EASA IMS Manual

MA.IMS.00001-012

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<th>Name</th>
<th>Validation</th>
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<tr>
<td>Prepared by:</td>
<td>Allison KERR</td>
<td>Validated</td>
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<tr>
<td>Verified by:</td>
<td>Annika HAUG</td>
<td>Validated</td>
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<tr>
<td>Reviewed by:</td>
<td>Dominique PERRON</td>
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<td>Approved by:</td>
<td>Annika HAUG</td>
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<tr>
<td>Authorised by:</td>
<td>Patrick KY</td>
<td>Validated</td>
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### Abbreviations / Definitions

<table>
<thead>
<tr>
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<th>Definition</th>
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<tr>
<td>ADR</td>
<td>Aerodromes</td>
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<tr>
<td>AECC</td>
<td>Authority empowered to conclude contracts of employment</td>
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<td>AIR</td>
<td>Air</td>
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<td>AMC</td>
<td>Acceptable Means of Compliance</td>
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<td>ANS</td>
<td>Air Navigation System</td>
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<td>AOC</td>
<td>Air Operator Certificate</td>
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<tr>
<td>ARES</td>
<td>Advanced Records System (electronic document management system)</td>
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<td>ARIS</td>
<td>Architecture of Intergration Information Systems</td>
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<tr>
<td>ATM</td>
<td>Air Traffic Management</td>
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<td>ATO</td>
<td>Approved Training Organisation</td>
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<td>BPM</td>
<td>Business Process Management</td>
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<td>BASA</td>
<td>Bilateral Aviation Safety Agreement</td>
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<td>BCC</td>
<td>Budget Control Committee</td>
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<tr>
<td>CAAR</td>
<td>Consolidated Annual Activity Report</td>
</tr>
<tr>
<td>CAMO</td>
<td>Continuing Airworthiness Management Organisation</td>
</tr>
<tr>
<td>CAT</td>
<td>Commercial Air Transport</td>
</tr>
<tr>
<td>CEOS</td>
<td>Conditions of Employment of Other Servants of the European Union</td>
</tr>
<tr>
<td>CIO</td>
<td>Chief Information Officer Board</td>
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<tr>
<td>CT</td>
<td>Certification Directorate</td>
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<tr>
<td>CIRCABC</td>
<td>Communication and Information Resource Cetnre for Administrations, Businesses and Citizens to collaborate and share information.</td>
</tr>
<tr>
<td>DMS</td>
<td>Document Management System (Sharepoint technology)</td>
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<tr>
<td>EASA</td>
<td>European Union Aviation Safety Agency</td>
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<td>EC</td>
<td>European Commission</td>
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<td>EPAS</td>
<td>European Plan for Aviation Safety</td>
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<td>ED</td>
<td>Executive Director</td>
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<td>ESC</td>
<td>EASA Safety Committee</td>
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<td>EU</td>
<td>European Union</td>
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<td>ED</td>
<td>Executive Director</td>
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<td>FS</td>
<td>Flight Standards Directorate</td>
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<td>FAA</td>
<td>Federal Aviation Administration</td>
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<td>FCL</td>
<td>Flight Crew Licencing</td>
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<td>FSTD</td>
<td>Flight Simulation Training Devices</td>
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<td>GM</td>
<td>Guidance Material</td>
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<td>IAS</td>
<td>Internal Audit Service</td>
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<td>ICF</td>
<td>Internal Control Framework</td>
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<td>ICAO</td>
<td>International Civil Aviation Organisation</td>
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<tr>
<td>IFACI</td>
<td>Institut français de l’audit et du contrôle interne</td>
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<tr>
<td>IIA</td>
<td>Institute of Internal Auditors</td>
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<tr>
<td>IMS</td>
<td>Integrated Management System</td>
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<tr>
<td>ISO</td>
<td>International Organisation for Standardisation</td>
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<tr>
<td>JAA</td>
<td>Joint Aviation Authorities</td>
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<tr>
<td>KPI</td>
<td>Performance Indicator (e.g. KPI – Key Performance Indicator)</td>
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An agency of the European Union

<table>
<thead>
<tr>
<th>MB</th>
<th>Management Board</th>
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<tr>
<td>NAA</td>
<td>National Aviation Authority</td>
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<tr>
<td>OPS</td>
<td>Operations</td>
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<tr>
<td>OSD</td>
<td>Operational Suitability Data</td>
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<td>PAR</td>
<td>Programming and Resources Advisory Board</td>
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<tr>
<td>QE</td>
<td>Qualified Entity</td>
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<tr>
<td>RSD Decision</td>
<td>Resources and Support Director Decision</td>
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<td>SAB</td>
<td>Stakeholder Advisory Body</td>
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<td>SAF A</td>
<td>Safety Assessment of Foreign Aircraft</td>
</tr>
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<td>SARPS</td>
<td>ICAO Standards and Recommended Practices</td>
</tr>
<tr>
<td>SEPIAC</td>
<td>Shared Electronic Platform for Initial Airworthiness Certification. It is designed to structure and improve the exchange of data in a central and secured online platform combining dashboard features.</td>
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<tr>
<td>SINAPSE</td>
<td>SINAPSE is a web communication platform offering tools to promote a better use of expertise in EU policy making and governance (networking of advisory bodies, support to expert groups, ad-hoc /public consultations and e-debates, etc.). It allows the sharing and exchange of documents and information.</td>
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<tr>
<td>SM</td>
<td>Strategy &amp; Safety Management Directorate</td>
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<tr>
<td>SPD</td>
<td>Single Programming Document</td>
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<td>SRM</td>
<td>Safety Risk Management</td>
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<td>SRP</td>
<td>Safety Risk Panel</td>
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<td>SYS</td>
<td>Systemic enablers for Safety Management</td>
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<tr>
<td>WA</td>
<td>Working Arrangement</td>
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## Log of issues

<table>
<thead>
<tr>
<th>Issue</th>
<th>Issue date</th>
<th>Change description</th>
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<tr>
<td>001</td>
<td>26/07/2010</td>
<td>Migration of E.M001-01, update following ISO 9001:2008 pre audit report</td>
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<tr>
<td>003</td>
<td>07/09/2012</td>
<td>Update considering Agency’s changes.</td>
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</table>
| 004   | 12/07/2013 | Update to incorporate changes in the IMS, mainly:  
  - New regulations  
  - Evolution in the implementation of the new remit  
  - Exclusion of the requirement on design & development from the scope of the certificate (previously covered by the rulemaking process)  
  - Impact of changes to the organisation  
  - Editing changes for sake of clarity  
  - Update of reference to quality documents  
  Changes to the previous version have been highlighted in yellow. |
| 005   | 18/10/2013 | Update of the IMS manual:  
  - to replace the declaration of Patrick GOUDOU by the declaration of the new Executive Director Patrick KY  
  - to reflect the changes to the organisation structure  
  - to remove the copy of the last ISO and IFACI certificates |
| 006   | 15/09/2014 | Update of the IMS Manual:  
  - update of abbreviations and definitions  
  - migration in accordance with Convergence project  
  - change of introduction  
  - revision of reference docs and legislative framework  
  - EASA governance scheme  
  - revision of stakeholders  
  - new org structure to include quality management representative  
  - change to ISO certification body  
  - minor changes for four phases of IMS  
  - update of roles and responsibilities to include procedures owner and process designers  
  - update of business continuity and crisis management (incl. crisis communication and plan)  
  - changes in chapter 5 to reflect revised end to end process map and org structure  
  - inclusion of clause 7.2 of ISO 9001:2008 regarding contract review |
| 007   | 08/07/2015 | Update of the IMS Manual:  
  - update of abbreviations and definitions  
  - update of main tasks of the Agency  
  - revision of reference docs and legislative framework  
  - new organisation chart (removal of Internal Audit & Quality Department in chart and references throughout IMS Manual) |
<table>
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<tr>
<th>Doc #</th>
<th>Approval Date</th>
<th>Update of references to ED Decision (following renewal)</th>
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<tr>
<td></td>
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<td>Update to chapter 3, 4 &amp; 6 to reflect migration to Multiannual Programming (MAP) and Multiannual Staffing Plan (MSPP)</td>
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<td></td>
<td></td>
<td>Changes in chapter 5 to reflect revised end to end process map and org structure</td>
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<tr>
<th>008</th>
<th>10/03/2016</th>
<th>Update of the IMS Manual:</th>
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<td></td>
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<td>Amendment to abbreviations / definitions table</td>
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<td>Structuring and update of Chapter 2</td>
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<td>Exclusions (not applicable) – amended to relate to the relevant clauses of the ISO 9001:2015 Standard.</td>
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<td>Removal to references to ED Decision (EDD/2014/147/E Directorate)</td>
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<td>Editorial – Renumbering of paragraphs and removal of references to ISO9001:2008 standard and related footnotes &amp; removal of “Figures” which were no longer relevant.</td>
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<th>Update of the IMS Manual:</th>
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<td></td>
<td>Incorporate Safety Management activities and provisions in accordance with ICAO, Annex 19, Appendix 2, including Safety Risk Management and change management</td>
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<td>Revise Figure 3 – EASA IMS Model – to include change management</td>
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<td>Update of high level organisation chart</td>
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<td></td>
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<td>Replace term quality coordinator with IMS coordinator</td>
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<td>Include Singapore office and update of text for EASA external representation (Chapter 2.3)</td>
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<td>Include European Plan for Aviation Safety (EPAS)</td>
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<td>Revise chapter 4 to reflect the changes in the Business Programming, monitoring and reporting process (introduction of a Single Programming Document (SPD) prescribed by the European Commission.</td>
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<td>Addition of Safety Risk Management (Safety Risk Portfolio) (Chapter 6.7).</td>
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<th>010</th>
<th>25/09/2018</th>
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<td></td>
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<td>Update of EASA Top Level Organisation Structure (Figure 1)</td>
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<td>Reference to Internal Control Standards from European Commission replaced by Internal Control Framework from European Commission and Figure 2 revised</td>
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<td>Update of paragraph 3.2 on change management</td>
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<td>Resource allocation:</td>
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<td></td>
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<td>o Update of paragraphs on training and technical training</td>
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<td>o Introduction of new paragraph on “Health and wellbeing”</td>
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<td>Operations</td>
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<td>o Update of description of processes</td>
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<td>o Clarification of Stakeholder communication and handling of EU sensitive information</td>
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<td>o Addtion of environmental aspects in procurement process</td>
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<tr>
<td>Doc #</td>
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<td>Update of the IMS Manual:</td>
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- Amendment of abbreviations/definitions table  
- Revision of Statutory and Regulatory requirements  
- Update and alignment of responsibilities from the Management Representative and Quality Section to Executive Director (ED) and ED Office with the support of Internal Audit and Assurance Section  
- Amendment Top Level Organisation structure  
- Removal of references to the Communication and Quality Department and Quality Section and reassignment of responsibilities to ED Office and Internal Audit and Assurance Section  
- Update of External Representatives and offices  
- Amendment of powers of Authority as a result of Regulation (EU) 2018/1139, and introduction of RS Decisions  
- Minor changes to HR, training and support policies to facilitate work life balance  
- Update of the role of International Cooperation  
- Update of outsourced tasks and services  
- Inclusion of referenct to Management Board Decision No 06-2018 of June 2018 laying down the guidelines on whistleblowing  
- Minor editorial changes |
| 012   | 05/06/2020    | - Amendment to abbreviations/definitions table  
- Updated to reflect Authority requirements as a result of Regulation (EU) 2018/1139  
- Minor editorial change, throughout to reflect current arrangements.  
*Note: Due to COVID-19 - Amendments prepared with inputs from and in close collaboration with IMS focal points. Approval via, the EASA Management Review as a written procedure, managed via the ExCom initiated 27/04/2020 (with track changes).* |
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**Message from the Executive Director**

