Are personnel aware of how they contribute to the objectives? Do they know of progress against the objectives? Can this be demonstrated?
* Are safety performance indicators (SPI’S) reviewed regularly? Are they reviewed when applicable outside of the formal review process? Are alerts sent if negative trends are identified?
* Do the formal safety reviews document the monitoring of safety objectives and progress against them?
* Is there evidence of corrective action taken when negative trends in safety performance are identified?
 |
| **Evaluation** | **Indicators of good performance (Operating)** | **Evidence, Notes and Actions**  |
| Management take responsibility for the safety performance of the organisation and can demonstrate their knowledge and how they are informed on that performance. |   |
| Safety objectives are being regularly reviewed, updated, and are communicated throughout the organisation.  |   |
| SPIs are linked to the identified risks and safety objectives of the organisation.  |   |
| The effectiveness of safety risk controls (if not being measured as an SPI) are being discussed during reviews of performance in the organisation. |   |
| They are monitored and analysed for trends and visible to the Safety Review process. They are adjusted when needed. |   |
| Safety goals remain relevant to the organisation and its activities, are understandable and visible and are focused on what is important to measure (Suitable) |   |
| **Evaluation** | **Indicators of Effective performance (Effective)** | **Evidence, Notes and Actions** |
| Achievement of the safety objectives is being planned and monitored by management and action taken to ensure they are being met.  |   |
| Decision making is influenced by outcomes of safety performance measurement where applicable.  |   |
| The data analysis process used in the organisation enables the consistent gathering of relevant safety data.  |   |
| That data is deemed reliable data and is informed by internal and external sources of safety information - including that captured from outputs of the safety management system. |   |
| The organisation is actively mining and analysing this data to gain usable safety information for their setting of safety objectives.  |   |
| The effectiveness of safety risk controls is being measured.  |   |
| SPIs are effectively demonstrating the safety performance of the organisation and the effectiveness of risk controls. Where a risk control is found to be ineffective action is taken. |   |
| Safety objectives are compared with those of any applicable risk profile sector and are considered against the latest relevant safety information available. SPIs are reviewed and regularly updated to ensure they remain relevant.  |   |

## 8. Management of Change

**Present & Suitable Requirements:** The organisation is required to develop and maintain a process to identify changes within the organisation and its operation that may pose a risk to aviation safety. The process should describe the arrangements to ensure safety performance before implementing changes, and to eliminate or modify safety risk controls that are no longer needed or effective.

**Maturity Assessment:**

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| What to look for: |
| * Review a recent MOC. Did the change process begin before the change was implemented, and were MOC outputs used for the decision making?
* Were key stakeholders from relevant departments and external organisations involved in the process?
* Was the hazard identification and risk management process consistent with the process normally used in the organisation?
* Were a wide range of hazards (human, organisational, environmental, technical, third party) considered?
* Were specific transition risks, such as those from new electronic platforms or training changes, considered?
* Were actions from the MOC followed up, and assumptions made later verified for accuracy and effectiveness?
* Evidence how the reasons for the change, and aspects of the change were communicated both externally and internally.
* Were the reasons for change and key aspects clearly communicated both internally and externally?
 |
| **Evaluation** | **Indicators of good performance (Operating)** | **Evidence, Notes and Actions**  |
| The organisation is using the defined change management process to identify whether substantive changes have an impact on safety |   |
| The management of change process begins prior to a significant change being implemented. |   |
| The triggers for when the organisation will use the process are clearly identified and documented and remain suitable for the organisation. |   |
| Any identified hazards and associated risks are managed in accordance with existing safety risk management processes |   |
| Hazard identification considers internal, external, technical, and organisational hazards. Effects of change on humans has also been considered. |   |
| There is a plan to ensure risk controls are put in place before any decision to move ahead with the change is made and these are monitored throughout the change.  |   |
| Change information is relayed to those affected in a timely manner.  |   |
| **Evaluation** | **Indicators of Effective performance (Effective)** | **Evidence, Notes and Actions** |
| The management of change process is proactively 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 the change was implemented safely. |   |
| Safety risks are being managed consistent with the scope and time scale associated with the change.  |   |
| Where change has occurred, review has taken place as to how that change affects the management system in key areas. |   |
| Change and impact to safety-related functions are communicated with other organisations, including internal and external stakeholders |   |
| Risk control and mitigation strategies associated with changes are achieving the planned effect.  |   |
| Risk mitigation actions resulting from management of change are part of the SMS performance monitoring. |   |

## 9. Continuous Improvement of the SMS and Interface Management (new)

**Present & Suitable Requirements**: The organisation is required to develop and maintain a process to identify opportunities to continuously improve its overall safety performance. The additional considerations have been added around Interface Management, previously covered in Element 9 of the 24100/02 third party indicators. Interfaces with other organisations can have a significant contribution to the safety of the organisation’s products or services.

