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RIYADH AIR  
طيران الرياض

# CORPORATE QUALITY MANAGEMENT SYSTEM

## Department

ORGANIZATION

## Issue / Revision / Date

00/ 00/ 18-FEB-2024

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This table summarizes the major changes made to each revision, not all changes. Throughout each review cycle, subsequent entries may change prior entries or proposed changes may be held, disregarded, and/or obsolete. This is a summary of input received throughout the duration. Changes throughout the manual are indicated by vertical revision bars.

**Note:** The vertical bar (change bar) in the margin indicates a change, addition, or deletion in the adjacent text for the current revision of that page only.

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## **0.3 RECORD OF REVISIONS**



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<b>Riyadh Air</b>		<b>GACA Accepted by:</b>	
Name:		Name:	
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# CORPORATE QUALITY MANAGEMENT SYSTEM

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SECTION	TITLE	TYPE	REGULATION   STANDARD
0.11.3	COMMON LANGUAGE	IOSA	FLT 3.1.1
0.11.5	HUMAN FACTOR PRINCIPLES	GACAR	121.139, 121.533
		IOSA	FLT 1.7.4
0.11.7	SECTIONS OF THE MANUAL SUBJECT TO GACA APPROVAL	GACAR	121.45
		IOSA	ORG 2.5.1
0.13.3	DISTRIBUTION LIST AND AVAILABILITY	GACAR	121.151, 121.155
0.13.4	OPERATIONS MANUAL DISTRIBUTION CONTROL	IOSA	ORG 2.5.1
0.13.5	PUBLICATION HIERARCHY	IOSA	ORG 2.5.3
0.13.8	FORMAT AND DOCUMENTATION CONTROL REQUIREMENTS	IOSA	ORG 2.5.1, ORG 2.5.3



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## 0.9 MANAGEMENT APPROVAL

Manual Number:	RXI/OPS- ORG- M02
Title:	<b>CORPORATE QUALITY MANAGEMENT SYSTEM</b>
Issue:	00
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Recommended by:	Date:
Title:	
Signature:	

Quality Review by:	Date:
Title:	
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Approved by:	Date:
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## 0.10 GACA APPROVAL / ACCEPTANCE

*This manual is a controlled document, prepared to meet the requirements of the General Authority of Civil Aviation Regulations (GACAR) and is herewith accepted by the General Authority of Civil Aviation (GACA) exclusively for the use of Riyadh Air.*

*If any conflict exists between the contents of this manual and GACA requirements, GACA requirements shall take precedence, and the manual will be revised without delay in accordance with GACA [eBook Vol.4 Ch.12, section 4](#).*

*All contents of this manual are current, as listed in the List of Effective Pages (LEP) Revision 0. 18 Feb 2024.*

This manual becomes 'uncontrolled' when printed.

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## 0.11 INTRODUCTION

### 0.11.1 Policy

Refer to CQMSM Section 1.3

### 0.11.2 Applicability

CQMSM is applicable for all safety and quality management system stakeholders.

### 0.11.3 Common Language

Refer to Corporate Policy Manual, Section 0.11.1.

### 0.11.4 Usage Of Terms

Refer to Corporate Policy Manual Section 0.11.2.

### 0.11.5 Human Factor Principles

Refer to Corporate Policy Manual Section 0.11.5.

### 0.11.6 Applicable Regulations and Standards

Throughout this manual, compliance tags are used to help users easily locate and reference applicable regulations, rules, standards and recommended practices. These tags are a systematic and organized way to manage and ensure adherence to regulatory requirements, company policies and industry standards.

This allows Riyadh Air to ensure that all regulatory standards imposed by the GACA and other aviation authorities are explicitly covered. Where an applicable regulation, rule or standard exists, the relevant section of the Operations Manual includes a header bar listing the applicable regulation and/or standard (example below).

Example Header:

GACAR § 121.123

The following regulations and standards addressed in this manual, include:

1. GACA Regulations:
  - a. PART 4 - OCCURRENCE REPORTING AND SAFETY INFORMATION SYSTEM
  - b. PART 5 - SAFETY MANAGEMENT SYSTEMS
2. IATA Standards Manual, applicable edition.



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3. Aviation Investigation Bureau Regulations (AIBR).

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## 0.12 ABBREVIATIONS, ACRONYMS AND DEFINITIONS

### 0.12.1 ABBREVIATIONS AND ACRONYMS

A	
AHM	Airport Handling Manual
AOC	Air Operator Certificate
AOG	Aircraft on Ground
ASL	Approved Supplier's List
ATA,	Air Transport Association
AVL	Approved vendor List
C	
CAB	Cabin
CAP	Corrective Action Plan
CGO	Cargo
CPM	Company Policy Manua
CQM	Corporate Quality Management
CQMS	Corporate Quality Management System
CQMSM	Corporate Quality Management System Manual
CSMM	Corporate Safety Management Manual
D	
DSP	Dispatch
F	
FAA	Federal Aviation Administration
FLT	Flight Operations
FOQA	Flight Operations Quality Assurance
G	
GACA	General Authority of Civil Aviation
GACAR	General Authority of Civil Aviation Regulation



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0.12 ABBREVIATIONS, ACRONYMS AND DEFINITIONS

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GMM	General Maintenance Manual
GOSARPS	Ground Operations Safety recommended Practices
GRH	Ground Handling
<b>H</b>	
HF	Human Factors
HOD	Head of Departments
<b>I</b>	
IATA	International Air Transport Association
ICAO	International Civil Aviation Organization
IOSA	IATA Operational Safety Audit
ISAGO	IATA Safety Audit for Ground Operations
ISARPS	IOSA standards and recommended practices
ISM	IOSA Standards Manua
ISO	International Standard Organization
<b>K</b>	
KPI	Key Performance Indicators
<b>M</b>	
MCC	Maintenance Control Centre
MNT	Maintenance
MQC	Manager Quality and Compliance
<b>N</b>	
NCR	Non Compliance Report
<b>O</b>	
OCC	Operations Control Centre
OPS	Operations
ORG	Organization
<b>P</b>	
PH	Post Holder



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PIC	Pilot In Command
<b>Q</b>	
QMS	Quality Management System
QPI	Quality Performance Indicators
<b>R</b>	
RCA	Root Cause Analysis
RXI	Riyadh Air
<b>S</b>	
SAFA	Safety Assessment of Foreign Aircraft
SEC	Security
SLA	Service Level Agreement
SMS	Safety Management System
<b>T</b>	
TCO	Third Country Operations

## 0.12.2 DEFINITIONS

Refer GACAR Part 1



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## 0.13 SYSTEM OF AMENDMENT AND REVISION

### 0.13.1 Manual Ownership

The Chief Inspector is responsible for overseeing Corporate Quality Management System Manual (CQMSM) and serves as the Manual Owner with the final authority to approve amendments to CQMSM. All revisions to the manual undergo a structured approval process.

This emphasizes the manual owner's significance in ensuring document accuracy and compliance. Any amendments that require GACA approval or acceptance are submitted for review before they are published.

To ensure efficient dissemination of information, all approved amendments are shared electronically with manual holders. This aligns with Riyadh Air's commitment to transparent and accessible communication of operational updates.

This systematic approach reflects Riyadh Air's dedication to upholding rigorous standards in operational documentation.

### 0.13.2 Manual Holder Responsibility

No relevant personnel within the operational framework may perform their duties without access to a current copy of the CQMSM. This policy highlights the importance of real-time information in creating a safe and efficient operational environment. Regular manual updates not only help conform to regulations but also enhance the overall effectiveness of our personnel in carrying out their responsibilities with precision and in accordance with industry best practices.

**Note:** Uncontrolled copies of this Manual shall not be used.

### 0.13.3 Distribution List and Availability

GACAR § 121.151 / § 121.155

At Riyadh Air, all operational personnel are provided with an updated electronic copy of this manual along with other relevant manuals. Subsequent updates are also given to the appropriate personnel, including but not limited to ground operations staff, maintenance staff, crew members, and assigned GACA representatives.

It is mandatory for the recipients of these manuals to keep them up to date with the provided changes and additions.



## 0.13.4 Publication Hierarchy

IOSA ORG 2.5.3

Refer to Corporate Policy Manual Section 0.13.4.

## 0.13.5 Manual Structure

The Corporate Quality Management System Manual is divided into 8 chapters and Appendices, as shown below:

- 0 FRONT MATTER
- 1 MANAGEMENT AND CONTROL
- 2 LEADERSHIP
- 3 AUDIT PROGRAM
- 4 EXTERNAL SERVICE PROVIDER MANAGEMENT
- 5 EXTERNAL AUDITS
- 6 DOCUMENT MANAGEMENT
- 7 TRAINING AND QUALIFICATION PROGRAM
- 8 CONTINUAL IMPROVEMENTS
- 9 APPENDICES

## 0.13.6 Source of Amendments

Refer to Corporate Policy Manual, Section 0.13.6.

## 0.13.7 Referenced and Linked Documents

CQMSM is interconnected with the following Regulations and Manuals. When changes are made to any of the below Regulations or Manuals, Riyadh Air undertakes a review of the relevant changes for incorporation into CQM Manual.

1. GACAR - Safety Regulations.
2. CPM - Corporate Policy Manual.
3. Corporate Safety Management Manual (CSMM).

## 0.13.8 Format and Documentation Control Requirements

IOSA ORG 2.5.1 / ORG 2.5.3

Refer to Corporate Policy Manual, Section 0.13.8.



### **0.13.9 Error Reporting and Corrections and Suggestions for Improvement**

All personnel are responsible for maintaining the accuracy and integrity of Riyadh Air's operations. If an employee comes across an error, notices any incorrect information in this manual or has a suggestion, they should report it to the Safety office. They will acknowledge receipt of the information and provide feedback to the concerned employee on their suggestion, the action taken to fix the error or update the information.

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## 1 MANAGEMENT AND CONTROL

### 1.1 INTRODUCTION

Riyadh Air Corporate Quality Management System (CQMS) is a quality assurance program that provides guidance for auditing. It includes the safety assurance and evaluation of the Management System of operations, maintenance, and security functions to ensure that the organization:

1. Complies with GACA and internal requirements,
2. Satisfies stated organizational and operational needs,
3. Identifies hazards, undesirable conditions and areas requiring improvement,
4. Assessed the effectiveness of safety risk controls.

A Quality Management System (QMS) ensures continued suitability, adequacy, and effectiveness of the entire organization.

The Quality Management framework serves as a systematic approach for monitoring aviation equipment, programs, and procedures, ensuring alignment with both regulatory requirements and quality standards adopted by Riyadh Air (RXI).

The established Riyadh Air Corporate Quality Management program incorporates audits of the management system for operations and maintenance functions. This ensures that the organization is:

1. Complying and conforming with applicable regulations and standards,
2. Satisfying stated operational needs,
3. Identifying areas requiring improvement,
4. Identifying hazards to operations, and
5. Assessing the effectiveness of safety risk controls.



## 1.2 SCOPE OF QUALITY MANAGEMENT SYSTEM

The CQMS covers the Quality Assurance functions across the organization. It ensures continual quality and safety improvements in all areas of operation. The Quality Assurance Program is the organization's internal evaluation program, it is a part of the CQMS in compliance with the requirements of GACA.

These sections fall under the scope of the Riyadh Air CQMS:

1. Flight Operations.
2. Cabin Operations.
3. Ground Operations.
4. Engineering and Maintenance.
5. Safety.
6. Security.
7. Environment.

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# CORPORATE QUALITY MANAGEMENT SYSTEM

## 1 MANAGEMENT AND CONTROL

### 1.3 SAFETY AND QUALITY POLICY

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## 1.3 SAFETY AND QUALITY POLICY



### Safety & Quality Policy

Riyadh Air management is committed to upholding the highest possible safety standards in all our aviation activities. Riyadh Air safety management system is designed to ensure strict compliance with all relevant safety regulations, standards, and best practices, providing an effective framework for safety oversight.

#### Riyadh Air Commits to

- ❖ Prioritizing safety and quality as the primary responsibility of all management levels and employees.
- ❖ Proactively and systematically identifying hazards, managing risks effectively, and preventing injury or damage to employees, guests, and customers to the greatest extent possible.
- ❖ Continuously monitor and measure safety performance indicators against set targets.
- ❖ Reporting safety data and mandatory safety occurrences to the General Authority of Civil Aviation (GACA).
- ❖ Ensuring the effective implementation, evaluation, and updating of the Riyadh Air Emergency Response Plan as required.
- ❖ Clearly define the responsibilities of management and employees in relation to safety performance.
- ❖ Regularly review this policy to ensure its continued relevance and alignment with Riyadh Air's objectives.

#### Riyadh Air Safety and Quality objectives

- ❖ Proactively ensuring continuous improvements in Operational Performance and Safety & Quality Management Systems
- ❖ To define and ensure ongoing compliance with all applicable safety, quality, and legislative regulations, standards, requirements, and best practices. This is the duty of all personnel.
- ❖ To foster a positive safety culture through effective safety communication channels.
- ❖ To establish and maintain a Just Culture, defining and identifying unacceptable behaviors
- ❖ To encourage staff to report Safety & Quality issues, hazards, occurrences, and events through mandatory, voluntary, and confidential reports using the non-punitive Riyadh Air hazard/occurrence reporting system.
- ❖ To ensure that the purpose of safety reporting and internal investigations is to improve safety, not to assign blame.
- ❖ To ensure no punitive actions are taken against any employee who discloses a safety or non-compliance concern through the reporting system, unless such disclosure indicates gross negligence, deliberate, or willful disregard of regulations or procedures.
- ❖ To manage safety risks and ensure established risk acceptance criteria are adhered to.
- ❖ To regularly review safety objectives, targets, and their achievement.
- ❖ To apply human factors principles.
- ❖ To encourage personnel to participate in compliance audits and safety investigations.

These safety and quality objectives apply to all Riyadh Air management and employees. Therefore, every Riyadh Air employee is responsible for ensuring that Riyadh Air operations remain safe and fully compliant with all applicable regulatory requirements, standards, and company requirements at all times.

Riyadh Air Accountable Executive holds the ultimate responsibility and accountability for the effective implementation of Safety & Quality across the organization, the Accountable Executive has full authority over all Riyadh Air's financial and human resources and will ensure the provision of all necessary resources, including facilities and systems for the effective implementation of Safety and Quality Management Systems.

HITESH PATEL  
ACCOUNTABLE EXECUTIVE  
For and on behalf of Riyadh Air  
Dated: 01.08.2023

Figure 1 – Safety & Quality Policy



### 1.3.1 Communicating the Safety & Quality Policy

Riyadh Air places a primary emphasis on ensuring that our Safety & Quality policy resonates across all organizational levels, instilling personal awareness, active participation, and motivation among our staff.

The Safety & Quality policy holds a central position of all Riyadh Air operations, transcending tasks, geographic locations, and functions. It is imperative that each member of our staff comprehends the policy and recognizes their integral role in its successful implementation.

Meticulous adherence to regulatory and customer requirements is pivotal for upholding and delivering the principles outlined in our Safety & Quality Policy.

To achieve this, the Policy is effectively communicated to our customers and all stakeholders through various channels, prominently featured in the quality manual, and disseminated through electronic means such as email.

This comprehensive approach ensures widespread awareness and understanding, fostering a culture of unwavering commitment to our quality standards across the organization.



## 1.4 QUALITY OBJECTIVES

The CQMS at Riyadh Air is fully aligned with the Safety Management Systems, fostering a holistic approach to enhance responsibility, accountability, and the effective deployment of resources. This integration serves to bring clarity to our processes and facilitates the meticulous monitoring and analysis of our organizational activities.

Quality objectives are instrumental in achieving our overarching goals and are systematically pursued through the implementation of a robust Quality Assurance program. This program ensures the following:

1. **Compliance/Conformance Monitoring:** Continuous adherence to applicable regulations and alignment with IATA Operational Safety Audit (IOSA) standards/Company requirements.
2. **Process Monitoring:** Definition and documentation of departmental processes, emphasizing continual improvement in work activities.
3. **Auditing of Outsourced Functions:** Monitoring external suppliers/vendors to ensure compliance with Company safety performance standards per the Contract and Service Level Agreement (SLA).

These quality objectives are set annually and align with the strategic direction of the organization. The current set of Quality Objectives is crafted to:

1. Address current and future organizational needs,
2. Maintain consistency with the quality policy,
3. Ensure conformity of our products and services,
4. Exceed customer expectations and satisfaction levels,
5. Leverage self-assessment results for continuous enhancement, and
6. Utilize benchmarking, competitor analysis, and identified opportunities for improvement.

Our quality objectives, accompanied by Key Performance Indicators (KPIs), undergo vigilant monitoring for compliance and applicability.



## 1.5 QUALITY PERFORMANCE TARGET AND INDICATORS

Quality performance targets and indicators are essential components of a CQMS. They help organizations monitor and measure their performance in delivering products or services that meet or exceed customer expectations. Key quality performance targets and indicators for Riyadh Air are contained in Figure 3.

QPI	Target
Number of safety incidents per 100 departures	
Number of External Audit Findings	
Number of Repeated Audit Findings (Department-wise)	
Number of High-Level Audit Findings (Department-wise)	
Number of SLA Violations	

Table 1 QPI and Targets



## 1.6 QUALITY PROCESSES

Riyadh Air's quality processes are crucial to ensuring the safety, reliability, and overall satisfaction of passengers. As Riyadh Air operates in a highly regulated and safety focused environment, Corporate Quality Management is essential for compliance with aviation standards and regulations.

These processes form an integral part of Riyadh Air's QMS:

1. Safety Management System (SMS).
2. Regulatory compliance.
3. Aircraft maintenance and engineering and Continuing Airworthiness Functions.
4. Flight Operations Quality Assurance (FOQA).
5. Ground Operations.
6. Emergency Response Planning.
7. Security processes.
8. Outsourced activity and vendor management.

These quality processes collectively contribute to the safe, efficient, and reliable operations of Riyadh Air thereby, ensuring the Company achieves the high standards set by GACA and provides a positive experience for passengers as well as stakeholders.



## 1.7 QMS AND SMS

The Quality Assurance Program is structured for safety assurance and security assurance and is considered a part of the continuous improvement element of the SMS. Information gained from Quality Assurance Audits is used to manage operational risk. Additionally, the Quality Assurance Program is structured to serve as a safety performance monitoring and measuring activity in an SMS.

The Quality Assurance Program is centrally controlled, and the Manager of Quality and Compliance is the designated Manager of the Program. The safety assurance process mirrors that of quality assurance, with requirements regarding analysis, documentation, auditing, and management reviews of the effectiveness of safety risk controls.

Quality assurance focuses on compliance with regulatory requirements, while safety assurance monitors the effectiveness of safety risk controls.

### 1.7.1 SMS and QMS Integration

The QMS and SMS are complementary systems. QMS ensures compliance with prescriptive regulations and compliances to meet customer expectations and contractual obligations, while the SMS is focused on safety performance. The objective of SMS is to identify safety-related hazards, assess the associated risk and implement effective risk controls. In contrast, QMS focuses on consistent delivery of products and services that meet the relevant specifications.

Both QMS and SMS:

1. Must be planned and managed,
2. Depend upon measurement and monitoring of performance indicators,
3. Involve all organization functions related to delivery of aviation products and services, and
4. Strive for continuous improvement.

Furthermore, QMS and SMS utilize similar tools. Quality and safety practitioners are essentially focused on the same goal of providing safe and reliable products and services to customers.

### 1.7.2 SMS and QMS Comparison

The relationship between SMS and QMS leads to the complementary contributions of each system which in turn, enables the attainment of the organization's safety and quality goals. A summary comparison may be as reflected in [Table 2 SMS & QMS Comparison](#).



# CORPORATE QUALITY MANAGEMENT SYSTEM

1 MANAGEMENT AND CONTROL  
1.7 QMS AND SMS

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QMS	SMS
Quality	Safety
Control of Non-Conforming Products	Safety Occurrences
Quality Assurance	Safety Assurance
Quality Culture	Safety Culture
Compliance to Requirement	Acceptable Level of Safety Performance
Prescriptive	Performance Based
Standards and Specifications	Organizational and Human Factors
Reactive and Proactive	Reactive, Proactive and Predictive
Monitoring and Measurement, Audit	Safety Audit
Quality	Safety

Table 2 SMS & QMS Comparison



## 1.8 QUALITY REVIEW MEETING

### 1.8.1 Objective and Details

Quality Review Meetings serve as a structured forum for evaluating and improving the effectiveness of a CQMS. The primary objective of these meetings is to ensure that the organization's quality processes are aligned with its goals, customer requirements, and applicable standards.

Key objectives and details related to Quality Review Meetings include:

1. Performance Evaluation:
  - a. Assessment of the QMS' performance,
  - b. Review of KPIs to measure the effectiveness of quality processes.
2. Continuous Improvement:
  - a. Identify opportunities for continuous improvement in quality-related activities,
  - b. Prioritize improvement initiatives to enhance overall quality performance.
3. Compliance Assurance:
  - a. Ensure compliance with relevant quality standards and regulations,
  - b. Address any nonconformities or deviations from established quality procedures.
4. Process Conformance:
  - a. Verify that key processes conform to established quality standards,
  - b. Address any deviations or nonconformities in processes,
  - c. Evaluate findings from internal and external audits, and
  - d. Discuss corrective and preventive actions based on audit outcomes.
5. Management Review:
  - a. Provide top management with an overview of the QMS performance,
  - b. Discuss strategic decisions related to quality management.

During these meetings, a detailed analysis of data gathered during the quality process, customer feedback, improvement initiatives, resource allocation and utilization will be discussed.



## 1.8.2 Member-Quality Review

The quality review meeting involves key stakeholders who play a crucial role in ensuring the effectiveness of the CQMS. The members include:

Accountable Executive.

Manager - Quality and Compliance.

Department HODs.

Quality Auditors.

Process owners.

## 1.8.3 Feedback System

Upon conclusion of the Quality Review meeting, the Manager of Quality and Compliance will disseminate feedback concerning the system's performance to pertinent departments. This feedback may manifest in the form of either a report or an email.

The feedback will elucidate the disparities between the mandated standard and the standard attained. Additionally, it may furnish guidance for enhancement. The feedback process could also require the departmental head to conduct a Root Cause Analysis and subsequently, develop a Corrective Action Plan.

This process entails specifying the responsible party for rectifying discrepancies and non-compliance in each case, along with delineating the procedure to be adhered to if rectification is not achieved within the stipulated timeframes. In instances where rectification is not completed promptly, the Manager of Quality and Compliance is obligated to escalate the matter to the relevant department's management to ensure appropriate action is taken on any outstanding items.



## 1.9 DATA MANAGEMENT

### 1.9.1 Introduction

The Corporate Quality Management department will be the responsible of maintaining a soft copy of audit records for a period of two years, which includes:

1. Published Audit Plan.
2. Revisions of published Audit Plan.
3. Audit reports along with Corrective Action Taken Report., and
4. Training records.

### 1.9.2 Electronic Database

To ensure the effective management of the information and data associated with audits conducted under the Quality Assurance Program, an electronic database will be maintained. The fulfillment of scheduled record backup will be as per Riyadh Air's documentation management process.

#### 1.9.2.1 Quality Data

The following data will be stored as a part of the Quality Assurance Process:

1. Area / entity audited.
2. Status of audit (planned, conducted, rescheduled, completed).
3. Date of audit.
4. Objective, scope, and criteria.
5. Auditor name.
6. These details regarding nonconformities / findings will be stored:
  - a. Root causes.
  - b. Corrective action implemented.
  - c. Assignment of responsibilities.
  - d. Closer and acceptance details.

