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2.b Audit Procedures

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Date: 07 May 2024

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2b.1 General

2b.1.1 Definitions

Approved Evaluator	Senior auditor who can perform check-out audits and competency-evaluations.
Audit	The structured, independent and objective assessment that determines the level of conformity with specific standards, rules, regulations or other applicable requirements.
Auditee	A generic term that refers to any entity, person or activity that is subjected to an audit.
Auditor	An individual who conducts an audit.
Auditor Independence	An auditor who is independent of the functional area or the manager that is being audited. The auditor's impartiality or functional independence would be considered as compromised in a situation where an auditor is subjected to any type of performance appraisal activity by the functional area or manager that is being audited.
Audit Objective	Tangible achievement(s) expected to be accomplished from the conduct of an audit normally expressed as a statement of intent.
Audit Plan	A detailed program of action(s) for the implementation and completion of an audit.
Audit Program	The documented management, organization, strategy, policies, and procedures used by an auditor(s) for providing audit services.
Audit Team	The group of auditors that coordinates and works together to conduct an audit.
Authority (Regulatory)	A government agency or other administrative body that exercises regulatory or oversight control over operations or activities within a defined jurisdiction.
Compliance	The state of being in accordance with rules or requirements specified in standards or regulations (i.e. regulatory).
Conformity	Fulfillment of specifications contained in standards or recommended practices (i.e. non-regulatory).
Corrective Action	Action to prevent reoccurrence.
Corrective Action Plan (CAP)	The plan of an auditee to close a finding through implementation of comprehensive and permanent corrective and/or preventive action.

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Corrective Action Record (CAR)	A document that describes each finding and observation that results from an audit and provides a history of a finding or observation and the associated steps taken toward closure.
Evidence	Data or information discovered during an audit that is analyzed by an auditor and used to determine conformity with the criteria upon which an audit is based.
Finding	A documented statement based on factual evidence that describes non-conformity with a standard.
Finding – Level 1	Major non-conformity: corrective and/or preventive action(s) must be implemented within a maximum of 7 calendar days.
Finding – Level 2	Medium non-conformity: corrective and/or preventive action(s) must be implemented within 30 calendar days.
Hazard	A condition or an object with the potential to cause or contribute to an incident or accident.
IQSMS	A web-based Safety, Quality and Risk Management System.
Lead Auditor	An experienced auditor who has acquired the requisite knowledge and skill, demonstrated the competence, and has successfully qualified to lead an audit team.
Non-compliance	The state of not being in accordance with rules or requirements specified in standards or regulations (i.e. regulatory).
Non-conformity	Non-fulfillment of specifications contained in standards or recommended practices (i.e. non-regulatory).
Management Review	Routine evaluation of whether a management system is performing as intended and producing the desired results.
Management System	Set of policies, processes and procedures used by an organization to ensure that it can fulfill the tasks required to achieve its objective.
Monitoring Program	Program to ensure compliance/conformity with applicable laws, regulations and company standards.
Observation	Evidence of a non-conformity with a recommended practice, which should be considered by the auditee as advice only. Observations present an opportunity for improvement.
Preventive Action	Action to prevent occurrence.
Risk	See Safety Risk.

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Root Cause	The initiating cause in a causal chain that leads to an undesirable situation or condition; the point in the causal chain where corrective action could reasonably be implemented and expected to correct and prevent recurrence of the undesirable situation or condition.
Root Cause Analysis (RCA)	A method of analysis that focuses on identifying the root cause(s) of an undesirable situation or condition.
Safety Management System (SMS)	A systematic approach to managing safety, including the necessary organizational structures, accountability, responsibilities, policies and procedures.
Safety Risk	The predicted probability and severity of the consequences or outcomes of a hazard.
5 WHY Method	A question asking method used to explore the cause and effect relationships underlying a problem.

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2b.1.2 Abbreviations

AOC	Air Operator Certificate
AvSec	Aviation Security
CAA	Civil Aviation Authority
CAPA	Corrective and Preventive Action
CAP	Corrective Action Plan
CAR	Corrective Action Report/Record
DG	Dangerous Goods
DHL AGOM	DHL Airside Ground Operations Manual
GOSARPs	ISAGO Standards and Recommended Practices
GSE	Ground Support Equipment
IATA	International Air Transport Association
ISAGO	IATA Safety Audit for Ground Operations
KPI	Key Performance Indicator
NCR	Non-Conformity Record / Report
OJT	On the Job Training
RCA	Root Cause Analysis
SLA	Service Level Agreement
SOP	Standard Operating Procedure
SMS	Safety Management System
SPI	Safety Performance Indicator
ULD	Unit Load Device

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2b.2 Introduction

Audits are the core component of the DHL Monitoring Program described in DHLAGOM **2. Global Airside Safety Management System (SMS)**. To provide further guidance, this document contains the business rules and procedures to ensure the effective implementation, control and standardization of the Global Airside Audit Program, including:

a. Selection, training and qualification of auditors,
b. Auditor performance,
c. Audit scheduling,
d. Audit preparation,
e. Conduct of audits,
f. Audit follow-up,
g. Closure of findings, and
h. Closure of audits.

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2b.3 Audit Program Scope

The procedures outlined in this document cover the Management System and operational activities as follows:

(a) Management System, i.e. services provided by Global Airside (SMS, Quality, Standards, Training, Load Control/Airside Systems), and
(b) Ground Operations, i.e. all cargo and ground-related services that are conducted by DHL employees or where DHL has contracted such services. The applicable standards are set in the DHLAGOM.

1. The procedures outlined in this document apply to all cargo and ground-related services that are conducted by DHL employees or where a DHL in-house airline or a 3rd party airline which is part of the Global Airside Ground Operations Pool has contracted such services to a 3rd party. Therefore, the following scenarios fall within the scope of the Monitoring Program:

    i. DHL self-handling stations

    Note: If a self-handling station outsources activities, then it is the responsibility of the local station to audit all sub-contracted services and 3rd party service providers. The standards set in DHL AGOM do apply to all sub-contracted activities.

    ii. 3rd party stations contracted by an in-house (owned) airline / AOC, including:
        a. Any station where a DHL-owned airline operates to,
        b. Any station where a wetlease operator under a DHL callsign operates to, and
        c. Any station where a DHL-owned airline has contracted services to a 3rd party service provider regardless of operator/AOC (i.e. external airlines/AOCs flying to stations contracted by DHL).

    iii. 3rd party stations contracted by a 3rd party airline, which is part of the Global Airside Ground Operations Pool, including:
        a. Any station where the 3rd party airline operates to,
        b. Any station where a wetlease operator under the callsign of the 3rd party airline operates to

    Note: New destinations will be added to the scope of the Monitoring Program once 12 flights have been operated within a time frame of 6 months.

2. Where an external airline has contracted handling activities directly with no involvement of DHL, such cargo and/or ground handling services shall be conducted in accordance with the operator's manuals as per contractual agreement. External airlines not operating under a DHL AOC shall conduct their own audits.

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2b.4 Auditor Selection, Training, Qualifications

2b.4.1 General

Confidence in, and reliance on, the audit process depends on the competence of personnel conducting the audits. Therefore, DHL utilizes auditors who:

(a) Have been trained and are qualified, and
(b) Are impartial and independent from the operational areas to be audited.