The Agency is the European Union Authority for aviation safety. Since its creation in 2004, the Agency has placed safety, excellence and quality at the heart of all activities and is recognised for its competence and level of performance by other European organisations and interested parties.

I want to continue to foster this approach towards excellence, with the aim of strengthening the role and responsibilities of the Agency to become a worldwide reference in aviation. My vision for the Agency is to be the heart of a fully consistent European regulatory and safety system, in complete symbiosis with the European aviation authorities.

I consider the highly qualified staff of EASA as one of its best assets. I, therefore, strongly encourage each staff member to take an active role in the further development of a strong, consistent and efficient organisation. To that end, I promote the synergy between all teams across the Agency, in order to make the best use of our available resources.

This must be supported by a continuous improvement of the Agency’s end-to-end processes, keeping in view common and agreed objectives for all the contributing actors, in line with the expectations of our main stakeholders and of safety management principles.

I strongly believe this is the key to a coherent and effective integrated system at Agency level.

Patrick KY
Executive Director
1. General

1.1. Scope
The Agency has implemented a documented Integrated Management System (IMS) with the aim of effectively supporting the achievement of the Agency’s objectives (e.g., operational, quality and safety) and improve the Agency’s operations.

This manual describes the features and objectives of the IMS.

The Agency:

- intends to demonstrate its ability to consistently provide a service that meets stakeholders’ expectations and applicable regulatory requirements, whilst ultimately contributing to a high level of aviation safety and environmental protection in Europe;
- aims to enhance its operations through the effective application of the system, including processes for continual improvement;
- intends to ensure its compliance to the applicable management standards namely, the EASA Management Standards that were developed by taking into account the requirements of ISO 9001 Standard and the Internal Control Framework of the European Commission; and
- intends to ensure its compliance to the applicable requirements on safety management as per ICAO, Annex 19, Appendix 2.

1.2. Applicability
The contents of this Manual are applicable to all Agency staff located in the headquarters in Cologne or abroad (Brussels, Washington, Montreal, Beijing, Singapore) and to all the Agency processes.

1.3. Document Control
The IMS Manual is issued and controlled by the Executive Director’s Office. It is reviewed on an annual basis and approved by the Executive Director.

1.4. Publication and distribution
The IMS Manual is published in the EASA Business process Modelling tool (ARIS) and on the Agency Intranet and communicated to all staff.

1.5. Complementary information
The IMS Manual is supported by complementary information which is published on the EASA Website (the primary means of communicating with internal and external stakeholders and interested parties) or on the EASA Intranet, which are updated on a regular basis.

The latest version of the IMS Documentation is published in the EASA Business Process Modelling tool (ARIS).
2. The European Union Aviation Safety Agency

2.1. Introduction

EASA became operational on 20 September 2003 and is the centrepiece of the European Union's strategy for aviation safety. Its mission is to provide safe air travel for EU citizens in Europe and worldwide. The Agency develops common safety and environmental rules at the European level.

The main activities of the Agency include development of strategy and safety management at EU level, the development of regulatory material, the certification of aviation products, the oversight of approved organisations and the standardisation of EU Member States.

EASA enjoys technical, financial and legal autonomy to ensure the highest common level of safety protection for EU citizens within the EU and worldwide, to ensure the highest common level of environmental protection, to avoid duplication in the regulatory and certification processes among Member States and to facilitate the creation of an internal EU aviation market.

EASA also plays a leading role within the EU External Aviation Policy: the Agency is a strong counterpart of other Aviation Authorities outside the EU (e.g. USA, Canada, Brazil) and a major contributor to the export of the EU aviation standards worldwide, in order to promote the free movement of EU aeronautical products, professionals and services throughout the world.

2.2. Organisational structure

The Agency is composed of aviation experts and administrators from all EU Member States. The headquarters is in Cologne (Germany) with additional offices in Brussels (Belgium) and 4 representation offices outside the EU: Washington (USA), Montreal (Canada), Beijing (China) and Singapore (Republic of Singapore).

The Agency Organisation Structure is published on the EASA Website and in the Staff Directory on the EASA Intranet.

References:
EASA Website: “the agency” - Agency Organisation structure.
EASA Intranet: “Staff Directory” - Organisation Structure

2.3. EASA External Representatives and other offices

As globalisation advances, civil aviation safety is more and more a cooperative, global, effort. Therefore, EASA places great emphasis on the growing international dimension of its activities. In order to face the challenges of this trend and to make best possible use of all opportunities, EASA is investing a lot of effort into international cooperation, especially with major players on the scene.

One of the practical consequences of this approach was the opening of EASA External Representations in: Washington; Beijing (in 2009); Montreal (in 2011) and Singapore (in 2017).

At the same time it is important that the Agency keeps close contact with European stakeholders and institutions which are typically located in Brussels. For this reason EASA has opened an office in Brussels which facilitates these relationships.
The main purposes of Representations and other offices are to:

- Establish and maintain direct links with the local and regional institutions and civil aviation authorities;
- Represent EASA at official events, meetings and conferences in the region;
- Explain and promote the EASA/EU civil aviation safety system;
- Facilitate the exchange of information, especially safety information;
- Support the implementation of Agreements and Arrangements between the EU or EASA and the local and regional Authorities or Organisations;
- Support EU Industry involved in validation exercises with the local and regional Authorities;
- Support and promote the overall relations, in the aviation domain, with the local and regional Authorities, Industries or Organisations;
- Support EASA staff in their technical interactions with the local and regional Authorities or Organisations.

References:
EASA Website: - “EASA and you” International cooperation explained.

2.4. Statutory & Regulatory Requirements

2.4.1. Regulations


The applicable regulations, implementing rules, as well as, the corresponding Acceptable Means of Compliance (AMC), Guidance Material (GM) and Certification Specifications are published and maintained on the EASA Website.

References:
EASA Website: EASA Regulations

2.4.2. Applicable Standards

The ISO 9001 standards represent an international consensus on good management practices with the aim of ensuring that the organisation can deliver the product or services that meet the stakeholders’ requirements.

