Quality Assurance Procedures Manual

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AMENDMENT RECORD

REVISION NO.	REVISION DATE	REVISED SECTIONS
2	10 Feb 2022	3.1, 3.2, 3.4
1	10 Mar 2017	2, 3.3, 3.4, 3.5, 3.7, 3.8, 4.1, 4.4, 4.5
INITIAL	20 May 2016	New manual

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1 Quality Assurance Program Principles

The Kelowna International Airport is committed to maintaining a high level of quality in operations and has adopted a comprehensive quality assurance program. The quality assurance program is based on a traditional auditing system following general auditing principles established by Transport Canada.

The Kelowna International Airport is mandated to maintain an effective quality assurance program in order to comply with the Canadian Aviation Regulations pertaining to Safety Management Systems for airports. Detailed processes and procedures regarding the Safety Management System are documented in the current Transport Canada approved Airport Safety Management System Manual.

The Quality Assurance Program (QAP) covers all safety significant airside activities, as well as regulated policies, plans, processes and procedures described in the Airport Operations Manual and other documents incorporated by reference.

2 Responsibility for Quality Assurance Program

The Accountable Executive is ultimately responsible for the effectiveness of the Quality Assurance Program. The Accountable Executive has assigned responsibility for the development, management and maintenance of the Quality Assurance Program to the Manager – Airport Safety & Security through the Senior Manager - Airport Operations.

All employees are responsible for maintaining a high level of quality and safety in the completion of their assigned duties. Employees are made aware of their responsibilities in regard to quality and safety. Refer to the YLW Safety Management System Manual Section 1.3 for a detailed breakdown of SMS responsibilities.

3 Quality Assurance Audit Program

3.1 General

Quality Assurance audits are conducted to verify processes and procedures described in approved manuals and policy/procedural documents referenced in the Airport Operations Manual meet the requirements of the CARs, and that the activities are being carried out in accordance with those manuals and/or documents.

3.2 Audit Types

Audits under the Quality Assurance Program may be classified as three types:

1) Routine Conformance Audit – A routine conformance audit is conducted on a regular schedule to determine the overall level of compliance with regulatory requirements and documented procedures. Routine Conformance Audits will form the vast majority of audits conducted under the Quality Assurance Program.

2) Special Purpose Audit – A special purpose audit may be conducted to respond to specific safety concerns or risk indicators. These audits are not scheduled and will be conducted at the discretion of the Manager - Airport Safety & Security.

3) Joint Audit – A Joint Audit is an audit conducted in cooperation with a tenant or external contractor. The purpose of this audit is to promote the sharing of safety information across different organizations and stakeholders at YLW.

3.3 Auditor Qualifications and Training

The Kelowna International Airport does not employ personnel whose sole duty is completion of audits. Audits will be completed by numerous personnel who will be assigned the temporary role of Auditor and will report to the Manager – Airport Safety & Security while completing audits.

The Manager - Airport Safety & Security will nominate personnel to complete audits and will provide all auditors with sufficient training for completion of audits.

Training for Auditors will include: familiarization with relevant manuals, basics of quality assurance / root cause analysis / corrective action, and familiarization with audit systems and software. Additional training may also be provided at the discretion of the Manager – Airport Safety & Security

Where there is conflict of interest, the role of Auditor may be assigned to a person within the City of Kelowna or the Airport for whom no such conflict exists or to an external organization, as necessary.

If the audit is to be conducted by an external organization, the Terms of Reference for the audit shall be determined by the Airport Director. The Audit Plan for all external audits shall be reviewed and approved by the Airport Director or Delegate, prior to the commencement of audit activities. The external organization will appoint a suitably qualified Auditor acceptable to the Airport Director.

3.4 Audit Schedule and Frequency

An audit schedule is established by the Kelowna International Airport to ensure that all required processes are audited at regular, pre-established intervals. The audit schedule is managed by the Manager – Airport Safety & Security.

It is ensured that all processes are audited on a three-year interval through a series of audits in accordance with the audit schedule.

3.5 Audit Process

The objective of the audit process is to evaluate the area being audited for regulatory compliance and compliance with processes contained in company manuals.