2b.4.2 Selection and Qualification

DHL uses auditors that have been selected and approved, based on the following criteria:

(a) Meet all applicable qualification prerequisites (see Proficiency Checks below),
(b) Possess the appropriate personal attributes (see Personal Attributes below),
(c) Demonstrate the ability to apply knowledge and skills necessary to:
    1. Effectively conduct audits, and
    2. Successfully complete all steps in the process for auditor qualification as defined in section **2b.4.3 - Auditor Training**

Proficiency Checks

Every auditor shall have an operational background and/or expertise relevant for the conduct of airside audits. All job holders must have the appropriate job specific training and knowledge specified in the individual job descriptions.

Before an auditor will be considered, the suitability of each auditor shall be verified. Therefore, each candidate shall s**ubmit evidence documenting the candidate's professional background in terms of education, operational experience, auditor certification and/or training and audit experience to the hiring manager.**

As a minimum, each candidate shall have:

- Auditor certification,
- Auditing experience preferred,
- Work experience and knowledge in the area to be audited, and
- Functional independence.

Personal Attributes

In addition, all DHL auditors shall:

(a) Possess certain personal attributes that contribute to the successful performance of an audit. Such personal attributes may include, but are not limited to, the following:
    1. Objective, fair and impartial in applying judgment,
    2. Operationally knowledgeable, analytical and logical in reaching conclusions,
    3. Observant of physical surroundings and activities,
    4. Dedicated to operating in a teamwork environment,
    5. Open to alternative ideas or methods; and adaptable to different situations,
    6. Tactful in dealing with people, and
    7. Discreet in managing information.

(b) Live up to high ethical standards.

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Appointment of Auditors:

1. The Regional Airside Teams shall propose new auditors based on the selection criteria defined above to Global Airside. Global Airside shall approve the proposed candidates before official appointment.
2. DHL Airlines can appoint their own auditors as long as the minimum requirements outlined above are met. An approval from Global Airside is not required.

2b.4.3 Auditor Training

Auditors assisting the DHL Monitoring Program, shall:

(a) Have been trained and are qualified, and
(b) Complete initial and continuing auditor training that provides the knowledge and understanding necessary to effectively conduct audits against applicable regulations and standards.

Minimum Training Requirements - Auditor Training Curriculum

All Global Airside-related audits can only be performed by certified auditors. The minimum requirement is an auditor certification. The auditor training course curriculum shall include, but not be limited to, instruction and evaluation or demonstration of proficiency in a minimum of the following areas:

(a) Auditor professional conduct and responsibilities,
(b) Planning and preparation for an audit,
(c) Audit principles, procedures and techniques that an auditor may select and apply as appropriate to ensure audits are conducted in a consistent and systematic manner,
(d) Management system and reference documents that enable an auditor to comprehend the scope of an audit and apply audit standards,
(e) Methods and techniques used by an auditor for effectively gathering evidence and other data necessary in determining conformance with standards,
(f) Preparation of the audit report,
(g) Audit follow-up, including root cause analysis, corrective and preventive actions.

Company-Specific Training Requirements

In addition, the following mandatory DHL courses have to be completed successfully:

(a) Audits of the Management System

Course	Revalidation Period
• Safety Management Systems – SMS (standalone or as part of the Airside Supervision course)	Every 36 month

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(b) Ground Operations Audits

Course	Revalidation Period*
• Airside Supervision	Every 36 months
• ULD Build-up Advanced	Every 24 months
• Min. Dangerous Goods (DG) Awareness	Every 24 months
• Aviation Security (AvSec)	As per local requirement
• Human Factors (standalone or as part of the Airside Supervision Course)	Every 36 months
• Safety Management Systems – SMS (standalone or as part of the Airside Supervision course)	Every 36 months

*Any auditor who holds an active approver status for DHL AGOM updates and amendments, and therefore is part of the DHL AGOM review process, does not require a recertification. A one-off training is sufficient. The same applies to any active trainer providing training in one of the subjects listed above.

New Auditors

New auditors will be phased in in a progressive manner. The initial audits conducted by a new auditor shall be accomplished under supervision of an experienced auditor or approved evaluator to establish company standardization of audit conduct.

New auditors will undergo a period of supervision during audits (which will be variable according to their previous experience) to establish competency before being permitted to carry out unsupervised audits. As a minimum, any new auditor shall undergo the following:

- One observations whereby the new staff will observe an audit conducted by an experienced auditor;
- One live audits whereby the new staff will act as lead auditor whilst being observed and assessed by an approved evaluator (i.e. check-out audit);
- Competency-based check-out checklist completed and signed by the approved evaluator conducting the check-out audit.

Depending on the candidate profile the training requirements can be increased (e.g. it is recommended for new auditors with no experience to undergo at least two observations and two live audits).

Any on-the-job training for new auditors shall be conducted in stations where DHL functions as well as cargo and ground handling activities take place to ensure full exposure to all operational functions during the audits.

The completed competency-based check-out checklist shall be forwarded to Global Airside.

Approved Evaluators

It is upon discretion of the Regional Airside Teams / Airlines to nominate approved evaluators. Approved evaluators are experienced auditors who can perform check-out audits. No additional training is required.

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2b.4.4 Auditor Professional Development

Continual professional development includes continuing education and the improvement of knowledge, skills, and personal attributes. DHL auditors shall:

(a) Maintain an appropriate level of audit experience and demonstrate continual professional development and auditing ability through regular participation in company audits:

1. Regional Airside auditors shall conduct at least four applicable audits per year to demonstrate an appropriate level of current audit experience,
2. Global Airside auditors shall conduct at least two audits per year to remain current,
3. Airline auditors shall conduct a minimum number of audits per year as per airline requirement.

(b) Participate in recurrent training to continually improve their performance. Recurrent auditor training shall concentrate on:

1. Company-specific training requirements. Recurrency periods have been outlined in section **2b.4.3 - Auditor Training**
2. Review of internal standards, including:

    i. Changes to Standard Operating Procedures (SOPs) outlined in DHL AGOM,
    ii. Company safety and quality trends and developments,
    iii. Findings and changes resulting from the management review,
    iv. Sharing of gathered experiences derived from personal experience and feedback from others to ensure efficiency and efficacy of the audit program.

The review of internal standards will take place during the annual auditors meeting organized by Global Airside.

Prolonged periods of absence

A period of reduced or no activity can degrade skills. It can also prevent the development of further expertise or proficiency. In case of absence of more than one year from auditing activities, DHL shall:

(a) Re-train the concerned auditor(s).
(b) Familiarize the concerned auditor(s) with new processes, procedures, etc. that may have happened during their absence.

Therefore, if an auditor was absent for more than one year from auditing activities, the auditor:

- Shall receive a briefing by the concerned Head of Department (Regional Airside Audit Program Manager / Airline Quality Manager) covering any changes to standards and procedures that have triggered changes to the Audit Program,
- Be current in the company-specific training courses as outlined in section **2b.4.3 - Auditor Training**,
- Undergo one check-out audit (i.e. refresher live audit) whereby the member of staff will act as lead auditor whilst being observed and assessed by an approved evaluator,
- A competency-based check-out checklist shall be completed for the live audit and signed by the approved evaluator conducting the refresher/check-out audit.

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2b.4.5 Auditor Evaluation

DHL auditors shall be evaluated on a periodic basis. The evaluation process shall:

(a) Identify training and other skills enhancement needs,
(b) Occur in different stages:
    1. Initial evaluation of persons desiring to become auditors (see section **2b.4.3 - Auditor Training**),
    2. Continual evaluation of auditor performance to identify training needs, and improvement of knowledge and skills,
(c) Be documented (see section **2b.4.6 - Training Records**).