#### 1.9.2.2 Safety Data

Refer CSMM Section 1.5.2



## 2 LEADERSHIP

### 2.1 ORGANIZATION STRUCTURE – QUALITY MANGEMENT SYSTEM

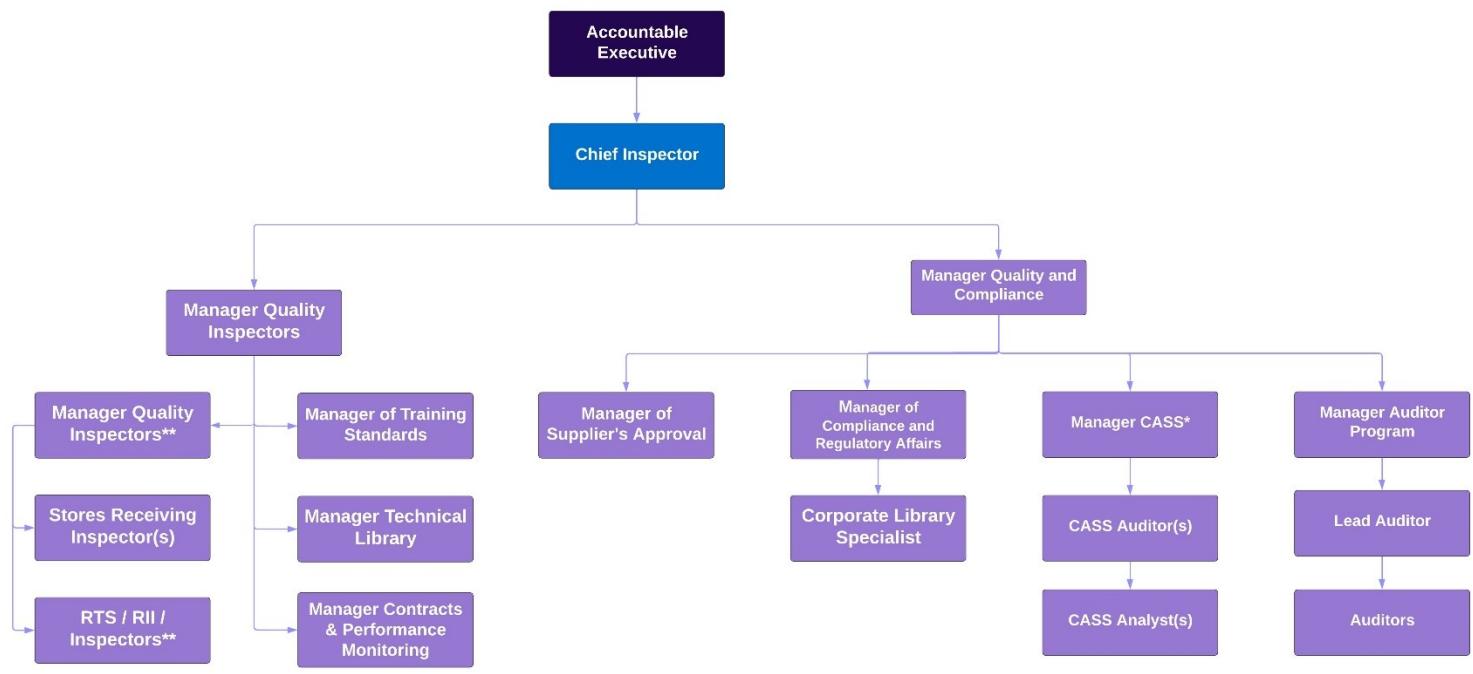


Figure 2 – RXI Quality Department Organization Structure



## 2.2 ROLES AND RESPONSIBILITIES

### 2.2.1 Manager Quality and Compliance

Following are the responsibilities of Manager - Quality and Compliance:

1. Implement and ensure adherence to the Compliance and Quality policies outlined in the Riyadh Air manuals, aligning them with departmental activities.
2. Arrange training sessions for staff to ensure they acquire and sustain the qualifications necessary for the effective execution of their duties, in line with compliance and conformance standards.
3. Guarantee that all employees within the designated area have access to Riyadh Air documentation and manuals.
4. Promptly report any accidents, incidents, safety-related events, safety violations, or injuries to the Safety Department.
5. Ensure strict compliance with security and safety policies, especially those pertinent to hazardous tasks.
6. Uphold regulatory compliance in accordance with documented policies and procedures.
7. Ensure adequate resourcing for the department to carry out its responsibilities effectively.
8. Develop and sustain the Riyadh Air Quality Management System (QMS).
9. Establish and refine policies and procedures governing the department's operations.
10. Formulate and maintain an inclusive audit plan, audit checklist, compliance, and quality audit schedule for Riyadh Air.
11. Grant approval for deviations from Riyadh Air's audit schedule.
12. Ensure an overview of compliance and quality status, proposing improvements to Riyadh Air's standards.
13. Approve all amendments to Operational Documentation, ensuring compliance before distribution.
14. Supervise and facilitate internal Riyadh Air and/or third-party audits.
15. Prepare audit reports, incorporating corrective action requirements and recommending further actions as necessary.
16. Contribute to the development of relevant departmental policies, processes, procedures, and practices, guiding and supporting employees to achieve Riyadh Air's objectives.
17. Review, update and maintain the Corporate Quality Management Manual and related documentation.



18. Allocate resources for the execution of combined operational audits, utilizing internal or external qualified auditors.
19. Report audit findings and integrate them into the Quality Management System.
20. Organize regular Quality Review Meetings, including the dissemination of agendas and the creation and filing of meeting minutes.
21. Ensure compliance with and adequacy of procedures necessary to guarantee safe operational practices in all operational aspects.

### 2.2.2 Manager Audit Program

Following are the responsibilities of Manager Audit Program:

1. Oversee the establishment, development, and management of the quality system within operational divisions, ensuring alignment with regulatory and company requirements.
2. Collaborate with the Manager of Quality and Compliance to implement quality assurance elements across operational departments, engaging with relevant Post Holders and managers to effectively manage operational risks.
3. Independently and collaboratively instill and foster a culture of Safety Management System (SMS) and Quality Management System (QMS) among both operational and non-operational personnel.
4. Coordinate and liaise with stakeholders regarding the Quality system, planning and conducting audits to ensure comprehensive coverage.
5. Ensure compliance with and adequacy of procedures, promoting safe operational practices within the organization.
6. Establish and maintain a continuous feedback system related to operational divisions, reporting deficiencies and non-compliances to the Manager of Quality and Compliance, and promptly implementing appropriate corrective/preventive actions.
7. Maintain the independence of auditors from day-to-day operations in the audited areas.
8. Develop enhanced procedures based on audit results, working closely with respective Department Heads.
9. Oversee the effectiveness of an independent quality assurance program, ensuring responsible departments take corrective action in response to audit findings.
10. Ensure timely implementation of corrective actions and assess their effectiveness in preventing the recurrence of identified non-conformances, analyzing trends and operational risks.
11. Plan and coordinate auditors' resources and manpower, manage audit logistics and oversee preparation, follow-up, tracking and closure of audits.



12. Conduct risk assessments and manage the Audit Management Information System to enhance the efficiency and effectiveness of the audit program.

### 2.2.3 Lead Auditor

Following are the responsibilities of the Lead Auditor:

1. Coordinate with the Manager-Audit Program to ensure that the audit preparation is adequate for the scope of audit being undertaken.
2. Focal point between the audit team and the stakeholders being audited.
3. Lead the audit team for audit conclusions. Brief audit team on the audit plan ensuring that all auditors understand their terms of reference. Ensure that any potential problems that could affect the audit are understood and resolved.
4. Chair audit opening meeting ensuring that all stakeholders understand their terms of reference and that any issues are addressed.
5. Be able to undertake audit tasks within his own scope of approval, ensuring that the applicable standards and regulations are understood and the corresponding questions are asked in an unambiguous manner easily understood by the auditee.
6. Ensure that all audit standards are assessed to ascertain that the standard has been documented, implemented or is not applicable to the audit scope.
7. Ensure that any non-conformances are agreed with the auditee. Identification of non-conformances should be highlighted to the auditee in a professional and diplomatic manner.
8. Ensure any disputes between the auditee and the audit team are resolved in an objective and diplomatic manner so that both parties are in accordance.
9. Ensure all findings raised by the audit team are written and formatted in a consistent manner allowing efficient compilation of the final audit report without any ambiguity.
10. Chair audit closing meeting and ensure that the auditee agrees to the audit finding(s). Any issues shall be resolved during closing meeting.



## 2.2.4 Auditor

Following are the responsibilities of the Auditor:

1. Execute audit tasks, investigations, surveillance or inspections of departments, external contracted service providers, codeshare, or wet lease organizations within the auditor's approved scope, evaluating compliance with relevant regulations, IOSA standards, Company procedures and other applicable requirements.
2. Perform audits, inspections, or investigations, compile reports, prepare audit checklists and provide timely feedback to auditees, adhering to the defined timescales outlined in the Audit Program as specified in this manual.
3. Collaborate with the Manager Audit Program for audit follow-up, ensuring diligent tracking of corrective actions and responses to audit findings, reinstating compliance with regulations, and validating the effectiveness of implemented procedures to support safe operations.
4. Conduct risk assessments during audits, investigations, inspections or as deemed necessary.
5. Promote regulatory compliance and the implementation of effective procedures to support safe operations, actively contributing to the enhancement of operational safety.
6. Assist in managing electronic and printed audit documentation and records, ensuring accuracy and compliance with record control procedures.
7. Adhere to the specified 'Auditor' responsibilities outlined in this manual when assigned to conduct audits or inspections.
8. When accompanied by the Lead Auditor, follow the lead auditor's directions, and provide support to conclude audit results.
9. Monitor audit currency and training requirements, ensuring continuous compliance with the specified requirements detailed in the Quality Management System Manual.

## 2.2.5 Manager of Supplier's Approval

Following are the responsibilities of Manager of Supplier's Approval:

1. Establish and maintain a comprehensive process for approving suppliers within the Riyadh Air approval framework.
2. Ensure alignment with relevant quality standards and regulations.
3. Develop criteria for evaluating and qualifying suppliers based on quality, reliability, performance, and other relevant factors.
4. Conduct supplier assessments and audits to verify compliance with established criteria.
5. Maintain accurate and up-to-date records of approved suppliers.



6. Document supplier evaluations, audits and any corrective actions taken.
7. Assess and manage risks associated with suppliers, considering factors such as financial stability, quality control and geographical location.
8. Develop contingency plans for critical suppliers.
9. Regularly review and update the supplier approval process to incorporate industry best practices and improvements.
10. Seek feedback from internal stakeholders to enhance the efficiency and effectiveness of supplier management.
11. Collaborate with procurement, quality assurance and other relevant departments to ensure a cohesive approach to supplier approval and management.
12. Communicate effectively with stakeholders to address concerns and implement improvements.

### **2.2.6 Manager of Compliance and Regulatory Affairs**

Following are the responsibilities of Manager of Compliance and Regulatory Affairs:

1. Ensure strict adherence to all applicable operational regulatory requirements.
2. Interpret new regulations and delegate/prepare new policies and procedures to guarantee compliance.
3. Research, analyze and interpret domestic and international regulatory requirements.
4. Liaise with IATA for matters related to the IOSA audit cycle.
5. Collaborate with internal department heads for GACA audits, IOSA and ensure compliance.
6. Conduct periodic controls assessment reviews to ensure relevance and effectiveness.
7. Implement controls within processes for continuous monitoring and tracking of any deviations.
8. Stay abreast of international legislation, guidelines, and practices in the aviation industry.
9. Manage projects related to changes in operating procedures, processes, or the introduction of new facilities.
10. Oversee and manage the approval of Operations Specifications and Third Country Operator (TCO) requirements.
11. Conduct risk assessments and compliance reviews to identify control gaps.
12. Implement mitigating controls and ensure continuous improvement.
13. Partner in developing and implementing the Compliance Program and Management System.
14. Coach internal stakeholders on compliance matters.



15. Oversee, manage, and contribute to the Operations Specifications, regulatory manuals, and other internal documents.
16. Perform periodic controls assessment reviews to ensure their relevance and effectiveness.
17. Conduct third party audits and inspections to ensure adherence to contractual and regulatory obligations.
18. Carry out investigations, present findings and recommend corrective and preventive actions with timely follow-up.
19. Cascade awareness of regulatory and standards requirements within the operations team.
20. Provide support and expertise to all post holders regarding the regulatory affair.

## 2.2.7 Manager CASS

Refer CASS Section 2.4.2

## 2.2.8 CASS Auditor

Refer CASS Section 2.4.3

## 2.2.9 CASS Analyst

Refer CASS Section 2.4.4



## 2.3 DELEGATION OF DUTIES

Delegation of duties shall be made with the guidance provided by the Chief Inspector in accordance with the Corporate Quality Management Departments' structure.

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## 3 AUDIT PROGRAM

### 3.1 AUDIT POLICY

Riyadh Air's quality management system provides a framework for the auditing of the management systems, and of operations and maintenance functions to ensure that:

1. Compliance with applicable regulations and standards of Riyadh Air
2. Satisfying stated operations needs
3. Identification of areas requiring improvements
4. Identification of Hazards to operations
5. Assessing the effectiveness of the safety risk controls

Riyadh air shall achieve these through the conduct of the different types of audits as laid below. In addition to these Riyadh Air also have monitoring process whenever required.



## 3.2 DEFINITIONS OF AUDITS

### 3.2.1 Internal Audit Program

The Internal Audits within the Riyadh Air Corporate Quality Management System (CQMS) Manual encompass evaluations of functional domains, such as Flight Operations, Ground Handling, Maintenance, Security, Training, Flight Dispatch, Cargo, Cabin, and Commercial. These audits are scheduled to occur annually.

### 3.2.2 External Audit Program

#### 3.2.2.1 Service Provider Audits

Riyadh Air, as part of its Quality Management System (QMS) Manual, engages in outsourcing certain activities to external service providers, such as major maintenance, ground handling, and pilot training. Supplier Audits, conducted by Riyadh Air, involve assessments of its service providers, subcontractors, vendors, and other independent organizations offering services to Riyadh Air. The classification of suppliers may range from non-critical to critical based on supplier criticality levels.

These service and product providers are subject to audits by Riyadh Air at a frequency of once every two years to verify their compliance with the stipulated standards. This auditing process ensures that the external entities meet the required quality and operational standards as per Riyadh Air's expectations.

#### 3.2.2.2 Authorities Audits

These audits are conducted by the GACA/ ICAO / FAA/ IATA/ SAFA / Code share airlines, wet lease airlines to meet certain specific requirements. Advance information is normally provided for such audits.

#### 3.2.2.3 Codeshare Agreement Audits

Riyadh Air has processes to monitor external service providers if Riyadh Air transports its passengers on flights conducted by one or more external operators through an aircraft lease, codeshare, capacity purchase or another type of agreement to ensure requirements that affect safety and/or security of operations are being fulfilled.

Riyadh Air ensures that outsourced functions are conducted in a manner that meets its own operational safety and security requirements. A monitoring process exists as it is necessary to satisfy that responsibility, and such a process would be applicable to any external service provider that conducts outsourced operational functions for Riyadh Air.

In some regulatory jurisdictions, there may be a regulatory control process that permits certain organizations to meet rigorous standards and become approved to conduct outsourced operational functions. A regulatory control process is an acceptable means provided the regulatory control process:



1. Includes ongoing monitoring of the approved service providers;
2. Such monitoring is sufficiently robust to ensure the approved service providers fulfill the operational requirements of the operator on a continuing basis.

Achieving and maintaining IOSA and/or ISAGO registration is a way for an external service provider to demonstrate fulfillment of requirements that affect the safety and/or security of operations.

Thus, Riyadh Air process that requires such service providers to maintain IOSA and/or ISAGO registration would constitute an acceptable method of monitoring those individual providers.

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## 3.3 AUDIT PLAN

### 3.3.1 Planned Audit

Manager Audit Program will be responsible for preparation and issuance of the Annual Audit plan which shall include audit of ISARPs.

The audit plan is meticulously prepared and continually revised, considering the following factors:

1. Management priorities.
2. Commercial intentions.
3. Management system requirements.
4. Statutory, regulatory, and contractual requirements.
5. Need for accreditation or registration/certification.
6. Risks to the organization.
7. Supplier and other interested parties' requirements.
8. Significant changes to operations, organization, and technology.
9. New Operations (start-up).
10. Significant trends.
11. Change of suppliers/service providers/contractors (if required).

Riyadh Air conducts audits for all main base functions annually, integrating IOSA requirements into its quality assurance program. Conformity to standards is continuously assessed during quality assurance audits.

The Manager Audit Program will issue an annual audit plan which shall be approved by the Chief Inspector before being published.

Inspections are not part of the yearly audit plan. The schedule is designed to be flexible, allowing for adjustments to the number of audits, including unscheduled audits when trends are identified.

Modifications throughout the year accommodate operational exigencies, such as unforeseen follow-up audits, special requests from the Accountable Executive / Post Holders / Department Heads, induction of training devices and technologies, changes to the organization and management structure, changes due to external factors, and third-party audits.

The yearly audit plan, not included in this manual, is a controlled document managed by the Quality Department and published separately. It is available for review by GACA, for any audits, or by the management when required. Regular updates, demonstrating audit progress and associated corrective action status, are controlled and conducted by the Quality Department.



### 3.3.2 Unplanned Audits

The Manager Quality and Compliance may necessitate unscheduled audits based on identified risks in a specific area or when re-auditing a department or organization becomes necessary. Unplanned audits may also be scheduled due to major changes in processes, personnel, facilities, or technology, or upon the change or selection of new service providers, code share, or wet lease partners.

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## 3.4 AUDIT PROCESS

The quality management system audit process is a systematic examination of processes to check its effectiveness, identify areas for improvement, and to ensure compliance with established standards, regulations, and organization requirements. This process follows a series of steps as laid down in the below flow chart.

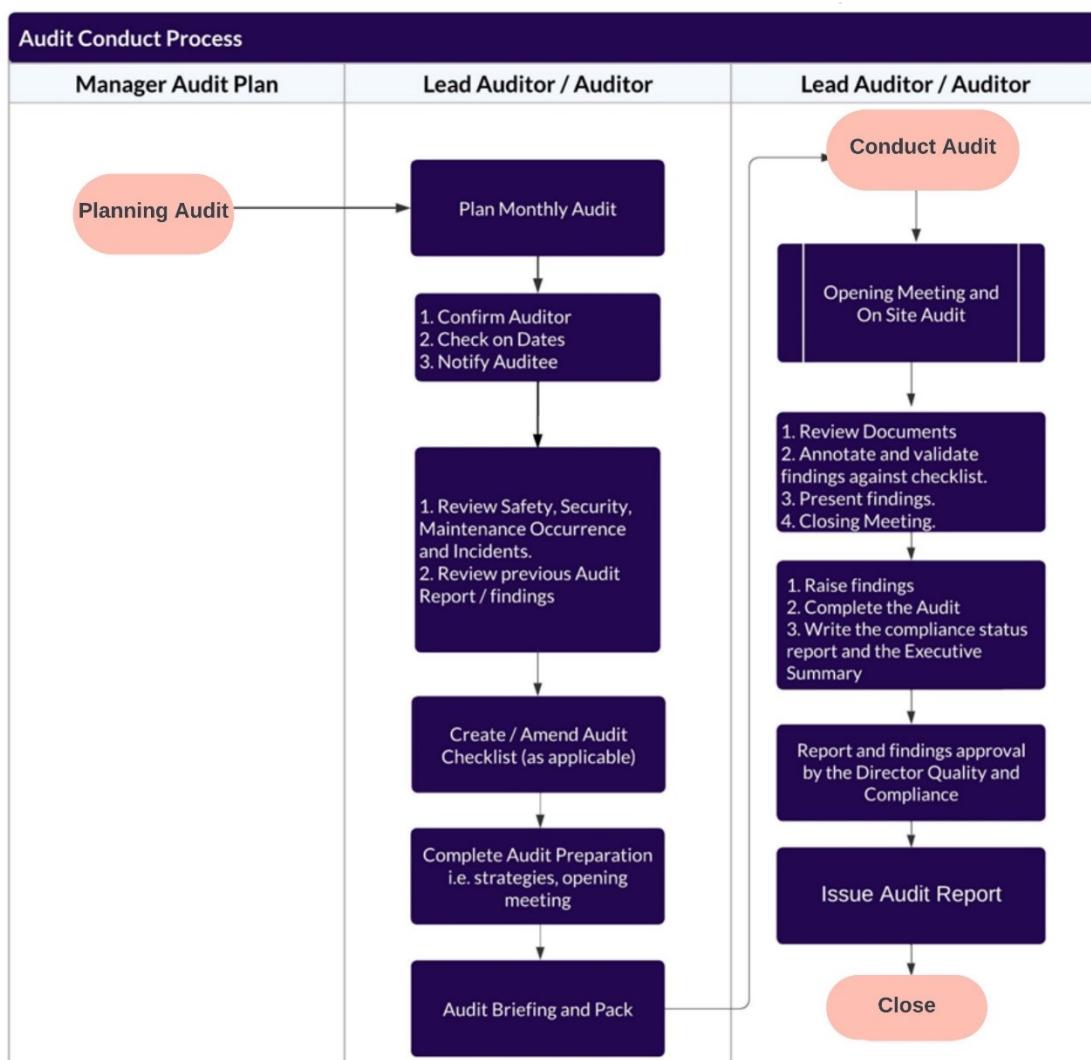


Figure 3 Audit Conduct Process



## 3.5 AUDIT PROCEDURE

### 3.5.1 Audit Scope

The Audit Scope defines the boundaries of the areas subject to audit and identifies the elements, categories, and activities to be scrutinized. Riyadh Air's Quality Assurance Program ensures a comprehensive auditing scope covering all organizational facets that impact operational quality, with a focus on safety and security. The following functions fall within the purview of the Quality Assurance Program:

1. Organization and Management System
2. Flight Operations (including Training and OCC)
3. Flight Dispatch
4. Cabin Operations
5. Engineering & Maintenance (including Training, CASS and MCC)
6. Ground Handling Operations,
7. Cargo Operations
8. Safety Management
9. Security Management.

This scope encompasses adherence to IOSA Standards and Recommended Practices (ISARPs). An audit's scope may extend to a complete systems audit, covering the entire system, or it may be limited to specific procedures or departments as deemed necessary.

### 3.5.2 Audit Plan and Schedule

The audit plan ensures that audits are:

1. Scheduled at intervals to meet regulatory and company requirements.
2. Completed within a specified period as per the plan. Any deferment with respect to the plan shall have justifications and approval by the Corporate Quality Management Manager. The closure period of the action in respect of the audit findings are based on Levels of findings.

The documented audit plan includes the following:

1. Audit area/department
2. Audit year & month
3. Audit interval



The audit plan shall be developed based on the priority of importance, safety, quality, regulatory requirements and audit cycle.

1. The Manager Audit Program shall prepare the audit schedules.
2. Each audit scope must be clearly defined.
3. Audit schedules and checklists must provide clear instructions on what is to be audited, how often it needs to be audited and what expertise is required by the auditor.
4. Before an audit schedule is implemented and an audit checklist is used, it must be reviewed by the Manager Quality and Compliance. The Manager Quality and Compliance will then approve or reject the schedule and/or checklist on behalf of the Accountable Executive.
5. Ad hoc audits may be requested for areas not currently covered by an audit schedule or to audit a new supplier.
6. All audits should be completed over a period of 12 months.

### 3.5.3 Audit Checklist

The Audit Checklist serves as a structured tool, providing continuity to audits and ensuring adherence to the defined audit scope. It functions as a communication aid and a repository for recording data, facilitating future references. Developed by the Corporate Quality Management audit team, the checklist undergoes creation after a thorough review of controlled operational documents, applicable requirements, and IOSA Standards and Recommended Practices (ISARPs).

