

NOTICE

U.S. DEPARTMENT OF TRANSPORTATION
FEDERAL AVIATION ADMINISTRATION

N JO 7210.883

Air Traffic Organization Policy

Effective Date:
October 1, 2015

Cancellation Date:
September 30, 2016

SUBJ: Air Traffic Organization Quality Control, Revised Chapter 6: Technical Operations Quality Control Programs

1. Purpose of This Notice. This notice revises Chapter 6 of the Federal Aviation Agency (FAA) Order 7210.634, *Air Traffic Organization (ATO) Quality Control (QC)*. Beginning on October 1, 2015, Technical Operations personnel in the Western Service Area will adopt the prototype practices and procedures of the ATO QC program outlined in this Notice. At the conclusion of the prototype period, Safety and Technical Training (AJI), Mission Support Services (AJV), and Technical Operations Services (AJW) will revise 7210.634 in accordance with requirements identified in 1320.1E, FAA Directives Management.

2. Audience. This notice applies to all ATO personnel, FAA contract employees, and anyone using ATO directives.

3. Where Can I Find This Notice? This notice is available on the MyFAA employee website at https://employees.faa.gov/tools_resources/orders_notices/ and the air traffic publications website at http://www.faa.gov/air_traffic/publications/.

4. Explanation of Policy Change. Chapter 6 of FAA Order 7210.634 aligns AJW with ATO QC processes and procedures that are successfully implemented in other ATO Service Units. This notice revises the processes and steps used to ensure the quality of AJW products and services provided at the Service Delivery Point (SDP) to ensure they are in accordance with the requirements identified in FAA JO 6000.15.

5. Procedures. Revise Chapter 6 as follows:

Chapter 6. Technical Operations Quality Control Programs

6-1. Purpose. AJW QC programs analyze performance characteristics of National Airspace System (NAS) services, systems, subsystems, and equipment, as well as maintenance policy compliance by AJW personnel. This chapter provides an overview of the QC programs currently established or being developed.

6-2. NAS Service, System, Subsystem, and Equipment Quality Control. The following are components of the AJW QC programs:

a. System Service Review. The purpose of a System Service Review (SSR), formerly "Lessons Learned," is to review the technical services for air traffic control or flight navigation, or both, provided in any situation, at any time, and under any circumstances. The absence of a defined list of instances when an SSR must be conducted allows latitude to use judgment and discretion in the determination of when to perform an SSR. SSRs may be specifically focused and limited in scope or may eventually evolve into a larger, more in-depth review. SSRs are documented in Comprehensive Electronic Data Analysis and Reporting.

NOTE: Nothing in this section will require an SSR for on-the-spot corrections or performance coaching. The filing or acceptance of a Voluntary Safety Reporting Program report does not preclude conducting an SSR.

1. **When to conduct an SSR.** SSRs may be random, scheduled, due to public inquiries, or as a follow up to known operational activities (post-event). SSRs are conducted when:
 - a. Any manager in AJW requests an SSR to:
 - i. Address circumstances identified creating an operational or technical safety concern within their line of business.
 - ii. Highlight examples of exemplary operational performance within their line of business.
 - b. Post-event for any occurrence (non-accident) coded yellow or red following a Services Rendered TELCON (SRT) in accordance with FAA JO 1030.3.

2. Who Conducts an SSR? The AJW District Manager/Technical Services Manager or equivalent will determine who will conduct an SSR for their organization.

b. Maintenance Process Observation. The purpose of the Maintenance Process Observation (MPO) is to collect data by observing the technical skills demonstrated by personnel certifying the NAS. MPOs are used to identify systemic issues, not for individual performance management. MPOs will include items identified on the checklists found in the Compliance Verification Tool (CVT). CVT is a national database that contains information related to the compliance verification process. Information includes checklists, reports, facility information, tracking information, response data, and other statistical information available on the CVT website, <http://aap.faa.gov>. Information contained in reports, mitigation plans, status reports, and closure is submitted through this database system. Data captured is the basis for many other QC processes. Sufficient quantities of MPOs and accurate documentation are essential to ensure proper identification of facility performance issues. There are two types of MPOs:

1. **Direct MPO.** The direct MPO is accomplished by observing maintenance processes as they are being done by personnel holding active certification authority. As part of the Technical Compliance Verification (TCV) process, Direct MPOs are conducted for every System Support Center (SSC) on a two year random sampling basis.
2. **Indirect MPO.** The indirect MPO is accomplished by reviewing log entries to verify certifying personnel are completing the required documentation of maintenance activities. As part of the Internal Compliance Verification (ICV) process, Indirect MPOs are conducted each fiscal year.

6-3. Compliance Verifications. The ATO uses Compliance Verifications (CV) to assess compliance with directives, policies, and procedures, and identify areas for improvement. CVs are divided into the following three categories:

a. Internal Compliance Verification. The purpose of an ICV is to verify personnel certifying NAS equipment or NAS services, or both, that are trained, certified, and credentialed in accordance with applicable directives. ICVs will include items identified on the checklists found in the CVT.

1. AJW District Managers/Technical Services Managers must ensure ICVs are conducted each fiscal year for those individuals performing certification of NAS facilities or services, or both.
2. ICVs must include all applicable items on the CVT checklist. Any ATO entity may propose the addition or deletion of a checklist item. Requests for checklist modification must be

forwarded to AJI for evaluation and possible incorporation.