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┌─────────────────────────────┐
│   Assigned Auditor receives │
│   notification of audit due │
└─────────────────────────────┘
              │
┌─────────────────────────────┐
│  Auditor logs in to system  │
│       and completes audit   │
└─────────────────────────────┘
              │
┌─────────────────────────────┐
│   Auditor sends completed   │
│   audit to Manager – Airport│
│   Safety & Security or       │
│   delegate for approval     │
└─────────────────────────────┘
              │
         ◇ Audit complete              Manager – Airport
           and acceptable? ── NO ──▶   Safety & Security or
              │                        delegate makes
             YES                       changes and provides
              │                        feedback to Auditor
         ◇ Are there non-      Manager – Airport
           conformances? ─ NO ─▶ Safety & Security or
              │                   delegate approves
             YES                  and closes audit
              │                        │
   Manager – Airport Safety &   Manager – Airport
   Security or delegate reviews  Safety & Security or
   findings and enters approved  delegate files audit
   non-conformances into the     report and indicates
   Corrective Action system      audit completion on
              │                   audit schedule
        Corrective Action              │
        Process                       END
```

3.6 Audit Tools and Documentation

The following software tools may be used in the Audit and Corrective Action processes:

1) iAuditor / Safety Culture
2) Microsoft Sharepoint
3) Microsoft Office

Auditors will log in to the Audit system to complete audits. Check sheets will be used to document each finding of Conformance and Non-Conformance with the regulatory requirements and/or the documented procedures.

All check sheets are reviewed as part of the audit and necessary changes are incorporated. Check sheets are maintained in the system at the current approved version.

While the primary tools for evaluation are the audit check sheets, the auditor may also use observations of activity and interviews as deemed necessary. All information will be documented on the audit check sheet.

3.7 Audit Findings and Observations

If a non-conformance is identified and verified during the audit, it shall be recorded on the audit check sheet and noted in the audit with details of the non-conformance. All findings of non-conformance will be reviewed for validity and severity by the Manager – Airport Safety & Security or delegate and entered into the Corrective Action system.

Where the auditor identifies areas that, while in technical compliance with regulatory requirements, have potential for improvements to be made, the Auditor shall consider recording these on the audit check sheet and/or addressing these things with the Manager in charge of the process. Observations are provided as suggestions only and do not require Corrective Action. The Manager – Airport Safety & Security or delegate will review all observations noted on audits and may enter them into the Corrective Action system for continuous improvement.

3.8 Reporting of Audits

A report of the status of quality assurance audits and resulting findings will be provided to the Accountable Executive quarterly in accordance with the SMS Management Review process.

3.9 Audit Records

All audit records will be stored electronically. Paper copies will be provided, if requested.

All audit records (including resulting Corrective Action Plans) shall be retained for the greater of two years or two audit cycles.

3.10 Review of Quality Assurance Program