While the audit checklist offers guidance, it is not exhaustive. It acts as a framework for planning and structuring audit activities. Auditors have the flexibility to incorporate any additional relevant checks based on changes in policies, regulatory requirements, etc. A detailed checklist is crafted to align with the activities of the respective area, department, or product for each audit. The dynamic nature of the checklists ensures adaptability, with each checklist systematically numbered for clarity and traceability.

Checklists for Riyadh Air are to be created by incorporating the following approved references:

1. Relevant company documentation.
2. Applicable aviation regulations or rules, such as the GACA eBook.
3. Riyadh Air Operations Specifications issued by GACA.
4. Any other pertinent references, including IOSA (International Operational Safety Audit) and ISO 9000 standards.

These approved references ensure that the checklists are comprehensive, aligning with company policies, regulatory requirements, and international standards to uphold operational excellence and compliance.



### 3.5.4 Audit Notification

#### 3.5.4.1 Internal Audits

The Manager Audit Program is responsible for coordinating internal audits and must formally notify the respective department in writing at least two weeks before the scheduled audit. The following information will be provided to the auditee:

1. A comprehensive package outlining the audit process.
2. A copy of the audit checklists that will be utilized.
3. A draft Audit Plan.

#### 3.5.4.2 External Audits

In the case of external audits, the Manager Quality and Compliance (MQC) is tasked with the following steps:

1. Coordinate with the auditee company to establish a mutually convenient time for the audit.
2. Confirm the agreed audit date in writing.
3. Dispatch an Information package detailing the audit process to the auditee.
4. Two weeks prior to the audit, provide the auditee with the following information:
  - a. Confirmation of the audit details.
  - b. A copy of the audit checklists intended for use.
  - c. A sample of the Audit Plan.

### 3.5.5 Pre-Audit Package

Audit team leaders are tasked with the preparation of a comprehensive pre-audit package for the assigned audit team. This package is designed to encompass critical information essential for the audit process and includes the following components:

**Audit Plan:** This document meticulously outlines the proposed audit timetable, providing a structured framework for the audit team's activities.

**Appropriate Audit Checklists:** Tailored checklists specific to the audit scope are included, ensuring a systematic and thorough examination of relevant criteria and processes.

**Summary of Findings from Previous Audit for Follow-Up:** A condensed overview of findings from the preceding audit is incorporated, facilitating a focused approach towards addressing and resolving identified issues.



**Significant Occurrence Trends (Accidents or Incidents):** An analysis of noteworthy occurrence trends, encompassing accidents or incidents, is presented. This information aids the audit team in understanding and evaluating the historical context and potential implications for the current audit.

### 3.5.6 Audit Team Selection

The Manager Audit Program is responsible for the meticulous selection of an audit team. This team, chosen independently of the area under review, is assembled based on requisite qualifications and capabilities, aligning precisely with the intended purpose and scope of the audit.

Subject matter experts are deemed essential for specific audit scenarios. These include:

1. En Route Inspections.
2. Check and Training System Audits.
3. Specific Ground Training Courses Audits.
4. Maintenance/Engineering Processes Audits.

Subject matter experts are indispensable for audits related to maintenance and engineering processes, bringing in-depth knowledge to the evaluation process.

#### 3.5.6.1 Auditor Composition and Replacement Protocols

Once the feasibility of an audit has been established, an audit team is meticulously assembled, taking into account the requisite competence necessary to attain the audit objectives. In cases where a singular auditor is designated, that auditor assumes the responsibility of performing all pertinent duties typically assigned to an audit team leader.

In deciding the size and composition of the audit team, consideration is given to the following:

1. Audit objectives, scope, criteria and estimated duration of the audit.
2. Whether the audit is a combined or joint audit.
3. The overall competence of the audit team needed to achieve the objectives of the audit.
4. Statutory, regulatory, contractual and accreditation/certification requirements, as applicable.
5. The need to ensure the independence of the audit team from the activities to be audited and to avoid conflict of interest;
6. The ability of the audit team members to interact effectively with the auditee and to work together;
7. The language of the audit, and an understanding of the auditee's particular social and cultural characteristics; these issues may be addressed either by the auditor's own skills or through the support of a technical expert.



The process of assuring the overall competence of the audit team should include the following steps:

1. Identification of the knowledge and skills needed to achieve the objectives of the audit;
2. Selection of the audit team members such that all of the necessary knowledge and skills are present in the audit team.

Auditors undergoing training may be incorporated into the audit team; however, they are not authorized to conduct audits independently and must operate under the guidance and direction of experienced auditors.

Both the audit client and the auditee maintain the right to request the substitution of audit team members under reasonable circumstances, adhering to established auditing principles. Examples of such reasonable grounds encompass situations involving conflicts of interest, such as a team member having a prior association with the auditee or having provided consultancy services to them, as well as instances of previous unethical behavior. Any grounds for replacement are communicated to the audit team leader and those responsible for overseeing the audit program. Subsequently, the matter is addressed with the audit client and auditee, and decisions regarding the replacement of audit team members are made collaboratively and judiciously.



## 3.6 AUDIT CONDUCT

### 3.6.1 Audit Plan Elements

An Audit Plan is a detailed program of action for the implementation and completion of an Audit Plan. The audit team leader prepares an audit plan to provide the basis for the agreement among the audit client, audit team and the auditee regarding the conduct of the audit.

The plan facilitates scheduling and coordination of the audit activities. The amount of detail provided in the audit plan reflects the scope and complexity of the audit.

The details may differ, for example, between initial and subsequent audits and also between internal and external audits.

The audit plan is sufficiently flexible to permit changes, such as changes in the audit scope, which can become necessary as the on-site audit activities progress. The audit plan covers the following:

1. The audit objectives;
2. The audit criteria and any reference documents;
3. The audit scope, including identification of the organizational and functional units and processes to be audited.
4. Audit location;
5. The dates and places where the on-site audit activities are to be conducted;
6. The expected time and duration of on-site audit activities, including meetings with the auditee's management and audit team meetings;
7. The roles and responsibilities of the audit team members and accompanying persons;
8. The allocation also covers appropriate resources to critical areas of the audit. identification of the auditee's representative for the audit;
9. Audit Method;
10. The working and reporting language of the audit where this is different from the language of the auditor and/or the auditee;
11. The audit report topics;
12. Logistic arrangements (travel, on-site facilities, etc.);
13. Matters related to confidentiality;
14. Any audit follow-up actions.

The plan is reviewed and accepted by the audit client, and presented to the auditee, before the on-site audit activities begin. Any objection by the auditee is resolved between the audit team leader, the



auditee and the audit client. Any revised audit plan is agreed among the parties concerned before continuing the audit.

### **3.6.2 Opening Meeting**

The opening meeting is a crucial initiation point for on-site audits within the Riyadh Air Quality Management System (QMS). This concise session serves as an opportunity for participants to address any queries related to the impending audit. The designated Audit Team Leader is responsible for executing the following tasks during the opening meeting:

1. Present the agenda outlining the topics for discussion during the opening meeting.
2. Document the names of all participants in attendance for record-keeping purposes.
3. Introduce the audit team members, providing relevant details about their roles and expertise.
4. Clarify the purpose of the opening meeting and set expectations for the audit process.
5. Record minutes of the opening meeting for documentation and reference purposes.
6. Introduce any observers, providing a brief overview of their roles and the rationale behind their presence.
7. Confirm the audit's objectives and scope, ensuring alignment among all stakeholders and agreement on related procedures and specifications.
8. Verify the status of documentation provided by the auditee prior to the commencement of the audit.
9. Confirm the implementation of corrective actions resulting from initial visits or documentation reviews.
10. Confirm the daily schedule, including designated tea and lunch breaks.
11. Review the overall audit timetable, ensuring clarity on key milestones.
12. Confirm that the auditee has assigned suitable representatives to accompany each audit team member.
13. Explain the documentation to be utilized during the audit, including checklists, nonconformance reports, and the significance of classifying findings.
14. Provide a summary of the methods and procedures employed for the audit process.
15. Discuss the necessity for daily summary meetings with the auditee in case the audit extends over multiple days, emphasizing the discussion and clarification of audit findings during these review meetings.



16. Request or confirm the facilities to be made available by the auditee for the use of the audit team, which may include an office, word processing, photocopying, and lunch facilities, as deemed appropriate.
17. Assure the auditee of the strict confidentiality of all facts arising from the audit, with information only shared with the approval of the auditee's head of department and the Manager of Quality and Compliance.
18. Assure the auditee of the audit team's compliance with safety requirements during facility or on-site audits, such as wearing protective equipment, as necessary.

### **3.6.3      Auditee Responsibilities**

For the successful completion of the audit activity the role of the auditee is very important. Following are the general responsibilities of auditee during the audit:

1. Provide full cooperation to the audit team throughout the audit process.
2. Adherence to the audit schedule
3. Grant access to all relevant processes and documentation required for audit.
4. Furnish accurate and complete information to the audit team.
5. Ensure that relevant personnel are available for interview and discussion with the audit team.
6. Demonstrate key processes and activities as requested by the audit team.
7. Share insights into root cause and contribute to the development of corrective action plans.
8. Keep auditors informed of the progress and completion of corrective actions.
9. Audit closure confirmation.

### **3.6.4      Audit Execution**

Audit execution is a critical phase in the audit process where the planned audit activities are carried out to assess the compliance, effectiveness, and efficiency of a system, process, or organization. The goal is to gather evidence, evaluate controls, and identify areas for improvement.

The on-site part of the audit is to determine the degree of compliance with the documented system and the effectiveness of its implementation. The auditor shall proceed as per the audit agenda, using prepared checklists. It shall be the responsibility of the lead auditor to supervise the activities of the audit team members to ensure the audit objectives are achieved,

All efforts shall be made by Audit Team so as not to interfere in the regular work of the Audited Department.



### **3.6.5 Auditor's Code of Conduct**

Auditors Should Adhere to the Following, while Conducting an Audit:

1. Apply audit principles, procedures, and methods;
2. Plan and organize work effectively;
3. Conduct the audit within the agreed time schedule;
4. Prioritize and focus on matters of significance;
5. Collect information through effective interviewing, listening, observing and reviewing documents, records and data;
6. Understand the appropriateness and consequences of using sampling techniques for auditing;
7. Verify the relevance and accuracy of collected information;
8. Confirm the sufficiency and appropriateness of audit evidence to support audit findings and conclusions;
9. Assess those factors that may affect the reliability of the audit findings and conclusions;
10. Use work documents to record audit activities;
11. Document audit findings and prepare appropriate audit reports;
12. Maintain the confidentiality and security of information, data, documents and records;
13. Communicate effectively in both verbal and written communication (either personally, or through the use of interpreters and translators);

### **3.6.6 Audit Team Meeting**

Following the completion of the audit and preceding the closing meeting, the audit team is mandated to convene for a comprehensive discussion and evaluation of the audit outcomes. In cases where the audit spans multiple days, it is imperative to consolidate information obtained from daily summary meetings. The duration of this meeting will be contingent upon the audit's scope and the quantity of identified findings. The Audit Team Leader is tasked with ongoing assessment and must gauge the requisite time for this meeting based on the evolving audit dynamics.

Each audit team member is required to bring the following documents to the audit team meeting:

1. Completed checklists utilized during the audit.
2. Records containing names and positions of auditee personnel present in the audited areas.
3. Records documenting discussions related to findings held with the auditee, including conclusions from daily summary meetings.



4. Audit finding reports.
5. Recordings outlining strengths and weaknesses observed in the management systems.

The Audit Team Leader assumes the role of the chairperson for the audit team meeting. The meeting is designed to:

1. Review, discuss, and evaluate objective evidence documented during the audit.
2. Determine the significance of findings and identify areas requiring improvement.
3. Identify common causes indicative of systemic issues.
4. Classify findings based on their nature and severity.

### **3.6.7 Termination of the Audit**

Auditor may terminate the audit under following circumstances:

1. Unobstructed access to the records and documents related to the audit have been denied
2. The systems , subsystems are not sufficiently developed to sustain a credible audit
3. Under influence or pressure on the auditor
4. Serious conflict of interest involving the auditor become apparent
5. Safety or security of audit team has been jeopardized

### **3.6.8 Closing Meeting**

The closing meeting serves the crucial purpose of delivering a succinct and objective overview of the audit results to the auditee. This comprehensive review encompasses the audit team's findings and emphasizes any necessary improvements to the existing system.

In instances where findings are adverse, the Audit Team Leader is obligated to accentuate positive factors and explicitly communicate that the audit's objective is to aid the auditee in rectifying deficiencies, ensuring compliance with pertinent standards or regulations.

During the closing meeting, the Audit Team Leader will undertake the following actions:

1. Distribute the agenda for the exit meeting.
2. Record the names of participants in attendance at the closing meeting.
3. Present the audit findings in a clear and concise manner.
4. Obtain agreement from the auditee regarding the presented findings.
5. Adhere to a demeanor that is helpful, firm, fair, and reasonable.
6. Convey a positive tone throughout the discussion.



7. Explain the procedural steps for follow-up on the identified findings.
8. Allow sufficient time for the auditee to pose questions or seek clarification.

### **3.6.9 External Audits**

#### **3.6.9.1 Audits of External Service Providers**

Refer Section 4.6

#### **3.6.9.2 Third-Party Audit**

Organizations eligible to conduct audits in the Riyadh Air include:

1. Regulatory Authorities.
2. Audit organizations.
3. Other entities approved by the Accountable Executive.

All audits must be communicated to the Manager of Quality and Compliance. The Manager will designate appropriate staff to be present during the audit, if required.

The audit report, along with any nonconformance reports, must be forwarded to the Quality department. The Manager of Quality and Compliance will coordinate and assign a team to conduct the root cause analysis and formulate a Corrective Action Plan.

### **3.6.10 Unscheduled Audits**

An unscheduled audit is an examination triggered by significant changes within Riyadh Air's Quality System, procedures, or organizational structure. Additionally, it may be prompted by alterations in an external provider's circumstances or procedures, or in response to an incident indicating a potential quality failure from the external service provider. Unscheduled audits may also be necessitated following an accident or incident, or as a follow-up measure to address a previously identified finding.

The following prerequisites must be considered prior to conducting an unscheduled audit:

1. The Manager of Quality and Compliance must be promptly notified of all unscheduled audits.
2. Documentation substantiating audit requirements must be submitted to the Manager of Quality and Compliance.
3. The Manager of Quality and Compliance is responsible for evaluating the evidence and granting approval for the unscheduled audit.
4. Once approved, the Manager of the Audit Program will organize the audit.
5. The Manager of the Audit Program is tasked with ensuring inter-departmental collaboration is available to support the unscheduled audit.



The same process will be followed as followed during a normal planned audit for conducting these audits.

### 3.6.11 Other Services and Products Supplier

Riyadh Air to ensure outsourced operational functions are conducted in a manner that meets Riyadh Air's operational and safety requirements. Riyadh Air shall periodically monitor such external service providers during station safety audits. This process would be applicable to any external service provider that conducts outsourced operational functions, including any separate affiliate to Riyadh Air. The monitoring can also be done by any of the means mentioned below:

**IOSA / ISAGO Registration:** The external service provider can demonstrate the fulfillment of the requirement through achieving and maintaining the IOSA and / ISAGO registration. The requirement shall be supported by either the IOSA / ISAGO latest audit report or a monitoring checklist according to the requirement.

**Monitoring performance outputs:** The requirements would be periodically monitored through filling up of checklist and / or periodic meetings. When monitoring is done through checklists, the relevant checklists shall be forwarded to the services provider. The service provider would return the completed checklist along with supporting documents. If any. The completed checklist will be reviewed, and decisions accordingly will be taken regarding additional measures required. If required, risk assessment would also be done as a part of the decision-making process.

**Regulatory control:** Regulatory control can be acceptable mean for meeting the specification if it can be demonstrated that the regulatory control process:

1. Include ongoing monitoring of the approved service provider.
2. Such monitoring is sufficiently robust to ensure that service provider fulfills the operational requirements on a continuing basis.

#### Governmental / Semi-Governmental Authority:

Under certain situations, Governmental / semi-Governmental authorities conduct certain activities (passenger or baggage screening at certain airport) that are not under the control of Riyadh Air. In these situations, Riyadh Air would monitor the output of the function conducted by authority to ascertain desired results are being achieved. Monitoring would be done through any of monitoring processes mentioned.

For Details refer [Chapter 4](#).



## 3.7 FINDINGS

### 3.7.1 General

Findings are categorized as either positive or nonconformance. A positive finding signifies a well-established process or procedure that can be utilized to enhance other departmental activities. Positive findings are recorded as observations in the system.

Nonconformance findings denote areas requiring system improvement and are further classified into the following categories:

#### 1. Level 1: Critical

Description: Critical findings are identified when operator safety is compromised.

Action: A critical finding necessitates the immediate cessation of the operation or process until rectified.

#### 2. Level 2: Non-compliance/Nonconformance

Description: Non-compliance/nonconformance findings indicate deviations that necessitate corrective action by the auditee.

#### 3. Level 3: Observation

Description: Observation findings highlight areas where best practices were not followed, process improvements are identified, or a better means of compliance is available.

Action: Observations require discussion within the department before acceptance for improvement or rejection as unnecessary.

Regarding observations, if the auditee agrees with the finding, the response time will be tracked conventionally. In cases where the auditee disagrees with the observation, the corrective action will be documented as "Finding not accepted, no corrective action to be taken."

It is important to note that positive findings, indicating processes or procedures beneficial to other departments, are explicitly documented as observations in the system.

### 3.7.2 Raising a Finding

The audit team meets as needed to review the audit findings at appropriate stages during the audit. Conformity with audit criteria is summarized to indicate locations, functions or processes that were audited. If included in the audit plan, individual audit findings of conformity and their supporting evidence are also recorded. Nonconformities are graded as per GACA requirements as:



### 3.7.3 Issuing a Finding

The auditor is responsible for issuing findings to the relevant management representative, along with copies of pertinent objective evidence for their reference. Typically, findings are presented in documented format during an audit closing meeting, subsequently documented as a finding in the system and stored as a Nonconformance Report.

However, if the applicable management representative is absent at the closing meeting or the finding is not a result of an audit, the auditor will take either of the following actions:

1. Schedule a post-exit meeting with the management representative to issue the finding.
2. Communicate with the management representative via email, informing them of the raised finding in the system and its forwarding for necessary action.

#### 3.7.3.1 Management Representative Acceptance

Upon review of the finding, if the management representative deems the matter outside their jurisdiction, they must contact the Lead Auditor for a review and potential reissuance of the finding. If the management representative accepts responsibility, they are obliged to furnish a root cause analysis and Corrective Action Response within the stipulated time.

#### 3.7.3.2 Corrective Action Timeframe

##### Level 1 – Critical:

Corrective Action Response within 24 hours.

Corrective Action Close-out within seven days of receiving the finding.

##### Level 2 – Non-Compliance / Non-Conformance:

Corrective Action Response within 7 days.

Corrective Action Close-out within 30 days or a mutually agreed timeframe.

##### Level 3 – Observation:

If an observation is accepted, Corrective Action Response within 30 days.

If the observation is not accepted, no Corrective Action is required but it will still be documented.

Corrective Action Close-out within an acceptable and mutually agreed timeframe.

If an observation is rejected, the management representative informs the auditor during the closing meeting, and the system response is set to "Not Required."

Upon receipt of an unaccepted observation, the Manager of Quality and Compliance reviews the finding. If satisfied, the finding is closed and the system response is set to "Not Required."



It remains to the Chief Inspectors' / Manager Quality and Compliances' discretion to escalate repeated Observations to Level 2 findings.

### 3.8 NON-CONFORMANCE REPORT

When a finding is identified, the auditor will raise it in the system, which in turn can be generated into a Nonconformance Report denoting the following:

1. Audit – the name of the audit under which the finding is being raised,
2. Nonconformance – the number of the finding (auto-generated),
3. Category – the level of negative finding that is generated,
4. Date Discovered – the date the finding was raised,
5. Risk – the level of risk for the finding, which is the outcome according to the predefined combinations of the Risk Matrix Codes,
6. Rule Ref. – any regulation/legislation against which the finding is raised,
7. Aircraft – registration of the aircraft,
8. Manual ref. – any documentation against which the finding is raised,
9. Dept – the department against which the finding is raised,
10. Entered By – the name of the person that enters the data,
11. Response Due – the date by which the Corrective Action Response is due,
12. Finding Description – documents the details of the finding. This will include a statement of the objective evidence cited, such as document numbers, titles, and sections,
13. Immediate Action Taken – the record of immediate action(s) taken by the auditor on-site,
14. Root Cause(s) – an explanation of the systemic or causal factor(s) for the finding, and
15. Follow-up Corrective/Preventive Action(s) – the response by the auditee in relation to the finding raised.



## 3.9 AUDIT REPORTING

### 3.9.1 Audit Summary and Report

After completion of audit, the team shall prepare the audit report in consultation with the team leader. The non-conformances and / or observations noted during audit shall be discussed and prepare a final report. The report shall be in detail and comprehensive, having reference of the requirements applied as the basis for assessments. The identified deviations / nonconformity with requirements as laid down in related Civil Aviation Requirements / Company Policy & Procedures / standards and recommendations shall be recorded, this shall however not preclude an auditor from raising any safety related issue.

The Audit report, after consultation with Manager Quality and Compliance, shall be forwarded to concerned departmental heads for the necessary corrective actions.

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### 3.10 FOLLOW-UP

The post-audit phase involves the evaluation of necessary corrective and preventive measures to validate the resolution of comments or recommendations outlined in the audit report. It is imperative to follow up on audits and ensure their closure systematically.

In the event of non-compliance by the auditee within the stipulated timeline, the Manager Audit Program is obligated to formally communicate with the department to ascertain the status of corrective/preventive actions. Instances of justified delays may be considered for an extension.

Following two unsuccessful attempts to achieve a satisfactory resolution, the Manager of the Audit Program is required to escalate the matter to the Manager of Quality and Compliance. MQC will then engage in discussions with the management representative regarding the audit findings.

Subsequently, the Manager of Quality and Compliance will dispatch a written communication to the concerned department, emphasizing the failure to adhere to agreed corrective actions. This correspondence serves as a notification to the auditee, conveying that persistent non-compliance may necessitate the referral of the finding to the Safety Review Board Meeting.

For verification on implementation of the proposed corrective action, refer [Section 9.7](#).



### 3.11 AUDIT RECORDS

Manager Audit Program is tasked with ensuring the retention of all audit records within the system for a duration of 5 years to facilitate comprehensive data analysis. The audit records encompass:

#### Audit Files

1. All correspondence related to the audit.
2. The completed checklist is utilized during the audit process.
3. A digital copy of the original audit report.
4. Whenever feasible, objective evidence supporting all identified findings.
5. Auditor working notes.
6. Responses to all audit reports.

#### Electronic Data

The electronic storage system is mandated to encompass both the audit report and all issued Nonconformance Reports (NCRs). The audit report stored in the system is to be maintained in a "read-only state" within the Quality department files.



## 3.12 ASSESS, VERIFY, AND VALIDATE IMPLEMENTATION

### 3.12.1 Verify the Effectiveness of Corrective/Preventive Action

The essence of the verification process hinges on the procurement of tangible evidence. The auditor is required to systematically seek objective and factual proof demonstrating the reduction or removal of identified root causes.

For verification on implementation of the proposed corrective action, refer [Section 9.7](#).

### 3.12.2 Verification Method

The subsequent inquiries serve as a framework for on-site verification:

1. Did the implemented actions effectively target the root causes of the issue rather than solely addressing symptoms?
2. Has the full implementation of the prescribed actions taken place?
3. Have there been revisions or developments in the pertinent procedures?
4. Are employees well-versed and informed about the instituted changes?
5. Can discernible enhancements be identified in services or outcomes?
6. Has a system of measurement or monitoring been instituted?
7. Is the top management apprised of the corrective action?
8. Has a recurrence of the problem been observed?