**Maturity Assessment:**

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| What to look for: |
| * Is the information being gathered on safety in the organisation from a variety of sources, including external sources and from across the SMS?
* Are there examples where lessons learned, or best practices have been identified and incorporated into the SMS and into operational processes?
* Have surveys been conducted with staff? If so, have the results been used to drive improvements in the organisation?
* Are interfaces with other departments and external entities (e.g. contractors, customers) identified and documented? Are these reviewed periodically for risk?
* For safety-critical interfaces, does the process for selecting external safety providers consider their alignment with the SMS and potential risks they bring?
* Are hazards associated with interfaces actively managed in the system, with actions like training or safety promotion sessions? Are controls being applied and monitored?
* Do contracts with external organisations that contribute to safety clearly address compliance with safety requirements?
 |
| **Evaluation** | **Indicators of good performance (Operating)** | **Evidence, Notes and Actions**  |
| There is evidence of the SMS being periodically reviewed to assess its effectiveness and where appropriate action is being taken. |   |
| The organisation has a documented list, register or diagram of their safety critical providers |   |
| For safety related services, the SMS of the contracted organisation is interactive with that of the organisation. |   |
| The organisation is managing their interfaces through hazard identification, risk management, and assurance activity, they are assessing risk controls associated with the interface. |   |
| Where appropriate contracts with stakeholders address the safety critical nature of the interface and this is used to feed the hazard and risk process |   |
| **Evaluation** | **Indicators of Effective performance (Effective)** | **Evidence, Notes and Actions** |
| The organisation routinely monitors the SMS performance to identify potential areas of improvement, and the outcomes of this process lead to improvements to its overall safety performance. |   |
| Surveys and assessments of culture are conducted at regular intervals and acted upon.  |   |
| The organisation actively considers the relative criticality of their interfaces and prioritises the management of the more critical ones.  |   |
| The organisation has a good understanding of interface management and there is evidence that the safety critical interface risks are being identified and managed.  |   |
| Interfacing organisations and/or departments are sharing safety information, management of changes and take actions when needed.  |   |
| There is evidence the organisation are conducting training and safety promotion activity with safety critical interfacing parties.  |   |
| The selection process for external service providers supports safety and security standards and objectives. Service providers are selected in consideration of the operator’s SMS |   |

## 10. Internal Audit Programme

**Present & Suitable Requirements**: The organisation is required to develop and maintain a process to conduct internal audits to assess compliance, conformance and system effectiveness.

**Maturity Assessment:**

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| --- |
| What to look for: |
| * Is the audit program up to date and reflective of the current organisation? Are contracted organisations included where appropriate in the programme?
* How is the decision made to postpone or cancel audits? Is this process defined?
* Is the audit programme influenced by outputs from risk management, investigations, training, external findings, change management or ERP testing?
* Are auditors competent and independent from the areas being audited?
* Are risk controls assessed for effectiveness?
* If deficiencies are found, are they assessed through the hazard and risk process?
* Is the method for root cause analysis (RCA) defined in the exposition being used? If an IT platform is being used, is it understood and suitable?
* Are the root cause findings addressing underlying causes, or are they focused on low level issues? Is the category being driven by pre worded IT choices?
* Are corrective and preventive actions (CAPA) tracked effectively, particularly for audit and investigation findings?
* When actions are overdue or not implemented, what steps are being taken to address these issues? What is the escalation process? Are management made aware of overdue actions and are they taking appropriate steps to address them?
 |
| **Evaluation** | **Indicators of good performance (Operating)** | **Evidence, Notes and Actions**  |
| The audit programme is being followed and regularly reviewed. This includes the modification of the programme to address identified risk or organisation and operational changes.  |   |
| Contracted or third-party organisations are considered and included where appropriate in the audit programme. |   |
| Audits are performed by persons competent in auditing skills and techniques who have operational independence of the area being audited. |   |
| Risk controls are being verified to assess whether they are applied and effective. |   |
| During audit, deficiencies detected are linked to the hazard identification process to feed risk management. |   |
| 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 management and staff, and they act on internal and external audit results. |   |
| The process for internal audit is documented, remains suitable for the size, nature and complexity of the organisation and the CEO is ensuring there is sufficient resource to accomplish the programme. |   |
| **Evaluation** | **Indicators of Effective performance (Effective)** | **Evidence, Notes and Actions** |
| The organisation regularly reviews its audit programme and procedures to identify the need for changes and to ensure the programme is influenced by outputs from the SMS and effectively reflects the risks in the business.  |   |
| Risk controls are assessed and actions taken to ensure they are effective and delivering a safe service.  |   |
| The organisation investigates the systemic causes and contributing factors of findings. |   |
| When deficiencies are detected and linked to significant risks to control, the root causes are identified and feed the Hazard Identification and Risk Assessment process.  |   |
| CAPAs are implemented in a timely manner and have ongoing monitoring for effectiveness |   |
| The chief executive and senior management actively seek feedback on the status of internal and external audit activities and take appropriate action where required. |   |
| Significant findings are used in internal safety training & safety promotion sessions and results of audit, root causes and contributing factors are considered when reviewing internal policy and procedures.  |   |

## 11. Management Review

**Present & Suitable Requirements:** The organisation is required to develop and maintain a process to ensure continuing effectiveness of the organisation’s safety processes and procedures, and to assess opportunities for improvement.

