



Integrated Management System Manual	Doc #	MA.IMS.00001-003
	Approval Date	07/09/2012

Integrated Management System Manual

MA.IMS.00001-003

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**DOCUMENT CONTROL SHEET****Abbreviations/Definitions**

AMC	Acceptable Means of Compliance
AGNA	Advisory Group of National Authorities
AGR	Annual General Report
ATM	Air Traffic Management
BP	Business Plan
BPM	Business Process Management
BASA	Bilateral Air Safety Agreement
CAW	Continuing Airworthiness
DOA	Design Organisation Approval
EASA	European Aviation Safety Agency
EC	European Commission
EU	European Union
ED	Executive Director
EAB	EASA Advisory Board
ExCom	Executive Committee
FAA	Federal Aviation Administration
FCL	Flight Crew Licencing
GM	Guidance Material
ICS	Internal Control Standards
ICAO	International Civil Aviation Organisation
IIA	Institute of Internal Auditors
IMS	Integrated Management System
ISC	Internal Safety Committee
ISO	International Organisation for Standardisation
JAA	Joint Aviation Authorities
KPI	Key Performance Indicator
MB	Management Board
MOA	Maintenance Organisation Approval
MTOA	Maintenance Training Organisation Approval
NAA	National Aviation Authority
OPS	Operations
POA	Production Organisation Approval
QE	Qualified Entity
SAFA	Safety Assessment of Foreign Aircraft
SPP	Staff Policy Plan
SSCC	Safety Standard Consultative Committee
TBD	To be defined
WP	Work Programme

Log of issues

Issue	Issue date	Change description
001	26/07/2010	First issue, migration of E.M001-01, update following ISO 9001:2008 pre audit report
002	15/07/2011	Second issue, updated considering results of ISO 9001:2008 certification. Updated by Oscar Ferreira.
003	07/09/2012	Third issue, updated considering Agency's changes by Valérie Landry-Sivel.



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Message from the Executive Director
Message du Directeur Exécutif

The European Aviation Safety Agency (EASA) is the centrepiece of the European Union's strategy for aviation safety. My ambition is to make this Agency the authority of reference and recognised by our stakeholders as a dependable, reliable and competent partner. Placing excellence and quality at the heart of all our activities will vastly contribute in achieving this ambition. That is why I decided to implement an Integrated Management System (IMS) at the Agency **which gave the opportunity to deploy effective processes in order to improve the Agency's services and to attain our ISO 9001:2008 certification as testimony to our success.**

Quality is not a discrete concept exclusive to 'specialists'. Quality, through the implementation of an IMS, is a golden opportunity to consider the needs and expectations of our stakeholders. It also provides a perspective on the fulfilment of our objectives, how we perform our daily work, how we are organised, the risks we face, and the tools we utilise. We can also assess how, on a daily basis, we can continuously improve, as individuals and as team members, our working conditions, and the Agency's culture.

The EASA Strategy and IMS policy document is the general statement of our Strategy and Quality goals in the context of the Agency's Vision, Mission and Strategy and takes into account the Agency's core values.

I count on the commitment and involvement of all of us to ensure that we achieve the objective of implementing the IMS and becoming the authority of reference and competent partner to our stakeholders.

Patrick Goudou
Executive Director



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1 General

1.1 Scope

The Agency has implemented an Integrated Management System (IMS) that is documented and applied in order to effectively support the achievement of the Agency's objectives (e.g, operational, quality and safety) and improve the Agency's operations.

This manual specifies the features and objectives of the IMS, as the Agency:

- intends to demonstrate its ability to consistently provide a service that meets stakeholders' expectations and applicable regulatory requirements, ultimately a high level of aviation safety and environmental protection in Europe;
- aims at enhancing 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:
EASA Management Standards that were developed by taking into account the requirements of ISO 9001:2008 and the Internal Control Standards of the European Commission.

1.2 Applicability

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

1.3 Document control

The IMS Manual is issued and controlled by the Quality Section within the Internal Audit & Quality Department.

This Manual is approved by the Executive Director.

1.4 Publication and distribution

The IMS Manual is communicated and published on the Quality pages of the Agency Intranet and Internet sites.



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2 The European Aviation Safety Agency

2.1 Background



The collaboration between European aviation safety regulators started in 1970, first by drafting Joint Aviation Requirements and subsequently by the foundation of the Joint Aviation Authorities (JAA) in 1989. The original objective of this initiative was the production of common certification codes for large aeroplanes and engines, which were subsequently extended to operations, maintenance, licensing and certification/design standards for all classes of aircraft. The JAA could only propose rules and did not have the authority to pass laws with compulsory national implementation. To achieve implementation of these rules the JAA was dependent on the States to incorporate such into their respective National legislation.

In order to ensure a common European strategy for aviation safety in 2002 the European Parliament and the Council passed Regulation (EC No 1592/2002 now repealed by EC No 216/2008*). The Regulation replaced the national regulation of airworthiness by a new Community regulatory system built around the foundation of the European Aviation Safety Agency (EASA).

The Agency became operational on 28 September 2003. It aims to ensure the highest levels of aviation safety and environmental protection through certification of aviation products, approvals of certain organisations providing aviation services, regular safety oversight, the development and implementation of a standardised European regulatory framework and the monitoring of the correct application of these rules. In December 2009 the Agency's competencies were extended into the domains of aerodromes and ATM/ANS, covering thus all areas of safety aviation activities.

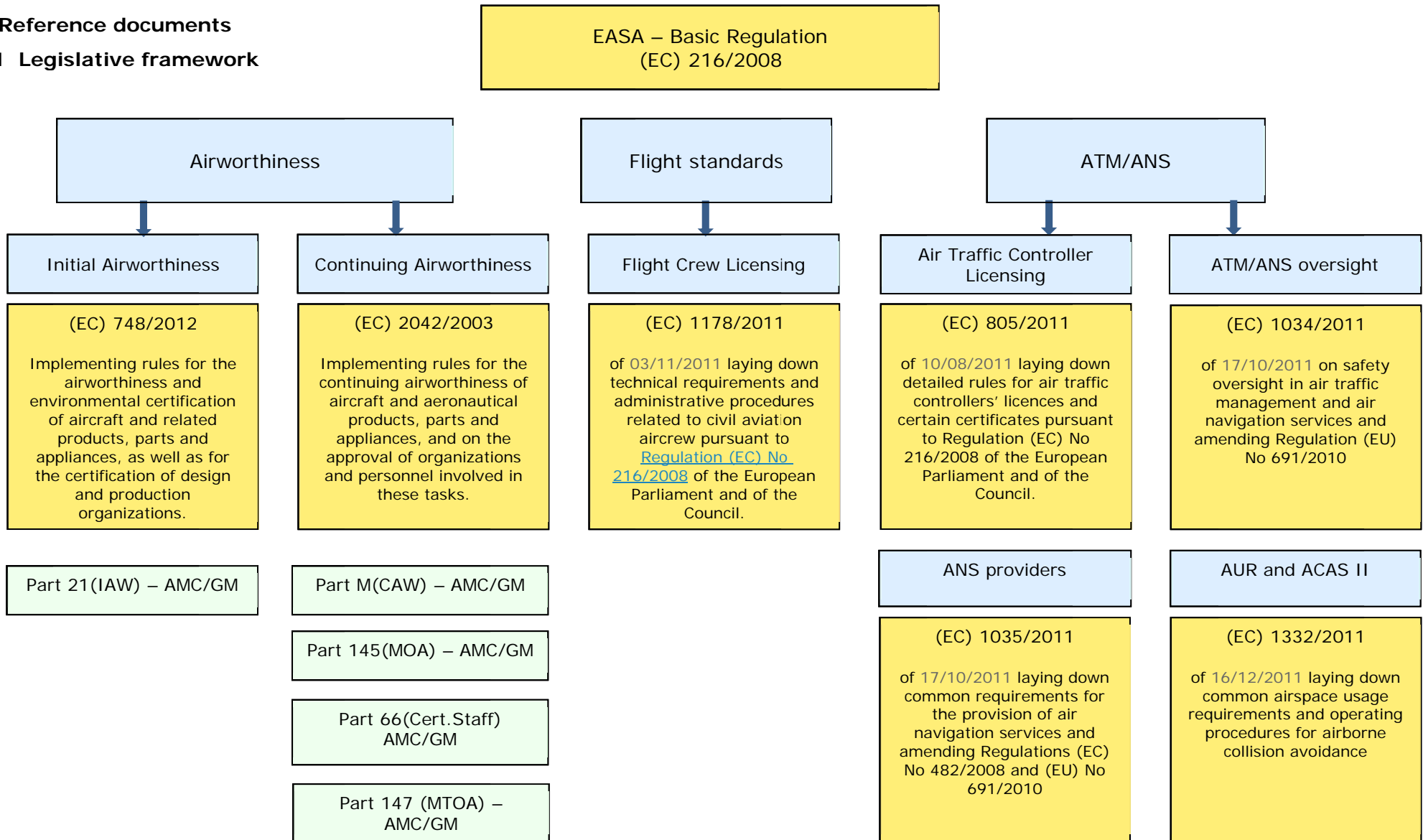
* Regulation (EC) No 216/2008 of the European Parliament and of the Council of 20 February 2008 on common rules in the field of civil aviation and establishing a European Aviation Safety Agency, and repealing Council Directive 91/670/EEC, Regulation (EC) No 1592/2002 and Directive 2004/36/EC (OJ L 79, 19.03.2008, p. 1)