If responses affirmatively align with the first seven criteria, and negatively for the last point, the corrective action is to be deemed effective in accordance with the stipulations outlined in the manual.

### 3.12.3 Ineffective Actions

In accordance with the Section 3.12.2, should any of the queries indicate the ineffectiveness of implemented actions, it is incumbent upon the auditee to engage the Lead Auditor for the formulation of new corrective measures.

The manual recommends the following methodologies to achieve enhancement:

**Enhance the Implementation Plan:** Consider breaking down substantial actions into manageable tasks, assigning responsibilities, allocating resources, specifying due dates, and implementing reviews. Delegation to responsible employees facilitates effective task management.

**Early and Frequent Communication:** Consistent and regular communication minimizes the likelihood of commitments slipping through the cracks. Visibility and transparency are integral components fostering effective action.



**Focus on Root Causes:** The focus must remain on identifying and mitigating the root causes rather than merely addressing symptomatic manifestations. Continuous scrutiny of actions ensures alignment with the underlying causes of the problem.

**Incorporate Creativity:** Introducing new and diverse individuals to the problem-solving team can instigate positive change. Fresh perspectives often prove instrumental. Additionally, conducting a secondary brainstorming session on the causes can stimulate creativity.

**Drive Change Implementation:** Effective solutions invariably alter established work processes. Ineffectual solutions often arise from retraining using outdated methods, reinforcing flawed procedures, and urging individuals to exert more effort. These approaches rarely induce meaningful change. Failure to modify work processes results in an inability to reduce or eliminate the identified problem.



## 3.13 AUDIT CLOSURE

An audit closure occurs upon resolution of all audit findings, with acceptable and verified corrections and preventive actions in place.

The finalization of the audit is effectuated through the endorsement of the audit report by either the Lead Auditor or the Manager of the Audit Program.

Simultaneously, the conclusion of the audit, along with the Closure of Corrective and Preventive Actions (CARs), necessitates reporting to both the department head affected and the auditee. Subsequently, this information is duly recorded in the audit database for comprehensive documentation and reference purposes.

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### 3.14 ROOT CAUSE ANALYSIS

Auditee shall identify root cause for each raised non-conformance/ observations and forward the same to office of Manager Audit Program along with Action Taken Report. The purpose of Root Cause analysis is to determine the fundamental cause of the issue so that it can be addressed and corrected in a manner that further recurrence of the non-conformance can be prevented.

Root Cause(s) is defined as one of multiple factors (events, conditions, or organizational factors) that contributed to or created the proximate cause and subsequent undesired outcome and, if eliminated, or modified would have prevented the undesired outcome. Typically, multiple root causes contribute to an undesired outcome.

Root Cause Analysis is a structured evaluation method that identifies the root causes for an undesired outcome and the actions adequate to prevent recurrence. Root cause analysis (RCA) should continue until organizational factors have been identified or until data are exhausted.

The objective of RCA is to identify root cause(s) so that these latent failures may be eliminated or modified, and future occurrences of similar problems or mishaps may be prevented.

For effective Root Cause Analysis, maximum available data must be gathered and analyzed, keeping following in mind.

1. Identify facts surrounding the undesired outcome.
2. When did the undesired outcome occur?
3. Where did it occur?
4. What conditions were present prior to its occurrence?
5. What controls or barriers could have prevented its occurrence but did not?
6. What are all the potential causes?
7. What actions can prevent recurrence?



## 4 EXTERNAL SERVICE PROVIDER MANAGEMENT

### 4.1 GENERAL

Riyadh Air may opt to contract or subcontract any activity to external service providers, with the understanding that Riyadh Air retains full responsibility for the proper execution of the outsourced functions by these external entities.

To formalize and regulate such engagements, it is imperative to establish a contractual relationship or agreement. This document serves to document the specific details of the outsourced functions, facilitating effective monitoring by Riyadh Air. All outsourced services will be procured exclusively through Approved Supplier List (ASL).

Any commercial interactions with external service providers will be subject to the terms and conditions outlined in the relevant agreement. Riyadh Air maintains oversight according to the stipulated terms, although the external service provider is held fully accountable throughout the duration of the contract.

For all new and/or existing contractors and subcontractors, Riyadh Air mandates the execution of a formal contract or agreement. Exceptions may be made for one-time agreements specifically addressing Aircraft on Ground (AOG) situations. However, Riyadh Air is prohibited from initiating any business dealings with third-party contractors or subcontractors in the absence of a signed formal contract or a letter of Service Level Agreement (SLA), except in cases of AOG emergencies.

Riyadh Air has the responsibility to ensure outsourced operational functions are conducted in a manner that meets Riyadh Air's operational safety, quality, and security requirements.



## 4.2 DETAILS OF OUTSOURCED SERVICES

Riyadh Air is authorized to engage in the contracting or subcontracting of specific activities, and the procurement of goods and services from external service providers. These activities are associated with various critical areas, including but not limited to:

1. Manufacturers (as applicable)
2. Maintenance Service Provider
3. Maintenance and Equipment Calibration Laboratories.
4. Ground De-Icing and Anti-icing Provider.
5. Fuel Provider.
6. Ground Handling Service Operators.
7. System Provider (including software for Flight Operations, Performance calculations, flight planning, navigation, database management and dispatch).
8. Training Facilities (including Flight Simulators)
9. Catering Provider.
10. Aircraft Cleaning and Sanitization Provider.

These engagements are undertaken in accordance with established quality management principles and regulatory requirements to ensure the seamless and secure operation of Riyadh Air.



# CORPORATE QUALITY MANAGEMENT SYSTEM

4	EXTERNAL SERVICE PROVIDER MANAGEMENT
4.3	ONBOARDING PROCEDURE OF VENDOR OR EXTERNAL SERVICE PROVIDERS

**Issue:** 00  
**Revision:** 00  
**Date:** 18-FEB-2024

## 4.3 ONBOARDING PROCEDURE OF VENDOR OR EXTERNAL SERVICE PROVIDERS

The inclusion of a new vendor in the AVL or ASL is a critical process to ensure the provision of products, goods, materials, or services, meets the established standards. The following procedural steps should be followed for the addition of a new vendor:

1. The responsibility for the selection and oversight of products, goods, or services provided by the contractor or subcontractor lies with the relevant Post Holder (PH) for outsourced functions or with the functional Head for areas not regulated by the General Authority of Civil Aviation Regulations (GACARs).
2. The relevant PH and/or functional Head are tasked with ensuring that the contractor or subcontractor adheres to the necessary safety, security, quality, and operational standards. Where feasible, the PH or functional Head should secure certification from the contractor indicating a commitment to Quality Principles.
3. A comprehensive written agreement between Riyadh Air and the contractor must exist, clearly delineating the safety, security, operational, service, and quality requirements.
4. All documentation obtained from the contractor or subcontractor must undergo review by the Quality Department before the finalization of the contract and the associated SLA.
5. The Corporate Quality Management Department will maintain copies of contracts and SLAs within its documentation recordkeeping systems. These records will undergo periodic audits and reviews to ensure ongoing service continuity and quality.
6. Functional Heads are also accountable for verifying that services or purchases delivered to their operational areas comply with Company standards, by employing principles of quality assurance.
7. Any procurement activities conducted by the Maintenance and Engineering (M&E) department must adhere to the departmental General Maintenance Manual (GMM) and the Continuing Analysis and Surveillance System (CASS) procedures.



## 4.4 SLA AND MEASURABLE STANDARDS

SLA is established as an annex to the contract between Riyadh Air and external or internal service providers. The SLA delineates, in quantifiable terms, the services expected from the external or internal service provider.

When utilizing contracted or subcontracted services, the respective department head is responsible for ensuring that the contract or agreement incorporates measurable specifications. Stakeholder inputs are to be seamlessly integrated into the SLAs.

The SLA is mandated to encompass measurable specifications, explicitly outlining the services impacting the safety, security, and quality of operations. Additionally, the SLA specifies the methodology by which service performance levels will be quantified and assessed. This structured approach ensures transparency and accountability in the delivery of critical services, aligning with Riyadh Air's commitment to safety, security, and operational quality.

SLA must, at a minimum, encompass the following components:

1. Detailed Specification of Operational Functions:

Comprehensive delineation of the operational functions to be executed, ensuring clarity and specificity in the scope of services.

2. Specification of Performance Indicators or Targets:

Explicit description of specifications, performance indicators, or targets, collectively referred to as measurable specifications. These are quantifiable benchmarks that Riyadh Air will monitor to assess the performance of the external service provider.

3. Monitoring of External Service Provider Activities:

Implementation of a systematic process to monitor all activities conducted by external service providers. This ensures ongoing compliance with specified standards and facilitates performance evaluation.

Departments within Riyadh Air responsible for overseeing these aspects must guarantee that external service providers possess the requisite authorization or approval, as mandated. Additionally, it is imperative that these service providers command the necessary resources and expertise to effectively carry out the assigned tasks, aligning with Riyadh Air's commitment to operational excellence and adherence to regulatory requirements.



## 4.5 MONITORING PROCESS

### 4.5.1 GENERAL

A systematic periodic audit process will be implemented to monitor the conformity of services and products acquired or contracted. This audit aims to ensure alignment with Riyadh Air's policies and procedures, as well as compliance with the regulatory requirements delineated in the contract between Riyadh Air and the respective service provider.

Riyadh Air employs various monitoring methodologies for external service providers, encompassing the following aspects:

1. Evaluation of adherence to local regulations and approval by GACA,
2. Assessment of compliance with ISO Standards (9001, 45001, 14001), EN/AS 9100 standards, contingent upon certification status,
3. Monitoring and analysis of claims-related activities,
4. Implementation of quality questionnaires to gauge performance and adherence,
5. Conducting inspections and surveys to assess the quality of services, and
6. Execution of audits for a comprehensive evaluation.

The monitoring approach is tailored individually for each provider or vendor. Typically, a hierarchical structure is established, allowing for the substitution of lower-tier monitoring methods with higher-tier alternatives when deemed necessary. This ensures that the monitoring methodology aligns with the criticality and complexity of each external service provider's scope of work.

### 4.5.2 Role of Corporate Quality Management Department

Riyadh Air implements a stringent Quality Audit protocol for all service providers prior to approval and inclusion in the ASL. Existing service providers are systematically incorporated into the annual external audit plan, and subject to periodic audits. In situations where on-site audits become impractical, approval for conducting desktop audits is contingent upon the discretion of the Manager of Quality and Compliance, provided there are no outstanding critical issues against the service provider.

The Corporate Quality Management Department maintains control of the ASL. This list comprehensively details the supplier's name, address, type of certificate, and ratings (ASL), or approval held (ASL), along with the contracted function assigned to each supplier. The ASL are securely stored in the Quality Office and are readily available for inspection by regulatory authorities.

The pertinent PHs and/or functional Head are responsible for ensuring that contractors possess the requisite authorization/approval, if mandated, and have the necessary resources and competence to execute outsourced tasks or functions. In cases where contractors are directed to undertake activities



# CORPORATE QUALITY MANAGEMENT SYSTEM

4 EXTERNAL SERVICE PROVIDER MANAGEMENT  
4.5 MONITORING PROCESS

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beyond their approved scope, the Quality Department conducts an audit to ensure the quality assurance measures encompass these additional requirements.

The Quality Department meticulously documents any changes to the approved scope, task, or function, ensuring that the individual who initially sanctioned the authorization is informed of the modifications. Pre-contract assessments of service providers are conducted to ascertain their capability, authorization/approval (if necessary), and competence to execute desired functions. These assessments are carried out consistently and in a standardized manner by the contracting department under the authority of the respective PH and/ or functional Head.

Supplier selection and evaluation procedures are based on the capacity of suppliers to provide products, services, and/ or goods in strict accordance with Riyadh Air requirements and technical specifications.

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## 4.5.2.1 Contractors and Subcontractors Audit

The conduct of audits of contractor/subcontractor is an essential requirement for the organization. The main purpose of the audit is to provide objective evidence that the Corporate Quality Management System (QMS) meets regulatory, safety, security, and operational requirements. However, audits also provide the organization with an opportunity to improve the system by identifying areas of waste, inefficiency, and excessive re-work areas which, when corrected, should result in higher Company profitability and performance. The process for monitoring the performance of a wet lease organization is designed and implemented to ensure the operations; and the safety and security needs of the Company are met.

An audit will provide means to determine contractor/subcontractor capability, readiness, and suitability to perform or deliver the desired functions, as part of the initial assessment of suppliers. The PH, or functional Head, shall contact the Quality Department providing information on the terms and conditions of the contract and/ or agreement to be signed. The Quality Department will plan the audit accordingly and provide feedback as per the audit procedures.

Full support and cooperation of management is required to ensure that an audit is successful in determining that both the individual system elements and the system as a whole are effective in meeting specified requirements.

All contracted organizations products/ credentials shall be audited/reviewed as per the requirement of Quality System (i.e. every 12-24 months).



## 4.6 EVALUATION AND ACCEPTANCE OF VENDORS

### 4.6.1 Flight Ops and Ground Ops Services

The protocol for flight/ground operations-related training and support services is outlined in this section. Reference for these services is to be made to the Supplier Evaluation Form – FLT/GRH Services, which is dispatched to the respective vendor. The vendor is required to submit the completed questionnaire along with evidence of their QMS certification, such as ISO 9001, ISO 14001, ISO 45001, ISO 17025 accreditation, etc. The Corporate Quality Management Department is responsible for the evaluation of vendors and subsequent approval processes.

The vendor evaluation process encompasses the following procedural steps:

1. The Procurement and/or Supply Chain & Logistics department initiates a vendor proposal request.
2. The potential vendor is contacted and instructed to complete the applicable questionnaire, supplemented by other required documentation if necessary.
3. The Procurement and/or Supply Chain & Logistics department uploads the received vendor documentation onto the Quality Department's software system.
4. The Quality Department conducts an assessment of the received documents; if any vendor certificates are absent, their presence on the internet is verified.
5. Upon satisfaction with the completeness of the documentation by the Manager of Quality and Compliance, vendor approval is granted. In cases of incomplete documentation, the prospective vendor is prompted to submit the missing documents.
6. The approved vendor is granted a two (2) year approval status and is included in the ASL.

The Manager of Quality and Compliance maintains an up-to-date record of the ASL.

The requirement for a contract or agreement applies to outsourced functions within the scope of ground handling operations that affect the safety and security of operations, including special functions such as aircraft fueling and de-/anti-icing. In Riyadh Air, such contracts can also be handled by Flight Operations and Engineering & Maintenance Departments.

The agreement identifies and specifies the standards by exact name (e.g., aircraft fuel shall be delivered in accordance with the published standards of the International Air Transport Association (IATA) Fuel Quality Pool), if applicable. The Airplane Health Management (AHM) contains detailed guidance and examples of a standard ground handling agreement and a SLA. Additionally, IATA publishes a standard contract for the delivery of aircraft fuel, which can be used as a reference.

An external service provider that is on the IATA Safety Audit of Ground Operations (ISAGO) Registry for a particular station indicates that such a provider has been audited and is in conformity with ISAGO



standards. The use of the ISAGO program is an acceptable method for some of the monitoring process for an external ground handling provider at a given station.

#### 4.6.2 Maintenance Services

Riyadh Air ensures a maintenance agreement has been executed with each external maintenance organization that performs maintenance functions for Riyadh Air; and such maintenance agreement shall:

1. Specify all maintenance requirements and define all tasks to be performed,
2. Comply with the procedures governing maintenance arrangements, as specified in the GMM.

Where Riyadh Air is not approved as a maintenance organization, or the maintenance organization is an independent organization, a contract is to be agreed between Riyadh Air and the Approved Maintenance Organization specifying all the work it will perform for the Company. A clear, unambiguous, and sufficiently detailed specification of work and assignment of responsibilities are required to ensure that no misunderstanding can arise between the parties concerned (operator, maintenance organization, and the State of Registry/Authority) that could result in a situation where work that has a bearing on the airworthiness or serviceability of aircraft is not, or will not, be properly performed. Special attention is to be paid to procedures and responsibilities to ensure that all maintenance work is performed, service bulletins are analyzed and decisions taken on accomplishment, airworthiness directives are completed on time and all work, including non-mandatory modifications, is carried out in accordance with approved data and to the latest standards.

1. Riyadh Air ensures each maintenance agreement with an external maintenance organization, that performs maintenance functions for Riyadh Air, specifies either in the agreement, SLA, or equivalent document, measurable maintenance safety and quality standards required to be fulfilled by the respective external maintenance organization.
2. The requirement for a maintenance agreement applies to all functions that are outsourced for substantial maintenance providers such as heavy maintenance and engine overhaul. If maintenance is expected to be accomplished in accordance with specific industry standards, an acceptable agreement identifies and specifies the standards by exact name.

Suppliers for Aircraft Maintenance Services are evaluated initially by Supplier Evaluation Form – M&E.



### **4.6.3 Evaluation of Service Providers / Suppliers**

Riyadh Air has established and implemented means to assess all activities necessary for ensuring that services and suppliers contracted meet the Company requirements, all applicable regulatory standards, the contracted scope of work, and are able to support safe operations.

The evaluation of service providers/suppliers outlined below pertains to the operational areas. For procedures related to the evaluation of contracted maintenance providers and suppliers, refer to GMM and CASS.

Prior to conducting the evaluation of a service provider/supplier, the manager responsible for contracting the provider shall ensure he has sufficient information that describes the characteristics of the service providers to ensure they meet the scope of work.

The Corporate Quality Management department shall be informed by either PH or Line (Functional) Manager of the contracting department. However, the contracting department and PH shall remain responsible for the selection and acceptance of all suppliers.

#### **4.6.3.1 Phase 1 – Initial Assessment of Service Providers / Suppliers**

In the context of new suppliers required for Flight Operations, Flight Dispatch, and Flight Crew Training, an audit may be deemed necessary before supplier utilization. Prior to commencement of services, the respective department is obligated to agree upon corrective, preventive, or mitigating actions resulting from the audit. If the supplier or service provider is enlisted in a recognized list, such as Jeppesen, a formal evaluation process may be exempted and services can be directly contracted. The exercise of discretion by the PH is imperative in such cases. For the assessment of maintenance suppliers involving cabin equipment, refer to the GMM/CASS. The evaluation of fuel and de-icing providers, cargo handling agents, ground handling agents, and security providers is incorporated into the station audit. The assessment also considers:

1. The availability or implementation of adequate work instructions, as necessary,
2. The use of suitable equipment,
3. The availability and use of monitoring and measuring equipment, if applicable,
4. The appropriate qualification of personnel, and
5. Approval to conduct the contracted scope of work (if applicable).

**4.6.3.2 Phase 2 – Validation of Service Providers**

Corporate Quality Management department has designed forms to systematically evaluate suppliers and service providers, ensuring their capability to achieve planned results. PH and Line Managers may employ the Corporate Quality Management department form for supplier evaluation. During evaluation, all supporting documentation should be gathered to substantiate the assessment. In cases where suppliers do not meet Company standards, such as with monopoly handlers, the PH is responsible for mitigating the risk by implementing adequate controls to monitor services.

**4.6.3.3 Phase 3 – Monitoring of Service Providers**

The PH or Line Manager overseeing the contracting of a service provider, and must regularly monitor performance using various resources, including inspections, audits, occurrence reports, feedback, meetings, etc. When deficiencies are identified, actions are to be implemented to enhance sub-standard performance. If necessary, the Line Manager responsible for contracting the service provider should consider discontinuing the utilization of the underperforming contracted service provider. The Corporate Quality Management department should be informed of such decisions.

**4.6.3.4 Phase 4 – Re-evaluation of Service Providers**

Every service provider is subject to re-evaluation every 24 months. This re-evaluation may coincide with quality assurance audits. If a service provider changes between audits, an evaluation should be completed in accordance with the detailed process outlined in Phase 1 above.



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## **4.9 TRAINING AND QUALIFICATION OF PERSONNEL**

Riyadh Air emphasizes that all individuals contracted to undertake responsibilities for the airline, particularly those influencing the safety or security of aircraft operations, must be selected based on their knowledge, skills, training, and experience relevant to their respective positions.

Prior to assuming operational roles, personnel are required to undergo initial training ensuring successful completion before assignment. Furthermore, all personnel must undergo recurrent training in accordance with established regulations and Riyadh Air manuals, with a minimum frequency of every 36 months if no specific intervals are defined.

The training program is designed to encompass a comprehensive range of subjects, including but not limited to personnel competence for their roles, awareness of applicable regulations, adherence to standard operating procedures, recognition of operational hazards, comprehension of human factor elements, familiarity with safety and security principles, and understanding reporting systems.

It is imperative that all personnel maintain both medical and physical fitness in alignment with the prescribed standards, to fulfill their duties effectively and contribute to the overall safety and security of Riyadh Air operations.



## 5 EXTERNAL AUDITS

### 5.1 INTRODUCTION

This section of the manual delineates the protocols for overseeing external audits. These audits are conducted at regular intervals by the relevant regulatory bodies such as the General Authority Of Civil Aviation (GACA), Safety Assessment of Foreign Aircraft (SAFA), IATA Operational Safety Audit (IOSA), or by entities with a vested interest in the organization.

The Corporate Quality Management Department assumes the responsibility for coordinating external audits. The Chief Inspector is the designated Post Holder (PH) within the Department who delegates to the Manager Quality and Compliance the task of audit preparation, representation throughout the audit process and the subsequent closure of the audit.

If opening and closing meetings are deemed necessary for the audit, the Manager of Quality and Compliance will communicate such requirements to the respective departmental PHs.



## 5.2 GACA AUDITS

Audits conducted by GACA will adhere to the GACA surveillance program. Additionally, GACA reserves the right to carry out ad hoc audits at their discretion.

In accordance with GACA protocol, mandatory opening and closing meetings are to be conducted during these audits, and it is imperative the relevant PHs attend these sessions according to the scope of work being evaluated. For detailed procedures regarding the resolution of findings or observations raised by regulatory authorities, please refer to Section 3 of this manual.

Throughout the audit process, GACA will verify the organization's adherence to prescribed GACA regulations (GACARs), other relevant aviation regulatory frameworks and international aviation standards as deemed applicable, ensuring ongoing compliance and the appropriate operational status throughout the duration of the permit/approval. This scrutiny is conducted before the issuance or renewal of an operating permit or whenever deemed necessary. Typically, these audits adhere to a predetermined schedule as outlined in published guidelines. However, special audits may be initiated after providing a reasonable notice period.



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## 5.4 SAFETY ASSESSMENT OF FOREIGN AIRCRAFT (SAFA) AUDIT

### 5.4.1 Introduction

ICAO mandates member states shall institute and sustain safe, regular, and efficient international commercial air transport operations. The guidelines for achieving this objective are detailed in ICAO Doc 8335, titled 'Manual of Procedures for Operations Inspection, Certification, and Continued Surveillance'. As an integral component of continued surveillance, member states are obligated to conduct ramp inspections of foreign aircraft operating within their jurisdiction.

In alignment with this ICAO requirement, regulatory authorities have instituted ramp inspections as part of various programs. The SAFA audit, integrated into the European Union Aviation Safety Agency (EASA) surveillance program in Europe, has served as a model for several national aviation authorities in structuring their own inspection programs. All such ramp inspections adhere to published standards encompassing procedures, interpretation, checklists, and reporting protocols.

### 5.4.2 Functioning of the SAFA Program

The SAFA program operates within the regulatory framework established by EASA and European member states. It aligns with international standards set by ICAO.

The SAFA program applies to all foreign-registered aircraft operating in the airspace of European member states. The focus is on verifying compliance with safety, operational, and airworthiness standards.