Staff training requirements are subject to continuous review, but shall be formally reviewed annually during individual staff performance reviews where recurrent / continuing training needs will be identified as required.

To ensure continued evaluation, any auditor shall undergo a competency-evaluation with an approved evaluator every 24 month. This shall be done in form of on-the-job training (live audit) whereby the auditor is acting as lead auditor while being assessed by the approved evaluator. The competency-based check-out checklist shall be applied and completed.

For Regional Airside auditors, approved evaluators cannot perform a competency-check for their direct reports. For Airline auditors, the competency-evaluation shall be conducted as per airline requirement (i.e. approved evaluators can perform competency-based evaluations for their direct reports).

Re-evaluation

Where a person does not meet the evaluation criteria, the person shall:

a. Receive additional training, as well as work and/or audit experience as required,
b. Undergo a re-evaluation (i.e. check-out audit).

2b.4.6 Training Records

Training records for auditors, including initial and recurrent training, shall be kept on a regional / airline level.

2b.4.7 Auditors Independence

Maintaining objectivity and independence are key requirements of all auditors. Therefore, all DHL auditors shall be impartial and functionally independent from the operational areas to be audited.

Under no circumstances shall auditing functions be delegated to a seconded staff member if the proposed auditor is an individual who is involved in, or responsible for, the activities being audited.

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2b.5 Audit Planning

2b.5.1 Audit Planning Process

The DHL audit planning process considers:

(a) Who will conduct the audit,
(b) Which department/function will be audited,
(c) When the audit will take place.

2b.5.2 Audit Schedule

It is the responsibility of Global Airside to plan the audit schedule for:

(a) Audits of the Management System, and
(b) Ground Operations Audits

to ensure sufficient resources are available so that:

1. Audits are scheduled at intervals to meet regulatory and management system requirements,
2. Audits are conducted within the scheduled interval,
3. Audits are conducted by trained auditors with adequate experience in the operational area/function to be audited.

The annual planning process considers:

(a) The time required to conduct the audit, and
(b) The time required to follow-up on corrective actions taken and the verification that these actions are permanent.

Allocation of Audits

Audits of the Management System will be conducted by Global Airside Auditors.

Ground Operations Audits are conducted as follows:

- Regional Airside auditors conduct audits within their region (exception Asia: all stations in Asia will be audited by Global Airside or Airline auditors),
- Global Airside and Airline auditors can audit stations upon request.
- Regional Airside auditors can audit stations in other regions upon request.

Scheduling

The Regional Airside Audit Program Managers shall provide a preliminary schedule to Global Airside by 1st December, including all stations to be audited, in which month the audit shall take place, and by whom the audit will be conducted.

Similarly, the Airlines shall submit their auditing preferences/requests to Global Airside by 1st December.

Global Airside will then produce and publish the final audit schedule for the upcoming year. The audit schedule shall be published by 31st December of each commencing year.

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Audit Frequency

The audit schedule should:

(a) Review all aspects of an operation within a period of 12 months, including all suppliers and contractors,
(b) Be flexible to allow for additional unannounced (unscheduled) audits when a company/organization undergoes significant changes in their management, organization, operation, technologies, regulatory requirements, or identified unsatisfactory trends, and
(c) Allow for follow-up audits to be scheduled when necessary to verify that corrective action was carried out and that it was effective.

As a standard, all in-house and 3rd party cargo and ground-related services are audited once every calendar year. However, the frequency of the audits may be in-/decreased at the discretion of the Airlines. For instance, organizations that hold a valid ISAGO certification and where the last audit identified only minor non-conformities can be moved to a more flexible audit schedule (e.g. every two or three years), if permitted by the relevant authorities (CAA where the Airline has its registered AOC). Similarly, stations may not be audited at all if ISAGO reports are accepted by the relevant authorities. Therefore, it is the responsibility of the Airline to define the audit frequency and advise Global Airside accordingly during the annual audit scheduling cycle.

In general, the following applies:

Audit Scope	**Frequency**
Management System	Every 2 years
Ground Operations Entities	Annually
Ground Operations Entities with ISAGO certification	Airlines to define the audit frequency based on CAA approval / recognition of ISAGO audit reports
Ground Operations Entities – red country	Security audit to be conducted annually

Audits shall be scheduled within 12 months from the previous audit date and for a given month.

Unscheduled Audits

Additional audits can be scheduled in case of poor performance, deterioration in safety standards or security concerns upon discretion of the Regional Airside Teams / Airlines with notification to Global Airside.

Events that can trigger an unscheduled audit include:

- Poor audit performance and lack of corrective actions to address significant safety or security concerns,
- Negative development of SPIs,
- Significant operational changes or disruptions.

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Transfer of Audits

Audit rescheduling is permitted and allows for mutually agreed dates and times to be established outside of the originally planned month of audit. The following rules apply:

- Audits can be conducted up to 3 month prior to their scheduled audit date,
- Audits can be conducted up to 3 month after the scheduled audit date. This requires a notification to Global Airside and the concerned Airline by the assigned auditor with a justification as to why the audit is being conducted late. The audit will then be rescheduled in IQSMS,
- Audits that are being conducted more than 3 month past the scheduled date require a risk assessment to be performed by the assigned auditor or the Regional Airside Audit Program / Airline Quality Manager. The risk assessment shall be submitted to Global Airside and the concerned Airline for approval. Once approved, the audit will be rescheduled in IQSMS.

Cumulative effects of audits carried out due to a varied periodicity are not acceptable. The original planned audit date will be used to calculate the next due date, and not the rescheduled date.

Cancellation of Audits

Under exceptional circumstances, scheduled audits may be cancelled where they are no longer considered appropriate due to changes in the respective organization, network operation or where the audit has been replaced with more appropriate audits. In these cases, the annual audit plan will be annotated with CANX to identify the audit as cancelled with a clear explanation included alongside.

2b.5.3 On-site versus Remote Audits

All audits shall be conducted as on-site audits.

Remote audits are permitted if a physical visit to a certain location is not possible due to health and safety or security concerns. Remote audits require a risk assessment to be conducted by the assigned auditor / Regional Airside Audit Program Manager or Airline Quality Manager as well as a proposal as to how the remote audit will be conducted. The risk assessment and audit proposal shall be submitted to Global Airside for approval. Once approved, the concerned airline shall be notified.

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2b.6 Conduct of Audits

The overall aim of an audit is to:

- Conduct a comprehensive review of the company's operations, management system, and processes using a checklist as guide,
- Conduct interviews with key personnel to gather information and insights regarding compliance and operational effectiveness,
- Evaluate the company's requirements and objectives and compliance with regulatory requirements, focusing on safety, quality and risk management,
- Identify deviations or non-compliance issues, record observations, and gather evidence to support findings,
- Document the audit process, including findings, recommendations, and required corrective actions.

The following sections will outline the role of the auditor to achieve this aim.

2b.6.1 Audit Preparation

2b.6.1.1 Initial Preparations

Audit preparation starts with the organization and planning of the audit and ends when the auditor or auditing team starts the execution of the audits and gathering of evidence.

It is the responsibility of the assigned auditor to prepare for the upcoming audit. In the audit preparation it is important to:

(a) Define the audit date, scope, and objective(s) and prepare the audit plan,
(b) Prepare audit checklists,
(c) Notify the auditee,
(d) Agree on the actual audit date, scope and objective(s) with the auditee.