**Maturity Assessment:**

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| --- |
| What to look for: |
| * Are Management Review (MR) meetings (or equivalent) being held? Is the frequency as defined in the documented process? If deviations have occurred from the scheduled has this been documented and justified?
* Has the formal agenda been used for the meeting? Did the package for discussion at the meeting reflect that agenda? Are items missing? Does the agenda continue to align with the organisations business, the risks and initiatives of the business?
* Does the Management Review report provide to the CEO a valid and comprehensive picture of safety performance? Question the Safety Manager (or whoever compiles the report) around the decision as to what items are chosen to display to management. Where is the data coming from and is that source a reliable one?
* Is risk being monitored by this review? Is the review providing awareness to the management team of significant risks in the organisation and how effectively these are controlled? Is discussion being held in the meeting around significant risks?
* Are emerging risks and trends being identified and tracked?
* Do the minutes reflect that all the agenda items have been discussed? Have failings, or negative trends, or issues, been identified and documented? Have clearly defined follow up actions been put in place and are these being tracked beyond the meeting for actions and closure? Follow up on some of those actions for completion.
* Is there a complete package of documented evidence of the review? For instance, who attended, the agenda, presentations, meeting minutes, actions (list, owner and timescale, report? Is this documentation being managed and appropriately stored?
* Has the appropriate information from the review been communicated to the wider organisation?
 |
| **Evaluation** | **Indicators of good performance (Operating)** | **Evidence, Notes and Actions**  |
| The organisation is following its established process for conducting management reviews, senior management are involved.  |   |
| Reports used in the review provide a clear picture of the organisation’s safety performance, including how well the SMS is working. These reports are based on data collected via the SMS and include analysis to support informed decision making.  |   |
| Audit results, investigation findings and other assurance activity outputs are reviewed regularly. Where relevant, external information is also considered alongside internal data.  |   |
| Significant risks and the effectiveness of current safety controls are reported on and assessed. |   |
| Safety objectives are reviewed to ensure they remain appropriate. Safety performance indicators are updated when needed.  |   |
| Decisions made during the review process are based on reliable and accurate data. When issues arise – such as negative trends or safety alerts – actions are taken to quickly address them, and these actions are monitored until they are completed |   |
| **Evaluation** | **Indicators of Effective performance (Effective)** | **Evidence, Notes and Actions** |
| The organization is effectively carrying out its safety review function in line with established procedures, ensuring the engagement of key stakeholders. Information used in these reviews is high quality; relevant and aligned with the risk profile.  |   |
| The effectiveness of the SMS is assessed using a broad range of both proactive and reactive data sources. This includes data from critical internal and external interfaces.  |   |
| Safety data analysis is conducted in a consistent and logical manner, with a clear focus on areas that reflect the organization’s actual risk landscape.  |   |
| Progress towards safety objectives is checked during the review, and senior management is directly involved in decision making around actions taken to ensure they are being met. When setting or updating objectives the team consider changes in risk, and the business environment.  |   |
| All review outcomes are formally documented, and any resulting actions are tracked for follow-up and continuous monitoring. Where relevant, outcomes are communicated across the organisation to maintain transparency and engagement.  |   |
| Management demonstrates a strong commitment to improving both the quality and sources of safety data and how it is analysed. They question the data when there is insufficient evidence, and there is evidence of decision making based on data presented to them.  |   |

# COMPONENT 4SAFETY PROMOTION

Includes NZCAA Elements:

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| --- | --- | --- |
| **Element 12** | Safety Training & Competency | CAR 100.3(a)(4) / ICAO Annex 19, Appendix 2 – 4.1 |
| **Element 13** | Communication of Safety Critical Information | CAR 100.3(a)(4) / ICAO Annex 19, Appendix 2 – 4.2 |

## 12. Safety Training and Competency

**Present & Suitable Requirements:** All personnel are trained and competent to fulfil their SMS related duties and the training programme is monitored for effectiveness and updated.