Review for effectiveness of the Quality Assurance Program, including audit reports, audit findings and corrective action plans, will be carried our annually as part of the Kelowna International Airport Management Annual Review and documented in the minutes.

4 Audit Corrective Action Plans

4.1 General

All findings of non-conformance resulting from the Quality Assurance Program at the Kelowna International Airport will be entered into the system with a requirement for a corrective action plan to be developed and implemented for each Corrective Action Plan Form issued.

4.2 Corrective Action Plan Timelines

Due dates for response to Corrective Action Plans will be set approximately 30 days from issuance.

In cases where safety of flight and/or persons may be affected, corrective action will be taken immediately.

Whenever possible, short term corrective action(s) will be completed within 30 days of the Corrective Action Plan issue date. Target date(s) for long term corrective actions will be evaluated by the Manager – Airport Safety & Security for acceptability. Dates may be changed if the Manager – Airport Safety & Security believes that it is required and feasible to complete corrective actions sooner than planned.

4.3 Corrective Action Training

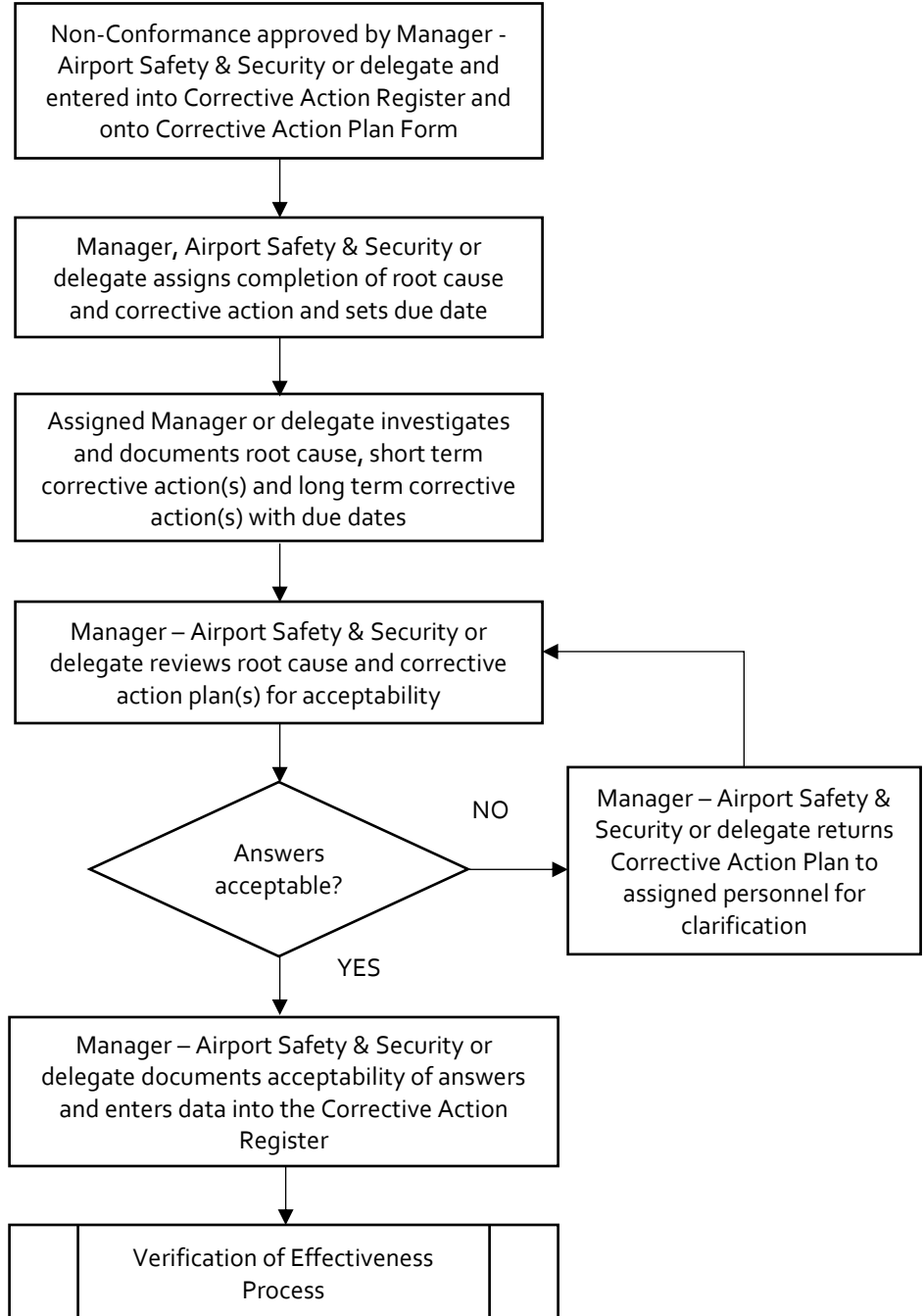All managers responsible for answering Corrective Action Plans through the Quality Assurance Program will be provided appropriate training.

Corrective Action training will include: root cause analysis, corrective action plan development and implementation, and familiarization with audit systems and software.

Additional training may also be provided at the discretion of the Manager – Airport Safety and Security.

4.4 Corrective Action Process

The objective of the corrective action process is to identify root cause and action(s) required to address an audit non-conformance.

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┌─────────────────────────────────────┐
│  Non-Conformance approved by Manager -│
│  Airport Safety & Security or delegate and│
│  entered into Corrective Action Register and│
│  onto Corrective Action Plan Form     │
└─────────────────────────────────────┘
                 │
                 ▼
┌─────────────────────────────────────┐
│  Manager, Airport Safety & Security or│
│  delegate assigns completion of root cause│
│  and corrective action and sets due date│
└─────────────────────────────────────┘
                 │
                 ▼
┌─────────────────────────────────────┐
│  Assigned Manager or delegate investigates│
│  and documents root cause, short term │
│  corrective action(s) and long term corrective│
│  action(s) with due dates             │
└─────────────────────────────────────┘
                 │
                 ▼
┌─────────────────────────────────────┐         ┌──────────────────────────┐
│  Manager – Airport Safety & Security or│        │ Manager – Airport Safety &│
│  delegate reviews root cause and corrective│ ◄──── │ Security or delegate returns│
│  action plan(s) for acceptability     │         │ Corrective Action Plan to │
└─────────────────────────────────────┘         │ assigned personnel for    │
                 │                                │ clarification             │
                 ▼                                └──────────────────────────┘
           ◇ Answers        ── NO ──────────────────────▲
             acceptable?
                 │
                YES
                 │
                 ▼
┌─────────────────────────────────────┐
│  Manager – Airport Safety & Security or│
│  delegate documents acceptability of answers│
│  and enters data into the Corrective Action│
│  Register                             │
└─────────────────────────────────────┘
                 │
                 ▼
┌───┬─────────────────────────┬───┐
│   │  Verification of Effectiveness│   │
│   │  Process                │   │
└───┴─────────────────────────┴───┘
```