3. The CVT checklist review process is being developed.
4. As part of the annual ICV, the following requirements must be included in the checklist:
 - a. Technical training programs, including On-the-Job Training (OJT),
 - b. Personnel Certification program,
 - c. Air Traffic Safety Oversight Service (AOV) Credentialing program, and
 - d. Indirect Maintenance Process Observation.

b. Technical Compliance Verification. The purpose of a TCV is to verify NAS facilities and services are maintained in accordance with applicable directives. TCVs will include items identified on the CVT checklists and performed in accordance with requirements outlined in FAA JO 6040.6.

1. AJW Director of Operations Support must ensure TCVs are conducted for every SSC on a two year, random sampling basis.
2. TCV data must include all applicable items on the CVT checklist. Any ATO entity may propose the addition or deletion of a checklist item. Requests for checklist modification must be forwarded to AJI for evaluation and possible incorporation.
3. The CVT checklist review process is being developed.
4. As part of the TCV, the following requirements must be included in the checklist:
 - a. Policy,
 - b. Facility Documentation,
 - c. Facility and Service Performance, and
 - d. Direct Maintenance Process Observation.

c. External Compliance Verification. The purpose of an External Compliance Verification (ECV) is to provide an independent, in-depth response to data-driven indicators or events with potential operational safety risk. ECVs will include items identified on the CVT checklists. ECVs may be conducted on-site or remotely using various methods. These methods may include a review of available data, direct observation, interviews with personnel, and other appropriate means.

1. The Service Area Director of Technical Operations, or designee, must decide when ECVs are conducted in response to data-driven indicators of potential operational safety risk. The Service Center Quality Control Group (QCG) is responsible for analyzing operational safety data and recommending ECVs to the Service Area Director of Technical Operations. AJW and AJI must provide necessary safety data requested by the QCG.
2. The QCG must collaborate with the Service Area Director of Technical Operations, or designee, to determine the scope of the ECV. ECVs may be broad or may focus on just a few items.
3. ECVs are conducted and led by the Service Center QCG. A service unit or a Service Area Director of Technical Operations may assign or request additional personnel to support an ECV. The QCG may request resources from the service unit/area to augment an ECV.
4. If at any time during an ECV, a significant operational safety risk is identified, then the QCG will notify the appropriate management officials as defined in the scope. With the concurrence of the Service Area Director of Technical Operations, or designee, the QCG may add those items to

the scope of the ECV.

5. At a minimum, the QCG will conduct pre-ECV and post-ECV briefings with the appropriate management official(s) as defined in the scope. Post-ECV briefings shall include all items that will be rated as non-compliant.

6-4. Findings

a. ICV, TCV, and ECV checklist items will be assessed using the following categories, and the results will be entered into the CVT:

1. Exemplary (E) – This finding is assigned to items that demonstrate performance in quality and efficiency that are worthy of duplication.
2. Compliant (C) – This finding is assigned to items that are completed in compliance with national, service area, and local requirements. Details are not required to be entered into the CVT but are highly encouraged.
3. Non-Compliant Low Risk (NL) – This finding is assigned to items that are non-compliant but are administrative and/or low safety risk to the NAS.
4. Non-Compliant Medium Risk (NM) – This finding is assigned to items that are non-compliant but represent a medium safety risk to the NAS.
5. Non-Compliant High Risk (NH) – This finding is assigned to items that are non-compliant and represent a high safety risk to the NAS.
6. Not Observed (NO) – This item is assigned to items that are not observed during the verification. The reason the item was not observed must be documented.

b. ECV reports must be completed and submitted into the CVT by the QCG within 10 administrative work days. The report must list all items rated and include associated details for all items rated E, NL, NM, or NH.

6-5. Responding to Findings

a. Risk Mitigation Plan. Risk Mitigation Plans (RMP) document corrective actions required to properly address medium and high non-compliance issues. RMPs are actions taken by a facility to address non-compliance that has been properly identified, validated, and understood through data collection and analysis.

b. The AJW District Manager, or designee, must respond to items identified as non-compliant in the following manner:

1. NM – The District must submit a risk mitigation plan for all items not corrected within 60 days of the completion of a CV and enter the plan in the CVT. To close the item, the District must document the processes used to ensure the effectiveness of the mitigation and then enter it into the CVT.
2. NH – Due to the severity of the finding and the subsequent risk to the NAS, the District Manager must be immediately notified when a non-compliant high risk item is identified. Additionally, within three administrative days, the District must develop a risk mitigation plan to correct the item and obtain associated Director of Operations at the service area, and service unit concurrence (through the QCG). To close the item, the facility must document the processes used to ensure the effectiveness of the mitigation and enter it into the CVT.

c. No RMP is required for checklist items rated E, C, NL, or NO.

6-6. Non-Federal Facilities Providing NAS Services. The purpose of a Non-Federal Facilities Inspection Program is to verify NAS facilities and services are maintained in accordance with applicable directives. Non-Federal Facilities Inspections are performed in accordance with procedures outlined in FAA Order 6000.15, FAA JO 6700.20, and 14 CFR 171. QC processes for non-federal facilities providing NAS services have yet to be developed. This section serves as a place holder for future non-federal facilities QC efforts, which should closely align with the revised AJW QC processes and procedures contained in this directive.

a. Distribution. This notice is distributed to the following organizations: Technical Operations, Air Traffic Services, Mission Support Services, Safety and Technical Training, Air Traffic Oversight Service, as well as the William J. Hughes Technical Center and the Mike Monroney Aeronautical Center.

b. Background. FAA Order 7210.634 helped implement a significant change in how the ATO assesses products and services provided at the SDP to ensure these products and services meet the requirements of the SDP and the ATO. This notice revised the processes and steps used to ensure the quality of AJW products and services provided at the SDP level on an ongoing basis.

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