The Internal Control Framework (ICF) has been developed by the European Commission and was published in 2017. It is designed to provide reasonable assurance regarding the achievement of five objectives set in the Financial Regulation: (1) effectiveness, efficiency and economy of operations; (2) reliability of reporting; (3) safeguarding of assets and information; (4) prevention, detection, correction and follow-up of fraud and irregularities, and (5) adequate management of the risks relating to the legality and regularity of the underlying transactions, taking into account the multiannual character of programmes as well as the nature of the payments concerned. The aim of the ICF is to adapt controls to the main organisational risks and to focus on the effective implementation of internal control.
In order to avoid overlaps or redundancy, the Agency developed its own management standards, endorsed by the Programming and Resources Advisory Board (PAR) and adopted by the Management Board (MB) taking into account both ISO 9001 Standard and the ICF developed by the Commission.

Figure 1. Applicable Standards

References:
Internal Control Framework (ICF) from the European Commission
ISO 9001 from the International Organisation for Standardisation (ISO)
LI.IMS.00003 - List of EASA Management Standards
EASA MB Decision 16-2019 EASA Financial Regulation

2.4.3. Non-applicable ISO Requirements (Exclusions from ISO 9001 Standard)
ISO 9001:2015 requirement “8.3 Design and development of products and services” has been excluded from the scope of the ISO 9001:2015 re-certification of the Agency in 2019.

2.4.4. Other applicable Standards and Recommended Practices
In pursuit of the strategic priorities, EASA takes a holistic, pro-active and systematic approach to aviation safety. The EASA management system includes the safety management fundamentals and responsibilities, to demonstrate compliance with the applicable Standards and Recommended Practices (SARPs) of ICAO Annex 19, Appendix 2, the Safety Management Systems (SMS) framework.
2.5. EASA’s governance scheme

EASA is an independent Body of the European Union with legal personality and autonomy in legal, administrative, and financial matters. It is accountable to the EASA Member States and the EU institutions. The Executive Director is appointed by the Agency’s Management Board. The Board, which brings together representatives of the Member States and the Commission, is also responsible for the adoption of the Single Programming Document (SPD) which is the translation of EASA’s mission, vision and strategic statements into multi-annual operational activities.

The aviation industry is actively involved in the Agency’s work through the Stakeholder Advisory Body (SAB) and its technical and sectorial committees. SAB is representing industry in the Agency’s Management Board.

Appeal to technical decisions of the Agency, which adversely affect a person or an organisation, may be addressed to the Board of Appeal, established specifically for the purpose. Other decisions may be challenged before the EU Court of Justice.

References:
- EASA Website: “the agency”;
- EASA Member States, Management Board, other EASA Boards.

2.6. Stakeholders

The identification of the Agency’s stakeholders, their needs and their expectations, is a major prerequisite in the achievement of the Agency’s Mission and to support compliance with the ISO standards and the EASA strategy and IMS Policy.

The Agency acts as an Aviation Authority of reference and therefore ensures the highest level of compliance with safety rules and applicable regulatory requirements. Consequently the Agency identifies the community of EU citizens who should benefit from the safest and the most environmentally friendly civil aviation system in the world as the final stakeholder.

The Agency also understands the importance of taking into account the needs and expectations of a variety of actors who have a direct interest in the performance of the Agency for different reasons:

1. The European Parliament and Council of the European Union which approve funding;
2. The European Commission which is assisted by the Agency for those activities which contribute to the benefit and well-being of European citizens, such as rulemaking and standardisation;
3. Industry, which applies for certification and organisation approval tasks which permit them to sell their products and service across Europe using a single certification process;
4. National Aviation Authorities in their role as competent authorities within their Member State for the oversight tasks which are standardised by the Agency;
5. The regulated persons, who are directly affected by the Rulemaking process;
6. Third country regulators which may request Technical cooperation or Working arrangements;
7. ICAO: for proper consideration of relevant ICAO Annexes in the development/amendment of new or existing regulation and their promotion through the Member States and for further co-operation tasks.
2.7. ISO and certification

The EASA Integrated Management System (IMS) is certified to the ISO 9001 Standard by an external Accredited Body. The Agency was first certified in 2010 and follows a 3 year certification cycle with follow-up audits conducted annually.
3. Integrated Management System

3.1. General overview and scope

EASA’s Integrated Management System (IMS) is a single integrated system used by the Agency to manage the totality of its processes, in order to meet its objectives and equitably satisfy the stakeholders.

All Directorates and Departments of the Agency shall organise the planning, tasking, monitoring, checking and continual improvement within the IMS by utilising the tools and methodology set up for it.

The Integrated Management System consists of:

- a planning process that ensures the consistency of all objectives defined across various fields and at various levels [strategic, operational (processes), Directorate, individual];
- sound management of the Agency’s processes to fulfil its missions and meet its legal requirements. Process interactions identified and the necessary documents drafted (e.g., policies, procedures). Process performance is monitored to ensure proper competence, functioning, control and traceability over the processes;
- management of the Agency’s risk and opportunities related to the Agency’s processes and aviation safety risks;
- management of changes, including the management of related risks and opportunities;
- management of adequate resources in line with the objectives, justified accordingly and with the possibility of adaptation in subsequent reviews;
- checks and measurements, including key performance indicators (KPIs), for safety and efficiency, based on data analysis (e.g., safety analysis, stakeholders’ feedback, audits and assessments etc.);
- review of the IMS at planned intervals by the Directors to ensure its continuing suitability, adequacy and effectiveness (Management Review process).

The Executive Director is ultimately responsible and accountable for the implementation of the IMS. The Management and Staff of the Agency and in particular the Process Owners, Procedure Owners, IMS Co-ordinators and Process Designers are responsible for the effective implementation and maintenance of the IMS. The Internal Audit and Assurance Section have the responsibility for the oversight of the system.

As part of its IMS, EASA has to discharge its responsibility as competent authority, and therefore comply with authority requirements in the respective domains: Flight Crew Licencing (FCL) (oversight of Approved Training Organisation (ATO) and Flight Simulation Training Devices (FSTD)); Air Travic Management (ATM); Aerodromes (ADR) (no organisation oversight at present); Operations (OPS) (Air Operator Certificate (AOC)); and Mainentance (Continuing Airworthiness Management Organisation (CAMO)). The FS Director holds the function of senior management of the competent authority and has established an independent compliance monitoring function within FS Directorate.

The Integrated Management System is applicable to all present and future processes performed by the Agency or on behalf of the Agency.
Access to the latest information on the EASA Integrated Management System and “EASA processes” is via the EASA Intranet.

The EASA Integrated Management System is based on four main phases which have a direct influence on the organisation’s efficiency and effectiveness:

**Phase 1 Planning**

The Directors are responsible for defining a vision, policies and strategic objectives consistent with the Agency’s Mission.

The strategic goals/objectives are broken down at directorate, department, section and personal level, covering the safety, operational, quality and financial areas; and taking into account stakeholders’ needs, regulatory requirements, potential risks and opportunities as well as the environment in which the Agency acts.

In addition, a high level Risk Assessment exercise is performed at Agency level. The results of this risk assessment are taken into account in order to properly manage and mitigate risks. The most critical risks in the risk register are included in the EASA Single Programming Document (which includes the Multi-annual objectives, Multi-annual work programme, the Financial and Human resources outlook and the annual work programme) and the status of the related mitigating actions is reported in the corresponding Consolidated Annual Activity Report (CAAR).
Phase 2 Process implementation

All staff carry out specific operations in their own field of competence.

These end-to-end processes are performed in a controlled way to meet with the applicable requirements and stakeholder expectations:

- They have been identified and Process Owners have been nominated;
- Process goals and risks have been identified by Process Owners;
- They have been analysed and described properly by means of Quality Documentation, while ensuring that they comply with the applicable regulatory requirements;
- They are documented via appropriate records;
- They are monitored through proper KPIs and key control points related to process goals and risks;
- Necessary preventative and corrective actions are taken for continual improvement.

Phase 3 Analysis & Measurement

For the third step “analysis & measurement”, specific methods have been identified to assess, monitor and measure how the Agency is performing and fulfilling its mission and objectives:

- **Performance measurement of processes through Performance Indicators (PIs):** The PIs are linked to the Agency’s objectives as defined in the EASA Single Programming Document (SPD). The final status of the Agency’s objectives is reported in the Agency Consolidated Annual Activity Report (CAAR) of the corresponding year.

- **Analysis of stakeholders’ feedback:** A number of vehicles are used to obtain, gather and analyse feedback from stakeholders. Formal feedback is obtained using questionnaires. The questionnaires are designed and tailored to obtain feedback from external and/or Internal stakeholders on the effectiveness of processes, meetings or services. The feedback received is analysed Process Owner (and procedure owner(s) as appropriate) for consideration and identification of improvement actions. In addition, spontaneous feedback is collected during operational meetings with stakeholders, during conferences/events or by mail/emails received.