In each SAFA-participating state, foreign aircraft may be subjected to ramp inspection mainly covering the following:

1. Flight Deck – aircraft documents and manuals, flight crew licenses, etc.,
2. Safety and Cabin – presence and condition of mandatory cabin safety equipment, emergency exits, etc.,
3. Aircraft condition – general external condition, flight controls, wheels, obvious repairs, etc., and
4. Cargo – condition of cargo compartment, dangerous goods, etc.

The findings of such inspections are categorized depending on their severity - Cat. 1 - Minor, Cat. 2 - Significant, and Cat. 3 – Major. General remarks not amounting to a finding is categorized as "G". No finding means no Cat 1, 2 or 3 findings but may include General Remarks 'G'.

Depending on the finding category, the information is provided to Captain, Operator and/or NAA requesting necessary corrective actions.



### **5.4.3 Procedures for Management of SAFA Inspection Reports**

Riyadh Air's Corporate Quality Management department is designated with the responsibility of coordinating the administration of the company database pertaining to SAFA inspections and associated responses. Access to the SAFA database is granted exclusively to the Corporate Quality Management and Engineering Quality Department.

To address and close SAFA audit findings, the following procedural steps will be undertaken:

1. SAFA Inspectors issue Proof of Inspection (POI) with acknowledgment from the Pilot-in-Command (PIC) or Crew. All such POIs must be submitted by the PIC or crew to Dispatch, and Dispatch is required to forward these POIs to the Corporate Quality Management via email.
2. If the POI is received by any other Company representative (such as Airport Manager or Station Engineer), it is mandatory to forward the POI to the Corporate Quality Management via email.
3. Following the issuance of the POI, the inspecting authority uploads the Ramp Inspection Report (RIR) into the SAFA database. The Corporate Quality Management will scrutinize the received RIR/POI and disseminate them to relevant departments for necessary action. Departments are obligated to ensure the submission of their responses within the timelines specified by SAFA.
4. The concerned department is tasked with conducting a Root Cause Analysis (RCA) and formulating corrective/preventive action in accordance with the procedures detailed in Chapter 3. The department is required to submit the root cause and corrective/preventive action plan for each finding, along with action details and supporting evidence, to the Corporate Quality Management department.
5. Findings are continuously monitored and escalated as per the procedures outlined in Chapter 3.
6. The Corporate Quality Management department will verify the submitted RCA and corrective/preventive actions for completeness. Verified actions will be uploaded into the SAFA database.
7. Periodic reviews of the SAFA database will be conducted by the Corporate Quality Management department to ascertain the status of reports related to Riyadh Air's fleet and to identify the availability of new reports.
8. SAFA inspection findings will be summarized in the Management Review for comprehensive analysis.



## 5.5 PROCEDURES FOR CLOSING FINDINGS

Upon identification of a finding by an external audit organization, the Corporate Quality Management department is mandated to execute the following actions:

1. Record all findings in the Corporate Quality Management database.
2. Scrutinize the findings and observations, disseminating them to the relevant departments for necessary action.
3. Manage finding levels in accordance with instructions provided by the external audit. In the absence of specific instructions, adhere to the finding level timeframe outlined in Chapter 3.
4. The concerned department is required to conduct an RCA and formulate corrective/preventive action as outlined in Chapter 3 procedures. submit the root cause and corrective/preventive action plan for each finding, including action details and supporting evidence, to the Corporate Quality Management department.
5. Monitor findings and escalate as detailed in Chapter 3 procedures.
6. The department will verify the submitted RCA and corrective/preventive actions for completeness. Verified actions will be transmitted to the external audit organization.
7. Coordinate with the external audit organization to ascertain the status of closure.
8. Summarize external audit findings in the Management Review for comprehensive review and analysis.



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# CORPORATE QUALITY MANAGEMENT SYSTEM

6 DOCUMENT MANAGEMENT  
6.1 DOCUMENTATION SYSTEM

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## 6 DOCUMENT MANAGEMENT

### 6.1 DOCUMENTATION SYSTEM

Refer Company Policy Manual Section 4.

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## 6.2 MANAGEMENT AND CONTROL OF QUALITY ASSURANCE DOCUMENTATION

The audit records shall be preserved in secured computer files or paper forms in designated filing cabinets to prevent deterioration and damage. Such records are easily accessible for use and shall be made available for review upon request from General Authority of Civil Aviation (GACA) or Accountable Manager.

The following documents are acceptable records:

1. Annual Audit Plan.
2. Audit Reports.
3. Completed Audit checklist.
4. Corrective Action Report.
5. Audit Status Log.
6. Audit Analysis Report.
7. Minutes of Audit Review Meeting.
8. Third-Part Audit Report (including corrective action plan).

The Manager Audit Program shall ensure that records are retained for a period of 5 years as per the following:

Sl. No	Record Title	Format
1.	Annual Audit Plan	Hard Copy/ Soft Copy
2.	Non-Conformance Report & CAP	Hard Copy/ Soft Copy
3.	Completed Audit check list	Hard Copy/ Soft Copy
4.	Corrective Action Report	Hard Copy/ Soft Copy
5.	Audit Status Log	Hard Copy/ Soft Copy
6.	Audit Analysis Report	Hard Copy/ Soft Copy
7.	Minutes of Audit Review Meeting (if any)	Hard Copy/ Soft Copy
8	Records of Internal ISARPs audit	Hard Copy/ Soft Copy
9	Third-Party Audit Report	Hard Copy/ Soft Copy

Table 3 Records and Retainment Format



## **7 TRAINING AND QUALIFICATION PROGRAM**

### **7.1 GENERAL**

The Quality Management Program utilizes Auditors who are appropriately trained and qualified as per the requirements laid down in this Chapter. Auditors who are impartial and functionally independent from operational areas to be audited are used for conducting audits. Confidence and reliance in the audit process depends on the competence of those conducting the audit.

This competence is based on the demonstration of:

1. The personal attributes
2. the ability to apply the knowledge and skills gained through education, work experience, auditor training, and audit experience.

Riyadh Air has a training and qualification program for Auditors that conduct auditing and evaluation against the GACA, IATA Operational Safety Audit (IOSA) and IATA Safety Audit of Ground Operations (ISAGO) standards. Such program ensures that Auditors:

1. Have the knowledge, skills and work experience needed to effectively assess areas of the management system and operations that will be audited,
2. Maintain an appropriate level of current audit experience,
3. Complete initial and continuing auditor training that provides the knowledge and understanding necessary to effectively conduct audits against,
4. Are able to adhere to applicable regulations and standards, and
5. Follow IOSA standards and recommended practices (ISARPS) for IOSA and GOSARPS for ISAGO.



## **7.2 QUALIFICATION AND EXPERIENCE REQUIREMENTS**

### **7.2.1 Manager Quality and Compliance**

The minimum qualification and experience required for Manager Quality and Compliance are as follows:

1. Should have an aviation graduate degree, Engineering license or Pilot license.
2. Should have 15 years of airline experience or a relevant aviation background,
3. Be a certified quality auditor to a recognized international standard such as IATA internal auditor/ IOSA auditor course/ lead auditor – ISO 9001 or EN/AS9100 standards, and
4. Should have at least 5 years of experience within the management of quality program.
5. Minimum of 10 years of job-related operational experience in any of the relevant discipline such as maintenance, flight operations, flight dispatch, cabin safety, ground operations, cargo, security, and flight safety management

#### **Training and Knowledge:**

1. Should have excellent knowledge and understanding of regulations and the industry standards e.g. GACA, Federal Aviation Administration (FAA), IOSA Standards etc.
2. Should have good knowledge of Safety Management System (SMS).
3. Should have good knowledge on Quality Management System (QMS).

### **7.2.2 Manager Audit Program**

The minimum qualification and experience required for the appointment of Manager Audit Program are as follows:

1. Should have an aviation graduate degree, Engineering license or Pilot license.
2. Should have 10 years of airline experience or a relevant aviation background,
3. Be a certified quality auditor to a recognized international standard such as IATA internal auditor/ IOSA auditor course/ lead auditor – ISO 9001 or EN/AS9100 standards,
4. Should have at least 3 years of experience within the management of quality program.
5. Minimum of 5 years of job-related operational experience in any of the relevant discipline such as maintenance, flight operations, flight dispatch, cabin safety, ground operations, cargo, security, and flight safety management.



## Training and Knowledge:

1. Should have excellent knowledge and understanding of regulations and the industry standards e.g. GACA, IOSA Standards, etc.
2. Should have good knowledge of SMS.
3. Should have good knowledge on QMS.
4. Should have good knowledge and understanding of the process management and attention to detail.

### 7.2.3 Auditor

The minimum qualification and experience required for the appointment of Quality Assurance Auditor are as follows:

1. Should have a graduate degree, Engineering license or Pilot license.
2. Be a certified quality auditor to a recognized international standard such as IATA internal auditor/ IOSA auditor course/ lead auditor – ISO 9001 or EN/AS9100 standards

**Note:** For conducting Flight Operations Line Audit, the Auditor shall be the holder of pilot qualification. The pilot conducting the simulator observation session shall have simulator operation experience or to be/have been a flight simulator instructor.

3. Should have a minimum of 5 years of job-related operational experience in any of the relevant discipline such as Maintenance, Flight Operations, Flight Dispatch, Cabin Safety, Ground Operations, Cargo, Security, Flight Safety Management, or Quality Management.

## Training and Knowledge:

1. Should have excellent knowledge and understanding of regulations and the industry standards e.g. GACA, FAA, IOSA Standards, etc.
2. Should have sound understanding of SMS.
3. Should have good knowledge and understanding of the process of management and pay attention to details.
4. For the discipline of Ground Operations and Cargo – should have knowledge and understanding of Aircraft Ramp handling, Weight & Balance, Dangerous Goods Regulations and Perishable Cargo, and Standard Ground Handling Agreement (SGHA) agreement clauses.



## 7.2.4 Lead Auditor

'Auditor' may be assigned the role of 'Lead Auditor' after satisfying the following requirements:

1. Shall have conducted a minimum of 10 internal audits as a qualified Auditor (Station audit is considered one audit) or demonstrate documented lead auditor experience up to a level acceptable to the Manager Quality and Compliance.
2. Shall have undergone a recognized Lead Auditor training,
3. Shall have undergone a performance assessment conducted by Manager Audit Program,
4. Completion (with certificate) of a formal aviation-based SMS training course, from a recognized airline-related training provider (e.g. ATA, IATA, Airline, AO, Flight Safety International, etc.) with a curriculum based on the SMS components and elements contained in the International Civil Aviation Organization (ICAO) Framework for Safety Management airline.
5. Shall have observed in the role of Lead Auditor during on-the-job training, and
6. Shall be approved by the Manager Quality and Compliance (MQC).

**Note:** Based on an interview, the MQC may accept previous audit experience in support of the above requirements. In this case, the Auditor will be exempted from completion of the above requirement. A letter to that effect shall be issued by the MQC.



## 7.3 TRAINING REQUIREMENTS

### 7.3.1 Training Matrix

Training	Recurrent Training (months)	Manager Audit Program	Lead Auditor/ Auditor	QMS Staff
Initial Auditor Training	-	Yes	Yes	Yes
Auditor Training / Lead Auditor course (ISO 9001 or EN/AS9100 standard) <i>See Note 1</i>	-	Yes	Yes	Yes
Training of Auditing IOSA Standard – <i>See Note 1 and 2</i>	24	Yes	Yes	No
Human Factors	24	Yes	Yes	No
Safety Management System (SMS) – <i>See Note 3</i>	24	Yes	Yes	Yes – Basic awareness
Root Cause Analysis	24	Yes	Yes	No
Dangerous Goods Awareness (Category 6/10)	24	Yes	Yes	No

Table 4 Training Matrix

Note 1: Auditor / Lead Auditor course and IOSA course may be combined.

Note 2: IOSA training shall include familiarization with IOSA documentation and the method of assessing IOSA standards as required by IOSA Standard ORG 3.4.13.

Note 3: The initial SMS Training shall include curriculum based on the SMS components and elements contained in the ICAO Framework. The training shall emphasize the importance of hazard identification and risk assessment. The knowledge of an Auditor can be tested by an examination for which the passing mark is 80%.

Note 4: Recurrent training may be combined with recurrent audit training module.



### **7.3.2 Elements of Auditor Training**

The newly recruited Auditor (part-time and full-time) shall undergo the following training to certify as Riyadh Air qualified Auditor:

1. Initial Auditor training (ISO 9000)
2. Aviation Auditor training (EN/AS9100)
3. Lead Auditor course (IATA/IOSA)
4. On-job-training
5. Release certificate

#### **7.3.2.1 Initial Training**

All Auditors shall complete initial Auditor training to understand Riyadh Air Quality Management practices and procedures, prior to being released for conducting any audit.

The training shall include a combination of classroom and practical sessions covering the principles of auditing, planning, preparing, conducting, and writing of audit tasks, reports, and non-compliances/conformances.

The levels of training shall be as follows:

1. Abridge course (2 days course) – Auditors having previously completed a recognized Auditor training (ISO 9001 or EN/AS9100) shall complete the abridged version of Riyadh Air initial Auditor training which consists of a briefing on Riyadh Air Quality Management Audit Program practices and procedures.

In addition, the Auditor shall undergo the following training:

1. Human Factors (HF)
2. Safety Management System
3. Root Cause Analysis
4. Dangerous Goods (Category 6/10)

##### **7.3.2.1.1 Abridged Course Training Syllabus**

This training will be delivered by a qualified trainer or the MQC.

1. The duration of the course will be 2 days.
2. The training shall be recorded in the Auditor training file.
3. The training syllabus shall include as a minimum the following:



- a. Overview of Riyadh Air Safety and Quality Management System, and Flight Safety Documentation Management System (documentation and record system, documentation hierarchy, etc.),
- b. Regulatory Requirements,
- c. Quality Assurance Program,
- d. audit procedures, forms and practices,
- e. audit planning, preparing, conducting, report writing, non-compliances/ - conformances, follow-up, and closure, and
- f. Riyadh Air Quality Database.

### 7.3.2.2 Training on IOSA Requirements – Syllabus

The training on interpretation and assessment of IOSA standards may either be conducted separately or combined with the Initial Auditor course.

The curriculum for the training of Auditors assigned to conduct internal auditing against the IOSA standards shall include, as a minimum, the following:

- 1. IOSA program overview,
- 2. IOSA documentation,
- 3. Reading and understanding the ISARPs,
- 4. Exercise IOSA key words and determining conformity with standards and recommended practices,
- 5. IOSA quality assurance requirements (IOSA ORG subsection 3.4),
- 6. Audit program management,
- 7. Auditor conduct, skills, qualifications, and evaluation,
- 8. Audit planning and preparation,
- 9. Audit methodology and procedures,
- 10. Auditor Actions,
- 11. Mandatory observations,
- 12. Root cause analysis
- 13. Conformance Report (CR)
- 14. Auditing Organization and Management (ORG) and repeated ORG ISARPs,
- 15. Auditing SMS,



16. Auditing quality assurance, and
17. Assessing outsourced operational functions.

### 7.3.3 On Job Training

After successful completion of initial Auditor training, the trainee Auditor shall be required to conduct:

1. **First Audit** – Observe a minimum of 1 audit under the supervision of a qualified Auditor or Lead Auditor which will be considered as first audit training.
2. **Second Audit** – Conduct a minimum of 1 audit under the supervision of a Lead Auditor which will be considered as second audit training.
3. **Release check** – Release check will be considered successful only after audit demonstrates his skills, knowledge, and competence for the audit scope on which he is being released to conduct audits.

The training outcome shall be recorded in the evaluation form. Additional training will be provided if required.

*Note: Based on an interview, the MQC may accept Auditor previous audit experience in support of the above requirements. In this case, the Auditor will be exempted from completion of on-the-job training. A letter to that effect will be issued by the MQC.*

### 7.3.4 Release Certificate

Once the trainee completes his on-the-job training successfully, the evaluation form shall be submitted to the MQC. They will check the evaluation form and then Auditor release certificate shall be issued to the auditor.

The release certificate shall indicate the scope(s) for which the Auditor is authorized to conduct audits.

The Auditors are qualified in accordance with the following audit scopes (as per IOSA):

ORG	Organization and Management
CAB	Cabin Operations
CGO	Cargo Operations
DSP	Flight Dispatch
FLT	Flight Operations
GRH	Ground Handling Operations
MNT	Aircraft Maintenance and Engineering
SEC	Operational Security



If the Auditor is required to be released for new scope(s), an evaluation shall be conducted by the Lead Auditor and if successful, the release certificate for the new scope will be issued by the MQC.

### **7.3.5 Human Factors Training**

HF training shall be conducted during Auditor's initial training. The training shall include, as a minimum, the following:

1. Culture;
2. Communication;
3. Situational awareness;
4. Decision making;
5. Threat and error management.

Recurrent training shall be conducted at intervals not exceeding 24 months from the date of successful completion of the previous training

### **7.3.6 SMS Training**

SMS Training shall be conducted during Auditor's initial training. The initial SMS Training shall include curriculum based on the SMS components and elements contained in the ICAO Framework. The training shall emphasize the importance of hazard identification and risk assessment.

Recurrent training shall be conducted at intervals not exceeding 24 months from the date of successful completion of the previous training.

Recurrent training may be combined with the recurrent audit training module.

### **7.3.7 Dangerous Goods Training**

Dangerous Goods Training (Category 6 or 10) shall be conducted during initial Auditor's training.

Recurrent training shall be conducted at intervals not exceeding 24 months from the date of successful completion of the previous training.

### **7.3.8 Recurrent Training**

Auditors shall undergo a recurrent training every 24 months and will be evaluated to keep them current. Evaluation shall be carried out by the qualified Lead Auditor, through oversight during the audit as per the Auditor Evaluation

Then recurrent training will be provided in the form of PowerPoint presentations, handouts, classroom training, etc. Mock exercises will also be part of this training. Riyadh Air shall ensure the recurrent training curriculum is designed to provide information that updates and refreshes Auditor knowledge



# CORPORATE QUALITY MANAGEMENT SYSTEM

7 TRAINING AND QUALIFICATION PROGRAM  
7.3 TRAINING REQUIREMENTS

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with respect to IOSA system and local issues, as well as any program feedback. Course content, as a minimum, includes and/ or addresses the following:

1. IOSA system issues.
2. IOSA program standardization.
3. Riyadh Air Alerts and Bulletins.
4. Review of Quality System including any changes.
5. Changes to the SMS.
6. Documentation.
7. Regulatory issues.
8. Audit principles and techniques.
9. Administrative issues.
10. On-site IOSA Audit Report (IAR) production and quality control.
11. Other system and local issues, as appropriate (e.g., IOSA audit experience, program development, quality assurance activities, quality control of IARs and other sources of program information and/ or feedback).



## 7.4 AUDITOR PERFORMANCE EVALUATION

Auditors will be evaluated to keep them current and competent for carrying out internal audits. The evaluation process of Auditors identifies training and other skill enhancement needs. The evaluation of Auditors shall be carried out by Manager Audit Program. The initial evaluation takes place after the successful completion of theoretical and practical training.

**The Evaluation Process Involves Four main steps.**

1. **Step 1** — The following personal attributes, knowledge, and skills:
  - a. Should be considered but not limited to:
    - i. The size, nature, and complexity of the organization/ system to be audited,
    - ii. The objectives and extent of the audit program,
    - iii. Certification/ registration and accreditation requirements,
    - iv. The role of the audit process in the management of the organization to be audited,
    - v. The level of confidence required in the audit program, and
    - vi. The complexity of the management system to be audited.
2. **Step 2** —Evaluation Criteria are as follows:
  - a. Based on qualification and experience:
    - i. Relevant audit qualifications and level of experience,
    - ii. Appropriate experience in auditing or similar projects/ programs,
    - iii. Ability to conform to the audit guidelines,
    - iv. Understanding of relevant principles and mandatory standard provisions,
    - v. Demonstrates organizational ability to plan, implement, and support an audit program,
    - vi. Timeline to meet the guidelines and requirements.
  - b. Based on past performance.
  - c. Quality of the work.
  - d. Quality of the audit reports.
  - e. Timelines for finishing the audit and submitting the audit reports, and
  - f. Backlog of pending audits.
3. **Step 3** — Appropriate Evaluation Method:
  - a. Evaluation will be undertaken by Corporate Quality Management Manager or a qualified Auditor using the following methods:



- i. Review of records.
  - ii. Positive and negative feedback (surveys, questionnaires, personal references, testimonials etc.).
  - iii. Interview.
  - iv. Observation (performance during audits).
  - v. Post-audit review.
- b. The following should be noted:
- i. The methods outlined represent a range of options and may not apply in all situations,
  - ii. The various methods outlined can differ in their reliability, and
  - iii. Typically, a combination of methods will be used to ensure an outcome that is objective, consistent, fair, and reliable.
4. **Step 4 — Evaluation:**

In this step the information collected about the person is compared against the criteria set in Step 2. If a person does not meet the criteria, improvement and continual evaluation of performance is required.



## 7.5 AUDITOR CURRENCY

The Auditors must carry out at least one quality audit every year, to be current with their qualification as an Auditor. In case, an Auditor does not meet the requirement, they will have to undergo recurrent training before conducting an audit.

**Process:**

1. If an Auditor is unable to conduct any quality audit in last 12 months, then they have to undergo Recurrent Training, and the training modules will be of 8 hours covering the following topics:
  - a. Audit Objectives, Scope, & Criteria.
  - b. Audit Principles & Audit Process.
  - c. Audit procedures & techniques.
  - d. Writing Audit Reports.
  - e. IOSA Update on salient changes in ISM.
  - f. IOSA Audit handbook familiarization and auditing techniques.
  - g. Feedback on report writing and standardization.
  - h. SMS strategy and understanding for Auditor.
  - i. Root Cause Analysis.
  - j. Awareness of essential GACA regulations.
  - k. After training, Auditor is cleared to do independent Audit.
2. In case, Quality Auditor has not carried out any Quality Audit in last 36 Months, then the Auditor has to undergo training as mentioned in above paragraph. After completion of classroom training, they will participate in one audit as trainee and an evaluation report will be filled by the Lead Auditor during the audit. After clearance from Lead Auditor, they will be cleared to do an independent Quality Audit.
3. In case, a Quality Auditor has not carried out any Quality Audit for more than 36 Months, then the Auditor has to undergo 3 days (compressed duration) Quality Auditors. After completion of classroom training, they will participate in one audit as trainee and an evaluation report will be filled by the Lead Auditor during the audit. After clearance from Lead Auditor, he will be cleared to do an independent Quality Audit.



## 7.6 TRAINING RECORDS

All the training records will be retained in the Auditors' personal files, and in the centralized database.

Auditors training records shall be maintained in accordance with records management procedures, detailed in Flight Safety Documentation System, in order to assure their identification, legibility, ready access, retrieval by authorized personnel, protection, security, and proper disposal.

Auditor's training records shall be maintained on the appropriate forms.

Individual auditor training records shall be maintained by the Manager Audit Program. The records shall be retained for a period of 5 years.

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## 8 CONTINUAL IMPROVEMENTS

### 8.1 MANAGEMENT REVIEW

The management evaluation represents a collaborative assessment of both Safety and Quality systems, scheduled to occur at a minimum frequency of once per year. The primary objective of this review is to scrutinize and rectify trends stemming from the Corporate Quality Management System, encompassing the compliance status of all company and outsourced activities. Additionally, the review aims to proactively prevent future non-conformities and non-compliances.

The Management review of significant quality assurance issues plays a pivotal role in facilitating the continual improvement of safety performance within the Safety Management System (SMS) framework. This process enables senior management to address substantial non-compliance matters across organizational segments impacting operational safety and security. The key objectives of this review are as follows:

1. **Continual Monitoring and Assessment:**

Engage in continuous monitoring and assessment of operational safety and security outcomes.