Logistical Considerations

During the audit planning process, the logistical issues play an important role in the audit time management and shall be accounted for. The auditor shall consider, for instance:

(a) Interview location,
(b) Records location,
(c) Transportation between audit locations,
(d) Visa(s),
(e) Security access, etc.

2b.6.1.2 Audit Scope

The scope of each audit shall be defined as appropriate for the area/organization being audited. In general, the scope of the audit program is defined, but not limited to, monitoring the organization, the management system, operational functions and supervision of all activities related to the airside operations, provided in-house or sub-contracted to 3rd party service providers. In scope are therefore:

- The Management System:
  i. Occupational health and safety and security management,
  ii. SMS, risk management and risk mitigation procedures,
  iii. Documentation and records / document control,
  iv. Training and qualification,

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v. Internal compliance monitoring (audits and inspections),

vi. Outsourced functions, if applicable.

- Operational processes and procedures:

  i. Supervision and operational oversight,
  ii. Ramp handling / aircraft turnaround, including preparation, arrival, unloading, loading, and departure procedures,
  iii. Mass and balance, load control and system updates (e.g. messaging),
  iv. Cargo handling, warehouse facilities and freight preparation process (in scope is every facility that prepares freight which is being uplifted on the dedicated DHL Air Network);
  v. GSE management and maintenance.
  vi. Unit Load Devices (ULD) management.

- Other deliverables as per company functions and objectives such as KPIs, SLAs:

  i. Station performance.

The following areas are not in scope:

- External activities and facility(s) outside airport boundaries unless final freight preparation and administrational functions related to the aircraft handling are performed remotely;
- Aircraft fueling facilities (fuel farms);
- DHL facilities if warehousing and freight build-up is provided exclusively by a third party; and
- Aircraft maintenance.

Special services (e.g. catering, de-icing) can be added upon request of an Airline in alignment with the Regional Airside teams.

2b.6.1.3 Notification

The auditor shall announce the audit:

(a) To the head of the department/area/organization to be audited,
(b) In writing,
(c) With sufficient time span.

Therefore, audits shall be announced to the auditee a minimum of 30 calendar days before the scheduled date.

2b.6.1.4 Setting-up Auditees in IQSMS

All audits within the scope of the audit program outlined in this manual shall be documented in IQSMS.

During the audit preparation phase, it is the responsibility of the auditor to set up one auditee per organization with a DHL LDAP. This allows the auditee to access IQSMS directly and later on to complete the root cause analysis and corrective action plan within the system. The procedure for setting up external parties with an LDAP is outlined in section **2b.11.2.1.2 - Setting up Auditees in IQSMS**.

All communication in regards to the audit shall be done via one nominated person (one point of contact) per organization/entity who shall have access to IQSMS.

Once the auditee has successfully logged into IQSMS, it is the responsibility of auditor to inform Global Airside about the new auditee / account in IQSMS. Global Airside shall then assign the correct user roles (i.e. “auditee”) in IQSMS and confirm back to the auditor once done.

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2b.6.1.5 Audit Checklist

A checklist is an informational job tool used to facilitate the gathering of objective evidence and reduce failure by compensating for potential limits of human memory and attention. It helps to ensure consistency and completeness in carrying out the audit tasks based on the audit scope and criteria.

Various checklists are available in IQSMS for the auditor to choose from depending on the area/organization to be audited. The checklists have been developed following a modular approach allowing flexibility in choosing only relevant checklists for a particular audit and to:

(a) Address ongoing compliance with regulatory requirements and DHL's standards as outlined in DHLAGOM,
(b) Consider relevant operational safety and security events that have occurred,
(c) Consider results from previous audits, including the effectiveness of corrective action that has been implemented.

Table 1 summarizes the checklists that are available in IQSMS and their applicability per functional area:

	DHL	Ground Handler (DHL or 3rd Party)	Cargo Warehouse (DHL or 3rd Party)	Security Service Provider
Organization & Management	✔	✔	✔	✔
Security*		✔*	✔*	✔*
Training	✔	✔	✔	✔
Aircraft Handling		✔		
Warehousing / ULD Control			✔	
GSE		✔	✔	
Load Control	Whoever is performing load control services at a given station			
Station Performance	✔	✔	✔	

*The detailed Security checklist is currently only applicable to certain regions as per regional agreement with the airline. Generic Security questions are covered in the other modules as relevant.

Annual Review

Audit checklists shall be reviewed annually by Global Airside to ensure they remain up-to-date and to incorporate the latest internal standards and changes to external regulations and industry best practices, as applicable. The review shall include:

- Changes to DHLAGOM,
- Changes to applicable regulations (if applicable),
- Changes to the ISAGO Program and ISAGO Standards Manual, and
- Change requests from Regional Airside Teams / Airlines.

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Change Requests

Regional Airside Teams and Airlines can request changes to the checklist as appropriate. Any change request shall be made to Global Airside and shall be considered during the annual review.

For urgent changes, the checklist may be updated outside of the annual review cycle. A justification for the required change is to be provided to Global Airside by the requesting party.

Approval of Checklists

All checklists require approval from the internal DHL airlines before being used for auditing purposes. A quorum is reached once 5 of the 9 internal DHL airlines have approved the checklist.

2b.6.1.6 Audit Plan

Once all parties have agreed to the proposed audit dates, the audit plan and audit checklist shall be forwarded to the auditee who is responsible to cascade the provided information to all relevant parties within the organization.

Audit Plan Content

The audit plan is a description of the activities and arrangements for an audit and ensures that relevant personnel are aware of their roles and responsibilities within the audit. The following shall be communicated to the auditee in preparation for the audit:

(a) Date(s) and place(s) where on-site audit activities are to be conducted,
(b) Expected time and duration of the audit,
(c) Audit team,
(d) Audit scope, objectives and checklist,
(e) Logistical considerations (e.g. airside pass requirements). It is the responsibility of the auditor to organize access to all facilities, personnel, etc. to be audited in cooperation with the auditee.

The audit plan and applicable checklist shall be communicated to the auditee a minimum of 14 calendar days prior the scheduled audit date.

Auditor Preparation

It is the responsibility of the auditor to prepare for the audit, including:

- Collecting relevant documentation, including procedures, policies, and records, for review during the audit (e.g. station performance, training status),
- Conduct a thorough review of the company's monitoring program and other data sources, such as SMS, to identify potential risks and areas of focus (e.g. review of safety occurrences raised against a station, review of corrective actions put in place to address safety occurrences and concerns),
- Review previous audit reports and non-conformities.

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2b.6.2 Conducting the Audit

2b.6.2.1 Opening Meeting

Every audit starts with an opening meeting followed by the actual on-site audit. Every DHL auditor shall:

(a) Conduct a formal meeting with the department's management team or auditee at the beginning of the on-site assessment phase of the audit,
(b) The opening meeting should address the following:

1. Introduction of the auditor(s) and representatives of the department,
2. Roles and responsibilities of the auditor(s) and the auditee,
3. Exchange of lines of communication during the audit,
4. Audit objective (i.e. determine the level of conformity with company standards and procedures),
5. Scope of the audit,
6. Planned schedule of all audit activities, including the closing meeting,
7. Methods and procedures used to conduct the audit,
8. Criteria for establishing conformity with company standards and procedures (i.e. “implemented”),
9. Administrative arrangements and facilities to be used during the audit,
10. Arrangements for observations of operational activities,
11. Method of keeping the department/auditee informed of audit progress,
12. Method of reporting findings to the department/auditee,
13. Closing meeting (date / time / location / participants),
14. Post-audit follow-up and an overview of the process for closing findings,
15. Confidentiality of the audit program, and
16. Conditions that may lead to termination of the audit.