- **Safety analysis:** Aviation safety issues (occurrence reporting, results of accident investigations, safety recommendations) are regularly reviewed and discussed by the EASA Safety Committee (ESC). Some safety issues may therefore have an impact on how the Agency is organised and contribute directly to the identification of priorities and objectives at Agency level.

- **Formal process assessment by Process Owners:** With continuous improvement in mind, Processes Owners perform, with the support of the Internal Audit and Assurance Section, a formal assessment of their process for efficiency, risks and opportunities, at least once every three years. Based on the result of this assessment, process improvements and new risk mitigating actions may be implemented.

- **Internal audit:** An internal audit capability is in place through internal audits performed by the Internal Audit Service (IAS) and the Internal Audit and Assurance section.

- **Compliance monitoring function:** This function resides within the FS Directorate and checks the compliance with applicable authority requirements where EASA is the competent authority. The results are reported to the FS Director.

- **External audits:** The Agency is subject to external audits. The Internal Audit and Assurance section is responsible for the coordination of all external audits. Relevant findings will be used as an input for improvement.

- **Analysis of exceptions (non-conformities):** Under exceptional circumstances, deviation from established regulations, policies and procedures can be authorised by the relevant parties, on justified and documented grounds.
The outcome of the CHECK phase may lead to specific corrective/preventive/improvement action plans which contribute to the improvement of the EASA Integrated Management System.

Phase 4 Review & improvement

This fourth step “review & improvement” consists of reviewing the EASA IMS for improvement on the basis of the outcomes of the CHECK phase. This is achieved through the following:

1. EASA IMS related actions follow-up: regular status of actions are reported to management.
2. Management Review meetings: the aim of this meeting is to assess the EASA IMS based on the data from previous phases.
3. In terms of safety management accountability, the EASA Safety Committee (ESC) acts as Safety Review Board and decides on the tolerability of safety risks and confirms risk mitigation actions based on proposals from the Safety Risk Panel and the operational EASA departments. The ESC also decides on any action aiming at improvement of safety management related policies and processes.

The outcome of the ACT phase is the (re-)definition of the actions for improvement of the EASA IMS and its processes.

3.2. Change management

Change Management Principles must be applied as soon as a change affects the organisation or the staff. Such a change may concern individuals, sections, departments or the whole organisation.

In EASA, this may include but is not restricted to the following internal or external changes:
- Political changes impacting EASA priorities;
- Change in EASA strategy;
- Extension of EASA remit;
- Change in applicable regulations;
- Decision to take up activities in new areas;
- Changes in the core processes of EASA;
- Changes in contracting of services in the core processes, where EASA acts as the competent authority;
- Organisational changes;
- Technological changes affecting the Agency’s capability to support emerging industry needs;
- Changes in aviation industry affecting the Agency’s workload (contracting, increase);
- Changes affecting the EU institutions or at EASA Member State level that may impact the EASA governance scheme.

The related methodology and training include the need to:
- Identify the need for change;
- Assess the risks and/or opportunities and impact of change;
- Communicate the need for change;
- Create positive dynamics for implementation;
- Make the change effective;
- Consolidate and evaluate the change.
3.3. Management commitment

By approving this IMS Manual, the Executive Director clearly expresses his commitment to support, implement, maintain, and continuously develop the Integrated Management System. This involvement is confirmed on the occasion of Management Review meetings which take place at least once per year and through the validation of all the Agency wide policies by the Executive Director.

3.4. EASA Strategy and IMS policy

The EASA Strategy and IMS policy is defined in document PO.IMS.00002 and is communicated to all staff via the EASA Intranet. This Policy is periodically reviewed and revalidated as part of the Management Review process.

References:

PO.IMS.00002 – EASA Strategy and IMS policy

3.5. Responsibility and authority

The Executive Director is accountable to the Management Board and responsible for the management of the Agency according to Regulation (EU) 2018/1139 Art 104. He delegates his powers in line with the provisions of the Basic Regulation via specific ED Decisions.

The responsibilities of each staff member have been described and communicated via job descriptions.

Directors are responsible for the definition of annual objectives at Agency and Directorate level. Each Director is therefore responsible for the definition of the annual objectives in their respective areas of responsibility.

3.6. The Executive Director’s Office

The Executive Director’s Office is responsible for providing the framework and methods for implementation of the IMS:

- ensuring that processes are established, implemented and maintained;
- ensuring that the IMS complies with the relevant statutory, regulatory and applicable Safety Standards and Recommended Practices (SARPs) (including the EASA Management Standards);
- reporting to the Directors on the performance of the IMS and any need for changes or improvement;
- ensuring the promotion of awareness of stakeholder requirements throughout the Agency.

3.7. Process owners

Process Owners are accountable for the overall performance, management of risks, opportunities and improvement of and necessary changes related to the process under their ownership, even if some parts of the process are performed, at sub process or activity level, by a team which is not under their managerial responsibility. Process Owners are supported by nominated Process Designers in ensuring consistency and adequate modelling of their processes.

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3.8. Procedure Owner

The procedure owner is a person directly involved in the process, who is able to provide the Process Owner with all the information needed about the process or sub-processes to define and manage the process. The person is not necessarily a manager but needs to have a complete overview of the procedure and related interfaces. The procedure owner may be requested by the process owner to support the definition and monitoring of their part of the end to end process.

3.9. IMS Coordinators

IMS Coordinators are the interface between the Internal Audit and Assurance Section and their respective Directorates or Departments. Their main task is to contribute to implement and maintain an efficient IMS and to facilitate achieving and maintaining compliance to the EASA Management Standards.

3.10. Process Designers

The Process Designers are responsible for the design of the process they are in charge of, in coordination with the Process Owner, using the Agency Process Business Modelling tool.

3.11. Internal Audit and Assurance Section

The Internal Audit and Assurance Section has the responsibility for the oversight of the IMS and for providing opinions on the level of compliance/implementation/risks/opportunities. In addition, the Section provides support to the Executive Director in the preparation for the ISO Certification audits.

3.12. Internal communication

Communication on the IMS is ensured within the internal communication framework namely:

- Intranet
- EASA website
- News summaries
- Newsletters
- IMS Coordinators
- Safety Management Steering Committee meetings and related communication
- Internal meetings
- ED presentations at all staff meetings
- ED decisions
- RSD Decisions
- ED emails or announcements to all staff
- ED participation in Directorate and department meetings
- Middle management communication with staff
3.13. Documents and records

The main activities of the Agency are described and recorded in a wide range of documents. It is, therefore, of strategic importance that specific requirements are defined and documented to control the different types of documents in order to ensure that the appropriate information is available whenever needed and to prevent the inadvertent use of invalid information.

Such requirements are provided within:

- Internal reference documents;
- External reference documents;
- ARES (electronic document management system);
- Document Management System (DMS).

3.13.1. Internal reference documents

3.13.1.1. Quality documents

Quality documents are defined as all those documents produced internally to provide guidance and instructions on how activities are to be performed. These documents are managed according to the dedicated Work Instruction on Quality Documents, which defines the general rules.

![Figure 3. Overview of Quality documentation structure](image)

References:
WL.IMS.00033 - Quality documents management Work Instruction
The systematic monitoring of the use of these Quality Documents and corresponding rules ensures consistency and transparency of the Agency activities, standardisation and rationalisation.

A Business Process Management (BPM) platform has been established to allow the effective management of processes and all its associated Quality documentation.

### 3.13.1.2. MB Decisions and ED Decisions

In addition to the Quality documents, other reference documents can directly affect the Agency’s IMS in view of ensuring that the Agency’s processes are managed effectively and efficiently, for example:

- **MB Decisions**, which records the decisions made by the Management Board of the Agency;
- **ED Decisions**, which records the decisions made by the Executive Director of the Agency. The powers of the Authority empowered to conclude contracts of employment (AECC) conferred by the Staff Regulations and Conditions of Employment of Other Servants of the European Union (CEOS) have been delegated by the Management Board to the ED. Therefore, decisions on the daily management of the Agency and in particular on individual staff matters are taken either by the ED, in the capacity of the AECC or the temporary agent(s) to whom those powers have been subdelegated.

The control and approval of these documents is managed independently within each process through specific procedures.

**References:**
- PR.PLAN.00032 - Management Board coordination procedure
- EASA Intranet – EDD Decisions
- EASA website – The Agency - Management Board page

### 3.13.2. External reference documents

External reference documents are defined as all documents produced externally to provide guidance and instructions on how all activities are to be performed (e.g. EU Regulations, ICAO Standards, Technical Standards, ISO, FAA, etc.).

Access to these documents is ensured through an updated source database.

**References:**
- EUR lex website
- EASA Intranet - Technical Standards Library

### 3.13.3. Mail

All incoming and outgoing mail (technical, administrative...) is managed with “ARES” software system, unless specified differently in the Work Instruction on mail attribution and registration rules.

