Audit Report Explanation
Part 145, CAMO, Part-147,
Part-21G, CAO















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## 1. Purpose of the document

This document explains:

- the content of an Audit Report established by the Airworthiness Organizations Department of the Flight Standard Directorate of the Belgian Civil Aviation Authority (BCAA/F-AWO), and
- the way the organization shall proceed with the management of the finding.

This document is applicable to organisations approved in accordance with Part 145, Part-CAMO, Part-CAO, Part-21G and Part-147.

## 2. Content of an audit report

## a) Summary of Audit

The section "Details" on the front page lists, among other:

- The reference of the audit:
- Other relevant information (Organisation, dates, subject, status, ...)

The section "Findings" on page 1 of the report lists:

- the number of non-compliance(s) (findings),
- their respective Reference, Classification, Status and "Target Date"

Reference: BCAA. ... .NC-xxx

Classification: Level 1, Level 2 or Level 3 (observation)

Status: Open / Closed

Target Date: the ultimate "Due Date" or "Deadline".

(By this date, the Corrective Action Plan should be completed).

## b) Detail for each non-conformity

The "Findings raised during audit" pages details each of these findings.

## 3. Way to proceed

As soon as you receive a notification of finding(s), the organization shall apply the process.

The goal is to have the latest step completed not later than the Target Date.

The process contains several steps, with some intermediate communication to/from the BCAA.

The process shall be implemented for each individual finding.

## Step 1: Immediate Action

The example of an NC that led to the finding needs to be addressed.

Remark 1: This should be done immediately when an example is found (i.e. during the audit).

Remark 2: This might not be applicable to administrative findings (e.g. Exposition update, ...)

Example: an overdue product shall be removed from production environment.

#### Step 2: Containment

The impact of the example that led to the finding needs to be assessed.

Remark 1: This should be done immediately (Level 1) of shortly after the audit (Level 2) when an example is found.

Remark 2: This might not be applicable to administrative findings (e.g. Exposition update, ...)

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Example: a torquemeter was found out of calibration. Which maintenance has been done with this defective tooling, and what is the impact thereof?

### Step 3: Correction

The organization shall search for similar examples.

Example: a search on overdue products shall be undertaken in the other storage location.

## Step 4: Root Cause Analysis (RCA)

The organization shall identify the root cause and contributing factors of the finding. The method for RCA is left to the choice of the organization.

## Step 5: Definition of the Corrective Action Plan

The organization shall define a Corrective Action Plan (CAP).

The plan shall identify the action, the responsible department and a date for completion.

The action(s) described in the CAP shall address the Root Cause identified in the previous step above and also define action(s) to prevent re-occurrence of the non-conformity.

#### → COMMUNICATION 1 (+/- 1 month after the receipt of the report)

The organization shall communicate to the BCAA:

- Actions taken for steps 1 to 3;
- Result of RCA (step 4) and
- Proposal for a Corrective action plan (step 5), with a proposed due date for completion of the implementation.

For very complex actions, an extension of the Target date may be requested. This will only be approved if a clear plan is supplied, containing various intermediated stages.

In return, the BCAA shall accept / reject the proposed CAP.

The Corrective Action Plan (CAP) must therefore be sent to the responsible agent of the BCAA as soon as possible (preferably within one month after receipt of the report), so that the BCAA has enough time to examine and accept / reject the CAP.

#### Step 6: Corrective Action Plan - Implementation

The organization shall implement the corrective actions foreseen in the CAP, and within the timeframe agreed in the CAP.

#### → COMMUNICATION 2 (NLT +/- 2 weeks before the Target Date)

The organization shall communicate the effective implementation of corrective actions to the satisfaction of the BCAA within the set time limit ("Target Date").

Evidence of the implementation of satisfactory corrective actions should be communicated sufficiently in advance to enable the BCAA to assess them within the agreed time frame.

Remark: an extension of the Target Date may be requested. This shall be granted by BCAA only if some progress in the implementation can be demonstrated.

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## 4. Timeline

Each finding must be closed (= Corrective Action Implemented) within the deadline.

• For **level 1** findings: **immediately**.

The concerned activities must be (immediately) stopped until satisfactory Containment, Immediate Action, Correction have been implemented.

#### • For level 2 findings:

At the latest by the date indicated in the "Target Date" section of the report.

If you do not submit an acceptable Corrective Action Plan, or do not execute the corrective actions so that the finding can be closed within the deadline (or the extended deadline), the level 2 findings will be upgraded to level 1. This means that action shall need to be taken on the approval certificate.

## • For **level 3** findings (observations):

The organization should analyze the related issues and determine when actions are needed. The analysis and the outputs, such as the actions taken or the reasons for not taking actions should be recorded internally.

## 5. Regulatory References

Part-CAMO	Part-CAO	Part-145	Part-147	Part-21
CAMO.A.150	CAO.A.115	AMC 1 145.A.95	147.A.160	21.A.158

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