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2.2 Reference documents

2.2.1 Legislative framework





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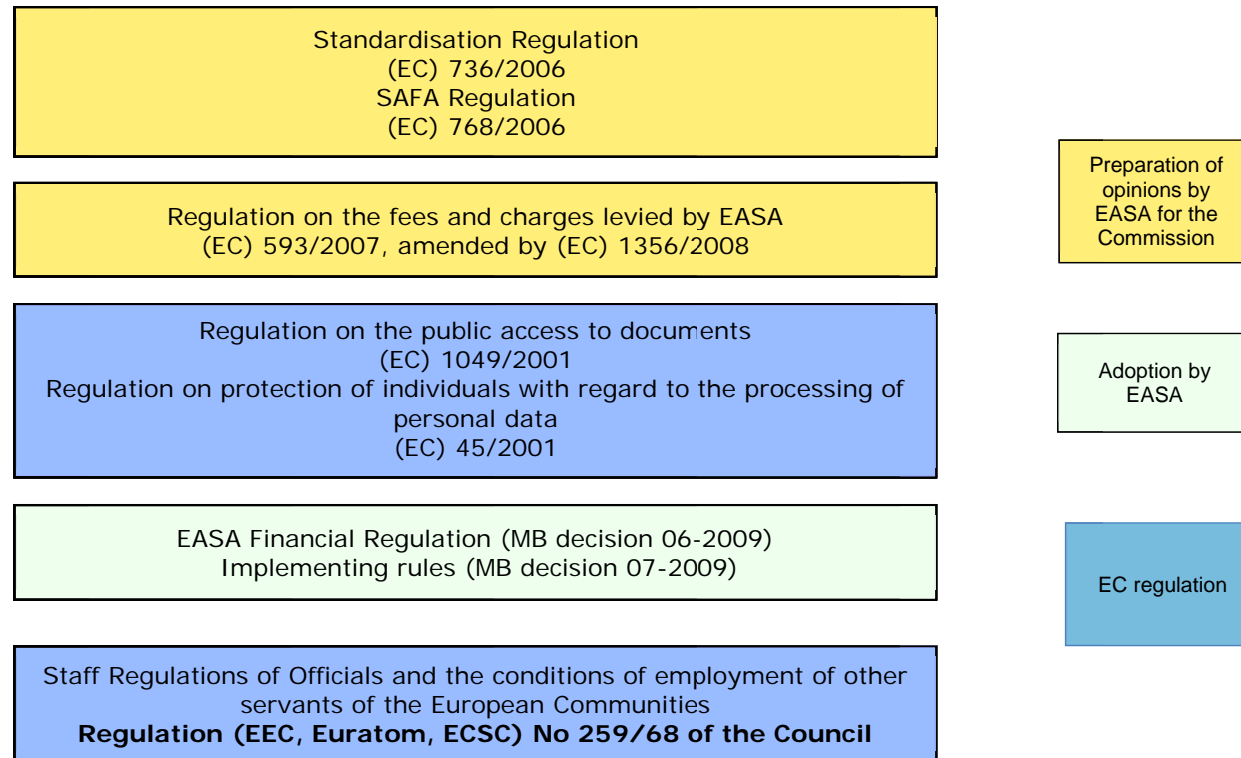


Figure 1
Legislative framework



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2.2.2 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 Standards are developed by the Commission. The Internal Control Standards specify the requirements, action and expectations which are necessary to build an effective system of internal control to provide reasonable assurances on sound financial management and the achievement of business objectives.

In order to avoid overlaps or redundancy, the Agency developed its own management standards, adopted by the Management Board in September 2008 (MB decision 14/2008) taking into account both ISO 9001:2008 standard and the Internal Control Standards (ICS) developed by the Commission.

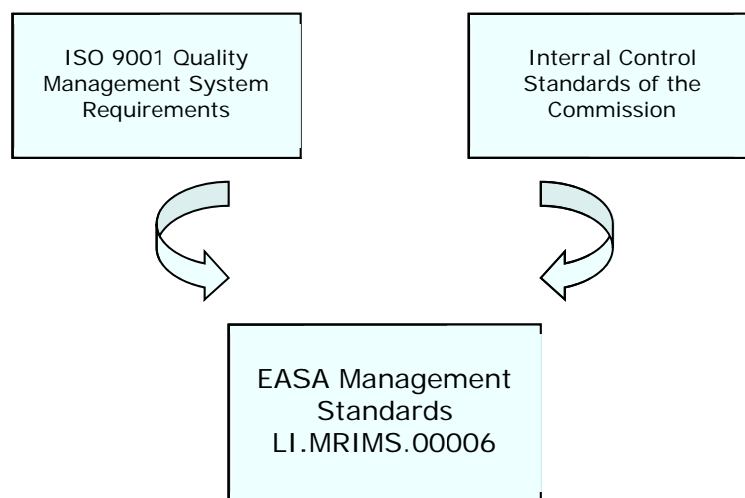


Figure 2
Applicable Standards



References:

Internal Control Standards (ICS) from the European Commission
ISO 9001:2008 from the International Organisation for Standardisation (ISO)
LI.MRIMS.00006 - List of EASA management standards

2.2.3 ED Decision on the IMS

The decision to implement the Agency Integrated Management System (IMS) has been formalised by the Executive Director with the Decision ED/2009/089/E on 03 August 2009.

In the decision the following aspects are explained:

- Description and scope of the IMS
- Management system standards
- Certification of the IMS
- Process owners and Quality coordinators



References:

Decision No 2009/089/E of the Executive Director of the European Aviation Safety Agency on the Agency Integrated Management System (IMS)



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2.3 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 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 Agency's work programme, the establishment of the budget, and for monitoring the Agency's operation. The aviation industry is actively involved in the Agency's work through a number of consultative and advisory committees: the Advisory Body of interested parties, EAB, representing all aviation stakeholders, is consulted by the Management Board.

Regarding rulemaking activities, the Agency consults the Safety Standards Consultative Committee (SSCC), composed by industry stakeholders' representatives, and two advisory groups of national authorities: the TAG, Thematic Advisory Groups reflecting the Agency's competences; and the RAG, Rulemaking Advisory Group, consisting of higher level of aviation safety regulatory administrators.

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.

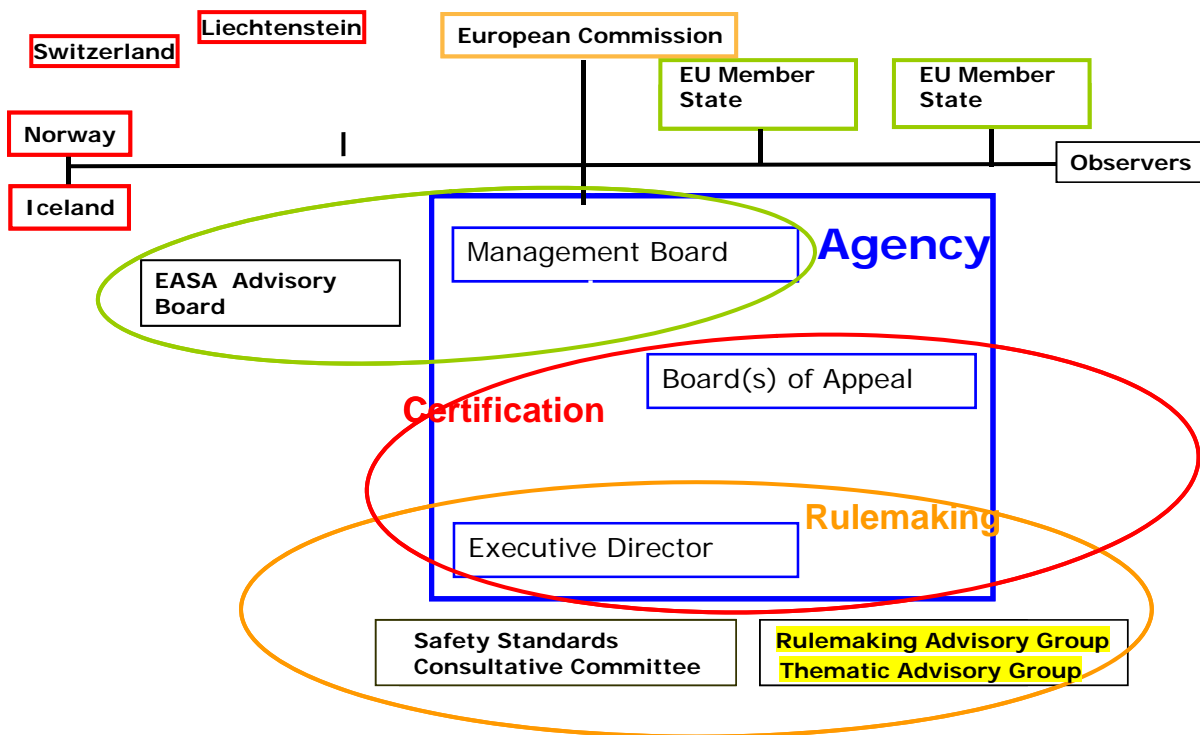


Figure 3
EASA's governance scheme



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2.4 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 Agency Quality Policy.

