Appendix 14-4. Compliance Action Documentation Review Job Aids

This document consolidates the Compliance Action (CA) data reporting requirements found in Volumes 10 and 14. Policy requires documentation of who, what, where, when, and why, including the Root Cause Analysis (RCA), the corrective actions taken (or to be taken), and any necessary followup to validate that the problem is fixed.

Documentation may be recorded in the Safety Assurance System (SAS) Activity Recording (AR), Module 4 Data Collection Tools (DCT), and Module 5, or in Module 5 alone if initially identified by the principal inspector (PI) through Analysis, Assessment, and Action (AAA) or from a source outside of SAS.

For the purpose of this document, the term "deviation" applies to observations of noncompliance and nonconformance. Noncompliance is a conduct that is contrary to a statute, regulation, or order issued under a statute or regulation. Nonconformance, however, is a nonfulfillment of an organization's requirements, policies, and procedures, as well as requirements of safety risk controls developed by the organization (i.e., safety concerns and/or recommendations in the National Airspace System (NAS) where no clear regulatory requirement exists). Refer to FAA Order 8000.72, FAA Integrated Oversight Philosophy, for additional definitions.

> NOTE: The "Compliance Action" action choice in the Action Item Tracking Tool (AITT) uses the term "noncompliance" for various fields within the automation. However, when documenting a nonregulatory concern, the user may consider the term "noncompliance" to mean the same as "nonconformance."

Complex or systemic issues require more details to tell the whole story. For this reason, it is vital to properly trigger, or link if unable to trigger, Regulatory CA records from or to the parent record (e.g., surveillance or investigation activities) that led to the discovery of the deviation.

The following phrases may help you with data consistency and quality across all databases. Although use of the samples below is not mandatory, their use whenever possible promotes consistency and enhances data quality. Modification or additional information may be added to provide a complete and comprehensive report. Note that the term "certificate holder" (CH) has been used below for convenience, but you may refer to any organization or individual.

Investigation: I [*notified* **or** *was notified by*] [*source such as individual, certificate holder (CH) personnel, Air Traffic Control, etc.*] that on [*date*] [*at place* **or** *on flight*] [*identify CH and additional persons involved*] did not comply with [*state the deviation*] when they failed to [*citation statement*]. The FAA became aware on [*date*].

Root Cause Analysis (RCA): This (*deviation)* was due to [*describe the root cause(s)*].

Corrective Action: [*Individual name and CH position, if applicable*] corrected the [*deviation*] when [*state the corrective action and/or refer to attachment if detailed/complex*].

Comments: I used [*additional training, counseling, on-the-spot correction,* **or** *describe other action taken*] to regain [*compliance* **or** *safe operations*]. I [*am* **or** *am not*] satisfied the CH's corrective actions fully address the identified root cause(s) and [*have* **or** *have not*] reestablished [*compliance* **or** *safe operations*]. I recommend [*no further action* **or** *additional followup* **or** *reexamination/reinspection* **or** *enforcement*]. [*Describe actions planned/linked/triggered*].

Documentation Tips		
Use the above statements whenever possible to promote consistency and enhance data quality.	Human error is not a cause. Identify what caused the human to err (e.g., see FAA Dirty Dozen).	Regulatory issues: Request CH's RCA, then validate and document CH and FAA analysis.
SPAS "Good SNAAP Regulations" contain prohibitive/restrictive rules and citation statements.	RCA only needs to be as detailed as the situation warrants (help the CH develop or improve RCA skills).	Reference all communication and items of proof. Upload documents in SAS when appropriate. Use Personally Identifiable Information (PII) carefully and avoid sensitive PII.

The following three job aids may be useful to aviation safety inspectors (ASI), data evaluation program managers (DEPM), Front Line Managers (FLM), and others to make quality records and perform consistent reviews.