Audit Progress

During the audit, the auditor shall inform the auditee about the audit progress and potential findings or observations on a regular basis.

2b.6.2.2 Verification of Implementation

The DHL Audit Program focusses on assessing the implementation of all requirements outlined in the audit checklist. The rationale behind is that all standards are documented in DHLAGOM and that all internal parties as well as 3rd party service providers are (contractually) required to work according to DHL standards.

The process of confirming implementation typically comprises of two distinct elements and the auditor needs to assess that:

(a) Standards/requirements are established, activated and integrated (i.e. the required activities are in place), and
(b) Standards/activities are monitored and evaluated, as necessary, for continued effectiveness (i.e. how does the organization ensure that the conducted activities are effective).

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2b.6.2.3 Verification of Documentation and Implementation

Next to the verification of implementation, documentation will be checked for local requirements that are not part of the DHLAGOM manuals (e.g. local Training Programs or local SMS requirements).

To assess whether a standard is “documented”, the auditor shall look for a publication of the required content in a controlled document (e.g. local SOPs, manuals).

Questions that require a documented and implemented assessment are highlighted in the question guidance as “Documented and Implemented Standard”.

2b.6.2.4 Sources of Evidence

The verification of implementation shall be based on factual evidence that is gathered as a result of various activities undertaken by an auditor during the course of an audit, such as:

(a) Reviewing documentation,
(b) Interviewing personnel, and
(c) Observing the conduct of operational activities and processes.

Documentation Review

Normally, the first step in the evidence collection process is a review of manuals and other relevant documentation to determine if and how a requirement is documented by the audited organization.

Interviewing Personnel

An auditor conducts interviews of operational personnel during an audit for the purpose of gathering the supporting evidence needed to determine conformity with requirements and/or standards. Preparation is important to ensure effective audit interviews. An auditor shall:

(a) Study the audit checklist in advance and prepare specific questions for each anticipated interview situation,
(b) Be proficient in posing questions in a way that will create productive dialogue and elicit information from interviewees.

Observing Operations

Observing and assessing facilities and/or actual operations during an audit is necessary for the corroboration of documented evidence to assess conformity or non-conformity as to the implementation of a requirement.

The auditor should:

a. Attempt to observe activities that represent normal operations of the department,
b. Make every effort to prevent the auditee from ensuring that the auditor only observes activities that are conducted by individuals that might have a significantly higher level of qualification than that of typical front-line operational personnel.

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Other Methods

If interviewing or observing auditee activities are not sufficient for objective proof of implementation, sampling is necessary. There are many different sampling methods, including random sampling and judgmental sampling:

(a) With random sampling, each item in the population has the same probability of being selected as part of the sample as any other item. For example, the auditor would randomly select three training records from all training records available.
(b) Judgmental sampling uses personal knowledge or experience to select the items to be sampled. For example, based on experience, it may be known which types of items are more likely to be in non-conformance, which types of items have had problems in the past, or which items are a higher risk to the organization.

2b.6.2.5 Checklist Execution

During the audit the actual state has to be reviewed. The auditor shall ensure:

(a) All checklist items are performed. For gathering the relevant information, the methods described in the previous sections should be used,
(b) Non-conformities or non-compliances and/or observations are recorded on the relevant audit checklist.

Any item from the checklist that is not applicable shall be marked accordingly as not applicable in the checklist. If any item could not be audited, this shall also be recorded in the audit checklist accordingly.

2b.6.2.6 Audit Findings

If a deviation from the audited standard/requirement is identified, a finding or observation shall be raised by the auditor:

(a) Non-conformity (finding).

Note: A non-conformity is the nonfulfillment of standards/requirements contained in regulations or other desired standards as determined by the auditor.

(b) Observation.

Note: Observations are recommendations which are usually provided for the areas that comply with desired standards/requirements, but where the process or area deserves management attention and improvement due to potential cost problems or inefficiencies.

Within DHL each non-conformity is graded based on the severity of the finding as follows:

1) Level 1

A Level 1 finding shall be raised if:

- Any significant non-compliance / non-conformity is detected with the applicable requirements of regulation or associated implementing rules, company procedures and manuals, or with any terms of approval or certificate which significantly lowers safety and/or security margins,
- During the audit there is evidence of mal practice or fraudulent use of the respective organization's approvals or certification,
- It is evident that either a previous finding (Level 2) has not been closed to a satisfactory standard and a repeat finding is to be issued or where an escalation is necessary due to compounded safety and/or security issues (i.e. repeated findings that have a signification safety/security impact).

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In all such circumstances, Global Airside, Regional Airside and the concerned Airline must be advised about all Level 1 findings immediately by email. In addition, other key management personnel shall also be notified if the finding falls within their respective areas of responsibility so as to establish root cause, corrective / preventive action and subsequent management follow-up strategy.

An immediate correction shall be taken before the next operational cycle to reduce the seriousness of the finding. Corrective and preventive actions shall be taken within 7 calendar days.

2) Level 2

A Level 2 finding shall be raised for:

- A non-conformity that is detected with the applicable requirements of regulation or associated implementing rules, company procedures and manuals, or with any approval or certificate that could lower safety and/or security margins.

Corrective and preventive actions for Level 2 Findings must be implemented within 30 calendar days. This is extendable up to 90 days as a one off. The justification for extending the finding deadline must be recorded in IQSMS. After the 90 days, no further extensions are possible.

3) In addition, an auditor can issue an observation. An observation is a recommendation that is based on evidence of a non-conformity with a recommended practice, which should be considered by the auditee as advice only. Observations do not require feedback / acknowledgement. Corrective action to address a recommendation is optional.

Risk Assessments

All findings shall be risk assessed by the auditors in IQSMS. Further guidance is provided in section **2b.11.4.1 - Risk Ratings**.

2b.6.2.7 Closing Meeting

At the end of the on-site phase of the audit, the closing meeting takes place. The auditor shall:

(a) Summarize the audit scope and audited areas and activities,
(b) Provide the audit result overview (i.e. non-conformities / observations),
(c) Appoint the responsible non-conformity owner,
(d) Inform the auditee about the process for accepting a corrective action plan, audit follow up, and post audit communication.

During the closing meeting the auditor shall provide a short debrief of the audit and associated non-conformities and observations. All results, observed deviations and also examples of good progress shall be discussed and agreed. The responsible head of department or relevant representative should be present at the debriefing. One point of contact shall be nominated (normally the local Quality Manager) for all non-conformity closure communication. This shall be the person who has been set-up with an IQSMS log in during the audit preparation phase.

If audit results affect areas / departments, originally not involved in the audit process, the auditor shall ensure that these departments / responsible persons will be informed about the results and associated findings.

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2b.6.3 Audit Report and Corrective Action Record

Once the execution of the audit is completed, an audit report shall be distributed. The audit report must summarize the conducted audit and present appropriate findings and recommendations. The content of this report and its results should not be a surprise but a result of interim reports provided to the auditee throughout the audit engagement. The audit report must present a current and objective picture of the situation, allowing management to take the action deemed necessary. Management shall use the audit report as a basis of accurate, reliable and useful information from which informed decisions can be taken.