All the details and responsibilities are described in the in the referenced procedures below.

**References:**
- PR.IMS.00021 - Centralised mail registration and dispatch procedure
- WI.IMS.00022 – Mail attribution and registration rules
3.13.4. Records management

A “record” is defined as an information whatever its medium, created, received and maintained as evidence by EASA, in pursuance of its legal obligations or in the transaction of its business.

The objective of the Records Management process is to establish record management principles in accordance with relevant legislative and regulatory requirements, standards and best practices and to ensure that records are properly created, managed and disposed in the interest of corporate accountability, orderly administration and memory.

Records contain information that is a valuable resource and an important business asset.

The Agency shall manage authentic, reliable and usable records capable of supporting business functions as long as they are required. This implies that:

- Records are proven to be what they purport to be (authenticity);
- Records contents can be trusted as a full and accurate representation of the transaction activities or facts to which they attest (reliability);
- Records are proven to be complete and unaltered (integrity);
- Records can be located, retrieved, presented and interpreted as directly connected to the activity or transaction that produced it (usability).

References:
- PO.IMS.00018 - Documents and records management policy
- PO.IMS.00019 – EASA Policy on Information Security classification
- PO.IMS.00118 – Use of electronic documents and electronic identification means
- PR.IMS.00020 - Documents and records management procedure
- WI.IMS.00023 – Documents and records management work instruction
- WI.IMS.00026 – Instructions for paper records archive management work instruction
- WI.IMS.00120 – Information Security risk assessment methodology work instruction
4. Agency Programming

The Agency has set up a programming process that enables it to translate the mission, vision and strategic statements, as well as risk factors, both at strategic and operational levels, into activities.

4.1. Business Programming and reporting cycles

The Business Programming process consists of a number of activities that are carried out within different timeframes. The planning cycle and associated documents are shown in the table below:

<table>
<thead>
<tr>
<th>Document</th>
<th>Period covered</th>
<th>Reviewed /Updated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strategic elements</td>
<td>Five years</td>
<td>Every year</td>
</tr>
<tr>
<td>Single Programming Document (SPD)</td>
<td>Three years</td>
<td>Every year</td>
</tr>
<tr>
<td>Multiannual Programming</td>
<td>Three years</td>
<td>Every Year</td>
</tr>
<tr>
<td>Resources – Human and Financial</td>
<td>Three years</td>
<td>Every year</td>
</tr>
<tr>
<td>Annual programme of work</td>
<td>One year</td>
<td>Every Year</td>
</tr>
<tr>
<td>Budget</td>
<td>One year</td>
<td>Every Year</td>
</tr>
<tr>
<td>Consolidated Annual Activity Report</td>
<td>One year</td>
<td>Every Year</td>
</tr>
</tbody>
</table>

4.1.1. Strategy

The Strategy represents the long term guideline for the organisation and sets out the framework for all Agency’s policies including the Strategy and IMS Policy.

4.1.2. Single Programming Document

The business programming process starts with a Strategic workshop with the Agency’s Directors and culminates in the publication of a Single Programming Document (SPD). The SPD comprises of the following elements:

- Vision & Mission;
- Strategic Plan (Strategic Statements, objectives and related actions);
- Multi-annual work programme;
- Resource Plans (human and financial);
- Work programme. This document provides a clear view of the Agency’s objectives, activities, expected output, performance indicators, risks and resources on an annual basis;
- Annexes including: the resource plans (human and financial) and risk register.

4.1.3. Risk analysis

The Agency analyses risks and opportunities in relation to the achievement of its strategic objectives and core processes on an annual basis. This analysis triggers specific actions to mitigate the critical risks that the Agency is facing. Both critical risks and specific actions are listed in the Work programme covering the current year.

4.1.4. Budget

The Budget is the instrument which, for each financial year (1 January to 31 December), forecasts and authorises the revenue and expenditure considered as necessary for the Agency.
Resources to implement the Agency’s processes are decided at Management Board level, subject to the final adoption by the Budgetary Authority (European Parliament and Council of the European Union), which ultimately decides on the Agency’s budget and establishment plan in the frame of the general EU budget.

4.1.5. Consolidated Annual Activity Report

On a yearly basis the Agency reports on the work done the previous year taking into account the objectives defined in the annual programme of work. The report provides a clear view of the achievement of the Agency’s objectives.

References:
EASA website - Management Board page
PR.PLAN.00033 – Annual Activity Report procedure

4.2. Safety Programming

The Safety Programmes include the Rulemaking Programme (RMP) and the European Plan for Aviation Safety (EPAS). The responsibility for the programming process is centralized as part of the planning cycle. The responsibility of the technical content of the Safety Programmes lies with the respective operational departments.

The safety part of the integrated programme is extracted and formatted for final endorsement: the final version of the EPAS is presented to the Management Board for endorsement; the RMP is submitted as an annex to the Agency’s SPD for written consultation with the Management Board, and then adopted by ED Decision.

References:
EASA website - Management Board page
PR.SFPRG.00001 – Safety Programming and Monitoring

4.3. Resource allocation

The identification of resources needed is an integral part of the Strategy, Business Programming and Reporting process. At a lower level, risk based allocation of resources is defined at the level of the relevant process.

References:
PR.PLAN.00009 – Budget preparation procedure

4.3.1. Human Resources

As an authority of reference, the Agency recruits and maintains highly qualified and experienced staff. It provides for a work environment and culture that encourages all staff to develop their potential and to pursue quality and continual improvement at the work place.

The Agency operates according to specific processes developed in full compliance with the requirements of the EU Staff Regulation.

References:
EASA Intranet – Human Resources
PO.HR.00001 - Policy on Human Resources
PO.HR.00119 – Policy on Sensitive Functions
PO.HR.00180 – Policy on Code of conduct for the Staff of EASA
4.3.1.1. Recruitment
The main purpose is to recruit the most suitable candidate for each vacant post in accordance with applicable requirements. The selection criteria for each and every post are defined in the dedicated Vacancy Notice according to the needs identified for the post.

References:
EASA Intranet – Human Resources
PO.HR.00001 - Policy on Human Resources
PO.HR.00119 – Policy on Sensitive Functions
PR.HR.00002 - HR recruitment procedure

4.3.1.2. Administration and services
The main objective of the Administration and services process is the establishment of individual rights and to ensure that each staff member has a complete and up-to-date formal record, and receives the correct entitlements in accordance with the statutory framework.

References:
EASA Intranet – Human Resources
PR.HR.00004 - Payroll management procedure
PR.HR.00005 - Employment contract management procedure

4.3.1.3. Competency, management and development
The main objective of the Competency, management and development process is to develop career and competencies in order to maintain and enhance qualification and skills.

The EASA job family framework, is an integrated approach to Development and Career Management. The job family structure reflects the EASA processes and the way EASA management sees the organisation. The job families represents groupings of jobs with a common purpose. The jobs within one family are similar in terms of type of work, applied capabilities and delivered output. There is also a continuum of knowledge, skills and competencies (seniority levels) that represent a career path from the lowest to the highest job level.

References:
EASA Intranet – Human Resources

4.3.1.3.1. Training
The training of personnel is considered fundamental in order to maintain and continuously develop the required competencies and professional expertise. EASA applies a competency-based approach to training. For each Agency staff member, training needs are reviewed during the performance appraisal exercise. The Agency manages two main types of training:

General Training
The Management & Development Section of the Human Resources Department is responsible for organising and implementing the General Training which includes comprehensive learning and development offers on a number of topics: training when entering into service (newcomers), language courses, IT training, financial and procurement training, soft skills, intercultural awareness, management skills, “EU affairs“ seminars, and other areas based on identified business needs.
Technical Training

Technical Training focuses on the aviation training areas of technical expertise, certificates and licences, techniques, regulatory framework and IMS including processes where the application of the knowledge and the competences gained as a result of this training has a direct influence on the performance of the Agency’s core activities. The target audience is EASA staff, staff of National Aviation Authorities and Aviation Organisations. In the case of EASA staff, the technical training services are provided on the basis of an annual training plan and training programmes by job profile which are maintained on a yearly basis as a reference for initial and recurrent training.

References:
- PO.TT.00155 – Technical training policy
- PR.TT.00002 - Technical training procedure
- EASA Intranet - Technical Training page
- EASA Intranet – EASA Learning Gateway

4.3.1.3.2. Competence and Staff performance

Individual objectives are assigned to the staff on an annual basis. These objectives are consistent with the objectives defined at Agency and department level each year.

The staff performance is evaluated annually against these objectives within the performance appraisal exercise, which includes the identification of development goals for each staff member.

References:
- EASA Intranet – Human Resources
4.3.2. Sensitive functions and segregation of duties

As a public body, the Agency is accountable to the European institutions and the public on the correct use of financial resources and must provide confidence in its ability to prevent any fraudulent activity.