It must be underlined that due to the specific remit of the Agency the identification of the stakeholders requires specific criteria.

On one hand, the unique role of the Agency has to be recognised. The Agency acts as an Authority of reference and therefore ensures the highest level of compliance with safety rules and applicable compulsory regulation. 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.**

On the other hand the Agency 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 provide 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.
5. The accredited National Aviation Authorities and Qualified Entities acting on behalf of the Agency and which are given the necessary investigation and audit powers to execute such certification tasks;
6. The regulated persons, who are directly affected by the Rulemaking process;
7. Third country regulators which may request Technical cooperation or Working arrangements;
8. ICAO: for proper consideration of relevant ICAO Annexes in the development/amendment of new or existing regulation and promotion through the Member States.



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2.5 Organisational structure

The organisational structure of EASA is represented in the following chart.

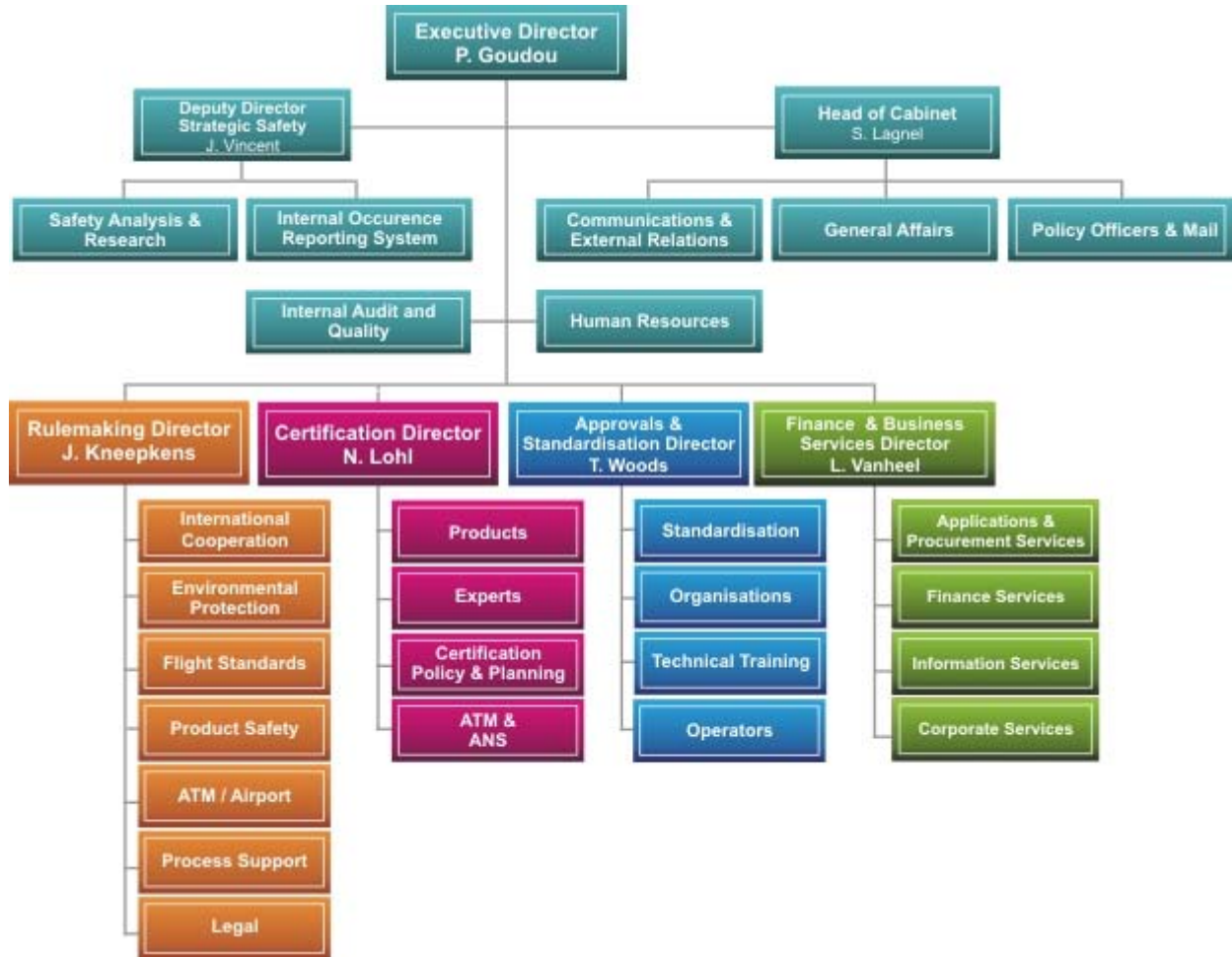


Figure 4
Organisational structure



Figure 4 is for reference only, for official information refer to the Agency's website and intranet.



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2.6 ISO 9001 and IFACI certification

The ISO 9001:2008 certification project was launched in 2008 to strengthen the Agency's operations and support in achieving its mission. In 2010, EASA's Integrated Management System (IMS) was successfully certified ISO 9001:2008 by the accredited body Bureau Veritas (see Annex 1) (<http://www.iso.org/iso/home.html>).

ISO 9001:2008 requirement "7.6 Control of monitoring and measuring devices" is excluded from ISO 9001:2008 certification of the Agency.



Also in 2010, the Agency's Internal Audit capability was successfully certified by the French IFACI (*Institut français de l'audit et du contrôle interne*) against the Internal Auditing Professional Framework (IPPF) (see Annex 2). The IPPF is issued by the Institute of Internal Auditors (IIA) (<http://www.theiia.org/>).





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3 Integrated Management System

3.1 General overview and scope

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

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

The Integrated Management System shall encompass as a minimum:

- 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 processes the Agency has already implemented and those that will be implemented to fulfil its missions and meet its legal requirements and process interactions; it also implies drafting the necessary documents (e.g., policies, procedures) to ensure proper competence, functioning, control and traceability over the processes;
- management of the Agency's business risks;
- management of adequate resources in line with the objectives, justified accordingly and with the possibility of adaptation in subsequent reviews;
- a system of checks and measurements, including key performance indicators and data analysis (e.g., safety analysis, stakeholders' feedback, audits);
- a system of effective follow up of EASA IMS related actions;
- a review of the IMS at planned intervals by the Directors to ensure its continuing suitability, adequacy and effectiveness (Management Review process);
- a system to manage changes, especially of regulations.

The Executive Director is ultimately responsible for the implementation of the IMS. The Quality Section of the Internal Audit & Quality Department is responsible to provide the framework and methods for the implementation.

The Integrated Management System is applicable to all present and future processes performed by the Agency or on behalf of the Agency.



