



International
Civil Aviation
Organization

Organisation
de l'aviation civile
internationale

Organización
de Aviación Civil
Internacional

Международная
организация
гражданской
авиации

منظمة الطيران
المدني الدولي

国际民用
航空组织

Ref: ES AN4/44 - 0595

14 September 2009

Subject: AFI RMA Safety Assessment Data

Action Required: Reply Monthly to the ARMA until further notice

Sir/Madam,

I have the honour to draw your attention to the outcome of the eighth (Special) AFI Regional Air Navigation Meeting (SP AFI RAN 8) held in Durban, South Africa, from 24 to 29 November 2008, in particular Recommendation 6/8 thereof, the text of which is reflected below:

Recommendation 6/8 — Reduced Vertical Separation Minimum (RVSM) monitoring and follow-up activities

That AFI States support:

- a) *the long-term submission of State RVSM operationally approved aircraft to the AFI Regional Monitoring Agency (ARMA);*
- b) *provision of long-term support to the AFI height monitoring programme;*
- c) *long-term collection of safety assessment data;*
- d) *the availability of personnel to fulfil the role of RVSM National Programme Managers;*
- e) *the establishment of the ARMA scrutiny group in 2009; and*
- f) *Measures to reduce the large number of horizontal incidents in the AFI Region.*

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In order to demonstrate the safe maintenance of Reduced Vertical Separation Minimum (RVSM) operations, it is imperative that sufficient operational and technical data is assembled to calculate the associated risk estimates. This data is required in the long term on a monthly basis by the ARMA until further notice and its importance cannot be overemphasized.

I attach hereto for your kind consideration and action, four relevant forms (in one excel file), and an example of information required on the revised Form 4. These forms have to be completed on a monthly basis and dispatched to the AFI Regional Monitoring Agency (ARMA) by the most convenient method, preferably by e-mail using the following ARMA email addresses:

Email: To - afirma@atns.co.za and copy – armad@atns.co.za

If your States/FIR's is already complying with this requirement on a monthly basis, you are urged to kindly continue to do so. The electronic blank forms in excel spreadsheet format are obtainable from the ARMA on request by e-mail or can be downloaded from the ARMA webpage (<http://www.atns.co.za/afi-rvsm>).

Accept, Sir/Madam, the assurances of my highest consideration.



Geoffrey Moshabesha
Regional Director

Attachments: ARMA Forms 1, 2, 3 and 4 in excel format



AFI REGIONAL MONITORING AGENCY (ARMA) (FORM 1)

HEIGHT I ("No event reported" or Complete Appropriately)					
STATE:		ACC:		MONTH:	
State of Registry					
Flight Identification					
Operator					
State of Operator					
Aircraft Type & Series					
Registration					
Serial Number					
Mode S Address					
Total height Deviation					
Total time of deviation					
Cause of Deviation					
Date & Time of Measurement	Assigned Flight Level	Observed Flight Level	Air Route	Geographical Location	Geographical Location
Provide description of incident including total height profile if available					
Include Number from List Below					
1. Error in altimetry or altitude-keeping system of an aircraft					
2. Turbulence or weather related phenomena					
3. Emergency descent by aircraft without crew following established contingency procedures					
4. Response to Airborne Collision Avoidance System (ACAS) advisories					
5. Error in following a correctly issued Atc clearance, resulting in flight at an incorrect level					
6. Error in issuing ATC Clearance, resulting in flight at an incorrect flight level					
7. Errors in coordination or transfer of control responsibility fo an aircraft between adjacent ATC Units, resulting in flight at an incorrect level					
8. Other reason, include reason in Description of incident					
NOTE: Complete with available information					



AFI REGIONAL MONITORING AGENCY (ARMA)

MONTHLY MOVEMENTS

(Form 2)

STATE:

ACC:

MONTH:

TOTAL IFR MOVEMENTS FOR THE MONTH:

TOTAL MONTHLY MOVEMENTS IN THE BAND F290 - F410:

AVERAGE TIME PER MOVEMENT IN THE LEVEL BAND F290 -F410

LEVEL FLIGHT

CLIMBING AND DESCENDING



AFI REGIONAL MONITORING AGENCY (ARMA)

OTHER OPERATIONAL CONSIDERATIONS				(Form 3)
STATE: ACC: MONTH:				
COORDINATION FAILURES:				
NUMBER OF EVENTS IN MONTH				
COMMUNICATION FAILURE				
DATE	TIME	DURATION	CAUSE OF COMMUNICATION FAILURE	
TOTAL TIME FOR MONTH				
TURBULENCE			NUMBER RECORDED: 0	
DATE	TIME	DURATION	MAGNITUDE*	LOCATION
*Magnitude as measured from Meteorology Turbulence Scale				
ACAS INCIDENTS			NUMBER RECORDED: 0	
DATE	TIME	DESCRIPTION OF ACAS INCIDENT		