On the basis of this principle the Agency has implemented 2 specific measures:

- Implementation of a sensitive functions policy in order to identify the staff members who are required to carry out functions involving a considerable amount of autonomy or executive power, implying a risk that such powers may be misused for personal gain (financial or otherwise).
- Application of segregation of duties in the financial domain in order to prevent any risk of conflict of interest.

References:
EASA MB Decision16-2019 – Adopting the revised Financial Regulation of the Agency
PO.HR.00119 – Policy on Sensitive Functions
LI.HR.00165 - List of sensitive functions
PO.HR.00180 – Policy on the Code of conduct for the staff of EASA

4.3.3. Health and wellbeing

EASA staff are key to achieving the Agencies objectives and meeting stakeholders’ expectations. The wellbeing of EASA staff members is a priority for the senior management.

4.3.3.1. Support from Human Resources Department

The HR Department has implemented various policies (part-time, flexitime, teleworking) facilitating the work-life balance and therefore contributing to improve the well-being of EASA Staff members as well as having established a number of additional measures:

- Joint Sickness Insurance Scheme (JSIS);
- Annual medical check-up;
- EASA medical advisor for occupational medicine;
- EASA medical advisor for leave and absences;
- Advice published in the intranet pages regarding healthcare in Germany, transfer of family health insurance and private top-up cover;
- Vaccinations for staff going on mission and yearly influenza campaign;
- Computer glasses.

4.3.3.2. Confidential Counsellors

The Executive Director has selected and appointed a network of EASA staff members as Confidential Counsellors. The Confidential Counsellors have been specifically trained to carry out this task, in complete confidentiality during working hours.

The Confidential Counsellors work together with any staff members requesting their assistance to find solutions for difficult situations they face at work, such as psychological or sexual harassment or conflict with colleagues.
4.3.4. Infrastructures and work environment

Infrastructure and work environment are dealt with by the Corporate Services and Information Technology support processes which cover facilities, premises and logistics, information services and security.

The necessary infrastructures are determined, supplied and maintained in order to take into account the applicable health and safety regulations, the staff support needs and the accomplishment of the Agency objectives.

The Agency offers:

- Suitable work spaces;
- Availability of software and office automation devices;
- Support services for travel organisation and management;
- Suitable environment conditions;
- Fire safety measures, evacuation and first aid coordination;
- Information to all staff about safety issues in the building.

References:
EASA Intranet – Corporate Services Intranet page
EASA Intranet – Information Technology page
PO.FACIL.00013 - Occupational Health and Safety Policy
PO.FACIL.00023 – Video-surveillance policy
PO.FACIL.00034 – Physical Security policy
PO.FACIL.00035 – Meeting catering policy
PO.FACIL.00036 – Parking Policy
PO.IS.00052 – Allocation and acceptable use of IT equipment policy
PO.TRAV.00027 – Missions and authorised travel policy

4.3.5. Business continuity

Due to its key role in the European Union’s strategy for civil aviation safety in Europe, and as it carries out specific regulatory, monitoring and execution of tasks, the Agency must be in a position to effectively respond to different kinds of events affecting its operation or reputation, without introducing additional risks. To describe the system in place, EASA has a business continuity policy and business continuity plans for critical processes that focus on the continuity of operations in case of disaster. Those plans also address the transition back to normal operations.

References:
PO.PLAN.00041 – Business Continuity Management

4.3.6. Emergency Management

In the event of an emergency in the field of aviation safety or impacting EASA as an organisation, an emergency team, established by the Executive Director, is in charge of setting up an action plan with resources needed and to monitor the reaction of the Agency to the emergency.
5. Operations

5.1. General

The Agency developed a top down and transversal approach identifying and describing the processes in the following documents:

- End to end process mapping with the overall picture of the Agency processes’ outputs and Stakeholders (General description level).
- General list of the Agency’s processes and process owners (General description level).
- Operational procedures with procedure owners and detailed duties and responsibilities (Detailed working level).

5.1.1. EASA Process map

The Agency has identified 4 main categories of processes:

- **Corporate processes**: These processes ensure the effective and efficient implementation of the core processes and contribute to the objective to let the Agency speak with one voice, by fostering the culture and identity of one agency and creating a customer orientated administrative function via communication, legal, audit and quality management;

- **Strategy and Programme Processes**: These processes contribute to the implementation of the operational processes via appropriate strategy, programming, monitoring and reporting including Safety intelligence, performance; safety risk management, and technical and safety advice.

- **Core processes**: These processes are related to the mission of the Agency as defined in the Basic Regulation and described in Chapter 5.1.4 of this manual.

- **Support processes**: These processes ensure the effective and efficient implementation of the above processes via administrative, financial, logistic, and operational support.

References:
LI.IMS.00004 - EASA Process map

5.1.2. Process list and process owners

The general end to end process map has been streamlined into a list of processes and sub processes. Process Owners have been identified at Level 1 and Procedure Owners at Level 3. The general responsibilities of the process and procedure owners are defined in Chapter 3 of this manual.

References:
LI.IMS.00004 - EASA Process map

5.1.3. Process documentation

In the framework of the IMS documentation, the Agency has drafted Quality documents (procedures, work instructions, etc.) in order to document specific activities and responsibilities for the correct implementation of each process.

The Process Owner with the support of procedure owners, process designers, IMS coordinators and the Internal Audit and Assurance Section shall ensure that each quality document takes into account the regulatory framework, the need of controls and check points where requested, and the eventual need for records to provide evidence of the work performed.
5.1.4. Description of EASA Core processes

5.1.4.1. Development of regulatory material

The development of regulatory material consists in issuing:

- Opinions which are recommendations to the European Commission for extending or changing the legislative framework
- Agency decisions (Certification Specifications, Acceptable Means of Compliance and Guidance Material) aimed at facilitating the implementation and understanding of applicable legislation.

5.1.4.2. Standardisation

The Standardisation process involves the safety oversight of Member States ensuring that the standardisation inspections of National Aviation Authorities are carried out effectively and in accordance with the relevant regulations.

The primary objectives are:

- Conduct standardisation inspections of NAAs in the domains of the implementing rules that are within the remit of the Agency (AIR, FCL, OPS, RAMP, ATM/ANS, ADR and SYS);
- Conduct standardisation inspections of ex-JAA (non-EASA) NAAs in the domains listed above
- Provide central management, data analysis and standardisation inspections for all EU and non-EU ECAC states involved in the Community Safety Assessment of Foreign Aircraft (SAFA) programme.

5.1.4.3. Product safety oversight

The Product safety oversight process contributes to a safe and environmentally friendly aviation system by:

- investigating the airworthiness of new type designs and granting certificates to products and parts including the operational certification of the products through Operational Suitability Data (OSD);
- performing safety oversight over approved products and parts ensuring their continuing airworthiness during the complete life cycle;
- taking corrective and preventive actions by means of Airworthiness Directives.

5.1.4.4. Organisational approval

Since the creation of the Agency, EASA has been responsible for the oversight, including the initial approval and continuous oversight, of organisations responsible for production, maintenance, maintenance training and continuing airworthiness management located outside the territory of the EU Member States, and design organisations wherever located. Following the first (2008) and second (2009) extensions of EASA’s scope of responsibilities, the Agency took over the approval and continuous oversight of pan-European and third-country air navigation service providers in 2011, and the oversight of non-EU air crew training organisations and aeromedical centres in April 2012.

In addition, EASA approves and/or oversees organisations located in one or more Member States, when so requested by the Member State(s) concerned (Article 64 of the Basic Regulation) or by the organisations under conditions (Article 65 of the Basic Regulation). As a consequence EASA will take the responsibility for the oversight of some EU AOC, on request.

5.1.4.5. International cooperation

Through its international cooperation activities, the Agency works with third country aviation authorities and other international partners worldwide to raise global aviation safety standards and to promote the European standards, policies and technology, in order to also provide a more compatible and open market for the EU aviation industry.
- EASA provides technical assistance to countries and regions and helps to improve the regulatory and oversight capabilities of national and regional aviation authorities. To this end, EASA develops and implements mainly EU funded civil aviation cooperation projects in the field of aviation safety and environmental protection, working closely with the European Commission.

- EASA and the EU develop international cooperation instruments – Bilateral Aviation Safety Agreements (BASA at EU level and Working Arrangements (WAs) at EASA level – to organise efficiently and effectively the cooperation with international aviation partners and to support the European aviation industry.

- EASA is mandated to assist the EU Member States in fulfilling their ICAO obligations (e.g. through the publication of Compliance Checklists) and plays a central role in the coordination process of European positions towards ICAO on issues related to aviation safety.

These activities are supported by EASA External Representations (in China/North Asia, Canada, the United States of America and Singapore/South East Asia).

