EASA Compliance Audit – Repeat Finding Considerations

Sofema Aviation (SA) Considers the issues which typically lead to findings repeating over multiple audits.

Introduction

When a non-conformity recurs, following corrective action closure, an auditor must systematically evaluate the breakdown across the analytical, implementation, and governance layers of the organization's EASA Management System.

Evaluating Root Cause Analysis (RCA) Depth and Multi-Factor Drivers

- The primary cause of recurring findings is a RCA process that targets superficial symptoms rather than systemic drivers. (Remember the business area owner is responsible to establish both the Root Causes as well as the Contributing Factors and to provide mitigations for all).

- Organizations often fall into the trap of isolating human error as the ultimate root cause, leading to repetitive and ineffective actions such as retraining personnel, issuing reminder memos, or amending procedures.

Distinguishing Contributing Factors from Root Causes

Contributing factors describe the immediate operational environment:

- Such as staff fatigue, ambient noise, time pressure, or ambiguous task cards.

- Root causes represent the underlying organizational design failures that allow those conditions to persist, such as flawed rostering logic, inadequate tooling budgets, or contradictory operational key performance indicators (KPIs).

Multi-Factor Analysis: Under EASA principles (e.g., ORO.GEN.200, Part-145.A.200, or CAMO.A.200), operational breakdowns rarely stem from a single variable.

- An acceptable RCA must map multiple interacting causal factors across technical, organizational, and behavioral domains.

Important Note: If an organization's RCA framework (e.g., 5 Whys, Fishbone, Bowtie) consistently yields single-point human error conclusions, the RCA methodology itself is non-compliant.

Evaluating Corrective Action Implementation and Verification Deficits

When an RCA successfully identifies systemic drivers but findings still recur, the failure lies within the Corrective and Preventive Action (CAPA) execution and verification mechanisms.

- **Output vs. Outcome Closure Bias:** A common failure mode occurs when the Compliance Monitoring Function (CMF) closes a finding based purely on output verification (e.g., confirming a new procedure was published) rather

than outcome verification (e.g., confirming sustained operational change in practice).

Absence of Post-Implementation Audits: The management system must enforce a mandatory, time-delayed effectiveness review loop.

The CM should keep findings conditionally open or mandate a scheduled follow-up audit within 90 to 180 days to sample the process under real operational conditions before formal closure:

- If the CM closes findings without measuring effectiveness, the breakdown resides within the compliance monitoring process itself.

Diagnosing Management System Weakness and Executive Ownership

Recurring non-conformities often reveal a structural ceiling on local authority:

- Middle managers frequently understand the root cause but lack the budget, cross-departmental authority, or headcount needed to implement a true fix.

The Middle Management Authority Ceiling: When a permanent fix requires capital expenditure, fleet modifications, software integration, or cross-departmental restructuring, operational managers are forced to implement local "band-aid" solutions. The recurring finding is an artifact of this authorization bottleneck.

Accountable Executive (AE) Buy-In & Governance: Under EASA governance structures, the Accountable Manager holds ultimate responsibility for financing and equipping the organization to ensure compliance (e.g., ORO.GEN.200(a)(1)&(2)):

- Persistent recurrence indicates a breakdown in the Safety Review Board (SRB) or Management Review escalation pathways.

- If the AE is not regularly briefed on repeat finding trends, or if resource requests to resolve audit findings are rejected without a formal safety risk assessment, the finding must be elevated to a management system level non-compliance against executive oversight.

Audit Sampling Protocol and Strategic Interview Framework

To determine the precise failure point during an audit, use the following interview strategies and documentation checks.

Targeted Questions for the Accountable Executive

- How are repeat audit findings and systemic compliance trends presented to you during Executive Management Reviews, and what threshold triggers your direct financial or operational intervention?
- When a corrective action requires capital investment or cross-departmental reorganization, what direct approval pathway exists to bypass middle-management resource constraints?

- How do you ensure that the resources allocated across departments are sufficient to address systemic root causes rather than short-term procedural fixes?

