### PART 1.5 - RECOMMENDATIONS

1.5.1.	Introduction.	The following recommendations are made in
order to	enhance Defence	Air Safety:

### 1.5.2 MAA Director (Ops) Should:

a. Ensure all Regulatory Waivers have a clearly defined validity 1.4.65 period in the body of the text.

#### 1.5.3 DG Combat Aircraft Should:

a. In consultation with COS(Health) and the ODHs, ensure the most appropriate G protection systems are being provided to fast jet aircrew.

1.4.82 & 1.4.34

1.4.59

- b. Investigate the Hawk T Mk1 aircraft anti-G system failures to:
  - (1) Determine the root cause of persistent AGV failures.
  - (2) Ensure anti-G system failures are accurately captured, and managed, on the Hawk T Mk1 SA's engineering Risk Register.
  - (3) Ensure extant engineering maintenance and repair procedures for the anti-G system are indeed best practice.

1.4.55

c. Incorporate a crash resistant voice recording facility in all Hawk T Mk1 aircraft.

# 1.5.4 DCDS (Cap), in consultation with COS(Health) and ODHs Should:

a. Develop and fulfil the capability requirement for the future of UK High G training, to ensure this can be conducted in accordance with NATO STANAG 3827.

## 1.5.5. COS Spt/CE(AIR), DACOS AE and CAE(A) Should:

a. Remind all engineering personnel of the potential risks 1.4.82 arising from ineffective fault and occurrence reporting.



#### 1.5.6. AOC 22(Trg) Gp Should:

a. Develop an effective Uni with RA1210 and the 22(Trg) (	fied Risk Register in accordance Gp ASMP.	1.4.75
	ent to ensure any workload AT tasking and flying rate, for all ed such that they are at least	1.4.85
c. Ensure the RAFAT's inte processes are appropriate and	ernal ensurance and assurance drobust.	1.4.75
d. Implement the Airworthin across the RAFAT as soon as	ness Review Certificate process practicable.	1.4.88
e. Implement a competence and J engineering authorisation	y based process of awarding level K	1.4.86
	engineering authorisation levels held O are appropriate for their roles and	1.4.86
	luding 2 <sup>nd</sup> order risks, associated oudbase are TOLERABLE and	1.4.65 & 1.4.66
h. Request Regulatory Wa display flying related activity in	ivers, as appropriate, to support all a 700ft cloud base.	1.4.65
i. Request Regulatory Wa conduct breaks to land from b	ivers to support any requirement to elow 300 ft MSD.	1.4.64
j. Establish a more robust appropriate for RAFAT operat	command framework that is ions.	1.4.84
k. Ensure 22(Trg) Gp Orde maximum permissible number	ers (FW) clearly mandates the of consecutive working days.	1.4.85
Areas while re-positioning dur	ent of low flying over Congested ing a display to determine if the priately mitigated to TOLERABLE	1.4.83
m. Ensure that individual R required, to support low level	egulatory Waivers are requested, if repositioning over CAs.	1.4.83
COS(A&C), AOC1 Gp, AOC2 consultation with DD Av ME		

# 1.5.7.

- a. Mandate appropriate aviation medical continuation training 1.4.56 in accordance with RA2135(6).
- Ensure aircrew have ready access to AP3456 Vol 6 (Aviation 1.4.56 b.



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	<ul> <li>Establish risk categories for aircrew at risk of G induced impairment and implement an appropriate training and currency regime for each category.</li> </ul>	1.4.57
1.5.8.	All ODHs Should:	
	<ul> <li>Ensure that all personnel actively involved in Risk Management are SQEP.</li> </ul>	1.4.75
	b. Remind all aircrew of the potential risks arising from ineffective occurrence reporting.	1.4.82
1.5.9	RAFAT DDH Should:	
	a. Actively manage the risk of G induced impairment by ensuring all relevant manoeuvres are considered with respect to the likelihood of G impairment, and where necessary develop appropriate mitigation measures.	1.4.75
	b. Re-examine and collate all RAFAT RtL into a single document in accordance with RA1210 and 22(Trg) Gp ASMP.	1.4.75
	c. Implement a RAFAT ASMP in accordance with 22(Trg) Gp ASMP.	1.4.75
	d. Ensure that all RAFAT pre-season training is recorded appropriately.	1.4.7
	e. Develop comprehensive RAFAT SOPs to ensure corporate knowledge is retained.	1.4.63
	f. Ensure that all RAFAT display flying manoeuvres, including each break to land manoeuvre, are formally approved through the PDA process.	1.4.64
	g. Implement a fatigue management system to ensure that personnel have appropriate rest days allocated and that these rest days are enforced.	1.4.85
	h. Mandate that MSDs are not to be used as target heights during manoeuvres.	1.4.83
	<ol> <li>Re-examine the required output from the pre-season display surveys and ensure that any revised process is accurate and understood by all stakeholders.</li> </ol>	1.4.83

#### 1.5.10. DD Av Med Should:

a. Remind all aircrew about extant policy and regulation with respect to privately sourced medical treatment and self-medication; to include the associated risks.



		odate AP3456, 6-1-1-3 (Physiological Effects Of ation) to ensure it is consistent with extant RAF CAM e.	1.4.56
1.5.11	IFS(RAF) & RNFSC CFSO Should:		
	a. Ra impairm	aise aircrew awareness to the dangers, and causes, of G ent.	1.4.77
	for fatigu	aise aircrew awareness of their individual responsibilities ue management, particularly with respect to exercise he duty day.	1.4.60
1.5.12	Hd of MilAAIB Should:		
		nhance awareness of the SI process for personnel who liable for the SI duties.	1.4.90
	ensure t	onfirm and, if necessary, amend the Manual of APCM to that nominated personnel are responsible for recording all electronic policy, regulatory and flight safety related ints post any incident/accident.	1.4.90
1.5.13	Hd DFRMO Should:		
		nsure that rescue vehicles are suitably equipped to quickly II crash sites.	1.4.90