The audit report shall:

(a) Inform all relevant parties about what was audited and what was found,
(b) Present appropriate conclusions and findings that lead to recommendations reflecting cost-conscious, workable and timely solutions to audit objectives,
(c) Present a current and objective picture of the situation, allowing management to take the action deemed necessary. Management uses the audit report as a basis of accurate, reliable and useful information from which informed decisions can be taken. The audit report should have the following minimum information:
    1. Executive summary,
    2. General audit information (e.g. station set up),
    3. Audit team,
    4. Scope,
    5. Objectives,
    6. Criteria,
    7. Methodology,
    8. **Non-conformities** and observations,
    9. Conclusions.

One audit report will be issued per location audited, regardless of how many entities (organizations) are in scope of the audit. All findings will be allocated to the entity where the non-conformity was identified.

Corrective Actions Record (CAR)

Audit results and non-conformities shall be recorded, addressed and tracked in IQSMS. A corrective action record (CAR) will be automatically produced for each finding. The CAR is where all the corrections are recorded and includes the following fields:

a. Non-conformities,
b. Root cause analysis,
c. Corrective action plan with expected implementation date,
d. Corrective and preventive actions taken with actual date when actions were put in place,
e. Person(s) responsible for development and implementation of corrective and preventive actions.

When entering non-conformities and associated CARs in IQSMS, the auditor must ensure the finding is described in detail. Findings should be based on standards, policy and best industry practices with appropriate references where applicable. Findings must be specific, clear and concise.

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Approval Process

After the audit report and CARs have been generated by the auditor in IQSMS, the report and associated non-conformities shall be reviewed and approved by a nominated approver. Reports will only be distributed by IQSMS once the approval has been granted in the system.

In case an audit report is rejected, the necessary corrections have to carried out by the auditor after which the report will be submitted for approval again.

It is the responsibility of the Regional Airside Teams / Airlines to nominate approvers and to communicate them to Global Airside.

Audit Report Distribution

The audit report shall be distributed within 7 calendar days after the closing meeting. It is up to the Regions / Airlines to define the final distribution list of relevant parties that shall receive a copy of each report, however, as a minimum the following parties shall be included:

- DHL Country Manager and Country Operations Manager,
- DHL Regional Management,
- Training and Airside Support Departments as appropriate,
- Regional Audit Program/, Quality, Safety and Security Managers as appropriate,
- Global Airside / Regional Airside, and
- Auditee(s).

Rescheduling of Audits

Once the audit report has been completed, a new audit needs to be scheduled for the following year. It is the responsibility of the auditor the schedule a new audit. The original planned audit date shall be used to calculate the next due date for the following year. As a target date the last day of the month shall be chosen (e.g. scheduled audit date 31st March).

2b.6.4 Audit Follow-up

2b.6.4.1 General Guidlines

DHL has implemented a process for addressing findings including:

(a) Determination of root cause(s),
(b) Development of Correction(s), as appropriate, to address findings,
(c) Development of corrective and preventive actions, as appropriate, to address findings,
(d) Implementation of corrective and preventive actions in appropriate operational area(s),
(e) Monitoring and evaluation of corrective and preventive actions to determine effectiveness.

After the audit report has been distributed, the auditee shall provide the root cause(s) and the Corrective Action Plan (CAP) for all Level 2 findings to the auditor within 7 calendar days after the closing meeting. For a Level 1 finding, the CAP shall be provided within 3 calendar days.

Note: If the auditee attempts to address a non-conformity through implementation of immediate corrective action, the auditor shall, while onsite, determine if the corrective action is comprehensive and permanent and results in a conformity status. It is upon the discretion of the auditor to accept the corrective action(s) or to record an audit finding.

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2b.6.4.2 Root Cause Analysis

Root Cause Analysis (RCA) is a method used to address a problem or non-conformity, in order to determine the source or origin of the problem. It is used to correct or eliminate the cause of the problem/ non-conformity and prevent its reoccurrence.

A RCA may be conducted in many different ways. One of the most effective methods, frequently used in the airline industry, is the “5 WHY” problem solving technique. “5 WHY” is a questions-asking method used to explore the cause/effect relationships underlying a problem.

Ultimately, the goal of applying the “5 WHY” technique is to determine a root cause of a defect or problem.

Benefits of the “5 WHY's” are:

(a) It helps to quickly identify the root cause of a problem,
(b) It helps determine the relationship between different root causes of a problem,
(c) It can be learned quickly and doesn't require statistical analysis to be used.

RCA Procedure

The following steps are recommended for a RCA procedure:

(a) Identify and clearly define the problem,
(b) Gather data and identify all potential causes,
(c) Break down the system problem to its basic events or conditions (i.e., further describe what happened),
(d) Identify immediate causes (e.g., continue asking “WHY” to identify root causes - approx. five times),
(e) Check your logic and facts (i.e., eliminate items that are not causes or contributing factors).

Determining to root cause of a finding and conducting a 5WHY Analysis is mandatory within IQSMS for all findings.

2b.6.4.3 Corrective Action Plan (CAP)

Within DHL findings that result from audits conducted are addressed by developing and implementing:

(a) Correction(s), i.e. immediate action(s) taken to rectify a situation/non-conformity,
(b) Corrective action(s), to eliminate the cause of a detected non-conformity, other undesirable situation/condition or result (i.e. to eliminate the root cause),
(c) Preventive action(s) to eliminate the cause of a possible or potential non-conformity (risk) or other undesirable potential situation (that has not happened yet, but where there is a possibility of it happening).

The CAP should consist of an acceptable overall proposal by the auditee to implement corrective and preventive actions to close all findings. A comprehensive CAP should include proposed implementation of comprehensive and permanent corrective action(s). The CAP should include processes to ensure that the corrective actions taken are effective and that the effectiveness has been verified. Preventive actions aim to eliminate causes that would eventually create a potential hazard or undesirable situation.

2b.6.4.4 Accepting the Corrective Action Plan

It is the responsibility of the auditor to review and reach agreement with the auditee on an acceptable corrective action plan (CAP) within an adequate time after the audit.

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2b.6.4.5 Closing Findings

After the planned corrective actions are accepted by the auditor, the auditee has 23 calendar days to specify the actions taken as Correction, Corrective Action, and Preventive Action. Evidence of implementation must be provided. It is the responsibility of the auditor to review the actions and evidence of implementation. Once the auditor is satisfied with the evidence received, the finding shall be closed.

If a Level 1 finding has raised during the audit, the Correction (i.e. immediate action) shall be taken before the next operational cycle. The Corrective Action Plan (CAP) shall be submitted within 3 calendar days and evidence of Corrective and Preventive actions taken within 7 calendar days.

It is the responsibility of the auditor to declare a finding closed after the implementation of comprehensive and permanent corrective action(s) has been verified. The auditor shall document in the CAR:

(a) A description of the method used for verification of corrective action implementation.
(b) The justification for the use of the method described above.
(c) A description of the evidence that provides proof corrective action has been implemented.

The auditee shall be notified about each non-conformity closure.

Extension of Deadlines

Corrective and preventive actions for Level 2 Findings must be implemented within 30 calendar days. This is extendable up to 90 days as a one off. The justification for extending the finding deadline must be recorded in IQSMS. After the 90 days, no further extensions are possible.

Open and Overdue Findings

Any open finding will be re-evaluated during the next audit. If the issue has still not been resolved, the open finding will be transferred to the new audit. The old/previous audit will be closed.