4.5 Corrective Action Documentation

All non-conformances identified during audits will be documented on a Corrective Action Plan form and entered into the Corrective Action Register for tracking of status and completion.

Corrective Action Plans shall contain the following elements:

- *Corrective Action Plan (CAP) Number*: Unique identifier for the Corrective Action Plan

- *Non-Conformance*: Details of the non-conformance including the source of the requirement, the requirement, the source of the evidence and the evidence for the non-conformance. The audit that generated the non-conformance will also be identified.

- *Assigned to*: The person assigned completion of the Corrective Action Plan

- *Due Date:* The date by which a root cause and Corrective Action plan must be provided.

- *Root Cause:* Identification of the root cause of the non-conformance.

- *Short Term Corrective Action(s):* Immediate action(s) taken to correct the non-conformance as well as the target date for completion of these actions.

- *Long Term Corrective Action(s):* Long term actions to be carried out to address the root cause of the non-conformance as well as the target date for completion of these actions.

- *Acceptance of Root Cause, Short/Long Term Corrective Action(s):* Indication that the Manager – Airport Safety & Security or delegate has reviewed the answers provided and accepted that the root cause is properly identified and planned action(s) are sufficient to address the root cause.

- *Verification of Effectiveness:* Verification that all planned corrective action(s) have been carried out within the timeline provided and have been effective in sufficiently eliminating and/or mitigating the root cause of the non-conformance. The Corrective Action Plan Form will be reissued if the verification of effectiveness cannot be successfully completed.
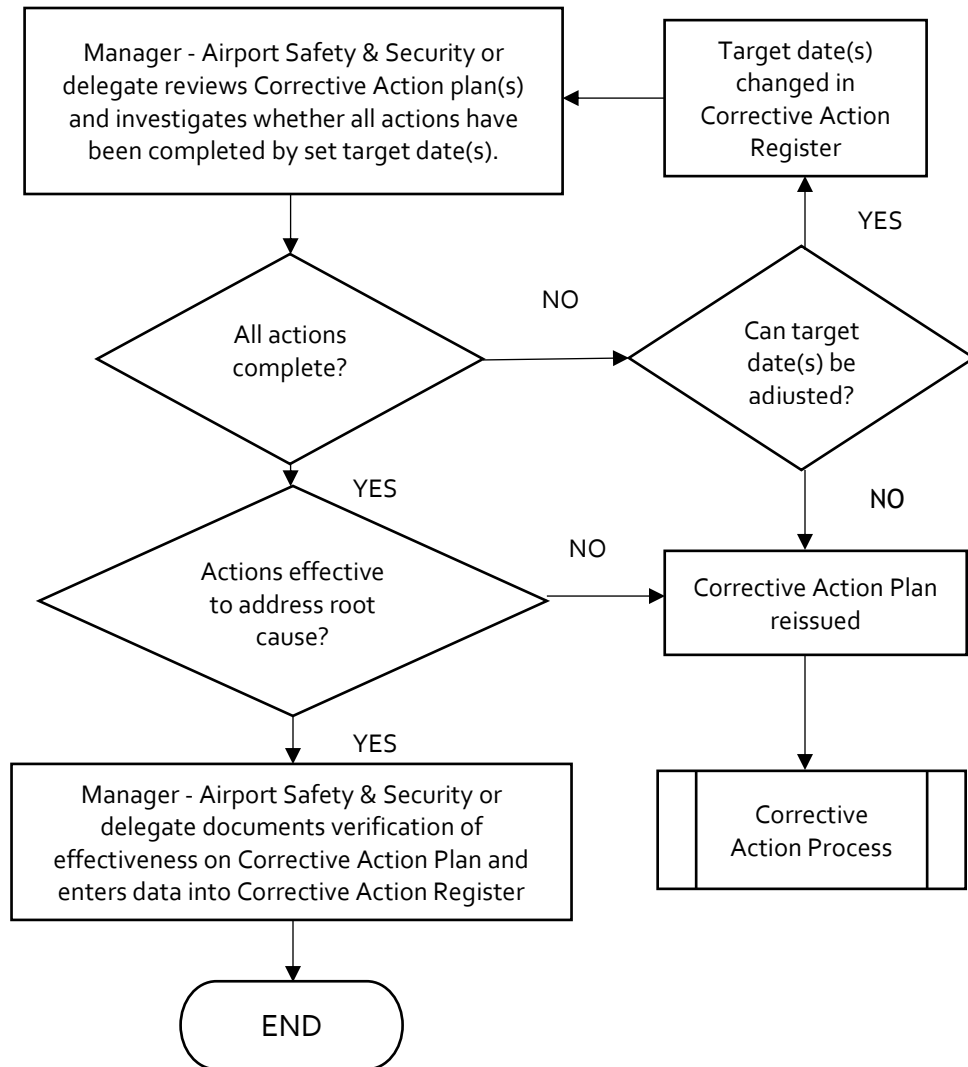
5 Verification of Effectiveness

5.1 General

All Corrective Action Plans generated as a result of Quality Assurance Program audits at the Kelowna International Airport will be required to have a verification of effectiveness completed before they can be fully closed.

Verification of effectiveness will be carried out by the Manager – Aircraft Safety & Security or an appropriately trained delegate.

