**Safety Case Review Checklist[[1]](#footnote-1)**

|  |  |  |  |
| --- | --- | --- | --- |
| **BASIC INFORMATION** | | | |
| **Title:** |  | | |
| **Safety Case Number:** |  | **Submission Date:** |  |

|  |
| --- |
| **OBJECTIVES FOR Review of safety assessment documentation** |
| * Review safety case for compliance with the service provider’s approved Safety Management System (SMS) Manual * Identify any high risk hazards and proposed mitigations * Identify any missing information * Develop recommendation for **Approval** or **Rejection** of the safety case |

|  |  |  |
| --- | --- | --- |
| **Preliminary review** | | |
| **Indicator** | **Response** | **Comments** |
| Does the safety case contain all elements required by the approved SMS Manual?   |  |  | | --- | --- | | 1. Implementation Decision (approval per signature page) | Choose an item. | | 2. Current System | Choose an item. | | 3. Proposed Change | Choose an item. | | 4. Assumptions or Bounding | Choose an item. | | 5. Hazard Identification | Choose an item. | | 6. Estimated Risk | Choose an item. | | 7. Hazard Mitigation/Tracking | Choose an item. | | 8. Hazard Monitoring | Choose an item. | | 9. Impacted Organizations | Choose an item. | | Choose an item. |  |
| Does the safety case affect any existing regulations or directives? | Choose an item. |  |
| Have necessary supporting references been included in the safety case, or are they easily referenced? | Choose an item. |  |
| Are the safety documents signed by the service provider? | Choose an item. |  |

|  |  |  |
| --- | --- | --- |
| **Evaluation** | | |
| **Indicator** | **Response** | **Comments** |
| **System Description** | | |
| Does the safety case contain a description of the current system? | Choose an item. |  |
| Does the safety case contain a description of the proposed change? | Choose an item. |  |
| Do the description of the current system and the proposed change contain sufficient detail to determine whether the proposed change has a significant impact on safety? | Choose an item. |  |
| Does the safety case identify stakeholders affected by the proposed change? | Choose an item. |  |
| Complex system changes may require that a panel of subject matter experts be convened to identify hazards, establish mitigations, and assess risk.  Has a panel of experts been convened? | Choose an item. |  |
| **Hazard Identification** | | |
| Are the identified hazards described in detail? | Choose an item. |  |
| Has a description of the hazard identification methodology been included? | Choose an item. |  |
| Have initial existing controls been identified? | Choose an item. |  |
| Do the Controls described in the Hazard Analysis Worksheet(s) clearly map to the Causes? | Choose an item. |  |
| Have any high risk hazards been identified? | Choose an item. |  |
| **Estimated Risk** | | |
| Has the risk of the proposed change been estimated? | Choose an item. |  |
| Have the methodology and tools used to determine the risk been described in the document? | Choose an item. |  |
| Severity is determined by the worst credible potential outcome.  Have the most severe effects been considered? | Choose an item. |  |
| Is the scope of the safety case appropriate to any high risk(s) identified? | Choose an item. |  |
| Are initial risks and residual risks (post-proposed mitigations) identified in the Hazard Analysis Worksheet(s)? | Choose an item. |  |
| Is the residual risk at or below an acceptable level? | Choose an item. |  |
| **Hazard Mitigation** | | |
| Have the hazard mitigation strategies and control efforts been identified and documented? | Choose an item. |  |
| Has the methodology for tracking hazards and verifying effectiveness of mitigation controls throughout the lifecycle of the system or change been identified and documented? | Choose an item. |  |
| When risk mitigation strategies cross organizations, risk acceptance and approval from those stakeholder organizations is necessary.  Has approval been acquired? | Choose an item. |  |
| **Hazard Monitoring** | | |
| Have the method(s) that will be used for monitoring operational data to ensure hazards are controlled been identified and described? | Choose an item. |  |
| Does the safety case relate to previous safety case(s)? | Choose an item. |  |
| If so, does the safety case include evidence that previously approved mitigations were implemented? | Choose an item. |  |

|  |  |  |
| --- | --- | --- |
| **decision** | | |
| Based on review and evaluation of the safety case, which of the following responses does the review team recommend? (Choose one). | | |
| **Acceptable:**  The documentation provided meets or exceeds requirements in accordance with the SMS manual and no further action is required | **Acceptable with concern(s):**  The requirement item(s) is/are acceptable; however, the review team has some minor concerns | **Unacceptable:** The documentation provided does not meet the minimum requirements in accordance with the SMS Manual |
| **Justification:** | | |
|  | | |
| **Does the review team Approve the mitigations for high risk hazards proposed in the safety case?** | Choose an item. | **Comments:** |
|  |
| **Does the review team Accept the proposed mitigations for medium-risk hazards?** | Choose an item. | **Comments:** |
|  |

1. This checklist is structured according to concepts currently used by the U.S. Federal Aviation Administration Air Traffic Safety Oversight Service to provide independent safety oversight of Air Navigation Service Providers. Adoption or use of this checklist does not guarantee compliance with any international standards. [↑](#footnote-ref-1)