5.1.4.6. Safety Promotion

The Safety Promotion process provides coordination for internal and external safety promotion initiatives. It develops and publishes safety promotion material aimed at improving European and world-wide aviation. Safety Promotion is one instrument to address safety risks besides rulemaking and standardisation and oversight.

5.1.4.7. Safety Assessment and Foreign Aircraft

The Safety Assessment of Foreign Aircraft (SAFA) process consists of:

- The storage of reported data related to the execution of ramp inspections on aircraft landing at the airports located in participating Member States of the Programme in a computerized database set up by EASA. The database also holds supplementary information, such as lists of actions carried out following inspections. The information held in the database is reviewed and analysed by EASA on a regular basis and the European Commission and Member States are informed of any potential safety hazards identified. A system is in place, which defines the amount of ramp inspections to be performed by the EASA Members States for a selection of operators with a high traffic exposure. At the same time, EASA regularly updates the inspection instructions, inspector qualifications and best practices for ramp inspections. Furthermore, a list of operators to be prioritised during ramp inspections is maintained and a report on the ramp inspection system is produced. Finally, EASA performs the verification of compliance and continuous compliance of ramp inspection training organisations against the applicable requirements, if requested by a competent authority.

5.2. Requirements definition within the core processes

Considering the role of the Agency acting as the Authority of reference, and its primary mission to ensure the highest level of safety and environmental protection in civil aviation, the “service” requirements for each core process are strictly defined in the applicable regulations, MB decisions, ED decisions, procedures and related documentation. In particular, EASA must comply with authority requirements in each applicable domain where it is competent authority.

5.2.1. Determination and review of service requirements

The applicable requirements are considered as the process drivers and are implemented in line with the appropriate quality documentation.

Whenever these requirements need to be changed:

- In the applicable regulations, an appropriate review is carried out according to the Rules Development process.
- In the MB decisions, a preliminary review within the Agency is carried out by the owner of the affected process and the respective Director. The final review for adoption is performed by the Management Board.
In the ED decisions, a preliminary review within the Agency is carried out by the owner of the affected process and the respective Director. The final review for adoption is performed by the Executive Director. Furthermore any change which becomes effective triggers the review of the process and the relevant quality documentation in order to ensure the continuous update of operational documents and the awareness of all the affected staff.

5.3. Stakeholders related processes

5.3.1. Determination and review of Stakeholder needs

According to the EASA Strategy and IMS policy, the Agency make the maximum effort to take into account our stakeholders’ needs and expectations in terms of offering an efficient service.

The Process Owners are responsible for defining their process in accordance with the applicable requirements and stakeholder expectations. To that end, Process Owners receive feedback from the stakeholders (including complaints) via a number of different channels and act on it appropriately.

References:
PR.IMS.00008 - Stakeholder feedback management

5.3.2. Stakeholder communication

The Agency identifies specific communication channels in order to continuously increase the effectiveness of the message released to the main stakeholders identified in chapter 2.

On a general basis the first outgoing communication channel for all the main operational processes is the EASA website. This website is used both to give information on any operational issues and to receive general enquiries via the contact details on the website.

Specific tools such as EU SINAPSE and CIRCABC are used to disseminate documents and information focusing on specific Groups (NAAs, European ICAO Contracting States). SEPIAC and Document Management System (DMS) are used to share and exchange data in a central and secured online platform with external stakeholders. In addition, appropriate communication is delivered during conferences, workshops, meetings and seminars.

In the event of an emergency, the Executive Director, with the support of the Communication Department is responsible for communicating with the Agency’s external and internal stakeholders.

References:
EASA Website
EASA News

5.3.3. Stakeholder property preservation

EASA considers this standard applicable to both intellectual and physical property and relating to EU and Industry documentation.

Stakeholders’ documentation identified as a record is protected and handled within the framework of the records management policy.

In addition, EASA staff are committed by the Staff Regulation to protect any non-public information.

The Agency has put in place a system to handle the EU sensitive information that it receives.
5.4. Design and development
This is excluded from the scope of the certificate because EASA does not perform design activity.

5.5. Verification, validation and monitoring
Within each process, there are specific steps for verification and validation of all the products (certificates, approvals, Opinions etc.) released by the Agency. The details of these controls are specified in the applicable procedures / Work Instructions.

5.6. Identification and traceability
The identification of all records released by the Agency is carried out according to the identification and filing rules developed in the documents and records management policy, procedures and the local filing plans dedicated to records management. This allows the possibility to trace a document along a process and determine as necessary: its origin, its history, and the conditions to which it was subjected.

5.7. Procurement and outsourcing

5.7.1. Procurement process
The procurement process in the Agency is regulated and developed according to the applicable EU procurement rules.

5.7.1.1. Procurement information
The supplier needs to know what the organisation requires before it can satisfy the need and although the standard does not specifically require the information to be recorded, EASA needs to document procurement requirements. This is done in the tender’s specifications (including the “Terms of Reference”). These requirements include environmental protection items.

5.7.1.2. Verification of purchased product
Verification is one of the fundamental elements of the control loop and in this case the verification serves to ensure that the output from the procurement process meets the requirements.

The Agency currently applies the applicable EU rules on public procurement.

References:
- Framework and Specific contracts
- Vademecum on public procurement procedures in the Commission
5.7.2. Outsourcing of certification tasks

According to the Basic Regulation, the Agency may assign certification and oversight tasks to National Aviation Authorities (NAAs) and Qualified Entities (QEs).

Partnership agreements are concluded between the Agency and the NAA and framework service contracts with the QEs so that, when certification tasks are assigned, NAAs and QEs can assist the EASA in the execution of its certification tasks as specified in Article 1 and 83 of Regulation (EU) no 2018/1139, and by providing other related services.

References:
PR.CERTO.00002 - Outsourcing of certification tasks procedure

5.7.2.1. Outsourced Service information

The terms and conditions for the provision of certification services for the allocation and secondment of tasks to NAAs and/or, an accredited QEs, are specified in dedicated partnership agreements (for NAAs) or framework service contracts (for QEs). Assigned tasks must be performed according to EASA’s technical processes that are made available to the certification service providers. Furthermore, reporting obligations to the Agency are clearly described.

As part of the assignment process, the selected provider receives a description of each specific task to be performed through a dedicated task assignment notification and supplementary documents issued by the Agency.

5.7.2.2. Verification of capabilities of the service provider and quality of the purchased service

The initial assessment of capabilities of QEs, including availability of qualified staff to perform the allocated tasks, and the continuous surveillance of QEs is managed through an accreditation process.

The verification of the quality of the outsourced services is carried out, for the technical part by the EASA technical units and for the administrative part monitoring processes are implemented accordingly.

As a safeguarding measure the Agency is performing a quality assurance process for NAAs. This quality assurance process is built on the outcome of the EASA Standardisation audits that paves the way for assignments of technical investigations and relevant surveillance inspections. These shall be performed in accordance with EASA procedures, work instructions and best practices. The quality assurance process mainly consists of performance monitoring for on-going projects complemented by ex-post verification of closed certification projects.

References:
PR.ACC.00001 - Accreditation of Qualified Entities
PR.CERTO.00002 – Outsourcing of certification tasks
PR.CERTO.00003 – NAA & QE report management and reimbursement

5.7.3. Control of monitoring and measuring devices (excluded from the ISO certification)

This is excluded from the scope of the certificate because the Agency does not perform any technical measurement and therefore does not have any monitoring and measuring devices.
6. Monitoring, measurement and analysis

6.1. General
Monitoring, measurement and analysis processes are vital to the achievement of continual improvement of the Agency’s IMS. Based on the reliable results of suitable measurements the Agency is able to ensure the completion of the objectives and implement valuable improvements in the system.

The following paragraphs explain the different methods implemented by the Agency for monitoring, measurement and analysis.

6.2. Process monitoring and measurement
In order to monitor the performance of the processes’ specific objectives, KPIs and targets are established. The analysis of these KPIs and the achievement of the targets are monitored by the process owner on a regular basis. All this input is also reviewed together with the Internal Audit and Assurance Section during the periodic assessment of the process. High level KPIs are included in the Work Programme, monitored on a quarterly basis with report to the EXCOM and then assessed in the corresponding Consolidated Annual Activity Report. At Governance level these KPIs are reported to the Performance and Resources Advisory Board (PAR) prior to the Management Board.

The monitoring of the specific products as an outcome from the processes is monitored and controlled within the specific process by means of appropriate check points.

References:
PR.IMS.00005 – Business Process Management procedure
WI.IMS.00010 – Process performance monitoring Work Instruction

6.3. Stakeholder satisfaction
Stakeholder feedback forms a valuable input to the Agency’s decision making and continual improvement of the IMS. To that end the Process Owners are responsible for determining the appropriate method for the collection of feedback relevant to their process and for the evaluation of the level of satisfaction from their stakeholders. The analysis of the feedback can be used as an integral part of the process (e.g. rules development) or to identify appropriate actions to improve the overall process. In addition the Agency analyses complaints lodged by external parties. This process is decentralised.

