MAR-FCL 3

Military Aviation Requirements - Flight Crew Licensing Part 3 (Medical)

Acceptable Means of Compliance (AMC)

STATUS PAGE

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12-4-2018	3.0 C	External review. AMC material is extracted from MAR-FCL3.
01-08-2018	3.0 D	Final internal MAA-NLD Staffing
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AMC – ACCEPTABLE MEANS OF COMPLIANCE

AMC MAR-FCL 3.510 Demonstration of compliance
(*See MAR–FCL 3.510)*

In order to demonstrate that the requirements are met, a risk assessment should be completed and documented. The result of this risk assessment should demonstrate that an equivalent level of safety to that established by the Acceptable Means of Compliance (AMC) adopted by the MAA-NLD is reached.

AMC MAR-FCL 3.515 Management system documentation
(*See MAR–FCL 3.515)*

The management system documentation should contain the privileges and detailed scope of activities for which the Organisation is certified, as relevant to the applicable requirements. The scope of activities defined in the management system documentation should be consistent with the terms of approval.

AMC MAR-FCL 3.520 Application time frames
(*See MAR–FCL 3.520)*

a. The application for the amendment of an Organisation certificate should be submitted at least 30 days before the date of the intended changes.

b. In the case of a planned change of a nominated person, the Organisation should inform the MAA-NLD at least 10 days before the date of the proposed change.

c. Unforeseen changes should be notified at the earliest opportunity, in order to enable the MAA-NLD to determine continued compliance with the applicable requirements and to amend, if necessary, the Organisation certificate and related terms of approval.

AMC MAR-FCL 3.535 Findings
(*See MAR–FCL 3.535)*

The corrective action plan defined by the Organisation should address the effects of the non-conformity, as well as its root-cause.

AMC MAR-FCL 3.550 Management system
(*See MAR–FCL 3.550)*

Non-Complex Organisations
(*See MAR–FCL 3.550.*a.1;2;3;5*)*

a. Safety risk management may be performed using hazard checklists or similar risk management tools or processes, which are integrated into the activities of the Organisation.

b. The Organisation should manage safety risks related to a change. The management of change should be a documented process to identify external and internal change that may have an

adverse effect on safety. It should make use of the Organisation's existing hazard identification, risk assessment and mitigation processes.

c. The Organisation should identify a person who fulfils the role of safety manager and who is responsible for coordinating the safety management system. This person may be the accountable manager or a person with an operational role in the Organisation.

d. Within the Organisation, responsibilities should be identified for hazard identification, risk assessment and mitigation.

e. The safety policy should include a commitment to improve towards the highest safety standards, comply with all applicable legal requirements, meet all applicable standards, consider best practices and provide appropriate resources.

f. The Organisation should, in cooperation with other stakeholders, develop, coordinate and maintain an emergency response plan (ERP) that ensures orderly and safe transition from normal to emergency operations and return to normal operations. The ERP should provide the actions to be taken by the Organisation or specified individuals in an emergency and reflect the size, nature and complexity of the activities performed by the Organisation.

Training and Communication on Safety

(*See MAR–FCL 3.550.a.4)*

a. Training
   1. All personnel should receive safety training as appropriate for their safety responsibilities.
   2. Adequate records of all safety training provided should be kept.

b. Communication
   1. The Organisation should establish communication about safety matters that:
      i. ensures that all personnel is aware of the safety management activities as appropriate for their safety responsibilities;
      ii. conveys safety critical information, especially relating to assessed risks and analysed hazards;
      iii. explains why particular actions are taken; and
      iv. explains why safety procedures are introduced or changed.
   2. Regular meetings with personnel where information, actions and procedures are discussed may be used to communicate safety matters.

Organisation's Management System Documentation

(*See MAR–FCL 3.555.a.5)*

a. The Organisation's management system documentation should at least include the following information:
   1. a statement signed by the accountable manager to confirm that the Organisation will continuously work in accordance with the applicable requirements and the Organisation's documentation as required by this Part;
   2. the Organisation's scope of activities;
   3. the titles and names of persons referred to in Subpart A;
   4. an Organisation chart showing the lines of responsibility between the persons referred to in Subpart A;
   5. a general description and location of the facilities referred to in MAR-FCL 3.085;
   6. procedures specifying how the Organisation ensures compliance with the applicable requirements;
   7. the amendment procedure for the Organisation's management system documentation.

b. The Organisation's management system documentation may be included in a separate manual or in (one of) the manual(s) as required by the applicable Subpart(s). A cross reference should be included.