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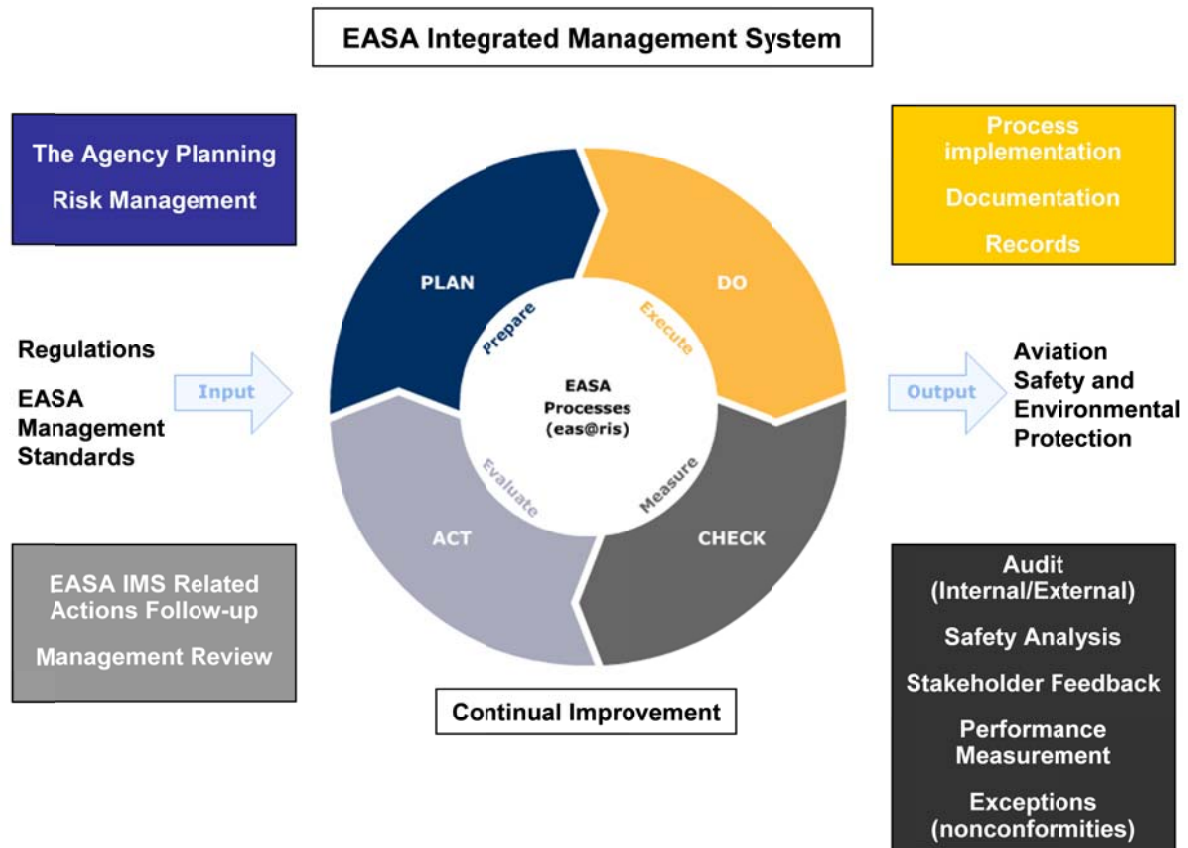


Figure 5 The Integrated Management System

The 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 operational, quality, financial and safety areas; and taking into account stakeholders' needs, regulations requirements, potential risks and the environment in which the Agency acts.

In addition, a Risk Assessment exercise is performed every year at Agency level. The results of this risk assessment are taken into account in order to properly manage and mitigate risks.



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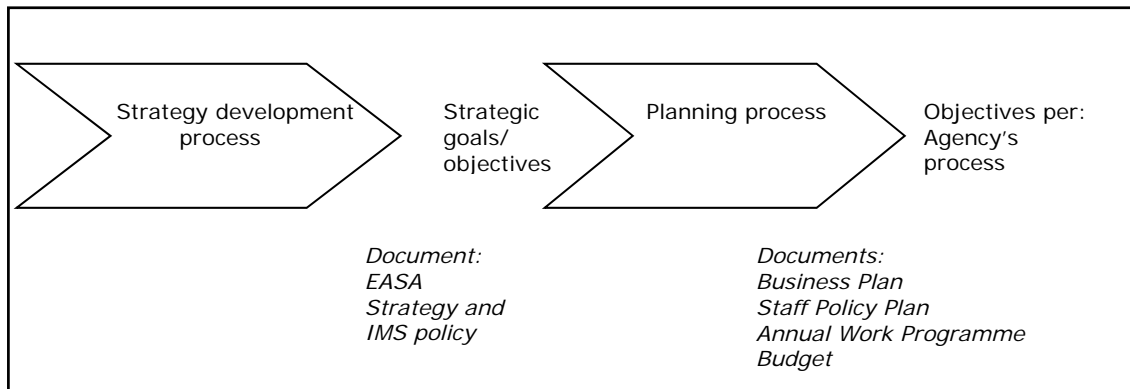


Figure 6
Overview of objectives planning

Phase 2 Process implementation

All staff carries out specific operations in their own field of competence in a system of integrated processes.

These processes are performed in a controlled way:

- 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.
- They are documented via appropriate records.
- They are monitored through proper key performance indicators and key control points related to process goals and risks.

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 objectives and mission:

- *Performance measurement of processes through Key Performance Indicators (KPI):* The KPIs are linked to the Agency's objectives as defined in the Annual Work Programme. The final status of the Agency's objectives is given in the Agency Annual General Report of the corresponding year. **In addition, a monthly scoreboard is used to monitor dedicated indicators during ExCom meetings.** More specific scoreboards are also defined at Directorate/Department level.
- *Analysis of stakeholders' feedback:* active and passive solutions are implemented for collection and analysis of stakeholder's feedback. Active solution consists of sending a questionnaire or requesting feedback during meetings for the evaluation of the process concerned; whereas passive solution is achieved through implementation of an online feedback form on the EASA website.
- *Safety analysis:* Aviation safety issues (occurrence analysis, results of accident investigations, safety recommendations) are regularly reviewed and discussed by the Internal Safety Committee. Some might have an impact on how the Agency is organised and contribute directly to identifying priorities and objectives at Agency level.



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- Formal process assessment by Process Owner: with continuous improvement in mind, Processes Owners perform a formal assessment of their process at least once every three year. Based on the result of this assessment, process improvements might be implemented.
- Internal audit: internal audit capability is in place through internal audits performed by the Internal Audit Service (IAS) and the Audit function of the Internal Audit & Quality Department (E.3).
- External audits: The Agency is subject to the audits conducted by the following bodies:
 - European Court of Auditors (ECA)
 - International Civil Aviation Organisation (ICAO)
 - Foreign Aviation -Administration (FAA)
 - Designated body for Basic Regulation Article 62 evaluationThe Internal Audit & Quality Department is responsible for the coordination of all external audits. Relevant findings will be used as an input for the improvement phase.
- 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 having an impact on the continuous improvement of the EASA Integrated Management System.

Phase 4 Review & improvement

This fourth step "review & improvement" consists of reviewing the EASA Integrated Management System for its improvement on the basis of the outcomes of the Check phase. This is achieved through the following:

- EASA IMS related actions follow-up: regular status of corrective/preventive/improvement action plans are reported to management.
- Management Review meetings: the aim of this **bi-annual** meeting is to assess the EASA IMS based on the data from previous phases.

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

3.2 Management commitment

By approving this Integrated Management System 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 the bi-annual Management Review meetings and through the validation of all the Agency wide policies by the Executive Director.

3.3 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 document is also systematically presented to the new comers during the induction training dedicated to the IMS system.



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This Policy is periodically reviewed and revalidated as part of the Management Review process.



References:
PO.IMS.00002 – EASA Strategy and IMS policy

3.4 Responsibility and authority

The Executive Director is responsible for the management of the Agency according to the Basic Regulation (EC) 216/2008 Art. 38.

He delegates his powers in line with the provisions of the Basic Regulation via specific ED Decisions.

In addition, the responsibilities of each staff member are described and communicated via detailed job descriptions.

Each Director is responsible for the definition of the objectives and the promotion of the culture for Quality in their respective areas of responsibility.

3.5 Management Representative

The Manager of the Quality Section is nominated as Management Representative for quality. He/she is responsible for ensuring that processes are established, implemented and maintained; for reporting to the Directors on the performance of the IMS and any need for improvement; for ensuring the promotion of awareness of stakeholder requirements throughout the Agency.

3.6 Quality Coordinators

Quality Coordinators are the interface between the Quality 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 management standards.



References:
Decision ED/2009/089/E on the EASA Integrated Management System

3.7 Process Owners

Process Owners are responsible for the definition, planning, implementation, measurement and improvement of their processes. Process Owners are supported by nominated Process Designers in ensuring consistency and adequate modelling of their processes.



References:
Decision ED/2009/089/E on the EASA Integrated Management System

3.8 Internal communication

Communication on the Integrated Management System is ensured within the internal communication framework namely:

- Intranet
- EASA website



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- News summaries
- Newsletters (The Flyer)
- Quality Coordinators
- Bilateral meetings between Departments
- ED presentations at all staff meetings
- ED decisions
- ED emails or announcements to all staff
- ED participation in Directorate and department meetings
- Middle management communication with staff

3.9 Documents and records

The main activities of the Agency are described and recorded by means of 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 secondly to prevent the inadvertent use of invalid information.

~~This documentation system allows the Agency to manage 3 types of documents. Such requirements are provided within:~~

- Internal reference documents
- External reference documents
- ~~Mail~~

3.9.1 Internal reference documents

3.9.1.1 Quality documents

Quality documents are defined as all those documents produced internally to provide guidance and instructions on how activities are to be performed.