SAS Module 4 DCT Compliance Action (CA) Documentation Review Job Aid			
4.0	**Data Collection Tool (DCT) Entries:**	**Notes**	**Reference**
4.1	**Enter data into the common data fields:** Select the Start and End date, enter the Location and the Related/Affiliated Designator.	Enter any *Related/Affiliated Designator if applicable.*	10-5-2-9A
4.2	**Document "Inspector Action Taken" field:**	*Upload and refer to supporting records, pictures, certificates, statements, emails, and letters.* ***Note:*** *Do not upload photographs of airman credentials.* *Create appropriate CA AR records for noncompliance by the airmen or individuals involved.* ***Note:*** *The Pilot's Bill of Rights Act (PBR) requires timely written notifications to airmen for inquiries and investigative purposes.*	10-5-1-9C/D 10-5-2-9A Table 10-5-2A 14-1-2-3D8 14-1-2-7B 14-1-2-9G 14-1-3-7
	• What did you do to communicate the problem to the CH? • Who did you tell? (i.e., Director of Maintenance (DOM), Position Title and Name) • What immediate action(s) did you take to resolve the deviation at the point of discovery? • Document any action taken to notify the principal inspector (PI)? If "PI Alert" was selected, provide reason(s). • If any CA AR was initiated for airmen or individuals involved, enter the full CA AR transmittal ID number (e.g., CAAREA61201512345). • If "Corrected on the Spot" was selected, document ASI action(s).		
4.3	**Select all "Response Details" that apply.**	*If "Other" was selected, provide explanation in the "Supporting Comments" field.*	10-5-2-9A
4.4	**Document additional details in the "Supporting Comments" field:**	The Compliance Program is NOT a means to authorize continued operations in nonconformance or noncompliance. *If "Corrected on the Spot" was selected, document CH's corrective actions observed to stop the deviation."* *Refer to FAA Order 2150.3 (as revised) Chapter 4, Subparagraph 8a, Enforceable Regulations.* *Refer to any uploaded documents when explaining your actions. You may refer within "Supporting Comments" to an uploaded attachment that contains the root cause analysis. This technique is useful to support several related unfavorable answers.*	3-60-2, Para 3-4878 10-5-2-9A Table 10-5-2A 14-1-2-7 14-1-2-9H Order 2150.3
	• Who was involved? • When did the deviation occur? • Where did the deviation occur? • What specific (guidance, safety, manual, regulatory, or statutory) requirement was not met? • What immediate action did the CH take to stop the deviation? *To support PI/CPM manage the CA in Analysis, Assessment, and Action (AAA), prior to closing the DCT, include the following,* ***if known****:* • Why did the deviation occur? • What were the identified hazards and/or ineffective risk controls, including behaviors that led to the deviation? • What were the mitigating and/or corrective actions taken by the CH? • Document coordination with the PI for short- or mid-term follow-up required validation.		
4.5	**Quality Data:**		10-5-3-5C Table 10-5-3A
	Before submitting the DCT for review, the ASI should review the entries to ensure the appropriate amount of data captures the observed activity and is easy to understand (i.e., accurate, complete, consistent, objective, relevant, timely, and valid).		