Compliance monitoring

(*See MAR–FCL 3.550.a.6)*

a. Compliance monitoring
The implementation and use of a compliance monitoring function should enable the Organisation to monitor compliance with the relevant requirements.
   1. The Organisation should specify the basic structure of the compliance monitoring function applicable to the activities conducted.
   2. The compliance monitoring function should be structured according to the size of the Organisation and the complexity of the activities to be monitored.

b. Organisations should monitor compliance with the procedures they have designed to ensure safe activities. In doing so, they should as a minimum, and where appropriate, monitor:
   1. privileges of the Organisation;
   2. manuals, logs, and records;
   3. training standards;
   4. management system procedures and manuals.

c. Organisational set up
   1. To ensure that the Organisation continues to meet the requirements, the accountable manager should designate a compliance monitoring manager. The role of the compliance monitoring manager is to ensure that the activities of the Organisation are monitored for compliance with the applicable regulatory requirements, and any additional requirements as established by the Organisation, and that these activities are being carried out properly under the supervision of the relevant head of functional area.
   2. The compliance monitoring manager should be responsible for ensuring that the compliance monitoring program is properly implemented, maintained and continually reviewed and improved.
   3. The compliance monitoring manager should:
      i. have direct access to the accountable manager;
      ii. not be one of the other persons referred to in Subpart A;
      iii. be able to demonstrate relevant knowledge, background and appropriate experience related to the activities of the Organisation; including knowledge and experience in compliance monitoring; and
      iv. have access to all parts of the Organisation, and as necessary, any contracted Organisation.
   4. In the case of a non-complex Organisation, this task may be exercised by the accountable manager provided he/she has demonstrated having the related competence as defined in (c)(3)(iii).
   5. In the case the same person acts as compliance monitoring manager and as safety manager, the accountable manager, with regards to his/her direct accountability for safety, should ensure that sufficient resources are allocated to both functions, taking into account the size of the Organisation and the nature and complexity of its activities.
   6. The independence of the compliance monitoring function should be established by ensuring that audits and inspections are carried out by personnel not responsible for the function, procedure or products being audited.

d. Compliance monitoring documentation
   1. Relevant documentation should include the relevant part(s) of the Organisation's management system documentation.
   2. In addition, relevant documentation should also include the following:
      i. terminology;
      ii. specified activity standards;
      iii. a description of the Organisation;
      iv. the allocation of duties and responsibilities;

v. procedures to ensure regulatory compliance;
vi. the compliance monitoring program, reflecting:
    A. schedule of the monitoring program;
    B. audit procedures;
    C. reporting procedures;
    D. follow-up and corrective action procedures; and
    E. recording system.
vii. the training syllabus referred to in (e)(2);
viii. document control.

e. Training
1. Correct and thorough training is essential to optimize compliance in every Organisation. In order to achieve significant outcomes of such training, the Organisation should ensure that all personnel understand the objectives as laid down in the Organisation's management system documentation.
2. Those responsible for managing the compliance monitoring function should receive training on this task. Such training should cover the requirements of compliance monitoring, manuals and procedures related to the task, audit techniques, reporting and recording.
3. Time should be provided to train all personnel involved in compliance management and for briefing the remainder of the personnel.
4. The allocation of time and resources should be governed by the volume and complexity of the activities concerned.

AMC MAR-FCL 3.615 Application
(*See MAR–FCL 3.615)*

a. The documentation for the approval of an AeMC should include the names and qualifications of all medical staff, a list of medical and technical facilities for initial class 1 aero-medical examinations and of supporting specialist consultants.

b. The AeMC should provide details of clinical attachments to hospitals, medical institutions and/or specialists.

AMC MAR-FCL 3.635 Experience
(*See MAR–FCL 3.635)*

a. At least 200 class 1 aero-medical examinations and assessments should be performed at the AeMC every year.

b. In the situation where the number of aero-medical examinations and assessments mentioned in (a) cannot be reached due to a low number of professional pilots, a proportionate number of class 1 aero-medical examinations and assessments should be performed.

c. In these cases, the continuing experience of the head of the AeMC and aero-medical examiners on staff should also be ensured by them performing aero-medical examinations and assessments for:
1. class 2 medical certificates; and/or
2. third country class 1 medical certificates.

d. Aero-medical research including publication in peer reviewed journals may also be accepted as contributing to the continued experience of the head of, and aero-medical examiners at, an AeMC.

AMC MAR-FCL 3.715 Medical-technical facilities
(*See MAR–FCL 3.715)*

The medical-technical facilities of an AeMC should consist of the equipment of a general medical practice and, in addition, of:

a. Cardiology Facilities to perform:
   1. 12-lead resting ECG;
   2. Stress ECG;
   3. 24-hour blood pressure monitoring; and
   4. 24-hour heart rhythm monitoring.

b. Ophthalmology
   Facilities for the examination of:
   1. Near, intermediate and distant vision;
   2. External eye, anatomy, media and fundoscopy;
   3. Ocular motility;
   4. Binocular vision;
   5. Colour vision (anomaloscopy or Colour Cone Test);
   6. Visual fields;
   7. Refraction; and
   8. Heterophoria.

c. Hearing
   1. Pure-tone audiometer

d. Otorhinolaryngology
   Facilities for the clinical examination of mouth and throat and:
   1. Otoscopy;
   2. Rhinoscopy;
   3. Tympanometry or equivalent; and
   4. Clinical assessment of vestibular system.

e. Examination of pulmonary function
   1. Spirometry

f. The following facilities should be available at the AeMC or arranged with a service provider:
   1. Clinical laboratory facilities; and
   2. Ultrasound of the abdomen.

Hoofddorp, 19 December, 2018

Director Military Aviation Authority – The Netherlands

J.P. Apon
Air Commodore