The Agency's Quality documentation system provides a ~~large variety of formats and a consistent set of document management rules for the capture and management of information (such as mail management, filing & naming conventions, preparation & validation of working documents, processing personal data).~~



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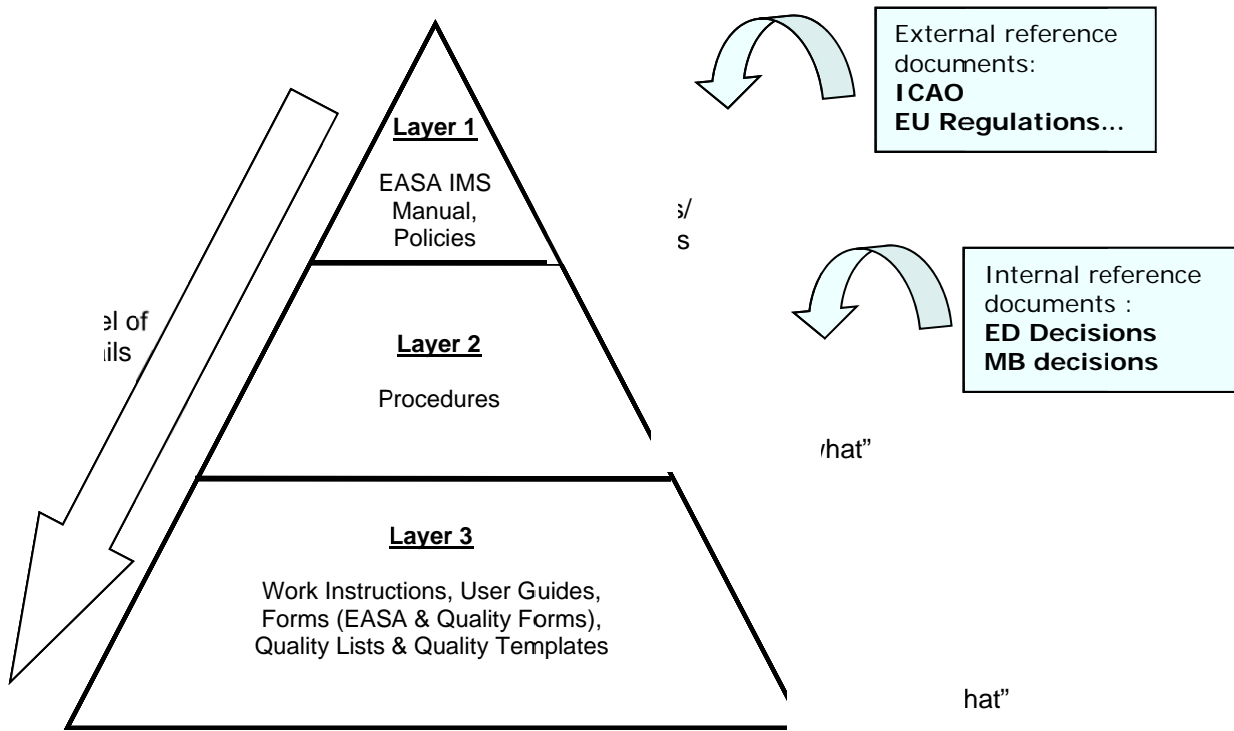


Figure 7
Overview of quality documentation structure



References:
WI.BPM.00003 - 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 allowing managing processes and all its associated Quality documentation. As an outcome of this tool, automatically generated intranet pages portray all Quality documentation applicable in the Agency.

3.9.1.2 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
- ED Decisions

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



References:
PR.EDD.00001 - ED Decision management procedure
PR.MB.00001 - Management Board coordination procedure
EASA Intranet – ED Decision page
EASA website - MB page



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3.9.2 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 - Agency Technical Library page

3.9.3 Mail

All incoming **and outgoing** mail (technical, administrative...) is managed with "ADONIS" software system. EASA has chosen to centralise "incoming" mail under the control of the Mail Service.

All the details and responsibilities are described in the following procedure:



References:
PR.DRM.00008 - Centralised mail registration and dispatch procedure

3.9.4 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 interests 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 (usable).



References:
PO.DRM.00012 - Records management policy
PR.DRM.00005 - Records management procedure
WI.DRM.00009 - Guidelines for creating File plans and RMWI

* The main concept refers to the "ISO 15489:2001 Information and documentation - Records management" and has been adapted to the needs of the Agency.



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4 Planning

The Agency has set up a planning and reporting process that enables it to meet strategic multi annual and annual goals and objectives.

Quality planning and the development of specific Quality objectives are fully integrated into the Agency's planning and reporting process.

4.1 Planning and reporting cycles

The Agency has identified planning activities that are carried out at different time frames. The planning cycle and associated documents are shown in the table below:

Document	Period covered	Updated
Strategic elements	Ten years	Every year
Business Plan	Five years	Every year
Staff Policy Plan	Three years	Every Year
Work Programme	One year	Every Year
Budget	One year	Every Year
Annual General Report	One year	Every Year



Figure 8
Planning & reporting cycles

Strategy

The Strategy represents the long term guideline for the organisation.

The Strategy sets out the framework for all Agency's policies including the Quality Policy.

Business Plan

The Business Plan is a vital first step in the mid-term planning of EASA processes and the basis for the rest of planning documents.

Staff Policy Plan (SPP)

The Staff Policy Plan meets a specific requirement of the EU environment and provides the staff figures for each year on a 3 year perspective.



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Work Programme (WP)

On a yearly basis the Agency defines the Work Programme for the following year. The Work Programme is the short term realisation of the Business Plan. It provides a clear view of the Agency's objectives and the key performance indicators on an annual perspective. **The WP covers the first year of the BP.**

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.

Annual General Report

On a yearly basis the Agency reports on the work done the previous year taking into account the objectives defined in the Annual Work Programme. The report provides a clear view of the achievement of the Agency's objectives.



References:

- EASA website - Management Board page
- PR.PLAN.00010 - Staff Policy Plan procedure
- PR.PLAN.00007 - Work Programme procedure
- PR.PLAN.00009 - Budget preparation procedure
- PR.REPO.00008 - Annual General Report procedure
- PR.STRAT.00001 - Strategy development procedure

4.2 Quality planning Process objectives

~~The Quality management activities are planned in conjunction with all other activities by documenting them in the managing planning cycles.~~

~~The Internal Audit & Quality Department is responsible for coordinating and facilitating the integration of Quality planning with the general planning cycles.~~

~~4.2. Quality o~~

~~As part of the general planning cycle, specific quality objectives are defined or reviewed for each process in line with the general strategic objectives of the Agency.~~

~~The annual objectives are reflected in the Work Programme (with yearly targets). Each objective defined in these documents is monitored via specific KPIs.~~

~~The Agency reports on these objectives in the corresponding Annual General Report.~~



References:

- EASA website - Management Board page
- PO. IMS.00002 - EASA Strategy and IMS policy
- PR.STRAT.00001 - Strategy development procedure
- PR.PLAN.00001 - Business Plan procedure
- PR.PLAN.00007 - Work Programme procedure
- PR.REPO.00008 - Annual General Report procedure



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4.3 Risk analysis

The Agency analyses risks in relation to its 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 Annual Work Programme.



References:

PR.HLRA.00001 - Annual risk assessment exercise procedure

~~PR.ACTFU.00001 – EASA IMS related actions follow-up procedure~~

Risk register

4.4 Resource allocation

The identification of resources needed is an integral part of the planning cycles.



References:

PR.PLAN.00001 - Business Plan procedure

PR.PLAN.00010 - Staff Policy Plan procedure

PR.PLAN.00007 - Work Programme procedure

PR.PLAN.00009 – Budget preparation procedure

4.4.1 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 encourage 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 EU Staff Regulation requirements.

4.4.1.1 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 according to the specific job descriptions.



References:

EASA Intranet - HR Recruitment page

4.4.1.2 Staff administration and services

The main objective of the staff administration process is the establishment of individual rights and to ensure that each staff member has a complete formal record and receives the correct entitlements due to -them.



References:

EASA Intranet - HR Administration & services page



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4.4.1.3 Human Resources management and development

The main objective of the HR Management & development is to develop career and competence in order to maintain and enhance qualification and skills.



References:

EASA Intranet - HR management & development page

4.4.1.4 Training

The training of personnel is considered fundamental in order to continuously maintain and develop the skills and professional expertise. 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 HR Management & Development Section within the Executive Directorate is responsible for organising and implementing the General Training which includes a comprehensive training encompassing a multitude of topics, including: training when entering into service (newcomers), language courses, IT training, financial training, personal effectiveness and communication, "EU affairs" seminars, training in management skills and other areas.



References:

EASA Intranet - General Training catalogue

EASA Intranet - General Training Web page

[EASA Intranet – EASA Learning Gateway](#)

Technical Training

Technical Training pertains to operational activities and addresses a wide range of specific topics (e.g. regulations, implementing rules, audit techniques, new technologies, etc.) whose knowledge and application may directly influence the quality of the processes performed by EASA.