5.2 Verification of Effectiveness Process

The objective of the verification of effectiveness process is to confirm that Corrective Action Plans have been completed and address the root cause of the associated non-conformance.

```
┌──────────────────────────────────┐        ┌──────────────────────┐
│ Manager - Airport Safety &       │        │   Target date(s)     │
│ Security or delegate reviews      │◄───────│   changed in         │
│ Corrective Action plan(s) and     │        │   Corrective Action  │
│ investigates whether all actions │        │   Register           │
│ have been completed by set        │        └──────────────────────┘
│ target date(s).                   │                    ▲ YES
└──────────────────────────────────┘                    │
                 │                                       │
                 ▼                         NO            │
          ◇ All actions ◇ ──────────────────► ◇ Can target ◇
          ◇ complete?   ◇                     ◇ date(s) be  ◇
                 │                             ◇ adjusted?   ◇
                 │ YES                              │  NO
                 ▼                                  ▼
      ◇ Actions effective ◇    NO    ┌──────────────────────┐
      ◇ to address root   ◇ ───────► │ Corrective Action    │
      ◇ cause?            ◇          │ Plan reissued        │
                 │                   └──────────────────────┘
                 │ YES                          │
                 ▼                              ▼
┌──────────────────────────────────┐  ┌──────────────────────┐
│ Manager - Airport Safety &       │  │ Corrective           │
│ Security or delegate documents   │  │ Action Process       │
│ verification of effectiveness on │  └──────────────────────┘
│ Corrective Action Plan and        │
│ enters data into Corrective       │
│ Action Register                   │
└──────────────────────────────────┘
                 │
                 ▼
            (  END  )
```

5.3 Verification of Effectiveness Documentation

Verification of Effectiveness of Corrective Action Plans will be documented on the Corrective Action Plan form and in the Corrective Action Register.