**Maturity Assessment:**

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| What to look for: |
| * Has the SMS training programme been reviewed recently? Is the course content and delivery method suitable for current operational needs?
* Is the training content updated – or is it a repeat of previous years? Consider the value of the content against where the organisation is in respect of the safety system maturity.
* Is there evidence of trainer qualifications and ongoing competency assessments. How is their knowledge being maintained? Are the trainers familiar with operational realities and able to relate content to actual work scenarios?
* Does the training incorporate lessons from external occurrences, investigation reports, safety meetings, hazard reports, audit findings, safety data analysis and training course evaluations etc.
* Are human and organisational factors included in the training?
* Does the training address individual safety duties relevant to specific roles? (may be more applicable to larger organisations)
* Are training records available and complete for personnel files - including management personnel?
* Has the SMS training been delivered as per the programme and properly recorded?
* Is there a process to assess training needs related to safety when personnel change roles?
* Can personnel clearly explain their role in the safety system, their safety duties, and responsibilities.
* Are safety duties and responsibilities communicated to personnel – verify whether this has occurred effectively by questioning personnel.
* Is there a process in place to measure training effectiveness?
* Are improvements made to the training content and delivery based on feedback and performance?
 |
| **Evaluation** | **Indicators of good performance (Operating)** | **Evidence, Notes and Actions** |
| All staff requiring training are identified and training is performed by competent personnel. |   |
| The training programme is delivering appropriate safety training that includes content that reflects outputs from the organisations SMS. |   |
| Where applicable the training covers individual safety duties (including roles, responsibilities, and accountabilities). |   |
| Training material and methodology are adapted to the audience and include Human Performance when relevant. |   |
| There is a process in place to periodically assess the actual competency of personnel against the framework. |   |
| Management and staff can explain their role in the organisation’s SMS and their safety duties and compliance responsibilities |   |
| There is evidence of the process being used and where appropriate training detail being amended and updated based on events occurring both within and external to the organisation. |   |
| **Evaluation** | **Indicators of Effective performance (Effective)** | **Evidence, Notes and Actions** |
| Training is routinely reviewed to take feedback from diverse sources into consideration. |   |
| Outputs from the system for safety management are consistently being considered and included into the training regularly where applicable. |   |
| The training programme is influenced by external interfaces involved in the organisation and external third-party risks.  |   |
| The competence assessments feed into the main training programme and individual’s competency overall. |   |
| The effectiveness of delivered training is assessed by the organisation and where appropriate actions are taken to improve subsequent training. |   |

## 13. Communication of Safety Critical Information

**Present & Suitable Requirements:** The organisation should develop and maintain a process for safety communication that ensures all personnel are fully aware of the SMS, conveys safety critical information, and explains why particular safety actions are taken and why safety procedures are introduced or changed.

**Maturity Assessment:**

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| What to look for: |
| * Evidence the different ways safety information is communicated (e.g., meetings, presentations, emails, website access, newsletters, bulletins, posters).
* Are these methods suitable for how safety is managed in the organisation?
* Are they tailored to the audience and the importance of the message being delivered?
* Are the safety messages clear, simple and easy to understand?
* Speak to management - establish how effective they consider their organisation’s safety communication is, and then do the same with non-management personnel
* Ask about a recent safety message – can the person recall it and explain how they accessed it?
* Confirm that lessons learned, incident details, investigation outcomes and change are shared promptly and with privacy considered.
* Is there evidence that a positive safety culture is being promoted (e.g. encouragement to report, support for just culture)?
* Evidence an example where safety communication was shared with external stakeholders (e.g. customers, suppliers, third parties)
 |
| **Evaluation** | **Indicators of good performance (Operating)** | **Evidence, Notes and Actions**  |
| The means of communication the organisation uses are adapted to the audience and the significance of what is being communicated. |   |
| There is evidence of safety meetings taking place that include key stakeholders, detailing the attendance, discussions, and actions.  |   |
| The outcomes of the meetings are documented and communicated, and any actions are agreed, taken, and followed up in a timely manner. |   |
| Communications such as newsletters and regular updates that are being developed and distributed are evidenced as being read by the appropriate personnel. |   |
| Safety critical information is being identified and communicated throughout the organisation to all personnel, as relevant, including contracted organisations and personnel where appropriate. |   |
| The process continues to determine what, when, and how safety information needs to be communicated (Suitable)  |   |
| **Evaluation** | **Indicators of Effective performance (Effective)** | **Evidence, Notes and Actions** |
| The organisation analyses and communicates safety critical information effectively through a variety of methods to maximise it being understood.  |   |
| Safety communication is assessed to determine how it is being used and understood, and to improve it where appropriate.  |   |
| The promotion of the safety policy and its positive safety culture is visible.  |   |
| Decision making, actions, and communication reflect a positive safety culture and safety leadership demonstrating commitment to the safety policy |   |
| The safety performance and safety objectives are reviewed and actioned as appropriate. |   |

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