The Technical Training Department is in charge of providing high quality technical training to EASA Staff and to NAA Staff as applicable.



References:

PO.TT.00001 – Policy for technical training

PR.TT.00002 - Technical training procedure

EASA Intranet - Technical Training page

[EASA Intranet – EASA Learning Gateway](#)



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4.4.1.5 Competence

The Agency has implemented a system of job descriptions in order to define both competence levels and main responsibilities **for each post**.



References:
Individual Job descriptions
EASA Intranet – HR page

4.4.1.6 Staff performance

Individual objectives are assigned to the staff on an annual basis.

These objectives are consistent with the objectives defined in the Annual Work Programme . The staff performance is annually evaluated against these objectives within the performance appraisal exercise.



References:
PR.STRAT.00001 - Strategy development procedure
ED Decision ED/2007/131/A - Establishing the policy and procedure for the performance appraisal of staff
ED Decision ED/2007/132/A - Promotion of Temporary Agents
ED Decision ED/2007/156/A - Promotion of Contract Agents

4.4.2 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 which 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 Decision 06/2009– Agency's Financial Regulation
EASA MB Decision 07/2009 – Implementing rules
PO.HR.00119 – Sensitive functions policy
PO.HR.00180 – Code of conduct for the staff of EASA policy
WI.HR.00065 – Work instruction on Implementing Rules for EASA standard 14 on sensitive functions

4.4.3 Infrastructures and work environment

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



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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

Medical advisor



References:

EASA Intranet - Facility management page
EASA Intranet – Travel management page
EASA Intranet – Information Services page

4.4.4 Business continuity

A Business continuity plan is required to EASA since the Agency is a key part of the European Union's strategy for civil aviation safety in Europe and carries out specific regulatory, monitoring and executive tasks in the field of aviation safety. For EASA the focus is on the continuity of operations for the Information Service Department (IT recovery plan).



References:

PO.ITMNT.00008 - Allocation and use of EASA IT resources policy

4.4.5 Crisis Management

In case of crisis in the field of aviation safety, a crisis cell established by the Executive Director is in charge of setting up an action plan, with related resources needed and to monitor the reaction of the Agency to the crisis.



References:

FO.EXCOM.00012 – Crisis event log book form



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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 detailed duties and responsibilities (Detailed working level).

5.1.1 End to end process mapping

The Agency has identified 3 main categories of processes:

- **Core processes:** These processes are related to the mission of the Agency as defined in the Basic Regulation.
- **Support processes:** These processes ensure the effective and efficient implementation of the core processes via administrative, logistic, legal, communication, quality and operational support.
- **Management processes:** These processes contribute to the implementation of the operational processes via appropriate planning, reporting and ~~support to the management strategy development.~~

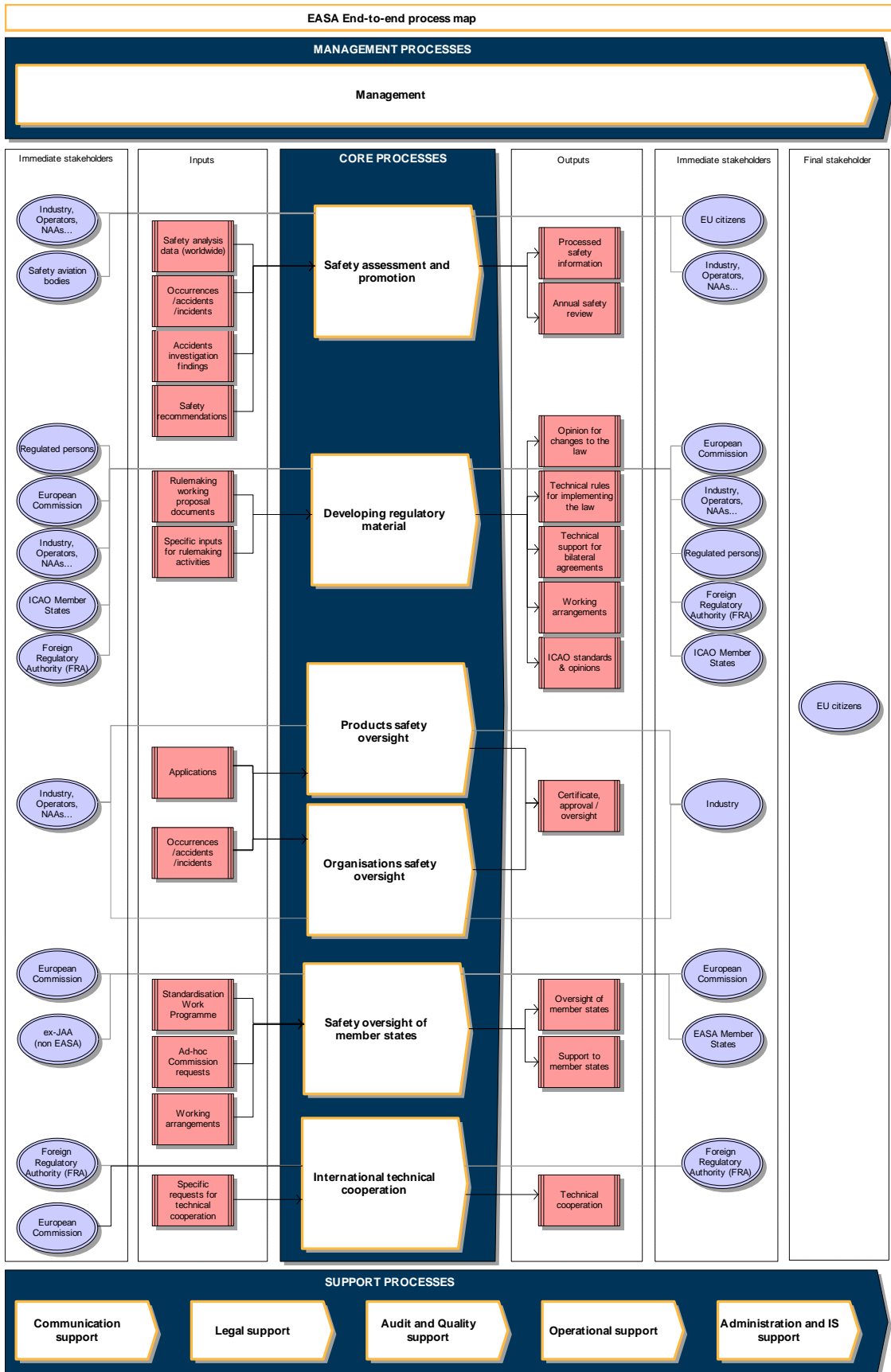


Figure 9
End to end process mapping



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5.1.2 Process list and process owners

The general end to end process map has been streamlined in a process list and specific levels of sub processes have been identified. At each level the appropriate process owner is identified and the general responsibilities defined in ED decision No 2009/089/E.



References:

LI.BPM.00002 - EASA Process map

Decision No 2009/089/E of the Executive Director of the European Aviation Safety Agency on the Agency Integrated Management System

5.1.3 Process documentation

In the framework of the IMS documentation, the Agency has drafted proper 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 process designers, quality coordinators and the Internal Audit & Quality Department 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 of records to provide evidence of the work performed.

5.1.4 Description of EASA Core processes

5.1.4.1 Safety assessment and promotion

The Safety assessment and promotion process consists of collecting data, conducting analysis and providing reports concerning the safety of European and world-wide aviation. It provides coordination for internal and external safety improvement initiatives and acts as the focal point for coordination of aviation accident and incidents investigation and safety recommendations.

5.1.4.2 Developing regulatory material

The process of developing regulatory material consists in issuing:

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

The bilateral agreement and working arrangement activity consists in establishing working arrangements with foreign NAAs or assisting the European Commission in the negotiation of Bilateral Air Safety Agreements (BASAs) in order e.g. to facilitate the free movement of European products and services worldwide or to improve cooperation with third countries.

In addition a specific task is performed by the European Aviation Safety Agency for the provision of recommendations to the European Commission for European States answers to certain ICAO State Letters.

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, parts & appliances



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- performing safety oversight over approved products, parts and appliances ensuring their continuing airworthiness during the complete life cycle
- taking corrective and preventive actions by means of Airworthiness Directives

As soon as the relevant rules will enter into force, EASA will be responsible for the operational certification of the products through the issuance of Operational Suitability Data (OSD) (expected end of 2012).

5.1.4.4 Organisations oversight

The Organisations oversight process consists of 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 oversight of pan-European or third-country air navigation service providers in 2011, and the oversight of non-EU air crew training and aeromedical centres in April 2012. As soon as the relevant implementing rules are in place, this area of activity will also encompass the authorisation of Third Country Operators.

EASA also approves production organisations located in one or more Member States, if so requested by the Member State(s) concerned.