2. **Implementation of Corrective or Preventive Actions:**

Ensure the implementation of appropriate corrective or preventive actions to address relevant compliance issues, monitoring their effectiveness over time.

3. **Continual Improvement:**

Foster a culture of continual improvement in operational safety and security performance.

The MQC is tasked with preparing a comprehensive review from the preceding period, summarizing inputs from various processes, including:

- a. Follow-up actions from prior management reviews.
- b. Results of audits, inspections, and surveillance checks, with emphasis on high-risk areas identified by the Quality Assurance Program.
- c. Significant findings and any delayed closure of findings.
- d. Recurrent findings.
- e. Status of corrective and preventive actions.
- f. Resource requirements, if applicable.
- g. Process performance and organizational conformity.
- h. Regulatory violations.
- i. Changes in regulatory policy or civil aviation legislation.



## CORPORATE QUALITY MANAGEMENT SYSTEM

### 8 CONTINUAL IMPROVEMENTS

#### 8.1 MANAGEMENT REVIEW

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- j. Feedback and recommendations for improvement in the management system.

This structured approach ensures that the management evaluation is a comprehensive and effective tool for maintaining and enhancing the safety and quality systems at Riyadh Air.

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## 8.2 CONTINUOUS IMPROVEMENT AND BENCHMARKING

### 8.2.1 Continuous Improvement

A systematic process of continuous enhancement of the Quality Management System is an integral aspect of the Quality Objectives across all levels of the organization.

The achievement of continuous improvement is facilitated through the following technical measures:

#### 1. Proactive Evaluation:

Ongoing assessment of facilities, equipment, documentation, and procedures through safety audits and surveys.

Proactive evaluation of individual performance to validate the fulfillment of assigned responsibilities.

#### 2. Reactive Evaluation:

Reactive evaluation to verify the effectiveness of the system in controlling and mitigating issues identified during the quality assurance program.

#### 3. Regular and Periodic Reviews:

Conducting planned reviews at regular intervals to assess organizational quality processes and performance.

#### 4. Tracking Organizational Changes:

Monitoring and ensuring the effectiveness of organizational changes.

#### 5. Communication with Managers:

Keeping managers informed about internal quality reviews and the planning and implementation of corrective actions.

#### 6. Coordination with External Organizations:

Coordinating quality objectives, processes, and improvements with external organizations, including service providers, suppliers, and subcontractors.

#### 7. Suggestions for Improvement:

Gathering suggestions for improvement from cascading objectives, meetings, external communication, or projects.

#### 8. Management of Change Processes:

Incorporating continuous improvement into the management of change processes and investigations.



## 9. QMS Outputs:

Utilizing various Quality Management System outputs such as trend analysis, process data review, customer surveys, Management Review outputs, SWOT analysis, etc., to drive improvement initiatives.

### 8.2.2 Benchmarking

Various methods and processes are employed by Riyadh Air for benchmarking against industry best practices. Benchmarking is a measurement and analysis methodology used to ensure:

1. Reference to Industry Best Practices - Referencing and adopting industry best practices.
2. Competitive Analysis - Utilizing competitive analysis for benchmarking purposes.
3. Performance Monitoring - Regular monitoring of performance against benchmarks.
4. Planning and Objective Setting - Incorporating benchmarking data into planning and objective-setting processes.
5. Encouraging Ownership - Encouraging employees to take ownership of processes and performance.

### 8.2.3 Methods for Continuous Improvement

The Riyadh Air Corporate Quality Management system advocates continuous improvement through a structured framework encompassing the following methodologies:

#### 1. Formulation and Implementation of Preventative Actions:

Triggered by thorough investigations, audit findings, or identified hazards, the formulation and execution of preventative actions serve as a proactive approach to mitigate potential risks and enhance operational efficiency.

#### 2. Suggestions for Improvement:

Continuous improvement is fostered through the formation of improvement suggestions arising from cascading objectives, meetings, external communications, or project-related insights. This sharing approach encourages employees to actively contribute to the enhancement of operational processes.

#### 3. Management of Change Processes and Investigations:

The management of change processes, coupled with investigative efforts, serves as a critical opportunity for continuous improvement. Adherence to these processes ensures that changes are seamlessly integrated, and investigations provide insights into areas for refinement.

**4. Quality Management System (QMS) Outputs:**

Leveraging outputs from the Quality Management System (QMS) is integral to continuous improvement. This involves a comprehensive review of data outputs such as trend analysis, process data, customer surveys, Management Review outputs, SWOT analysis, and other pertinent indicators. These insights guide decision-making and facilitate targeted improvements in operational processes.

By actively engaging in these methodologies, Riyadh Air endeavors to cultivate a culture of continuous improvement, ensuring that the organization remains adaptive, efficient, and aligned with industry best practices.

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## 8.3 QUALITY PROMOTION

The communication of safety, security, and quality information is a critical component for fostering awareness, maintaining employee focus on specific objectives and ensuring compliance with relevant laws, regulations, and company standards. This is essential for the continual improvement of Riyadh Air.

Information derived from the quality assurance program may be concurrently distributed with safety information within the framework of the Safety and Quality Management System. However, it is imperative that information from the quality assurance program is periodically disseminated (at least annually) to uphold continuous awareness and concentration on quality principles. This approach aims to achieve safety, quality, and security objectives and to sustain compliance with regulations and company standards.

Considering that contracted service providers play a significant role in Riyadh Air quality assurance program, efforts should be made to extend the dissemination of information and educational awareness regarding the quality assurance program, regulatory compliance, and standards to them.

Various means for information dissemination to employees are available, including but not limited to bulletins, newsletters, memos, emails, banners, videos or animated flyers, PowerPoint presentations, meetings, conventions, conferences, road shows, and training sessions. These communication channels serve to effectively convey important information and uphold a high standard of safety, quality, and security within the organization.



## **9 APPENDICES**

## **9.1 AUDIT PLAN**



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*Figure 4 Audit Plan Page 1*



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# **CORPORATE QUALITY MANAGEMENT SYSTEM**

## 9 APPENDICES

## 9.1 AUDIT PLAN

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## AUDIT PLAN

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### *Figure 5 Audit Plan Page 2*



## 9.2 AUDIT NOTIFICATION

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AUDIT NOTIFICATION FORM		Revision: 00
		Date: 18 FEB 2024
<b>Audit Details</b>		
<b>Audit Type</b>	<input type="checkbox"/> Internal Audit <input type="checkbox"/> External Audit <input type="checkbox"/> Others (specify):	
<b>Audit Subject</b>		
<b>Organization / Department</b>		
<b>Objectives:</b>		
<b>Reference Standards:</b>		
<b>Scope:</b>		
<b>Audit Date/s</b>		<b>Audit Time</b>
<b>Audit Team</b>		
<b>Lead Auditor</b>		
<b>Auditor</b>		
<b>Auditor</b>		
<b>Required Logistics and Access</b>		
<b>Areas to prepare</b>		
<b>Documents to prepare</b>		
<b>Others</b>	<input type="checkbox"/> Internet <input type="checkbox"/> Meeting room <input type="checkbox"/> Display monitor <input type="checkbox"/> Others (specify):	
<p><b>Note:</b> The auditor reserves the right to audit, check, inspect or visit other areas or ask for documents other than those listed above, depending on the requirements of the audit. Should you have any concern or comment, please inform the lead auditor within 5 working days of receipt of this notification; otherwise, we will assume your acceptance of the proposed audit.</p>		
<b>Prepared by:</b>	<b>Approved by:</b>	
<b>Lead Auditor</b> (Name, Sign & Date)	<b>Manager Quality and Compliance</b> (Name, Sign & Date)	

Figure 6 Audit Notification Form Page 1 of 1



## 9.3 AUDIT CHECKLIST

CORPORATE QUALITY MANAGEMENT SYSTEM MANUAL		
AUDIT CHECKLIST	Issue:	00
	Revision:	00
	Date:	18 FEB 2024
<b>Auditor Name</b>	<b>Subject Matter Expert</b>	
<b>Title</b>	<b>Title</b>	
<b>Complete the following items prior to audit commencement:</b>		
Arrangement for intended audit and agreement on the visit date	<input type="checkbox"/> Yes	<input type="checkbox"/> No
List of Station Staff / Qualifications obtained	<input type="checkbox"/> Yes	<input type="checkbox"/> No
List of Technical Publications / revision status obtained	<input type="checkbox"/> Yes	<input type="checkbox"/> No
List of stored items	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Previous audit report reviewed, and corrective actions taken checked	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Storage area security passes confirmed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Previous report reference and audit date	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Levels of Non-compliance, findings and corrective action response required:</b>		
Level 1: within 7 days	Level 2: within 30 days	Level 3: No response required
<b>Findings / Comments</b>	<b>Level</b>	<b>Response Reference</b>
<b>Hazards</b>	<b>Probability</b>	<b>Level of Risk</b>
<b>Location</b>	<b>Address</b>	
<input type="checkbox"/> Personnel	<input type="checkbox"/> Performance Engineers	<input type="checkbox"/> EFB / Laptop Administration
<b>1. Introduction</b>		
1.1 Date of Current Audit		
1.2 Facility Representatives (Auditees)		
1.3 License / Approval of Organization No. / Valid till		
1.4 Contract with Organization Valid Till (if applicable)		
1.5 Legal basis of Current Audit		
<b>List of Documentation / Software Referenced</b>	<b>Abbreviation</b>	<b>Revision Status</b>

Figure 7 Audit Checklist Page 1



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2	Supplier's Facilities	SAT / UNSAT	Reference (Doc. Number/Part)
2.1	Any change in the facility since previous audit		
2.2	Facilities descriptions		
2.3	Cleanliness and tidiness of facilities (presence of dust)		
2.4	Is each office heated (air conditioned), lit, and ventilated <u>so as</u> to conform to local conditions?		
2.5	Fire-fighting Equipment (controlled & adequate)		
2.6	Power, Air, Water supplies		

Supplier can be considered as

Contractor  Subcontractor

I recommend the Supplier\*

Yes /  No

Name of the Auditor

Signature of the Auditor

MQC has no objections against supplier

Signature of the MQ&C

Comments:

Supplier will be monitored by\*

Audit  Inspection  Quality Questionnaire  Performance Monitoring

Date:

Note:

A copy of the completed form shall be kept by DQC for 5 years notwithstanding whether the contact was signed or not.

\* mark as appropriate

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Figure 8 Audit Checklist Page 2



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## 9.4 GACAR PART 142 TRAINING CENTRE AUDIT CHECKLIST

CORPORATE QUALITY MANAGEMENT SYSTEM MANUAL						
GACAR PART 142 TRAINING CENTRE AUDIT CHECKLIST						
<small>Issue: 00 Revision: 00 Date: 18 FEB 2024</small>						
<b>A. AUDIT DETAILS:</b>						
<b>Audit Date:</b>	<b>Audit Type:</b>	<input type="checkbox"/> Initial <input type="checkbox"/> Recurrent <input type="checkbox"/> Surveillance <input type="checkbox"/> Follow-up/Verification <input type="checkbox"/> Others (specify):				
<b>Audit Method:</b>	<input type="checkbox"/> Physical / On-Site			<input type="checkbox"/> Remote / Desktop		
<b>B. COMPANY INFORMATION:</b>						
<b>Company Name:</b>						
<b>Parent Company/Division of:</b>						
<b>Company Address:</b>						
<b>Telephone:</b>	<b>Fax:</b>	<b>E-mail:</b>	<b>Website:</b>	<b>Commercial Registration:</b>	<b>Years in Business:</b>	
<b>Company Approval:</b>						
<b>List of Customers:</b>						
<b>Key Personnel Contact</b>						
Name	Position Title	Contact information				

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Figure 9 GACAR PART 142 Training Center Audit Checklist Page 1



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1. C MANAGEMENT AND ADMINISTRATION		GACA References	Assessment Result			DOCUMENTATION REF / REMARKS
Item #	Description		Yes	No	N/A	
C-01	This audit scope encompasses a description of the management and administration of the training center.	142.11(e)				
C-02	Does any person whose employment or control contributed to the revocation, suspension, or termination of a part 121, 125, 135, 141, or 142 operating certificate within the previous 5 years manage, control, or have substantial ownership of this training center?	142.13(a)				
C-03	Does the training center have a sufficient number of approved evaluators to accomplish required checks and tests within 7 calendar days of training completion?	142.13(b)				
C-04	Are the instructors and evaluators at each satellite training center under the direct supervision of management personnel of the principal training center?	142.17(a)(2)				
C-05	Does each management representative, and all personnel who conduct direct student training, understand, read, write, and fluently speak English?	142.13(e)				
C-06	Has the training center certificate been properly issued and does it contain all business names under which the certificate holder may conduct operations and the address of each business office used?	142.3(b) 142.11(d)	and			

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Figure 10 GACAR PART 142 Training Center Audit Checklist Page 2



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C-07	Is the training center certificate prominently displayed in a place accessible to the public in the principal business office?	142.19(a)			
C-08	Has the training center been properly issued training specifications?	142.3(b)			
C-09	Are all exemptions, deviations or waivers properly approved and contained in the center's training specifications paragraph A005?	142.11(d)(2)(vi), GACA <del>EBook</del> Vol 15, para 15.7.1.5 (A5), <del>OpsSpecs</del> A005			
C-10	Does the training center comply with all conditions and provisions of any exemptions, deviations, or waivers?	<del>OpsSpec</del> A005			
C-11	Does the training center conduct, or advertise to conduct, any training, testing, or checking that is designed to satisfy part 142 requirements that is not approved by GACA?	142.23(a)			
C-12	Does the training center make any statement in its advertising relating to its certification and ratings that is false or designed to mislead?	142.23			
C-13	Does the training center, in its advertising, differentiate between courses that have been GACA approved and those that have not?	142.23			
C-14	If the training center utilizes a part 141 pilot school to provide training, testing, or checking, is there a training agreement between the school and the training center?	142.25(a)			
C-15	Are the training course outlines used by each such part 141 pilot school under the training agreement GACA approved?	142.25(c)			

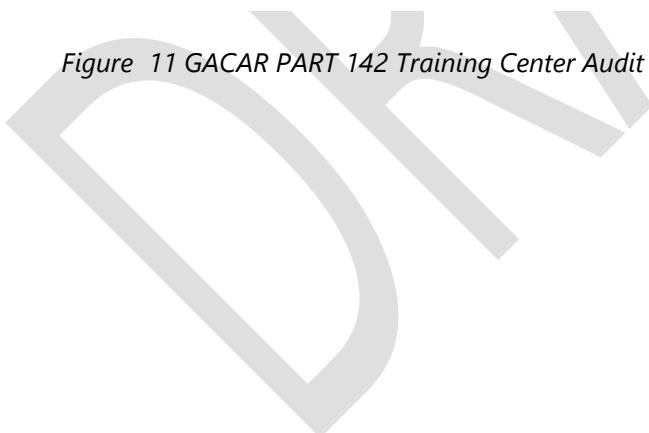
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Figure 11 GACAR PART 142 Training Center Audit Checklist Page 3





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C-16	Does the training center have written procedures to ensure management control of its personnel at satellite centers and/or remote sites?	142.17					
C-17	Based upon review of leases, agreements and contracts, does the training center have exclusive use of flight training equipment and courseware, including at least one Full Flight Simulator (FFS) or Flight Training Device (FTD) qualified at Level 6 or 7 under GACAR Part 60?	142.15(d)					

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Figure 12 GACAR PART 142 Training Center Audit Checklist Page 4



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D TRAINING SPECIFICATIONS		GACA References	Assessment Result			DOCUMENTATION REF / REMARKS
Item #	Description		Yes	No	N/A	
D-01	Has the training center been properly issued training specifications?	142.3(a)				
D-02	Is the information contained in Part A of the training specifications current, including names, addresses, other business names (dba), satellite center authorizations (including address and contact information), and authorized exemptions, deviations, and waivers?	142.3, 142.11(d)(2)(v-vi), 142.17(a)(4) and (b)				
D-03	Is the personnel and staff information contained in Part A of the training specifications current, including that of management and supervisory personnel, evaluators, and instructors?	142.3(a), 142.55(b)				
D-04	Is the information regarding the maintenance of approved flight training equipment, (flight simulators, flight training devices, and/or aircraft) contained in Part D of the training specifications accurate?	142.3(a), 142.15(d), 142.11(d)(2)(ii-iv)				
D-05	Is the information regarding record keeping contained in Paragraph A025 of the training specifications current and accurately identify the specific records and system used by the Training Center to document students, instructors, and evaluators?	142.15(c), 142.89, 142.91				
D-06	Do the training specifications contain authorization for the use of each "Simulator Component Inoperative Guide"? [or Missing, Malfunctioning, or Inoperative (MMI) equipment as appropriate]	OpsSpecs D95				

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Figure 13 GACAR PART 142 Training Center Audit Checklist Page 5



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E COURSEWARE		GACA References	Assessment Result			DOCUMENTATION REF / REMARKS
Item #	Description		Yes	No	N/A	
E-01	Is the training center's courseware adequate to support the curriculum goals and has it been approved by GACA?	142.11(b) and (d)				
E-02	Do lesson plans adequately describe lesson objectives, training elements, schedule, equipment, student and instructor action, and completion standards?	142.43				
E-03	Does the courseware include Standard Operating Procedures and flight training event descriptions appropriate to the aircraft?	142.11, 142.27				
E-04	Do <u>computer based</u> instruction programs meet requirements?	142.11, 142.27				
E-05	Do audiovisual programs contain correct information and conform to lesson objectives?	142.11, 142.27				
E-06	Do aircraft operating manuals conform to manufacturer procedures and data?	142.11, 142.27				

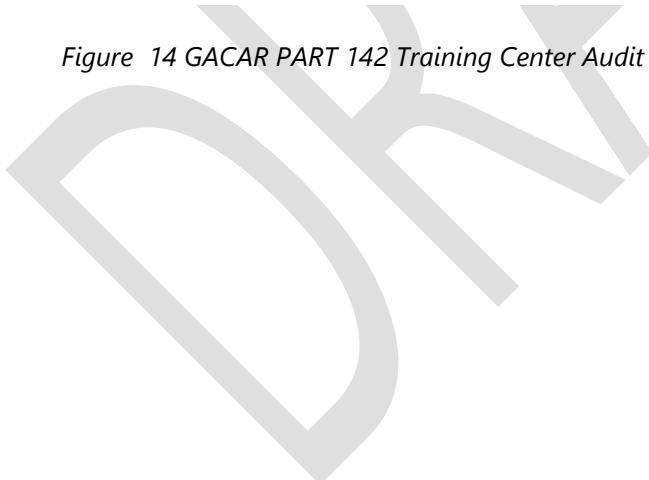
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Figure 14 GACAR PART 142 Training Center Audit Checklist Page 6





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E-07	Do weight and balance procedures conform to manufacturer procedures and data?	142.11, 142.27			
E-08	Do aircraft performance data conform to manufacturer procedures and data?	142.11, 142.27			
E-09	Have the Checklists or Quick Reference Handbooks used during training, <u>testing</u> and checking been approved and do they conform to the flight training equipment and the Aircraft Flight Manual (AFM) / Rotorcraft Flight Manual (RFM)?	142.11, 142.27			
E-10	Does the training center use a pictorial method to accomplish the preflight inspection testing <u>requirements</u> and does it represent the flight training equipment being used?	142.11, 142.27			
E-10-1	If pictorial <u>preflights</u> are authorized, does the center have an approval for each?	142.11, 142.27			
E-11	Do aircraft mockups, cockpit procedures trainer, or other training aids conform to the curriculum/courseware requirements?	142.11, 142.27, GACA <del>EBook</del> 12.3.7.5(e)			
E-12	Do workbooks and student handouts and other training materials conform to other course materials?	142.11, 142.27 GACA <del>EBook</del> 12.3.7.5(d)			

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Figure 15 GACAR PART 142 Training Center Audit Checklist Page 7



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E-13	Does the Simulator Component Inoperative Guide (SCIG) and/or MMI conform to national policy and Training Specifications requirements?	142.65(d), GACAR Part 60 GACA <del>EBook</del> 12.12.1.3(d 4)				
------	---	--	--	--	--	--

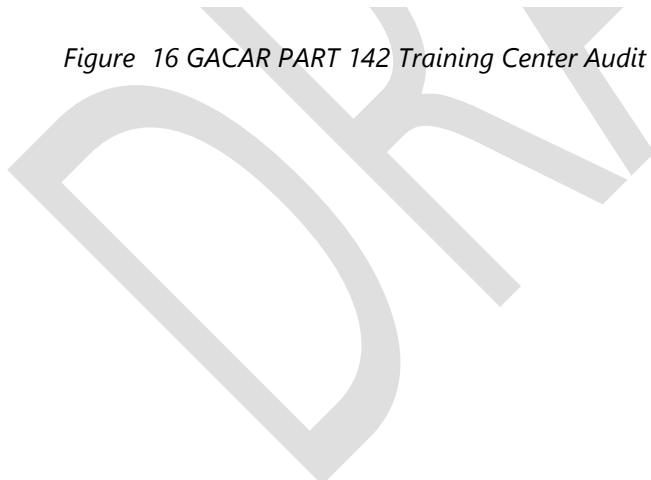
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Figure 16 GACAR PART 142 Training Center Audit Checklist Page 8





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F AIRMAN TRAINING PROGRAMS		GACA References	Assessment Result			DOCUMENTATION REF / REMARKS
Item #	Description		Yes	No	N/A	
F-01	This audit scope encompasses brief description of the training programs and individual approved curriculums used for airmen training by the training center.	142.41				
F-02	Are all core and specialty curriculums approved by being listed in the center's training specifications, and is each maintained by the training center in a form that will enable the user to determine its revision status?	142.41(c)(1)				
F-03	Does the training program identify which curriculums are considered "core" and which are considered "specialty"?	142.55(c)(1)				
F-04	Have all curriculums been reviewed to determine if the content meets the minimum requirements for that certificate rating or training requirement in accordance with the applicable Practical test Standards (PTS) document?	142.41(c)(2) and (c)(3)				
F-05	Does each curriculum include a statement of which requirements of GACAR Part 141 would be, and would not be, satisfied by the curriculum?	142.43(a)				
F-06	Does each curriculum contain a syllabus and courseware listing, and has that syllabus and courseware been approved by the Training Center Program Manager (TCPM)?	142.43(b)				
F-07	Does each curriculum contain the minimum requirements for flight training equipment used?	142.43(c)				

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F-08	Does each curriculum contain within it an initial and continuing training curriculum for each instructor and evaluator designated to instruct/evaluate in the curriculum?	142.43(d)				
F-09	Does each curriculum contain within it training in knowledge and skills related to human performance?	142.43(e)				
F-10	For each curriculum using fewer than the minimum training hours prescribed in GACAR Part 141, is there a means of demonstrating the ability to accomplish such training in the reduced hours and a means of tracking trainee performance after leaving the training center?	142.43(f)				

