INTERNATIONAL CIVIL AVIATION ORGANIZATION

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> > 10 August 2004

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Ref: ES AN 4/44 - 0607

Subject: AFI RVSM Safety Assessment

Action Required: Reply by 30 September 2004

Sir/Madam,

I have the honour to draw your attention to APIRG/14 meeting held in Yaounde, Cameroon, from 23 to 27 June 2003. APIRG/14 Conclusion 14/21 and AFI RVSM Task Force/4 meeting Conclusions 4/1 *inter alia* advocated as follows:

Conclusion 14/21: Implementation of RVSM in the AFI Region:

That:

States do their utmost to implement RVSM in selected airspaces, as per plan by AIRAC cycle date of 20 January 2005 concurrently with the CAR/SAM Region

Conclusion 4/1

That:

That AFI RMA undertakes safety assessment as a matter of urgency

As you are aware, the introduction of RVSM must be done in conjunction with a thorough assessment of the safety implications that will result from this change of operation within the Region. As required in other regions AFI RVSM has to demonstrate to the international aviation community that the Target Level of Safety (TLS) set out by ICAO for the vertical collision risk will not be exceeded in the AFI RVSM Airspace.

An AFI RVSM Pre-Implementation Safety Case is therefore required to provide the assurance that the objectives stated in the AFI RVSM Safety Policy are met. Evidence must be provided that (i) all identified hazards and risks are managed and mitigated, and (ii) the collision risk meets the ICAO Target Level of Safety. In order to demonstrate that these required objectives are met, appropriate risk estimation methodologies will need to be available, and sufficient operational and technical data will need to be collected to obtain risk estimates with sufficient confidence.

As you are aware, each State is also responsible for the safe implementation of RVSM in the airspace over which it has jurisdiction and will be responsible for providing assurance that their responsibilities have been met. All Area Control Centres (ACC) will be required to conduct monitoring of aircraft height deviations in the AFI RVSM airspace and forward the relevant data to the AFI RMA on a monthly basis.

Attached please find the relevant forms required for monitoring of aircraft height deviations that need to be completed monthly. I would be grateful if you could forward copies of the completed forms to the AFI Regional Monitoring Agency (ARMA) as soon as possible, but not later than **30 September 2004.**

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

Attachments:

Height Deviation and Traffic Data Forms (1 – 5)

AFI REGIONAL MONTORING AGENCY (ARMA)

(Form 1)

HEIGHT DEVIATIONS

STATE:	AC	C:	MONTH:	
State of Registry				
Flight Identification				
Operator				
State of Operator				
Aircraft Type and Serie	es			
Registration				
Serial Number				
Mode S Address				
Total height deviation				
Total time of deviation				
Cause of Deviation ¹				
Date and Time of Measurement	Assigned Flight Level	Observed Flight Level	Air route	Geographical Location
Provide description of i	incident including total hei	ight profile if available.		
 2. Turbulence or w 3. Emergency des 4. Response to Air 5. Error in following 6. Error in issuing 	y or altitude-keeping syster veather related phenomen scent by aircraft without creation rborne Collision Avoidance g a correctly issued ATC of an ATC clearance, resultion naton of transfer of contract	na ew following established e System (ACAS) advisc clearance, resulting in flig ing in flight at an incorrec	ories ight at an incorrect flight ct flight level	level

8. Other reason, include reason in Description of Incident

A	AFI REGIONAL MONTORING AGENCY	<u>′ (ARMA)</u>	
	MONTHLY MOV	EMENTS	(Form 2)
STATE:	ACC:	MONTH:	
TOTAL IFR MOVEME	ENTS FOR THE MONTH:		
TOTAL MONTHLY IF	R MOVEMENTS IN THE BAND F290	0 - F410	
AVERAGE TIME PER	R MOVEMENT IN LEVEL BAND F29	0 - F410	
	LEVEL FLIGHT		
	CLIMBING AND D	DESCENDING	
			•

		AFI REGION	NAL MONTORIN	IG AGEN	icy (Arma)		
		0			L CONSIDER	RATIONS	(Form 3)
STATE:			ACC:			MONTH:	
COORDINATIC	N FAILURES				1	7	
	NUN	IBER OF E	VENTS IN MON	ITH			
COMMUNICAT							
DATE	TIME	DURATION		CA	USE OF COMMUNIC	ATION FAILURE	
	+						
	+						
	1	TOTAL TIM	E FOR MONTH				
TURBULENCE						-	
DATE	TIME	DURATION	MAGNITUDE ¹			LOCATION	
1 Magnitude as	measured from	n Meteorology Tu	Irbulence Scale				
ACAS INCIDEN							
Date	Time			Desc	ription of ACAS Incid	ent	
	1	 					

AFI REGIONAL MONTORING AGENCY (ARMA)

TRAFFIC FLOW DATA

(Form 4)

STATE:		ACC:		MONTH					
	information for the m		ing or departing from v		operate within the				
Please include all information for the month on aircraft arriving or departing from within the state, which operate within the f band F280 - F410. Do not include aircraft overflying the FIR.									
CALLSIGN	OPERATOR	AIRCRAFT TYPE	DEPARTURE PT	DESTINATION	FLIGHT LEVEL				
0/ 12201011	0. 2. 0 0			22011.011011					

	AFI REGIONAL MONTORING AGENCY (ARMA)									
TRAFFIC FLOW DATA (OVERFLYING AIRCRAFT)									(Form 5)	
STATE:			ACC:	:		MO				
Please inclu	de informatio	on on all aircı	aft overfling t	the airspace	within the fliç	ght level band	1 F280 - F410			
DATE	ROUTE	CALLSIGN	AIRCRAFT TYPE	OPERATOR	DEPARTURE AERODROME	DESTINATION AERODROME	NAV EQUIPMENT	WAYPOINT	TIME AT WAYPOINT PASSING	