~~The process also ensures the continuous compliance of approved organisations by performing appropriate oversight.~~

5.1.4.5 Safety oversight of Member States

The Safety oversight of Member States process ensures 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 (Airworthiness, FCL and ATM/ANS);
- Conduct **standardisation inspections of all EASA Member States** on OPS, until the entry into force of the relevant implementing regulations;
- Conduct **standardisation inspections of ex-JAA (non-EASA) NAAs** in the domains listed above
- Prepare for the **extension of the scope** of the Agency and the performance of standardisation inspections in the field of Aerodromes ~~and ATM/ANS~~;
- Conduct **international standardisation inspections** related to Bilateral Aviation Safety Agreements or Working Arrangements;
- Provide central management, data analysis and standardisation inspections for all EU and non-EU ECAC states involved in the Community SAFA programme.

5.1.4.6 International technical cooperation

International technical cooperation consists of assisting third countries in improving their regulatory and oversight capabilities through the development and implementation of assistance projects in foreign countries.



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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 compulsory regulations, MB decisions and ED decisions.

5.2.1 Determination and review of service requirements

For each core process the “service” requirements (see outputs in figure 9) are defined in the **applicable legislation-, MB decisions and ED decisions.**

These requirements are considered as the process drivers and are implemented through 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 updating of operational documents and the awareness of all the affected technical 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 has to develop the maximum effort to take into account our stakeholders’ needs and expectations in terms of offering an efficient service.

This analysis is performed in a centralised way according to the process of analysing Stakeholder feedback and complaints.



References:

- PO.STKFB.00029 - Policy on stakeholder feedback and complaints management
- PR.STKFB.00001 - External stakeholder feedback management
- PR.STKFB.00002 - External complaint 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 2.4.

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 Circa are used to disseminate documents and information focusing on specific Groups (NAAs, European ICAO Contracting States). In addition appropriate communication is delivered during conferences, workshops, meetings and seminars.



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References:

PO.EXCOM.00001 - External communication policy

EASA Website

EASA News

PO.STKFB.00029 - Policy on stakeholder feedback and complaints management

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 record is protected and handled within the framework of the records management policy. ~~As regards other types of documents, they are included in the draft EASA policy on information security classification, which is under consultation.~~

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



References:

PO.DRM.00012 - Records management policy

5.4 Design and development

The requirements related to Design and Development are applicable to the Rules development process.

In this process any Opinion for changing the law in force or any document subject to approval through Agency Decision is properly designed and developed through specific stages. The Opinions issued by the Agency are then subject to the legislative process.

Within the limit of the Management Board decision on Rulemaking **MB 01/2012** the applicable requirements for Design and Development are taken into account:

- Planning
- Design and Development Inputs
- Design and Development Outputs
- Validation and Verification
- Monitoring of changes



References:

MB Decision 01/2012 - Concerning the procedure to be applied by the Agency for the issuing of opinions, certification specifications and guidance material ("Rulemaking procedure")

PR.RPRO.00001 – Process a rulemaking task procedure

PR.RMP.00001 – Annual rulemaking programme procedure

5.5 Verification, validation and monitoring

Within each specific 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.



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5.6 Identification and traceability

The identification of all records released by the Agency is carried out in different ways according to the identification and filing rules developed in the records management policy. 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.



References:

- PO.DRM.00012 - Records management policy
- PR.DRM.00005 - Records management procedure
- WI.DRM.00009 - Guidelines for creating File plans and RMWI

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 ("Terms of Reference").

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
- EASA Financial Regulation
- PR.PROC.00001 - Low value procurement process (contract value <60.000€)
- PR.PROC.00002 - High value procurement process (contract value >60.000€)

5.7.2 Outsourcing of certification tasks

According to the Basic Regulation, the Executive Director of the Agency may allocate certification tasks to National Aviation Authorities (NAAs) and Qualified Entities (QEs).

Further guidelines for such allocation of tasks have been established by the EASA Management Board (MB).

Framework Service Contracts are concluded between the Agency and the NAA and/or QE so that, when Purchase Orders are issued, they can assist the European Aviation Safety Agency in the execution of its certification tasks as specified in Articles 20, 21, 22 and 23 of Regulation (EC) No 216/2008, and by providing other related services.



References:

- MB Decision 04/2009 – On guidelines for the allocation of certification tasks to National Aviation Authorities or Qualified Entities



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MB Decision 01/2011 - On guidelines for the allocation of certification tasks to National Aviation Authorities and Qualified Entities (repealing MB Decision 04/2009)
~~PR.RELMA.00002 - NAA relationship management procedure~~
~~PR.CERTOASALL.00002 - Outsourcing of certification tasks procedure~~

5.7.2.1 Outsourced Service information

The requirements for the provision of outsourced tasks to an accredited NAA and/or, ~~in the near future~~, an accredited QE, are defined in dedicated framework contracts signed between EASA and each service provider. In particular, the **performance** of the allocated task must be performed according to EASA's technical processes that are communicated in advance, and reporting obligations to the Agency are clearly described.

Then, the chosen provider receives a description of each task to be performed through the dedicated purchase order issued by the Agency.

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

The initial assessment of capabilities of NAAs, including availability of qualified staff to perform the allocated tasks, and the continuous surveillance is managed through the Accreditation process. Due to the recent extension of the allocation of certification tasks to QEs, the same accreditation requirements will be applied as of 2012 to the newly selected providers in order to authorise them to work on behalf of the Agency. The maintenance of capabilities of accredited entities is then check through the continuous accreditation oversight performed by the Agency.

The verification of the quality of the outsourced services is carried out, for the technical part, in the context of the certification project management to be performed by the Agency, and for the administrative part, in the context of the contract monitoring.



References:
PR.ACC.00001 - Accreditation procedure

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 device.~~

~~In the Agency several software tools are used to facilitate the daily activities and to support the operational processes.~~

~~With respect to the software that is considered to have an impact in the quality of the service delivered, specific controls are carried out within the Information services process.~~

~~Confirmation of the ability of this software to satisfy the intended application and to maintain its suitability for use is ensured mainly via appropriate maintenance contracts and through the EASA Service desk activity.~~



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6 Monitoring, measurement and analysis

6.1 Generalities

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 (see chapter 7).

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, annual KPIs and targets are established. The analysis of these KPIs and the achievement of the targets are done partly through their inclusion in the Work Programme and their assessment in the Annual General Report, partly through inclusion into the Agency scoreboard or into specific Directorate, Department or Section scoreboards. Annual KPIs are updated with the frequency required to decide improvement action proactively, and communicated to all concerned process actors.

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.REPO.00007 - Regular reporting objectives / KPIs procedure

PR.REPO.00008 - Annual general report procedure

PR.BPM.00001 – Business Process Management procedure

WI.BPM.00007 – Process performance monitoring work instruction

6.3 Stakeholder satisfaction

Active and passive solutions are implemented for collection and analysis of external stakeholder feedback. The active solution consists of sending questionnaires for the evaluation of the concerned process, and collecting information during meetings with external stakeholders; whereas passive solution is achieved through implementation of on-line feedback form on the EASA website.

In addition the Agency analyses complaints lodged by external parties.

Regarding internal stakeholder feedback, Process Owners may launch specific stakeholder satisfaction surveys ~~as an input to consider improvements in their processes~~.

The analysis of the stakeholder feedback is used as an input for the improvement phase.



References:

EASA Intranet – Internal Audit and Quality page

EASA Website – Quality Management page

PO.STKFB.00029 - Policy on stakeholder feedback and complaints management

PR.STKFB.00001 - External stakeholder feedback management procedure

PR.STKFB.00002 - External complaint management procedure

~~ED Decision 2009/078/E – Adopting the Code of Good Administrative Practice for the staff of the European Aviation Safety Agency in their relations with the public~~

PO.HR.00180 – Code of conduct for the staff of EASA policy



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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 eliminate the root cause of repetitive nonconformities, then a corrective action will be created.



References:

PR.INTAU.00002 – Internal auditing procedure

PR.ACTFU.00001 - EASA IMS related actions follow-up 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 risk** are analysed and identified as part of the request for exception, to allow further improvement actions at process level.



References:

PR.EXCEP.00001 – 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 71 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 function of the Internal Audit & Quality Department 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 IIA). It also reports annually on the internal audit activity (article 72 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 (Institute of Internal Auditors, IIA)

PO.INTAU.00020 - Internal Audit policy (charter)

PR.INTAU.00002 – Internal auditing procedure

PR.ACTFU.00001 - EASA IMS related actions follow-up procedure



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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 twice a year. It issues a specific report on the Agency's financial statements and management. This report is one of the elements on which the European Parliament bases 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 audited by the FAA in the framework of the bilateral agreement between the EU and US.~~

- Basic Regulation Article 62 evaluation

In accordance with Article 62 of the Basic Regulation the Management Board shall commission an independent external evaluation on the implementation of this Basic Regulation.