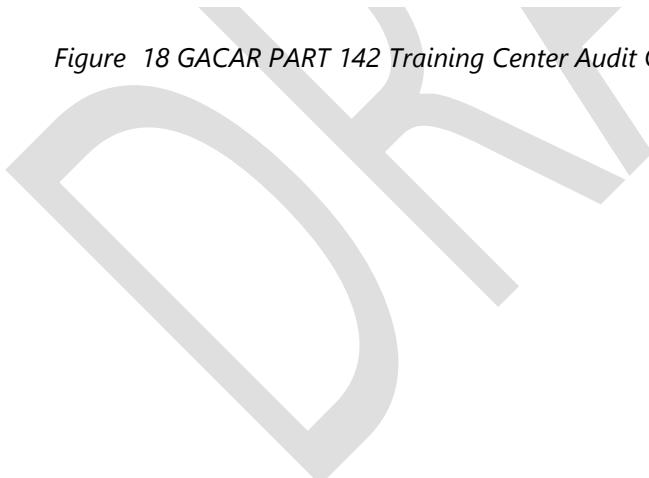
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G INSTRUCTOR AND EVALUATOR TRAINING AND QUALIFICATION						
Item #	This audit scope encompasses a brief description of the instructor and evaluator qualifications and training requirements at the training center.	GACA References	Assessment Result			DOCUMENTATION REF / REMARKS
			Yes	No	N/A	
G-01	Do all instructors meet qualification and training requirements of part 142 subpart C?	142.55(a)				
G-02	Has the training center designated in writing each instructor's authority to instruct in an approved course, prior to him or her instructing in that course?	142.55(b)				
G-03	Prior to initial designation, did each instructor receive at least 8 hours of ground training in the subjects required?	142.55(c)(1), 142.59(a)(2)				
G-04	Prior to initial designation, did each instructor satisfactorily complete a written examination on the required subjects?	142.55(c)(2)(i)				
G-05	Was the initial instructor written test accepted as being equivalent in difficulty, complexity, and scope as the tests provided by GACA for the "Flight Instructor-Airplane" and "Instrument Flight Instructor" knowledge tests?	142.55(c)(2)(ii)				
G-06	Prior to initial designation and within each 12 calendar months thereafter, has each instructor satisfactorily demonstrated to an authorized evaluator, instructional knowledge and proficiency in representative segments of each curriculum for which that instructor is designated to instruct?	142.59(a)(1)				

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G-07	Prior to designation and within each 12 calendar months thereafter, has each instructor satisfactorily completed an approved course of ground instruction that includes the required subjects?	142.59(a)(2)				
G-08	Prior to designation and within each 12 calendar months thereafter, has each instructor who instructs in qualified and approved FSTDs, satisfactorily completed an approved course of flight simulator training that includes the required subjects?	142.59(a)(3) and (4)				
G-09	Prior to designation and within each 12 calendar months thereafter, has each instructor who instructs in qualified and approved FSTDs, satisfactorily completed an approved course of ground instruction, applicable to the training courses the instructor is designated to instruct?	142.59(a)(3)				
G-10	Prior to designation and within each 12 calendar months thereafter, has each instructor who instructs in qualified and approved FSTDs or aircraft, satisfactorily passed written tests on the subject matter and maneuvers pertaining to each curriculum the instructor is designated to instruct?	142.59(a)(6)				
G-11	Prior to designation and within each 12 calendar months thereafter, has each instructor who instructs in qualified and approved FSTDs or aircraft, satisfactorily passed proficiency checks on representative segments of each curriculum the instructor is designated to instruct?	142.59(a)(6)				
G-12	Prior to designation and within each 12 calendar months thereafter, has each flight instructor who provides training in an aircraft, satisfactorily completed an approved course of ground instruction and flight training in an aircraft, flight simulator, or flight training device that includes the required subjects?	142.59(a)(5)				
G-13	Does the center hold deviation authority from the requirements of 142.59(d)?	OpsSpecs A005				

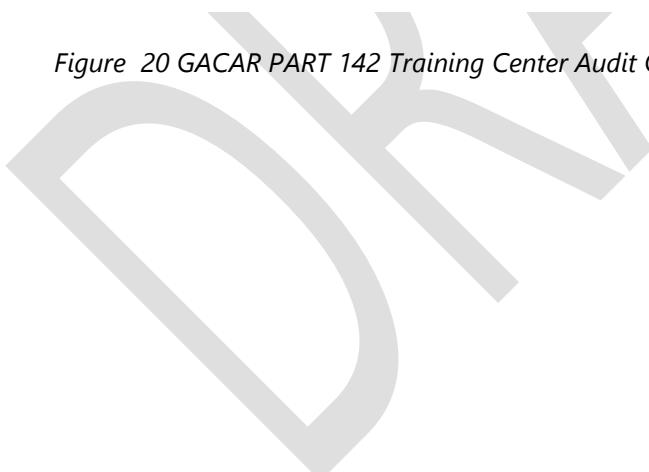
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G-14	Within the previous 12 calendar months, has each instructor who instructs in a Level C or D simulator met <u>one</u> of the following requirements in the same type of aircraft represented by the simulator:  --2 hours in flight, including 3 takeoffs and landings as sole manipulator in cat/class/type. (or) --Participated in a line observation program under GACAR Part 121 or 135 that was – (i) Was accomplished in the same airplane type as the airplane represented by the approved FFS in which that instructor is designated to instruct and (ii) Included <u>line oriented</u> flight training of at least 1 hour of flight during which the instructor was the sole manipulator of the controls in an approved FFS that replicated the same type aircraft for which that instructor is designated to <u>instruct</u> ; o (or) --Participated in an approved in-flight observation training course with 2 hours in type and 1 hour Line Oriented Flight Training (LOFT) as sole manipulator in a simulator (in type).	142.59(b)				
G-15	If any instructor was given credit for training based upon completion of an instructor course under part 121 or part 135, was granting of credit approved by GACA?	142.59(d)				
G-16	If any instructor was given credit for training based upon completion of an instructor course under part 121 or part 135, did the course meet the requirements of GACAR Part 142.59(a) and (b)?	142.59(d)				

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G-17	Has each instructor provided instruction or testing/checking in only <u>those curriculum</u> for which qualified?	142.57(a)				
G-18	Has any instructor conducted more than 8 hours of instruction in any 24 consecutive hour period (not including briefing and debriefing time)?	142.57(d)(1)				
G-19	Does each instructor who instructs in an aircraft in flight while occupying a required crewmember seat hold at least a valid class 2 medical certificate?	142.57(d)(3)(iv)				
G-20	Does each instructor who instructs in an aircraft in flight while occupying a required crewmember seat meet the recency of experience requirements of GACAR Part 61?	142.49(d)(3)(v)				
G-21	Does the Training Center have defined procedures to ensure management control of its instructors and evaluators through written procedures?	142.27				
G-22	Has each evaluator been approved and designated by GACA under GACAR Part 183?	142.61(a)(1)				
G-23	Are any of the center's instructors or evaluators also approved as contract instructors/check airmen for their customers?					
G-23-1	If so, is the center tracking their time for compliance with the 8-in-24 time limit requirements?	142.57				
G-23-2	If so, is the center tracking their proficiency training requirements?					
G-24	Does each evaluator meet all the qualification requirements of an instructor in each curriculum in which evaluations will be given?	142.61(a)(2)				

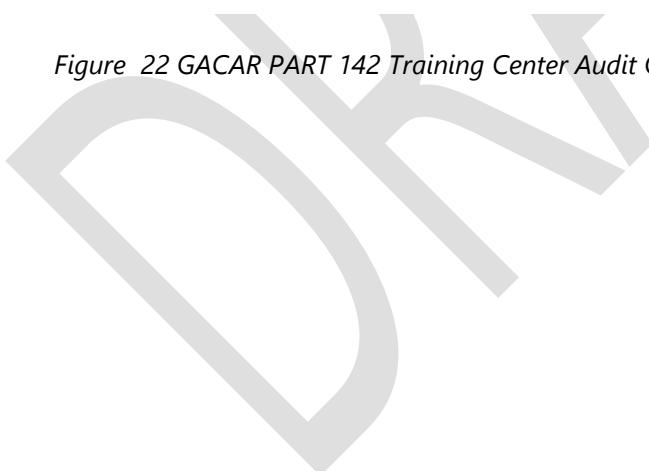
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G-25	Unless otherwise authorized by the GACA, did each evaluator have at least 1 year of experience as an instructor, check airman, designated examiner, or evaluator in category/class/type prior to selection and 100 hrs. of simulator experience?	142.55(a)					
G-26	If evaluating in an aircraft, did each evaluator have at least 100 hours of experience as Pilot in Command (PIC) in type?	142.55(a)					
G-27	Within the preceding 12 calendar months, has each evaluator completed a training program, <u>developed</u> and conducted by GACA that includes: (i) Evaluator duties, functions, and <u>responsibilities</u> ; (ii) Methods, procedures, and techniques for conducting required tests and <u>checks</u> ; (iii) Evaluation of pilot performance; and (iv) Management of unsatisfactory tests and subsequent corrective action.	142.61(a)(3)					
G-28	Has each evaluator satisfactorily passed a written test and annual proficiency check developed and conducted by GACA in a flight simulator or aircraft?	142.61(a)(4)					
G-29	If any evaluator was given credit for training based upon completion of a check airman course under GACAR Part 121 or 135, did the training meet the requirements of GACAR Part 142.61(a)(3)?	142.61(c)					

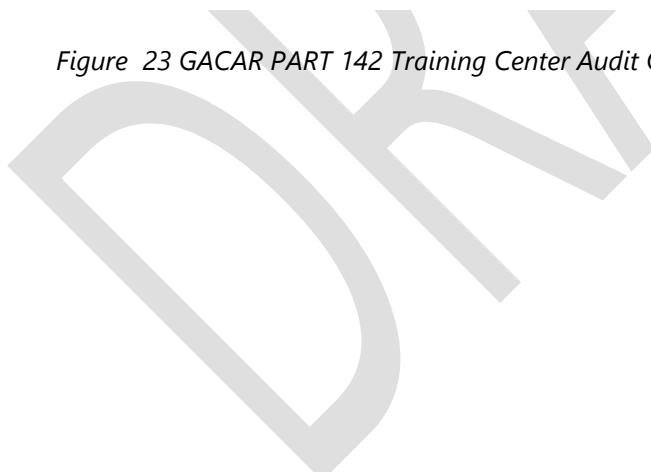
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Item #	This audit scope encompasses a review of the facilities utilized by the training center.	GACA References	Assessment Result			DOCUMENTATION REF / REMARKS
			Yes	No	N/A	
H-01	Is each room, training area, or other space used for instruction heated (air conditioned), lighted, and ventilated <del>so as to</del> conform to local codes?	142.15(a)(1)				
H-02	Are facilities used for instruction free from significant distractions?	142.15(a)(2)				
H-03	Is the training center's principal business office physically located at the address shown on its certificate?	142.15(b)				
H-04	Do the facilities at all satellite and/or remote training sites meet the requirements of H-01 and H-02 above?	142.15(a)				
H-05	Do the facilities, equipment, personnel, and course content of the satellite training center(s) meet the applicable requirements of GACAR Part 142?	142.17(a)(1)				
H-06	Was the GACA notified at least 60 days prior to commencement of operations at any satellite training center(s)?	142.17(a)(3)				

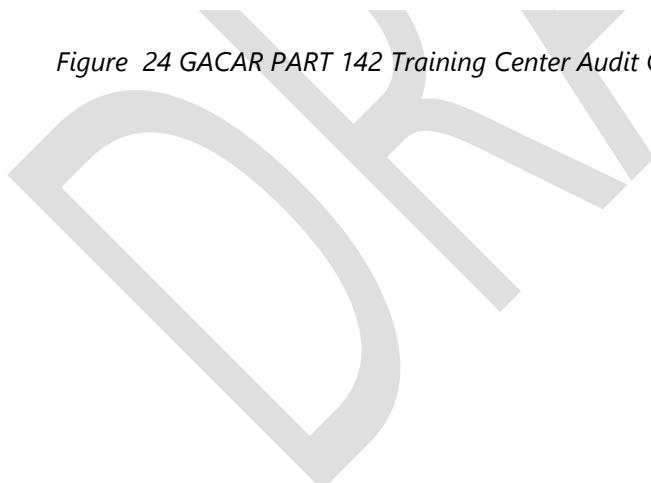
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I FLIGHT TRAINING EQUIPMENT						
Item #	This audit scope encompasses a brief description of the aircraft, flight training devices, and flight simulators used by the training center.	GACA References	Assessment Result			DOCUMENTATION REF / REMARKS
			Yes	No	N/A	
I-01	Does the Training Center have available exclusively, for adequate periods of time and at a location approved by GACA, adequate flight training equipment, including at least one flight simulator or advanced training device (Level 6 or 7 Flight Training Device)?	142.15(d)				
I-02	Has each flight training device or simulator been approved for each maneuver and procedure for the make/model/type?	142.65(a)(1)				
I-03	Has each level 4 through 7 flight training device and each level A through D flight simulator been issued a Statement of Qualification by the State Authority / FAA National Simulator Program (NSP)?	FAA AC 120-45A, FAA AC 120-40B, FAA AC 120-63 and GACAR Part 60				
I-04	Has each level 4 through 7 flight training device and each level A through D flight simulator been approved for each curriculum or training course by identifying it correctly in the training specifications?	142.65(a)(1)				
I-05	Is each flight training device or simulator maintained to ensure reliability of the performances, functions, and all other characteristics that were required for qualification?	142.65(c)(1)				

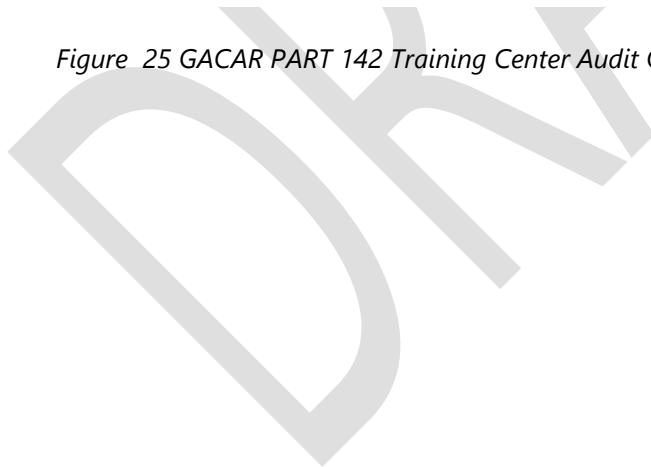
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I-06	Has each flight training device or simulator been updated to conform with any modification to the aircraft being simulated, if such modification changes the performance, function or characteristics required for qualification?	142.65(c)(2)				
I-07	Is each flight training device and simulator given a functional preflight check daily before use?	142.65(c)(3)				
I-08	Is a discrepancy log kept for each flight training device and simulator?	142.65(c)(4)				
I-09	Does the center provide written instructions to their staff on what to do in the event a required training device or portion of a device becomes inoperative?	142.65(c)(4)				
I-10	Does the center have a policy for managing missing, malfunctioning, or inoperative (MMI) equipment?	142.65(d)				
I-11	Does each aircraft used for flight instruction and solo flights have a standard airworthiness certificate issued under GACAR Part 21 or a foreign equivalent of a standard airworthiness certificate, acceptable to GACA except for flight instruction and solo flights in a curriculum for aerial work operations under GACAR Part 133?	142.63(a)(1)				
I-12	Is each aircraft used for flight instruction and solo flights maintained and inspected in accordance with the requirements of GACAR Part 91 subpart E?	142.63(a)(2)				
I-13	Is each aircraft used for flight instruction and solo flight maintained in accordance with an approved maintenance and inspection program?	142.63(a)(2)				
I-14	Is each aircraft used for flight training equipped to support the associated curriculum?	142.63(a)(3)				

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I-14-1	If not, has the Training Center developed an appropriate differences module?	142.63(a)(3)				
I-15	Is each aircraft used for flight instruction a two-place aircraft with engine power and flight controls easily reached and operated in a conventional manner from both pilot stations?	142.63(b) and (c)				

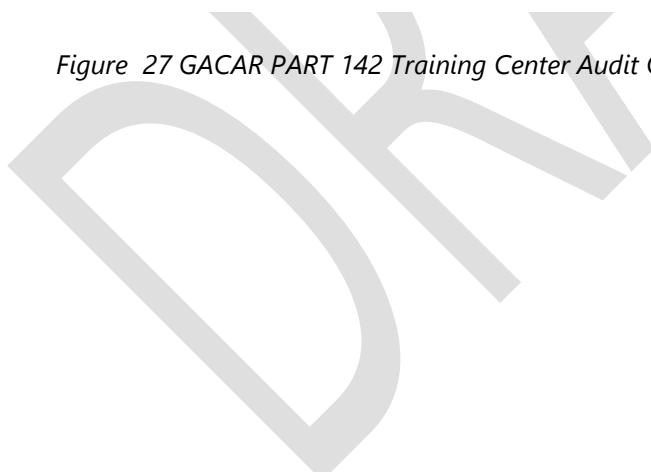
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J RECORDS		GACA References	Assessment Result			DOCUMENTATION REF / REMARKS
Item #	Description		Yes	No	N/A	
J-01	This audit scope encompasses a brief description of the record keeping system of the Training Center.	142.15(c), 142.91(d), <del>OpsSpecs</del> A025				
J-02	Are all records maintained in adequate facilities, as described or referenced in the training specifications?	142.93, <del>OpsSpecs</del> A025				
J-03	Does the Training Center have approval for an electronic recordkeeping system?	142.91(d)(1), <del>OpsSpecs</del> A005 and A025				
J-04	Are all records for trainees maintained at the training center or satellite center, where the training, testing, or checking occurred (or in another location in accordance with a properly issued deviation)?	142.91(d)(2), <del>OpsSpecs</del> A005 and A025				
J-05	Are all records for instructors and evaluators maintained at the training center or satellite center, where the instructor or evaluator is primarily employed (or in another location in accordance with a properly issued deviation)?	142.91(a)(1)-(7)				
J-05-1	Does the training center maintain a record for each trainee that includes all of the following items:	142.91(a)(1)				
J-05-2	Name of the trainee.	142.91(a)(2)				
J-05-3	A copy of the trainee's pilot certificate, if any, and medical certificate, if any.	142.91(a)(3)				

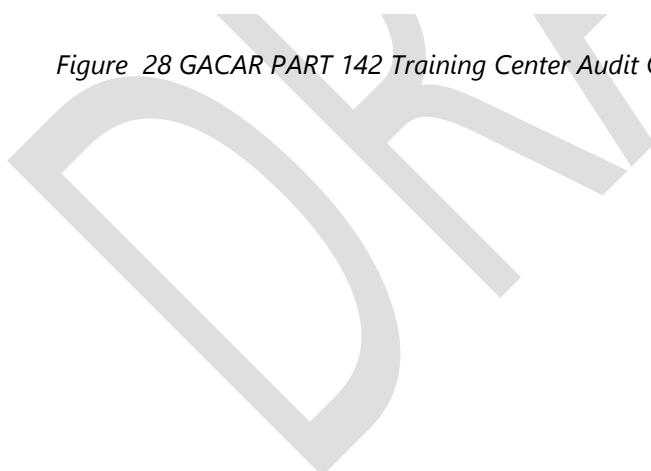
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J-05-4	The trainee's prerequisite experience and course time completed.	142.91(a)(4)			
J-05-5	The trainee's performance on each lesson and the name of the instructor providing instruction.	142.91(a)(5)			
J-05-6	The date and result of each end-of-course practical test and the name of the evaluator conducting the test.	142.91(a)(6)			
J-05-7	The number of hours of additional training that was accomplished after any unsatisfactory practical test.	142.91(a)(7)			
J-06	For training, testing, and checking conducted under an agreement with a GACAR Part 141 pilot school, has each student's training record been forwarded to the training center and included in the permanent training record?	142.25(d)			
J-07	Are the trainee records maintained for at least 2 years following the completion of training, testing, or checking?	142.91(c)			
J-08	Does the training center provide the trainee with a copy of his/her training records when requested?	142.91(e)			
J-09	Does the training center continuously maintain initial training and recurrent qualification records for all instructors and evaluators currently employed?	142.91(c)(2)			
J-10	Does the training center maintain initial training and qualification records for all instructors and evaluators for 2 years after termination of employment?	142.91(c)(2)			
J-11	Does the training center maintain records that document the results of the instructor's recurrent observations and proficiency check while the instructor or evaluator is employed by the certificate holder and for at least 2 years thereafter?	142.91(c)(3)			

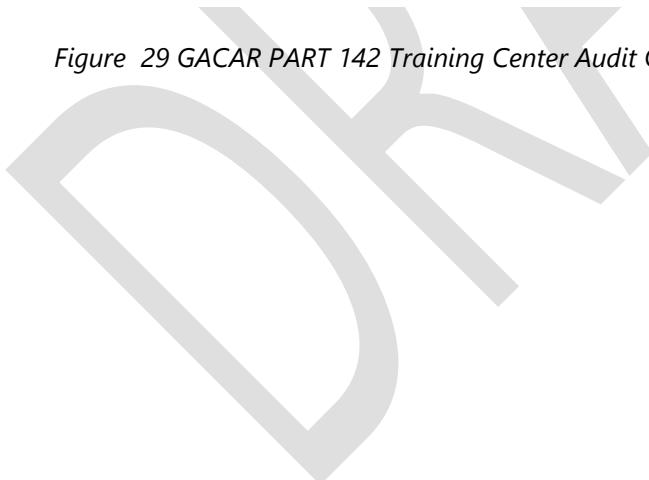
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J-12	Do the records of each instructor and evaluator indicate compliance with the requirements GACAR Part 142.13, 142.53, 142.55, 142.57, and 142.59, as applicable?	142.91(b)					
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2. K TRAINING OPERATIONS		GACA References	Assessment Result			DOCUMENTATION REF / REMARKS
Item #	Description		Yes	No	N/A	
K-01	This audit scope encompasses a review of the training testing and checking activities conducted by the training center.	142.1(c), 142.3(a)				
K-02	Is the training center conducting any training, testing, or checking in flight simulation training devices without, or in violation of their training specifications?	142.25(b)				
K-03	During observation of training, testing, or checking, were all of the flight training components operative?	142.63(a)(2), 142.65(d)				
K-03-1	If not, was each device restricted in accordance with the certificate holder's SCIG/MMI procedures?					
K-04	During observation of testing or checking in a flight training device or simulator, was the "freeze," "slow motion," or "repositioning" feature used?	142.79(a)(1)				
K-05	During observation of evaluation or line-oriented flight training, was the "repositioning" feature used other than to only advance along a flight route to the point where the descent and approach phase began?	142.79(a)(2)				

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K-06	During observation of flight testing, checking, or line operational simulation, was each crewmember position occupied by either: --A crewmember qualified in the aircraft category, class, and type (if applicable) who was giving instruction, or --A student in the same specific course	142.79(b)				
K-07	Was any trainee recommended for a certificate or rating without having satisfactorily completed the approved course?	142.79(c)(1)				
K-08	Was any trainee recommended for a certificate or rating without having passed the final tests?	142.79(c)(2)				
K-09	Was any student graduated from a course without satisfactorily completing the curriculum requirements of that course?	142.79(d)				
K-10	Is each core curriculum supported by an advanced flight training device or a full flight simulator appropriate to the aircraft type, model, and series?	142.15				
K-11	Does the training center explain the proper use of the simulator's freeze, slow motion, repositioning features during training, testing, or checking?	142.79(a)				

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Figure 32 GACAR PART 142 Training Center Audit Checklist Page 24



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# CORPORATE QUALITY MANAGEMENT SYSTEM

## 9 APPENDICES

### 9.4 GACAR PART 142 TRAINING CENTRE AUDIT CHECKLIST

**Issue:** 00  
**Revision:** 00  
**Date:** 18-FEB-2024



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## CORPORATE QUALITY MANAGEMENT SYSTEM MANUAL

### GACAR PART 142 TRAINING CENTRE AUDIT CHECKLIST

Issue: 00  
Revision: 00  
Date: 18 FEB 2024

3. L QUALITY CONTROL MEASURES		GACA References	Assessment Result			DOCUMENTATION REF / REMARKS
Item #	Description		Yes	No	N/A	
L-1	Does the center have an approved Quality Control Program?	142.11, 142.29, GACA <a href="#">EBook</a> 12.12.1.3(9)				
L-2	Does the Quality Program comply with the guidelines specified in GACA <a href="#">EBook</a> 12.12.1.3?	142.11, 142.29, GACA <a href="#">EBook</a> 12.12.1.3(9)				