References:
PR.IMS.00008 - External stakeholder feedback management procedure
PO.HR.00180 – Code of conduct for the staff of EASA policy
6.4. Correction and authorisation of nonconforming products

The action to remove the detected nonconforming product is a correction that can include the completion of operations, rework of documents or whatever is deemed necessary in order to eliminate the nonconformity.

The correction of the detected nonconformity (during audits or during the normal activities) is managed by closing the findings by means of proper remedial actions.

In the case there is the need to identify and eliminate the root cause of repetitive nonconformities, then a corrective action will be identified.

References:
PR.INTAU.00002 – Internal auditing procedure

Whenever exceptional circumstances call for derogation from an existing legal framework/policy/procedure, then proper authorisation will be requested according to the Exception management procedure before the non-conformant action is executed (ex-ante).

If the deviation is detected only after the non-conformant action has been executed (ex post), then proper authorisation for remedial and/or improvement action can be requested according to the Exception management procedure.

Root cause and associated risk(s) are analysed and identified as part of the request for exception, to allow further improvement actions at process level. Then, a review of all the exceptions raised during the past year is performed by the Internal Audit and Assurance Section. The root cause analysis of the main groups of recurring exceptions, performed together with the process owner, leads to an agreement on corrective and improvement actions.

References:
PR.IMS.00007 – Exception management procedure

6.5. Internal audits

Internal audits are carried out by two different bodies:

- The **Internal Audit Service of the Commission** (IAS) that exercises, in accordance with the article 84 of the Agency's Financial Regulation, the same powers with respect to the Agency as with respect to Commission departments. The IAS is the official internal auditor of the Agency.

- The **Internal Audit and Assurance Section of the Agency**; this internal audit capability plans and performs audits in accordance with the generally recognised principles and international audit standards (the International Standards for the Professional Practice of Internal Auditing published by the Institute of Internal Auditors (IIA)). It also reports annually on the internal audit activity (article 78 of the Agency’s Financial Regulation) and coordinates the IAS audits at the Agency.

The purpose of internal audit is to contribute to a rigorous and effective management of the Agency resources and to determine how the Agency may mitigate risks; the added value being to promote a culture of efficient and effective management within the Agency and its departments.

The results of internal audit are an input for the improvement phase.

References:
International Internal Auditing Standards published by the IIA
PO.INTAU.00020 - Internal Audit policy (charter)
PR.INTAU.00002 – Internal auditing procedure
6.6. Audits and assessments by external parties

The Agency is subject to the audits conducted by the following bodies:

- **European Court of Auditors**
  
  The ECA audits the Agency each year. It issues a specific report on the Agency's financial statements and management. This report is one of the elements that is provided to the Management Board and subsequently to the European Parliament who uses it as part of the bases for its opinion for granting or not the annual discharge on the accounts.

- **ICAO International Civil Aviation Organisation**
  
  ICAO Contracting States are subject to ICAO audits in the framework of the Universal Safety Oversight Audit Programme. As certain competencies have been transferred from the EU Member States and EASA States to the Agency, ICAO needs to assess how these are performed, in order to get the overall picture of the Aviation Safety System in these States. A Memorandum of Cooperation has been signed to this effect between ICAO and the Agency.

- **Federal Aviation Administration (FAA)**
  
  The Agency could be assessed by the FAA in the framework of the bilateral agreement between the EU and US.

- **ISO**
  
  The Agency is audited every year in order to maintain the certification of its IMS against the ISO 9001 standard.

  
  In accordance with Article 124 of Regulation (EU) 2018/1139 the Management Board shall commission an independent external evaluation on the implementation of this Regulation.

The Internal Audit Assurance Section is responsible for the coordination of all external audits and the relevant findings will be an input for the improvement phase.

6.7. Safety Risk Management

In order to improve aviation safety in Europe it is vital that the output of the safety analysis process is used to support the evidence based approach to the identification and prioritisation of actions of the EPAS. This is the purpose of Safety Risk Management (SRM).

The ultimate goal of this procedure is to document the management of safety risks at European Level in a systematic manner and enable Europe to be a leading region for aviation safety at Global Level by:

- Prioritising safety actions which are most efficient in reducing risk levels;
- Ensuring adequate internal and external coordination on the identification and assessment of safety issues and the programming of safety actions, and
- Providing transparency for the wider European Aviation Community on why the Agency has taken certain actions.

The scope of the process is limited to safety issues that may affect European aviation products, services, or European passengers. In this context a European safety issue is one that is at least partially better addressed by the Agency than by individual Member States, or which require mitigation actions to be determined through coordinated efforts of more than one entity, such as issues which are related to more than one aircraft type, to more than one operator, and/or to more than one State. Strategic safety issues include those addressed by EPAS actions.
The SRM Process consists of five steps as shown in Figure 5 (above).

Internally the Agency has established a Safety Risk Panel (SRP) represented by the heads of the operational departments (CT, FS and SM) with a view to oversee and better coordinate the SRM process. The role has been formalized in ED Decision (2016/046/ED). When necessary decisions are escalated to the ESC.

The management of safety risks involves not just EASA but also Member States and industry through a range of advisory and collaborative group activities. Through their active involvement, States and Industry contribute to identify safety issues and agree on the more cost-efficient actions to mitigate the associated safety risks. This partnership is vital for the well-functioning of the system.

References:
PR.SRMA.00001 – Safety Risk Management
6.8. Records of non-conformities

All exceptions and non-conformity findings from internal and external audits are properly registered and archived in a centralised digital register/database, the exception register.

References:
- PR.IMS.00007 – Exception management procedure
- PR.INTAU.00002 – Internal auditing procedure

6.9. Data analysis

In order to assess the suitability and effectiveness of the IMS, the Agency considers of main importance the analysis of all data generated by the processes of the IMS.

On a general basis the basic factual data are generated during the monitoring phases defined in the previous chapters namely:

- KPIs defined in the planning phase;
- Stakeholder feedback;
- Non conformity data (e.g. audit findings, exceptions);
- Safety related actions affecting the Agency management system.

References:
- PR.IMS.00008 - External stakeholder feedback management
- PR.INTAU.00002 – Internal auditing procedure
- PR.IMS.00007 – Exception management procedure
- PR.IMS.00006 - Management Review of the EASA IMS procedure
- PR.IMS.00005 – Business Process Management procedure
- PR.SRMA.00001 – Safety Risk Management

6.10. Guidelines on whistleblowing (incl Anti-Fraud)

As a public body, the Agency is accountable to the European institutions and the public on the correct use of financial resources and must provide confidence in its ability to prevent any kind of fraudulent activity. To that end, the Agency developed an Anti-Fraud Strategy built on key objectives and specific actions tailored to meet EASA’s environment and needs.

Furthermore ethics and integrity are essential at EASA, therefore, all staff members are committed to disclose information to the appropriate management level whenever he/she becomes aware of any suspicion of fraud.

To further support these values, the code of conduct of the Agency has been updated to include a policy on conflict of interest. Internal staff has been trained on the main principles of this policy.

References:
- PO.HR.00180 – Code of conduct for the staff of EASA policy
- EASA Management Board Decision – Decision No 15 2018 of 14 December 2018 laying down the guidelines on whistleblowing
7. Improvement

The outcome of risk management, monitoring & measuring activities represent the primary input for any improvement action.

Within the Integrated Management System the Agency has identified the following activities that are significant in the achievement of concrete opportunities for improvement:

- Management review;
- Hazard identification, risk and opportunity assessment at all levels;
- Implementation of EASA IMS related actions;
- Stakeholder feedback;
- Guided self-assessments.

7.1. Management Review

The Management Review is a process intended to review the EASA Integrated Management System by the Directors for:

- Adequacy (output meets requirements);
- Suitability (results achieved in the best way);
- Effectiveness (system fulfils the needs).

The Management Review process mainly relies on ExCom meetings, Chief Information Officer (CIO) Board meetings, Budgetary Control Committee (BCC) meetings, EASA Safety Committee meetings and the Management Review meetings.

The Management Review process aims to review at least the following data and outcomes from:

- Changes to external and internal factors (including results of evaluations and assessments) that are relevant to the IMS;
- Action follow-up including the output of previous Management Review meetings;
- Information on the performance and effectiveness of the IMS, including trends in:
  - stakeholder satisfaction and feedback;
  - extent to which the quality (strategic) objectives have been met;
  - process performance and conformity of services;
  - exceptions management (nonconformities and corrective actions);
  - monitoring and measurement results;
  - internal and external audits and assessment results;
  - performance of external providers;
- Adequacy of resources;
- The effectiveness of the actions taken to address risks and opportunities;
- Recommendations or opportunities for improvement to improve the IMS.

The outcome of the Management Review meeting consists of decisions and action plans to ensure continuous suitability of the EASA Integrated Management System and to further improve it.

References: PR.IMS.00006 – Management Review of the EASA IMS