SAS Module 5 Compliance Action (CA) Documentation Review Job Aid

5.0	Principal Inspector (PI) Analysis, Assessment, and Action (AAA):	Reference
5.1	**ANALYZE:** Review the DCT documented facts, actions, behaviors and any recorded history of noncompliance.	10-6-1-9 14-1-2-7
	Collect More Data? If Yes, add DCT to CAP, AAA Auto-extend, or Return with explanation of what is needed.	
	Data Review Issues? If Yes, Return with detailed explanation of what is needed.	
5.2	**Assessment Determination [See Performance Assessment (PA) and Design Assessment (DA) Determination Tables]** **0G / No Findings, Performance Affirmed:** **PA:** PI should close the assessment. **DA:** PI should close the assessment and approve or accept the program. **1G–7R, Nonregulatory:** **PA/DA for Approved/Accepted Programs:** Considering safety impact and likelihood, the justification should include enough information to support the PI's selection. Action is required. **DA for CH/A's Initial Program Approval/Acceptance or a Change Request to Existing Program:** Justification should include enough information to support the PI's selection. Notify CH/A (Non-acceptance or Disapproval letter with detailed findings and Select Submit). **1G–7R, Regulatory:** **PA (all) or DA to CH's Approved/Accepted Programs:** Considering safety impact and likelihood, the justification should include enough information to support the PI's selection. Action is required. **DA NOTE:** *Determination of safety impact is not intended to predict a specific outcome within a specific timeframe.* **RCA NOTE:** *The assessment determination value alone does not determine the PI action(s). PIs conduct RCA per Section 14-1-2. The results of the RCA and the PI's knowledge of the CH's compliance attitude, safety culture, and ability to take effective corrective actions are used to determine the action(s) required to mitigate the identified risk.*	10-6-1-9 10-6-1-11 Table 10-6-1 A/B/C/D 14-1-2-7 14-1-2-9
5.3	**Add Action(s):** **PA/DA to CH's Approved/Accepted Programs (1G – 7R):** The PI must select one or more actions from Table 10-6-2A and provide action(s) justification to support the assessment determination. **Regulatory:** The PI must select "Compliance Action" or "Initiate 2150.3 ( )" and any associated action(s) to support the assessment determination. **Nonregulatory Safety Concerns:** The PI may add actions for a nonregulatory safety concern or if additional followup is necessary, tracking these actions in the AITT. The PI is encouraged to use the "Compliance Action" action choice but may document the nonconformance using any appropriate actions in the AITT.	10-6-2-9 Table 10-6-2A 14-1-2-7 14-1-2-9
	If "Compliance Action" is selected: Mandatory for regulatory noncompliance and optional for other nonconformance. The regulatory or nonregulatory selection within the action (Under CA Determination) will govern the required fields for action item closure. Within the CA Determination, the PI indicates the likelihood and severity pertaining to the risk being addressed by the CA (which may differ from the overall assessment determination value).	
	If "Notify Certificate Holder" was selected: For transmitting assessment results or findings, see Section 1-3-1, Table 10-6-2A letter descriptions, and Volume 14, Appendix 14-3, Compliance Action Communication/Correspondence Guidelines. See DCT "Inspector Action Taken" field, AITT Sub-Action, or AITT Event for objective evidence.	References at left
	If "Corrected on the Spot" for a regulatory noncompliance was selected in Module 4: If the PI determined the risk of reoccurrence was fully addressed/mitigated at the point of discovery, the PI must still select "Compliance Action", provide justification, and close item in AITT.	10-6-1-9D 10-6-2 10-6-2-9B
	Accepted Aviation Safety Action Program (ASAP) or Voluntary Disclosure Reporting Program (VDRP): Select **"Other"**, do not include any identifying information; add the following statement without the quotations: "***Details related to this action are tracked in the appropriate database which is protected from release under 14 CFR part 193***." ****DO NOT SELECT Compliance Action****	Table 10-6-2A 14-1-1-8 14-1-2-7 14-1-2-9
	If "Initiate 2150.3 ( )" was selected: Justification must support that CH is unwilling or unable to comply, not cooperative in corrective actions, failed to complete agreed-upon corrective actions, or enforcement is required by law.	
5.4	**Review justification statements to ensure they align and support assessment and action choices**	10-6-1-9D 10-6-2-9A

	"Assessment Determination Justification"	"Action(s) Justification"
	The PI must identify any regulatory noncompliance and/or safety concerns, consider safety impact and likelihood of reoccurrence and provide enough information to support their selection.	The PI/CPM must determine the appropriate action(s) and provide justifications for each chosen action.