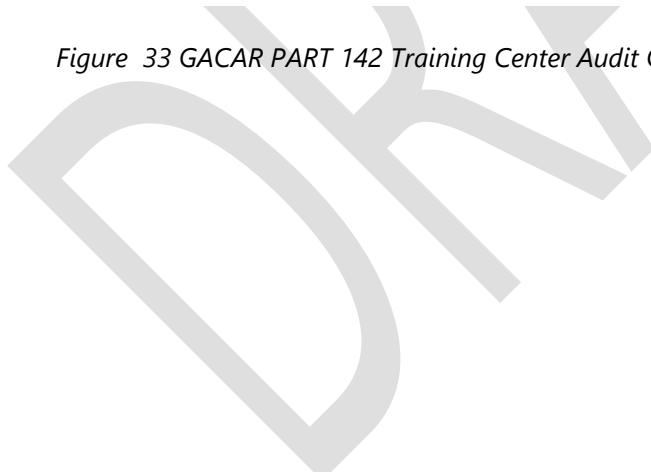
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Figure 33 GACAR PART 142 Training Center Audit Checklist Page 25





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## CORPORATE QUALITY MANAGEMENT SYSTEM MANUAL

### GACAR PART 142 TRAINING CENTRE AUDIT CHECKLIST

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4. MISCELLANEOUS		GACA References	Assessment Result			DOCUMENTATION REF / REMARKS
Item #	MISCELLANEOUS		Yes	No	N/A	
M-1	For foreign training center located outside the KSA, does the center have a safety management system (SMS) that meets the standards in ICAO Annex-19 and is acceptable to the ICAO Contracting State's civil aviation authority?	GACAR 142.9 (C)				
M-2	For foreign training center located outside the KSA, has GACA issued an examiner acceptance or authorization to one of the training center's staff?	GACAR 142.55 (d) (1) (i-vi), and GACAR 142.55 (d) (2) (i-iv)				
M-2-1	Does the delegated examiner meet the requirements of GACAR 142.55 (d) (1) (i-vi)?	GACAR 142.55 (d) (1) (i-vi), and GACAR 142.55 (d) (2) (i-iv)				
M-2-2	Does the delegated examiner meet the requirements of GACAR 142.55 (d) (2) (i-iv)?	GACAR 142.55 (d) (1) (i-vi), and GACAR 142.55 (d) (2) (i-iv)				
M-3	For foreign training center located outside the KSA, has GACA issued an examiner acceptance or authorization to one of the training center's staff?	GACAR 142.62 (a) (1-6) and GACAR 142.62 (b) (1-4)				

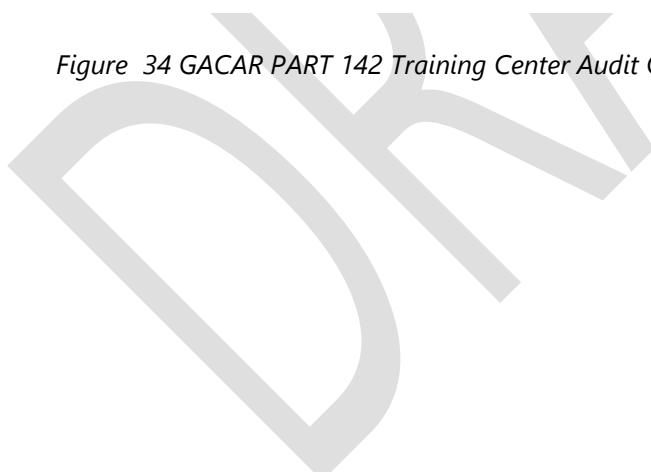
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Figure 34 GACAR PART 142 Training Center Audit Checklist Page 26





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## 9 APPENDICES

### 9.4 GACAR PART 142 TRAINING CENTRE AUDIT CHECKLIST

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### GACAR PART 142 TRAINING CENTRE AUDIT CHECKLIST

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M-3-1	Does the delegated examiner meet the requirements of GACAR 142.62 (a) (1-6)?	GACAR 142.62 (a) (1-6) and GACAR 142.62 (b) (1-4)				
M-3-2	Does the delegated examiner meet the requirements of GACAR 142.62 (b) (1-4)?	GACAR 142.62 (a) (1-6) and GACAR 142.62 (b) (1-4)				
M-4	For foreign training center located outside the KSA, is the electronic signature for records requiring a certifying statement, or an electronic recordkeeping system, approved by its certifying CAA and accepted by the president?	GACAR 142.95				

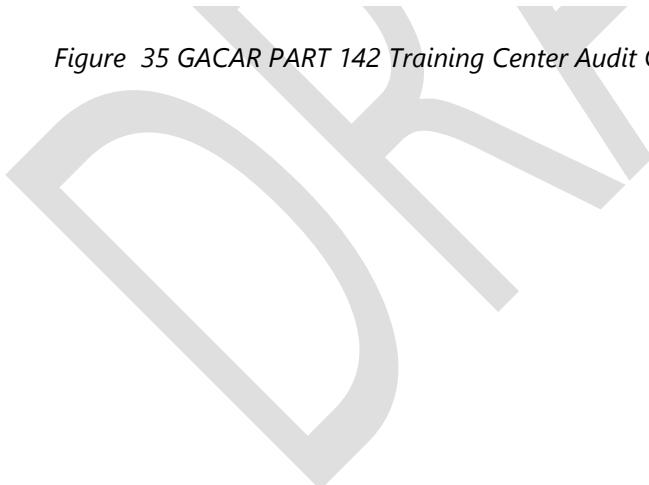
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Figure 35 GACAR PART 142 Training Center Audit Checklist Page 27





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### 9.4 GACAR PART 142 TRAINING CENTRE AUDIT CHECKLIST

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## CORPORATE QUALITY MANAGEMENT SYSTEM MANUAL

### GACAR PART 142 TRAINING CENTRE AUDIT CHECKLIST

**Issue:** 00  
**Revision:** 00  
**Date:** 18 FEB 2024

1. N CONTRACTED TRAINING ARRANGEMENTS		GACA References	Assessment Result			DOCUMENTATION REF / REMARKS
Item #	Description		Yes	No	N/A	
N-1	This inspection area encompasses a review of the training center's contracted training arrangements (NOTE: This section is applicable for renewal audits).	A31 OpsSpecs				
N-2	Does each of the training organization(s) listed in A31 OpsSpecs has adequate facilities and equipment, competent personnel, and an organizational structure to support the requested training and/or evaluations specified in the certificate holder's approved training program?	A31 OpsSpecs				
N-3	Are all instruction and evaluations conducted by each training organization listed in A31 OpsSpecs performed in accordance with the certificate holder's operating rules and as approved by the certificate holder's Principal Operations Inspector (POI)?	A31 OpsSpecs				
N-4	Does each person engaged in the instruction and evaluation of its personnel who are employed by each training organization listed A31 OpsSpecs trained, qualified, and authorized to conduct the appropriate training, testing, and checking in accordance with the certificate holder's operating rules and the training program approved by its POI?	A31 OpsSpecs				

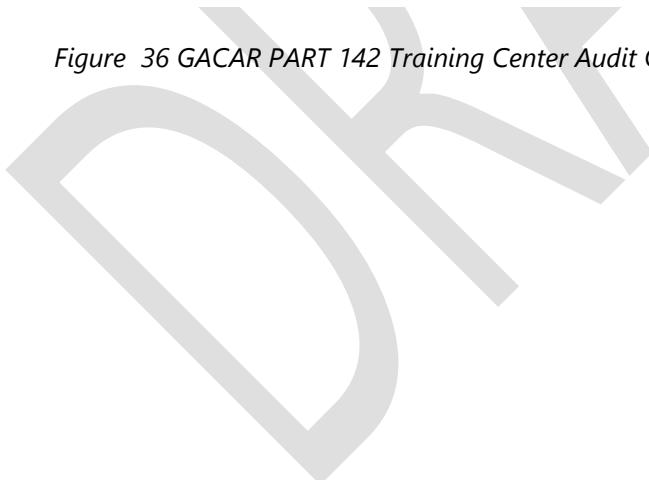
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Figure 36 GACAR PART 142 Training Center Audit Checklist Page 28





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### 9.4 GACAR PART 142 TRAINING CENTRE AUDIT CHECKLIST

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## CORPORATE QUALITY MANAGEMENT SYSTEM MANUAL

### GACAR PART 142 TRAINING CENTRE AUDIT CHECKLIST

Issue: 00  
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N-5	Are all arrangements made with each training organization listed in A31 OpsSpecs fully compliant with these operations specifications, the certificate holder's approved training program, the GACAR and in no way contrary to them.	A31 OpsSpecs.				
N-6	Does the training organization <u>has</u> the equipment, instruction, and evaluations that can effectively support RXI's training needs? In case of differences between RXI's equipment and the training organization's equipment, will the training organization be able to conduct <u>differences</u> training?	A31 OpsSpecs.				

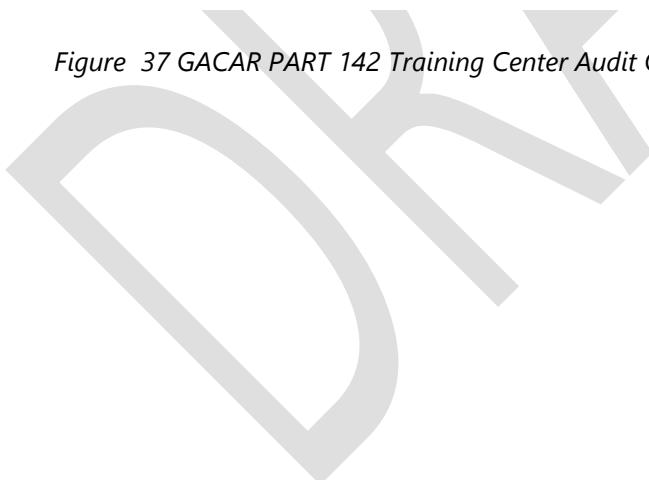
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Figure 37 GACAR PART 142 Training Center Audit Checklist Page 29





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## 9 APPENDICES

### 9.4 GACAR PART 142 TRAINING CENTRE AUDIT CHECKLIST

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## CORPORATE QUALITY MANAGEMENT SYSTEM MANUAL

### GACAR PART 142 TRAINING CENTRE AUDIT CHECKLIST

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O. AUDITOR DETAILS:			
ROLE	NAME	SIGNATURE	DATE
Lead Auditor:			
Auditor/s:			
Observer:			

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# CORPORATE QUALITY MANAGEMENT SYSTEM

9 APPENDICES  
9.5 AUDIT REPORT

Issue: 00  
Revision: 00  
Date: 18-FEB-2024

## 9.5 AUDIT REPORT

**CORPORATE QUALITY MANAGEMENT SYSTEM MANUAL**

**AUDIT REPORT**

Issue: 00  
Revision: 00  
Date: 18 FEB 2024

<b>Organization:</b>		
<b>Audit Date:</b>		
<b>Audit Team:</b>		
Lead Auditor:		
Auditor/s:		
Observer/s:		
<b>Key Auditee/s:</b>		
<b>Contents:</b>		
	Cover Page .....	Page x
I.	Introduction .....	Page x
II.	Audit Scope .....	Page x
III.	Findings/Concerns .....	Page x
IV.	Recommendation .....	Page x
V.	References .....	Page x
<b>1. INTRODUCTION</b>		
<b>Executive Summary</b>		
<b>Company Profile</b>		
<b>2. AUDIT SCOPE</b>		
The following areas were reviewed during the audit:		

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# CORPORATE QUALITY MANAGEMENT SYSTEM

9 APPENDICES  
9.5 AUDIT REPORT

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## CORPORATE QUALITY MANAGEMENT SYSTEM MANUAL

### AUDIT REPORT

Issue: 00  
Revision: 00  
Date: 18 FEB 2024

TBD (as per checklist)

#### 3. SUMMARY OF FINDINGS AND OBSERVATIONS

No.	Description	Category
1		
2		
3		
4		
5		

#### 4. RECOMMENDATION

--

#### 5. REFERENCES

	Name / Designation	Signature and Date
Prepared by:		
Assisted By:		
Reviewed by:		
Approved by:		

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Figure 40 Audit Report Page 2



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# CORPORATE QUALITY MANAGEMENT SYSTEM

9 APPENDICES

9.6 NON-CONFORMANCE REPORT

Issue: 00  
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## 9.6 NON-CONFORMANCE REPORT

RIYADH AIR طيران الرياض	CORPORATE QUALITY MANAGEMENT SYSTEM MANUAL		
	NON-CONFORMANCE REPORT		
	Issue: 00		
	Revision: 00		
	Date: 18 FEB 2024		

Date Opened	Date Closed		
Observed During	<input type="checkbox"/> Audit	<input type="checkbox"/> Inspection	<input type="checkbox"/> Operations
Concern Department(s)			
Documentation and Reference			
Audit:			
Non-Conformance Category	Level of Finding	Date Discovered	
<input type="checkbox"/> Risk	<input type="checkbox"/> Level 1	Rule Reference	
<input type="checkbox"/> Aircraft	<input type="checkbox"/> Level 2	Manual Reference	
<input type="checkbox"/> Department	<input type="checkbox"/> Level 3	Entered by	
<input type="checkbox"/> Response Due		Error Code	

### Finding Description:

Finding Accepted	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date	
Auditor Name:			Signature	
Date				
Accepted by MQC	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Signature	
Date				

### Corrective/Immediate Action Taken:

Completed  Yes  No Date dd mmm yyyy

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Figure 41 Non-Conformance Report Page 1





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9.7 AUDIT IMPLEMENTATION VERIFICATION

**Issue:** 00  
**Revision:** 00  
**Date:** 18-FEB-2024

## 9.7 AUDIT IMPLEMENTATION VERIFICATION

CORPORATE.QUALITY MANAGEMENT.SYSTEM. MANUAL					
AUDIT FOLLOW UP FORM			Issue: 00 Revision: 00 Date: 18 FEB 2024		
<b>Auditee Details</b>					
To				Date	
Designation					
Department			Section/Area		
<b>Audit Reference</b>					
Audit Type	<input type="checkbox"/> Internal <input type="checkbox"/> External <input type="checkbox"/> Surveillance				
Audit No.		Audit Date	dd mmm yyyy	Due Date	dd mmm yyyy
Audit Subject					
<b>Audit Status – See below list of overdue findings</b>					
No.	Finding			Due date	
<input type="checkbox"/>	First follow-up sent date	dd mmm yyyy			
<input type="checkbox"/>	Second follow-up date	dd mmm yyyy			
<b>Note:</b> Failure of the auditee to comply with the corrective/preventive actions will compel Manager Audit Program to escalate the issue for further discussion with the management representative.					
<b>Quality Team Comments</b>					
<b>Prepared by:</b>		<b>Sign &amp; Date</b>			
Lead Auditor/Auditor					
<b>Approved by:</b>		<b>Sign &amp; Date</b>			
Manager Quality and Compliance					

Figure 43 Audit -Implementation Verification



## 9.8 AUDITOR EVALUTION

CORPORATE QUALITY MANAGEMENT SYSTEM MANUAL		
AUDITOR EVALUTION FORM		
Issue: 00 Revision: 00 Date: 18 FEB 2024		
<b>Auditor Name</b>		
<b>Evaluator Name</b>		
<b>Evaluation Date</b>		
<b>Last Evaluation Date</b>		
<b>Evaluation Items</b>	<b>Satisfactory</b>	<b>Unsatisfactory</b>
<b>Auditor Records Review</b>		
Training Records		
Professional credentials and audit experience		
<b>Personnel Interview</b>		
Personal Behavior		
Communication Skills		
Knowledge & Information		
<b>Audit Performance Review</b>		
Audit Reports Review		
Auditee's Feedback		
Auditor Performance and Skills		
Audit Techniques		
Sampling Techniques		
<b>Overall Evaluation Result</b>		
<b>Evaluator Comments</b>		
<b>Prepared by:</b>		<b>Approved by:</b>
<b>Evaluator</b> (Name, Sign & Date)	<b>Manager Quality and Compliance</b> (Name, Sign & Date)	

Figure 44 Auditor Evaluation



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## CORPORATE QUALITY MANAGEMENT SYSTEM

9 APPENDICES

9.9 MAINTENANCE CONTRACT REQUEST

Issue: 00

Revision: 00

Date: 18-FEB-2024

### 9.9 MAINTENANCE CONTRACT REQUEST

	CORPORATE QUALITY MANAGEMENT SYSTEM MANUAL	
RIYADH AIR طيران الرياض	MAINTENANCE CONTRACT REQUEST	Issue: 00
		Revision: 00
		Date: 18 FEB 2024

Riyadh Air Technical department wants to Order / Contract following supplies:

Maintenance (Line / Base / Engines) – Aircraft / Engines (use as appropriate).

From the external service provider:

(Name of Repair Station)

Effective from: \_\_\_\_\_ (date of signature or proposed effectiveness).

Contract shall comply with following Riyadh Air requirements:

(relevant Riyadh Air department shall complete required parameters of supplies):



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Figure 45 Maintenance Contract Request Page 1



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# CORPORATE QUALITY MANAGEMENT SYSTEM

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9.9 MAINTENANCE CONTRACT REQUEST

**Issue:** 00

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## CORPORATE QUALITY MANAGEMENT SYSTEM MANUAL

### MAINTENANCE CONTRACT REQUEST

**Issue:** 00

**Revision:** 00

**Date:** 18 FEB 2024

PARAMETER	OPTION	COMMENTS
Scope of work	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Locations identified for the performance of maintenance / certificates held	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Measurable specifications within the contract	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Subcontracting	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Maintenance Program	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Quality Monitoring	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Training Program	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Airworthiness Data	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Incoming conditions	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Airworthiness Directives and Service Bulletin / Modifications	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Hours & Cycles control	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Life Limited Parts	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Supply of parts	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Pooled parts at line stations	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Scheduled maintenance	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Unscheduled maintenance / Defect rectification	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Deferred tasks	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Deviation from the maintenance schedule	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Test flight / Test bench	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Release to service documentation	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Maintenance recording	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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Figure 46 Maintenance Contract Request Page 2



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# CORPORATE QUALITY MANAGEMENT SYSTEM

9 APPENDICES

9.9 MAINTENANCE CONTRACT REQUEST

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## CORPORATE QUALITY MANAGEMENT SYSTEM MANUAL

### MAINTENANCE CONTRACT REQUEST

Issue: 00

Revision: 00

Date: 18 FEB 2024

PARAMETER	OPTION		COMMENTS
Exchange of Information	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Contract review meetings	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Work scope planning meeting	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Technical meeting	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Quality meeting	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Reliability meeting	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Based on initial evaluation by M&E parameters Supplier is recommended\*

Yes  No

I recommend the Supplier\*

Name of the Chief Inspector

Yes /  No

Signature

\_\_\_\_\_

MQC has no objections against Supplier

Signature of MQC

\_\_\_\_\_

Comments

Supplier will be monitored by\*

<input type="checkbox"/> Audit	<input type="checkbox"/> Inspection	<input type="checkbox"/> Quality Questionnaire	<input type="checkbox"/> Performance Monitoring
--------------------------------	-------------------------------------	--	---

Date:

Note:

A copy of the completed form shall be kept by DQC for 5 years notwithstanding whether the contract was signed or not.

\* mark as appropriate

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Figure 47 Maintenance Contract Request Page 3



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# CORPORATE QUALITY MANAGEMENT SYSTEM

## 9 APPENDICES

### 9.10 OPERATIONS CONTRACT REQUEST

**Issue:** 00  
**Revision:** 00  
**Date:** 18-FEB-2024

## 9.10 OPERATIONS CONTRACT REQUEST

CORPORATE QUALITY MANAGEMENT SYSTEM MANUAL																	
RIYADH AIR طيران الرياض	OPERATIONS CONTRACT REQUEST FORM	Issue: 00 Revision: 00 Date: 18 FEB 2024															
	<b>Riyadh Air department</b> _____ ( <i>Name of the department willing to outsource service or buy item/ wants to Order / Contract following supplies:</i> 1 _____ 2 _____ 1. <i>(Specify supplies, e.g., spare parts, catering supplies, software, etc.)</i>																
<b>From the external service provider:</b> _____ <i>(Name of Supplier)</i> _____ <b>Effective from:</b> _____ <i>(date of signature or proposed effectiveness).</i>																	
<b>Contract shall comply with following Riyadh Air requirements:</b> <i>(relevant Riyadh Air department shall complete required parameters of supplies):</i> <table border="1"> <tr> <th>PARAMETER</th> <th>OPTION</th> <th>COMMENTS</th> </tr> <tr> <td>Supplier holds necessary approval, if applicable</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> <td></td> </tr> <tr> <td>Delivery within required period</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> <td></td> </tr> <tr> <td>Acceptable payment conditions</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> <td></td> </tr> <tr> <td>Measurable specification of performance in the contract</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> <td></td> </tr> </table>			PARAMETER	OPTION	COMMENTS	Supplier holds necessary approval, if applicable	<input type="checkbox"/> Yes <input type="checkbox"/> No		Delivery within required period	<input type="checkbox"/> Yes <input type="checkbox"/> No		Acceptable payment conditions	<input type="checkbox"/> Yes <input type="checkbox"/> No		Measurable specification of performance in the contract	<input type="checkbox"/> Yes <input type="checkbox"/> No	
PARAMETER	OPTION	COMMENTS															
Supplier holds necessary approval, if applicable	<input type="checkbox"/> Yes <input type="checkbox"/> No																
Delivery within required period	<input type="checkbox"/> Yes <input type="checkbox"/> No																
Acceptable payment conditions	<input type="checkbox"/> Yes <input type="checkbox"/> No																
Measurable specification of performance in the contract	<input type="checkbox"/> Yes <input type="checkbox"/> No																
<table border="1"> <tr> <td>Proposed method of monitoring Supplier</td> <td></td> </tr> <tr> <td>Contract valid until</td> <td></td> </tr> </table>			Proposed method of monitoring Supplier		Contract valid until												
Proposed method of monitoring Supplier																	
Contract valid until																	
Based on evaluation of parameters Supplier complies with Riyadh Air requirements* <input type="checkbox"/> Yes <input type="checkbox"/> No																	

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Figure 48 Operations Contract Request Page 1



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# CORPORATE QUALITY MANAGEMENT SYSTEM

## 9 APPENDICES

### 9.10 OPERATIONS CONTRACT REQUEST

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## CORPORATE QUALITY MANAGEMENT SYSTEM MANUAL

### OPERATIONS CONTRACT REQUEST FORM

Issue: 00  
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**Supplier can be considered as**

Contractor  Subcontractor

**I recommend the Supplier\***

Yes /  No

**Name of the VPFO**

**Signature**

**MQC has no objections against Supplier**

**Signature of MQC**

Comments:

**Supplier will be monitored by\***

Audit  Inspection  Quality Questionnaire  Performance Monitoring

**Date:**

**Note:**

*A copy of the completed form shall be kept by DQC for 5 years notwithstanding whether the contact was signed or not.*

*\* mark as appropriate*

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Figure 49 Operations Contract Request Page 2



## **9.11 MEETING ATTENDANCE LIST**



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*Figure 50 Meeting Attendance List*



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# CORPORATE QUALITY MANAGEMENT SYSTEM

9 APPENDICES

9.11 MEETING ATTENDANCE LIST

**Issue:** 00

**Revision:** 00

**Date:** 18-FEB-2024

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DRAFT



**Riyadh Air,**

Door No, Street Address,

Pin code.

[www.riyadhair.com](http://www.riyadhair.com)