

Strategy & Safety Management Directorate
Safety Intelligence & Performance Department

Guidance material on follow-up reports

Final

“The information contained in this report is intended for internal and external communication. Such information is not necessarily definitive, and consequently the Agency cannot be held responsible for any damage resulting from unauthorised use of this information. If you rely on this information for purposes other than its intended use, you assume all risk associated with such use.”



An agency of the European Union

Safety Intelligence & Performance Department

TE.GEN.00400-003 © European Aviation Safety Agency. All rights reserved. ISO9001 Certified.
Proprietary document. Copies are not controlled. Confirm revision status through the EASA-Internet/Intranet.

Page 1 of 5

Guidance material on follow-up reports

	Status	Date
	Final	28/03/2017

Contact name and address for enquiries: IORS@easa.europa.eu
European Aviation Safety Agency
Safety Intelligence & Performance Department
Postfach 10 12 53
50452 Köln
Germany

Information on EASA is available at: www.easa.europa.eu

Authorisation :		
Prepared	Name Certification Directorate/ Propulsion Section (CT4.1) Safety Investigation and Reporting Section (SM1.2)	Date 21/12/2016
Reviewed	EASA IORS Committee	23/03/2017

Report Distribution List:	
1	EASA
2	EASA approved organisations
3	Others as necessary



Table of Contents

Table of Contents.....	3
1 Introduction.....	4
2 Unsafe condition identified?	4



1 Introduction

It was identified that a guidance within the Agency on how the follow-up reports should be generated by the reporting organisations is needed. It was proposed to develop such a guidance on how EASA interprets the requirements stemming from R376/2014 on provision of follow-up reports by reporting organisations to harmonise our approach.

This paper attempts to capture follow-up requirements for Design organisations (and could possibly apply also for POA). It could be used as basis also to align on other organisations, like maintenance organisations, approved training organisations etc.

The main principle is to define that follow-up information on reportable occurrences is required to be transferred only if it has revealed an actual or potential aviation safety risk (Article 13(4) and (5)) and associate this in case of DAH/POA to (potential) Unsafe Conditions.

Guidance will clarify 30 days follow up requirement and final (closure) report.

This item was added for discussion/agreement to the agenda of the IORS CM on February 16, 2017. According to IORS CM Action 2017-1.4 it was reviewed by IORS Committee by 23 March 2017 (one month's time).

It should help EASA DOA colleagues to align the procedures. This will be communicated also via IORS Workshop – planned for June 29, 2017.

2 Unsafe condition identified?

2.1 As long as a potential unsafe condition is not identified – voluntary reporting:

The TC holder can delay the reporting to EASA up to the issuance of the final report and report the occurrence as closed on issue (data exchange). In such cases, no follow-up report shall be submitted. However the report to EASA shall include confirmation and justification that no unsafe condition exists. It is requested that the TC holder provides information on the cause(s) of the occurrence and on the TC holder corrective or preventive actions (if any).

Or

after an initial report was sent, the closure report shall include confirmation and justification that no unsafe condition exists. It is requested that the TC holder provides information on the cause(s) of the occurrence and on the TC holder corrective or preventive actions (if any).

This way of reporting shall not be understood as an accepted deviation to the requirements of 748/2012 and 376/2014. If, at any stage during the course of the investigation, the TC holder identifies that a potential unsafe condition exists, it shall be reported to EASA within 72 hours.

2.2 If a (potential) unsafe condition has been reported – mandatory reporting:

The 30-days follow-up report shall include:



1. The latest TC holder position as to whether the (potential) unsafe condition is confirmed;
2. The occurrence analysis and first investigation results – including cause(s) of occurrence if known;
3. The containment actions that have already been defined and put in place (if any);
4. A risk assessment supporting that the product can be operated safely (see Part 21 GM 21.A.3B(d)(4) Defect correction – Sufficiency of proposed corrective action or relevant DOA procedure) until the corrective actions have been defined and implemented, or until a more refined risk assessment can be provided.

The TC holder may provide this *30-days* follow-up report before 30 days.

And

Organisations are encouraged to provide complete analysis and follow-up as soon as available and, in principle, no later than three months after the occurrence notification, it is recognised that analysing an occurrence may take longer than three months, especially in the event of a complex investigation or where the services of a specialist investigator are required.

The follow up requirements are not intended to jeopardise the quality and thoroughness of an occurrence analysis. It may be detrimental to safety if rushed in order to be completed within the encouraged three months period without properly establishing root cause and determining relevant remedial action.

The final (close-out) report shall include:

1. The final TC holder position as to whether a (potential) unsafe condition exists;
2. The occurrence analysis and final investigation results – including cause(s) of occurrence;
3. The corrective and preventive actions;
4. A risk assessment supporting that these corrective and preventive actions allow the product to be operated safely (refer to Part 21 GM 21.A.3B(d)(4) Defect correction – Sufficiency of proposed corrective action or relevant DOA procedure).