5.5	**Manage CA:** The PI must document the results of the RCA, the identified hazards or ineffective risk controls, and how the problem was corrected.	10-6-2-9B 14-1-2-9C

	SAS AR Compliance Action (CA) Documentation Review Job Aid **Questions with an asterisk* indicate where a written response to the question must be entered into the record, per Volume 14, Chapter 1, Section 2, as appropriate. All other questions are considerations when creating or reviewing the CA AR.**	**Reference**
1.0	Comments must include a documentation of the facts. Documentation must be clear and stand alone in later history searches, showing the noncompliance stopped and that any fixes put in place to prevent recurrence were effective.	14-1-2-9J
1.1 *	Who was involved with the noncompliance?	14-1-2-7B, 14-1-2-9F1)
1.2 *	What specific regulatory or statutory requirement was not met?	14-1-2-9F4)
1.3 *	When did the noncompliance occur?	14-1-2-9F4)
1.4 *	Where did the noncompliance occur?	14-1-2-9F4)
1.5 *	Why did the noncompliance occur? What are the results of the RCA? What were the identified hazards or ineffective risk controls, including behaviors that led to the noncompliance?	14-1-2-7B 14-1-2-9F4)
1.6 *	What was done to communicate or transfer any nonregulatory concerns or potential risks?	14-1-2-7A1), C1)
2.0	Document FAA action and mitigations/corrective actions taken by the airman/organization.	
2.1 *	What were the mitigations/corrective actions taken by the airman/organization and the FAA?	14-1-2-7C, 14-1-2-9F4)
2.2 *	How was the problem corrected?	14-1-2-7D, 14-1-2-9F4)
2.3	Does the CA AR capture the controls, monitoring, and feedback required to mitigate risks and ensure compliance?	14-1-2-7D, 14-1-2-9F4)
2.4	Is there sufficient information for future review of what the problem was and how it was fixed?	14-1-2-9F4)
3.0	Record of noncompliance in SAS AR and Multiple Records Requirement.	
3.1	Was a CA AR triggered from the primary SAS AR surveillance or investigation activity? If unable to trigger, was the CA AR linked to the primary SAS AR using SAS automation?	14-1-2-9D
3.2	Was the appropriate CA AR activity code (*7** for investigating ASIs or *9** for FAA Safety Team (FAASTeam)) selected for the CA and any triggered follow-up surveillance? Note the follow-up surveillance should not be documented with an additional CA AR but rather with a surveillance (*6**) or other appropriate AR activity code.	14-1-2-9E
3.3	If unable to trigger or otherwise directly link the CA AR to the parent or triggered record(s), was the activity number(s) and transmittal record ID(s) of the parent or triggered record(s) entered into the comment section of the related record with a keyword “907” and opinion code “I”?	14-1-2-9D
3.4	Are nonregulatory concern comments coded separately with keyword “911” and opinion code “I”?	14-1-2-9B
3.5	Is the date of occurrence entered in the comments if different from the start date?	14-1-2-9F4)
4.0	Additional Training and Remedial Training (RT).	
4.1 *	Was the airman’s agreement to participate in RT documented in the Additional Training CA AR record?	14-1-2-9F4)h), 14-3-2-9A
4.2	Was the parent SAS AR record transmittal ID provided to the FAASTeam Program Manager (FPM) and entered in the RT AR record with keyword “907” and opinion code “I”?	14-3-2-9A
4.3	Was the RT AR record triggered from the parent SAS AR record; or was the transmittal ID provided to the referring ASI and entered in the Additional Training CA AR record with keyword “907” and opinion code “I”; or were the records linked in SAS automation?	14-1-2-9F4)h), 14-3-2-9A
4.4	Was the Additional Training CA AR Activity kept open until the RT was completed?	14-1-2-9F4)h), 14-3-2-9A
5.0	Trigger follow-up surveillance activities (only when needed).	
5.1 *	Did the airman/organization complete all corrective action(s) satisfactorily?	14-1-2-7E, 14-1-2-9H
5.2	If the entity failed to complete an agreed-upon action, were the CA AR comments annotated, the CA AR terminated, and an Enforcement Action AR triggered?	14-1-2-9I
5.3	If agreed-upon corrective actions failed to achieve their intended purpose, were additional corrective actions documented in the CA AR or follow-up surveillance record comments?	14-1-2-9H
5.4	When necessary, has the AR record documented any follow-up validation inspection(s) required and been closed after confirming compliance?	14-1-2-9H