Targeted Questions for the Compliance Manager

- What objective evidence does the CM require before formally closing a finding, and what percentage of closed CAPAs undergo a deferred 90–180 day effectiveness audit?
- How do you track, aggregate, and trend root causes across different operational departments to identify underlying management system weaknesses?
- What formal escalation pathway do you use when a department manager proposes a corrective action that you consider insufficient to prevent recurrence?

Key Audit Artifacts to Request

- Minutes, hazard logs, and action item tracking registers from Safety Review Board (SRB) and Management Review meetings over the previous 12 to 24 months.
- CM effectiveness verification audit records and sampling evidence collected post-closure.
- RCA worksheets, causal trees, or risk assessments associated with both the original finding and its subsequent recurrences.
- Capital expenditure applications, resource allocation requests, or business cases submitted by operational managers seeking to resolve compliance findings.

Level 2 Audit Finding Statement: Management System & Executive Governance Oversight

Regulatory Reference:

- EASA ORO.GEN.200(a)(1) & (a)(2) / Part-145.A.200(a)(1) & (a)(2) / CAMO.A.200(a)(1) & (a)(2) – Management System (Accountable Executive Responsibility & Resource Allocation).
- AMC1 ORO.GEN.200(a)(6) / AMC1 Part-145.A.200(a)(6) – Compliance Monitoring Function and Corrective Action Verification Loop.

Finding Classification: Level 2 Non-Conformity (Note: Elevates to Level 1 under ORO.GEN.160 / 145.B.50 / CAMO.B.350 if uncorrected within agreed timelines or if the failure directly reduces safety margins/airworthiness).

Statement of Non-Conformity: The organization’s management system fails to ensure that repeat non-conformities are effectively escalated, resourced, and resolved at the Accountable Executive level. The management system has permitted systemic root causes to remain unaddressed across successive audit cycles,

resulting in recurring operational non-compliances and ineffective corrective action monitoring.

Audit Evidence:

- **Repeat Findings:** Audit Finding [Ref: AUD-XXXXXX] regarding [specific operational process, e.g., tool control / maintenance documentation] was closed on [Date] based on procedural updates. An identical non-conformity recurred under Audit Finding [Ref: AUD-2025-004] and again during Audit [Ref: AUD-XXXXXX].
- **Superficial Root Cause Analysis:** Root Cause Analyses (RCA) for Findings [AUD-XXXXXXX] and [AUD-XXXXXX] relied on isolated human error ("staff failed to follow procedure") and implemented localized actions ("reminded staff / updated SOP"). The RCA failed to evaluate underlying systemic drivers, such as shift handovers, staffing levels, and conflicting operational KPIs.
- **Governance Breakdown:** Review of Safety Review Board (SRB) and Management Review minutes over the past 12 months showed that recurring non-conformity trends and operational resource deficits were not escalated to or reviewed by the Accountable Executive.
- **Resource Allocation Ceiling:** Line management documented capital and personnel constraints as the barrier to a permanent fix in [Internal Memo Ref / Date], yet no formal risk assessment or resource allocation request was presented to the Accountable Executive for authorization.
- **Verification Loop Failure:** The Compliance Monitoring Function closed the initial findings based solely on paper proof of SOP amendments without performing a mandatory 90–180 day post-implementation effectiveness audit.

Safety Impact & Systemic Assessment: Operating a compliance system that closes findings on paper without resolving underlying operational enablers undermines the integrity of the Safety Management System. When middle management lacks the cross-departmental authority or budget to resolve root causes, the failure ceases to be an operational issue and becomes a structural breakdown of executive governance.

Required Action:

- **Immediate Mitigation:** Re-open Finding [Ref: AUD-XXXXXX] and execute a multi-factor Root Cause Analysis incorporating operational, resource, and management factors.
- **Governance Integration:** Implement an automated escalation mechanism within the Compliance Monitoring Manual (CMM) requiring any repeat finding to be logged directly onto the Accountable Executive’s risk dashboard and SRB agenda.
- **CMF Effectiveness Verification:** Establish a mandatory post-closure effectiveness audit sampling protocol within the CMF for all complex or repeat CAPAs prior to final administrative closure.