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



References:

EASA Intranet - Internal Audit and Quality page

PR.ACTFU.00001 - EASA IMS related actions follow-up procedure

6.7 Safety analysis

Aviation safety issues (for example, occurrences analysis, results of accident investigations, safety recommendations) are regularly reviewed and discussed by the Internal Safety Committee. Some might have an impact on the Agency IMS. In this case these issues are considered as an input for the management improvement phase.



References:

EASA Intranet – Safety Analysis page

PR.SFANA.00001 – Safety analysis procedure

PR.IORS.00001 – Processing of occurrence reports procedure

6.8 Records of non conformities

All exceptions and nonconformity findings from internal and external audits are properly registered and archived in a centralised digital register/database, the exception register and the central action follow up register respectively.



References:

PR.EXCEP.00001 – Exception management procedure

PR.ACTFU.00001 - EASA IMS related actions follow-up procedure

PR.INTAU.00002 – Internal auditing procedure



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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:

- Agency scoreboards
- Key performance indicators as defined in the planning phase
- Stakeholder feedback
- Non conformity data (e.g. audit findings, exceptions)
- Previous EASA IMS related actions
- Safety related actions affecting the Agency management system



References:

- PR.REPO.00005 – Fees and charges reporting procedure
- PR.REPO.00006 – Annual closing procedure
- PR.REPO.00007 - Regular reporting objectives / KPIs procedure
- PR.REPO.00008 - Annual general report procedure
- PR.STKFB.00001 - External stakeholder feedback management
- PR.STKFB.00002 - External complaint management
- PR.INTAU.00002 – Internal auditing procedure
- PR.EXCEP.00001 – Exception management procedure
- PR.ACTFU.00001 - EASA IMS related actions follow-up procedure
- PR.SFANA.00001 – Safety analysis procedure
- PR.IORS.00001 – Processing of occurrence reports procedure
- PR.MRIMS.00001 - Management Review of the EASA IMS procedure
- PR.BPM.00001 – Business Process Management procedure

6.10 Reporting of serious wrongdoings

This is a specific requirement coming from the ICS and is mentioned with respect to the monitoring of financial issues.

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.

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 serious wrongdoing.



References:

- PR.LEGAL.00005 - Process report of serious wrongdoing procedure
- ED Decision 2009/078/E – Adopting the Code of Good Administrative Practice for the staff of the European Aviation Safety Agency in their relations with the public
- PO.HR.00180 – Code of conduct for the staff of EASA policy



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7 Improvement

The outcome of 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
- Implementation of EASA IMS related actions

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 Directors meetings, Internal Safety Committee meetings, Internal Research Committee meetings, COMINFO meetings, Management Board meetings and the bi-annual Management Review meeting.

The bi-annual Management Review meeting, under the responsibility of the Quality Section, aims to review at least the following data and outcomes from:

- Internal and external audits
- Risk management
- Stakeholder feedback
- Process **description and performance** management
- Status of EASA IMS related actions (identifying on schedule or late actions)
- **Closure of actions from the previous Management Review**
- Exception management
- Documents and records management
- Changes that may affect the EASA IMS (regulatory, organisational, budgetary)

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.MRIMS.00001 - Management Review of the EASA IMS procedure
EASA Intranet - Internal Audit and Quality page



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7.2 EASA IMS related actions

Corrective action shall be the preferred means to address all situations where a major or repeated minor non conformity is highlighted.

For any repeated non conformity related to the quality of services or the Agency's processes, specific actions are foreseen at the appropriate level in order to eliminate the causes and to avoid the repetition of the same problem. The IMS related actions follow-up procedure includes the verification of implementation of corrective actions, but also the assurance of their actual effectiveness.

Preventive action and loss prevention shall be the preferred means to mitigate potential non conformities and risks. Whenever a risk has been detected, it is up to the concerned Process Owner to designate a problem solver to take the responsibility for implementing the preventive action as appropriate.

The Internal Audit & Quality Department maintains a central database with all information relevant to the follow-up of EASA IMS related actions.



References:
PR.ACTFU.00001 - EASA IMS related actions follow-up procedure

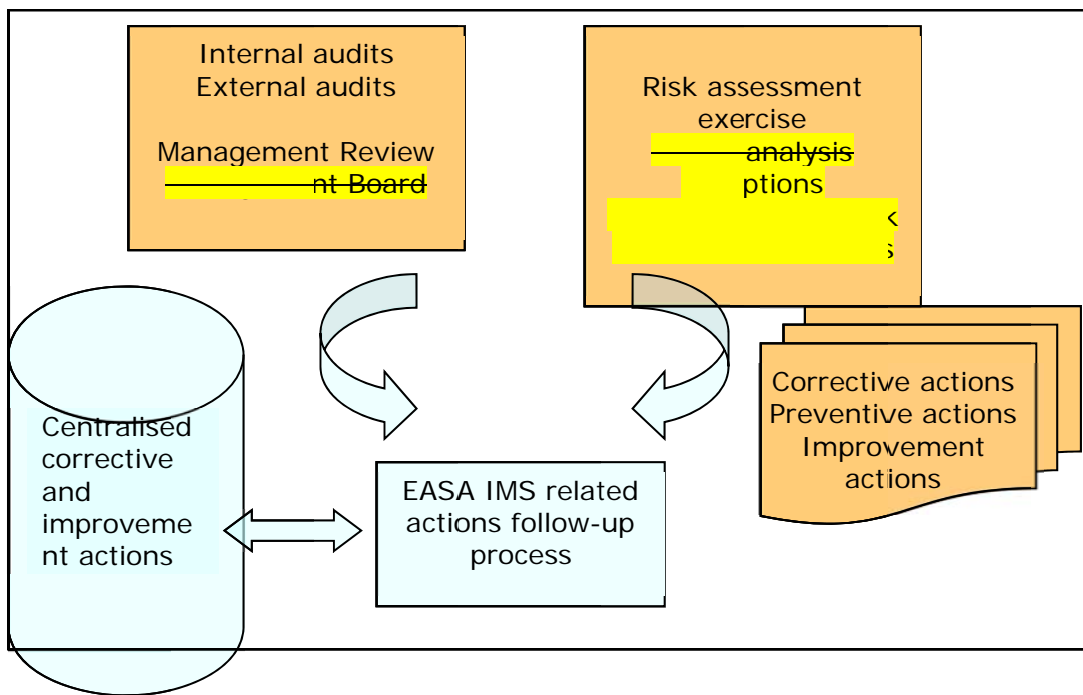


Figure 10
EASA IMS related actions follow-up process



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Annex 1. ISO 9001:2008 Certification



Certification
Awarded to

EASA
Ottoplatz 1
50679 COLOGNE
GERMANY

Bureau Veritas Certification certify that the Quality Management System of the above organisation has been audited and found to be in accordance with the requirements of the management system standards detailed below

Standards

NF EN ISO 9001 : 2008

Scope of supply

DEFINITION, IMPLEMENTATION AND MONITORING OF COMMON TECHNICAL REQUIREMENTS AND ADMINISTRATIVE PROCEDURES IN THE FIELD OF CIVIL AVIATION SAFETY AND ENVIRONMENTAL PROTECTION.

Original Approval Date: **15th December 2010**

Subject to the continued satisfactory operation of the organisation's Management System, this certificate is valid until : **15th December 2013**
To check this certificate validity please call : + 33(0) 4 78 66 82 60
Further clarifications regarding the scope of this certificate and the applicability of the management system requirements may be obtained by consulting the organisation

Date : 15th December 2010
File Number : 2099961

Etienne CASAL
Managing Director





CERTIFICATION D'ENTREPRISES & DE PERSONNELS
ACCREDITATION N°4-002
PORTEE DISPONIBLE SUR WWW.COFRAC.FR

MANAGING OFFICE ADDRESS: Bureau Veritas Certification France – 60, avenue du Général de Gaulle – 92046 Paris – La Défense
ISSUING OFFICE ADDRESS: Bureau Veritas Certification France – 41, chemin des Peupliers – BP 58 – 69573 Dardilly Cedex






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Annex 2. IFACI Certification

N°IFACI/2010/0036r

European Aviation Safety Agency

Ottoplatz 1 – D-50679 Köln – Deutz – Germany

Professional certification of Internal Audit activities

IFACI Certification certifies, as regards the above activities,
that all dispositions are implemented in order to fulfill requirements
of the International Professional Practices Framework (IPPF) - 2009 version.

Certification delivered from
July 6, 2010

until
July 5, 2013

Chairman of the
Certification committee

General Manager of
IFACI Certification

Jacques Renard

Louis Vauris

IFACI Certification - 13 rue de Laborde - 75008 Paris - Tél. : 01 44 70 63 00 - www.ifaci.com