Open and overdue audit findings shall be discussed during the Management Review meetings as outlined in **2. Global Airside Safety Management System (SMS)**.

2b.6.5 Audit Closure

Once all non-conformities have been closed, the audit will automatically appear as closed in IQSMS.

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2b.7 Communication with Authorities

It is the responsibility of the Regional Airside Teams to communicate all audit findings to the concerned operators. It is the responsibility of the operator to demonstrate the corrective action plan implementation to the satisfaction of the competent authority or organization where regulated within the period agreed.

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2b.8 Monitoring and Evaluation of Corrective actions to Determine Effectiveness

Corrective or preventive actions arising out of non-conformities identified during an audit will be implemented to the satisfaction of the assigned auditor, who shall ensure that these corrective actions shall be adequate to address the root cause of the non-conformity.

In addition, DHL is committed to monitor and evaluate the effectiveness of corrective actions to ensure that defined policy, operational and maintenance standards are continuously complied with. This is done on a continuous basis to eliminate the cause of any unsatisfactory performance, for instance, by:

(a) Setting up additional audits if deemed necessary.
(b) Monitoring safety reports and reported hazards in the concerned areas/departments/stations.
(c) Monitoring overall performance to detect sub-standard performance.
(d) Reassess the risk of the finding.

As a minimum, the evaluation for effectiveness shall take place during the next scheduled audit. Additional evaluations are optional and should be performed as required.

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2b.9 Escalations

It is the auditor's responsibility to follow-up on all open audit findings. In case an escalation is required, the issue shall be addressed to the Regional Audit program Manager. It is the responsibility to escalate to DHL Management within the respective region as appropriate. Escalations shall also be briefed during the Management Review.

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2b.10 Data Management

As part of the audit documentation the following documents shall be retained as a minimum:

(a) Audit schedules.
(b) Audit reports.
(c) Checklists.
(d) Non-conformities.
(e) Response to non-conformities, follow-up and closure of non-conformities:

- Correction.
- Corrective action.
- Preventive action.

(f) Evidence of implementation and monitoring.

Electronic Database

Therefore, DHL is using IQSMS as an electronic database to ensure the effective management of information and data associated with audits conducted under its monitoring program:

(a) The electronic database serves all employees as a focal point for all safety, security and quality compliance and conformity data, materials and activities, and can be used to create management awareness of areas in need of attention,
(b) For security purposes, all users have registered logon IDs and passwords,
(c) All data should be saved on company servers with appropriate backup procedures.

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2b.11 IQSMS Procedure

2b.11.1 IQSMS System Administration

2b.11.1.1 User Profiles

The responsibility of administering the IQSMS system lies with Global Airside. This includes the assignment of user roles in the system.

In regards to the IQSMS Quality Module, four user roles are available:

- QM Entity – For Regional Audit Program Managers / Airline Quality Managers and Approvers
- Auditor – For all Auditors
- Auditee – For all Auditees
- Readers – For anyone requiring read access to the IQSMS Database (e.g. Airline Representatives)

It is the responsibility of the Regional Airside Teams / Airlines to notify Global Airside about any new IQSMS user and the required access. Global Airside shall then assign the user profile accordingly.

Any requests should be addressed to **GlobalAirside.Quality@dhl.com**

The Global Airside System Administrator shall assign the user roles as follows:

QM Entity

Step 1: Assign User Role

Go to Administrator Functions – General – Users. Select user roles:

Quality Module

- QM Entity
- Auditor
- Auditee
- Evaluator Quality Module
- Audit Reader
- QMS Statistics

Step 2: Assign Entity

Go to Administrator Functions – Quality – Audit Users:

Once the user roles have been assigned, the correct entity/entities (i.e. geographical region for which the user role is valid for) shall be assigned to each user role.

Note: The QM entity role overwrites any regional selection. That means, QM entity user rights can only be activated for an entire region, not for individual stations within a region.

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Auditor

Step 1: Assign User Role

Go to Administrator Functions – General – Users. Select user roles:

Quality Module

- Auditor
- Evaluator Quality Module
- Audit Reader
- Auditee
- QMS Statistics

Step 2: Assign Entity

Go to Administrator Functions – Quality – Audit Users:

Once the user roles have been assigned, the correct entity/entities (i.e. geographical region for which the user role is valid for) shall be assigned to each user role.

Auditee

Step 1: Assign User Role

Go to Administrator Functions – General – Users. Select user roles:

Quality Module

- Auditee

Step 2: Assign Entity

Go to Administrator Functions – Quality – Audit Users:

Once the user roles have been assigned, the correct entity/entities (i.e. geographical region for which the user role is valid for) shall be assigned to each user role.

Audit Reader

Step 1: Assign User Role

Go to Administrator Functions – General – Users. Select user roles:

Quality Module

- Audit Reader

Step 2: Assign Entity

Go to Administrator Functions – Quality – Audit Users:

Once the user roles have been assigned, the correct entity/entities (i.e. geographical region for which the user role is valid for) shall be assigned to each user role.

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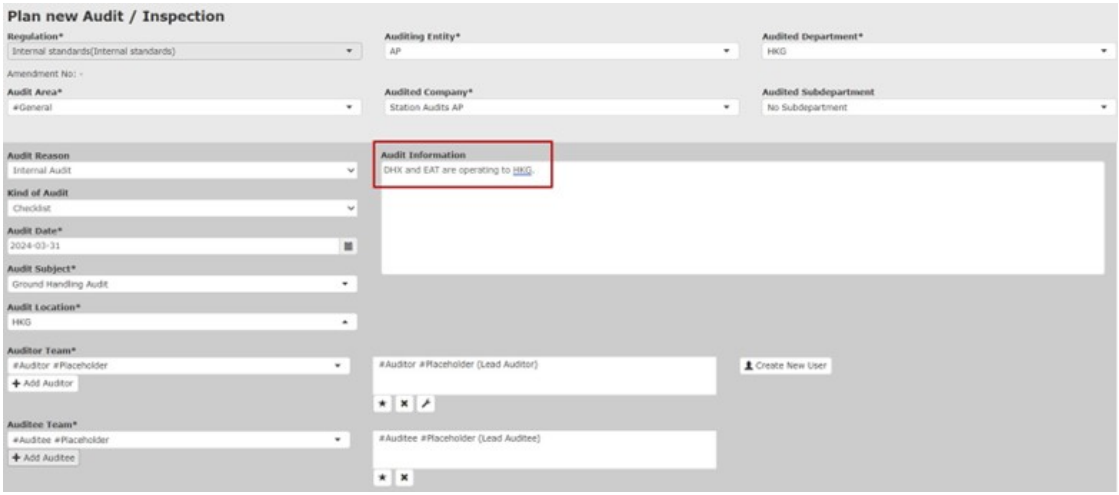
2b.11.1.2 Entering Audits into IQSMS

All audits shall initially be entered into IQSMS by the Global Airside System Administrators. The following data shall be entered:

- Regulation : Internal Standard
- Audit Area: General
- Auditing Entity: Select the Region to be audited
- Audited Company: Select Station Audit in the Region to be audited
- Audited Department: Select three-letter Airport Code (e.g. EMA, LEJ or CVG)
- Audited Subdepartment: No Subdepartment
- Audit Reason: Internal Audit
- Audit Information: Specify which airlines are operating to a certain location and, if known, which entities (i.e. organizations) shall be audited
- Kind of Audit: Checklist
- Audit Date: Select the last day of the month in which the audit is scheduled for (e.g. 31st March / 30th April)
- Audit Subject: Ground Handling Audit
- Audit Location: Select three-letter Airport Code (e.g. EMA, LEJ or CVG)
- Auditor Team: Select the Auditor(s) and assign one person as Lead Auditor
- Auditee Team: Select #Audit #Placeholder
- Show planned Audit to Auditee: No
- Audit not performed due to: Select as appropriate



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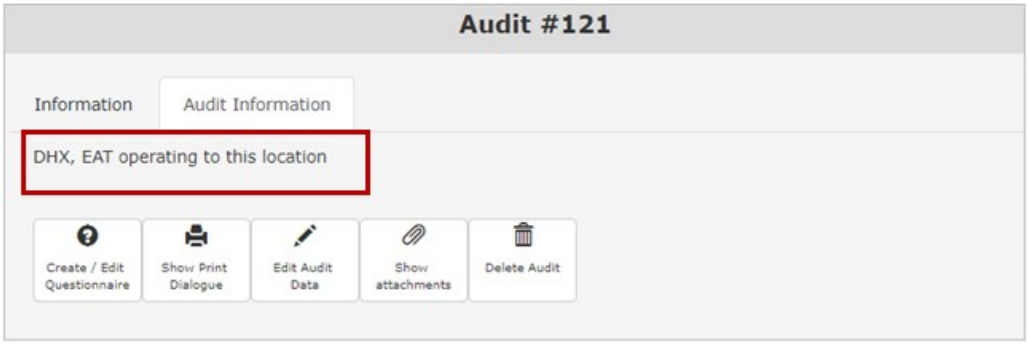
2b.11.2 IQSMS Procedures for Auditors

2b.11.2.1 Audit Preparation

2b.11.2.1.1 Audit Scope

In preparation for an audit, the auditor shall go into IQSMS and confirm the scope of the audit. The Audit Information tab captures which airlines were operating to the station to be audited at the time the audit schedule was produced (December of each year).



The provided information serves as a guide only. It is the responsibility of the auditor:

- To check if the provided information is still accurate and which airlines are operating to a certain location at the time of the audit;
- To identify the station set-up and which entities are therefore in scope of the audit (e.g. by checking old audit reports, contacting the Regional Audit Program Manager or the airlines to identify which SGHAs are in place).

Note: One audit report will be issued per location, regardless of how many entities (organizations) are in scope of the audit. All findings will be allocated to the entity where the non-conformity was identified.

2b.11.2.1.2 Setting up Auditees in IQSMS

During the audit preparation phase, it is the responsibility of the auditor to set up one representative per entity (organization to be audited) in IQSMS. The following process shall be followed:

Step 1: Set up a DHL LDAP, if required

Access to IQSMS requires a DHL LDAP. For external users, it is the responsibility of the auditor to request the LDAP. The following process shall be followed:

Fill in the External User Request Excel template. The template can be found on the Global Airside Ground Ops Audit Program TEAMS channel. It is important to fill in the Excel template correctly. The line manager must be the requesting auditor.

Send the Excel file by email to the European Regional Helpdesk **hgsd@dhl.com**

Provide the following information in the email body:

- Hi Team, could you please raise a ticket to PIAM team to create an LDAP accounts for the attached external users. They require an LDAP account in order to access IQSMS Global Airside.
- Reason: Request for external LDAP account for Global Airside IQSMS.
- Additional Parties to be notified: **GlobalAirside.Quality@dhl.com**

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The European Regional Helpdesk will create an IT ticket and forward it to the People Identity & Access Management (PIAM) team. PIAM will then create the LDAP. Once the LDAP has been created, login credentials will sent to the auditor who made the request. The auditor will receive two emails:

- User ID and user name
- Password

The emails are sent by PIAM-PROD.no-reply@dhl.com

It is the responsibility of the auditor to communicate the login credentials to the external user. In addition, it is the responsibility of the auditor to communicate that the external user must set up a Multi Factor Authentication (MFA). A guide on how to set up the MFA can be found on the Global Airside Ground Ops Audit Program TEAMS channel.

Once a DHL LDAP is available and the external user has set up the MFA, the auditee will have to log into IQSMS. This will automatically create a new user in the system. It is the responsibility of the auditor to notify Global Airside about the new auditee. Global Airside will then assign the correct user profile.

All problems with external LDAP accounts (e.g. forgotten passwords, disabled accounts) shall be addressed to the European Regional Helpdesk **hgsd@dhl.com**

Step 2: Request user profiles from Global Airside

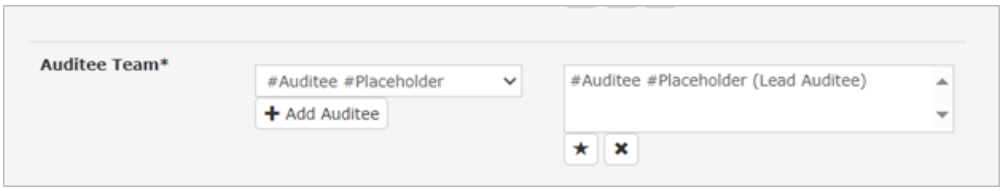
It is the responsibility of the auditor to inform Global Airside about any new auditee (i.e. name, company and station/location). The Global Airside System Administrator shall then assign the correct user role and confirm back to the auditor once the user role has been configured. Once the correct user role has been assigned in IQSMS, the computer-based training (CBT) will be available.

Similarly, it is the responsibility of the auditor to notify Global Airside about any internal auditees in order to assign the correct user role in IQSMS.

Step 3: Replace the dummy auditee in IQSMS

During the annual scheduling, a dummy auditee (#Auditee #Placeholder) will be assigned to each audit. Once the actual auditees have been confirmed and set up with an IQSMS account/login, the dummy will have to be replaced with the actual auditees.

Please note that only one audit will be conducted per location. Therefore, auditees form all entities (organizations) that will be audited in a given location will have to be added as Auditee Team. For instance, if three different entities are involved in the operations at a given station, three auditees will have to be entered. In case of multiple entities, the DHL representative shall be assigned as Lead Auditee.



Note: In case an auditor has not been allocated during the annual scheduling, a dummy auditor (#Auditor#Placeholder) will be entered into the system. It is the responsibility of the auditor to check if the correct auditor was assigned to an audit and to request the replacement of any dummies, if applicable, from Global Airside.

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2b.11.2.1.3 Creating Questionnaires IQSMS

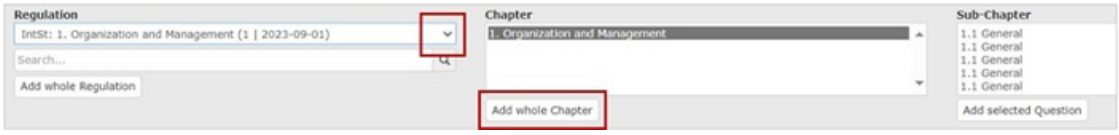
As part of the audit preparation, the auditor is required to compile the relevant checklist in IQSMS. Multiple checklists are available as individual modules. It is the responsibility of the auditor to select the relevant modules following the guidance provided in Table 1 (section **/reader/#/1678657/h/2b.6.1.5**).

Step 1: Creating a Questionnaire

The checklists are available in the “Create / Edit Questionnaire” section of the audit.

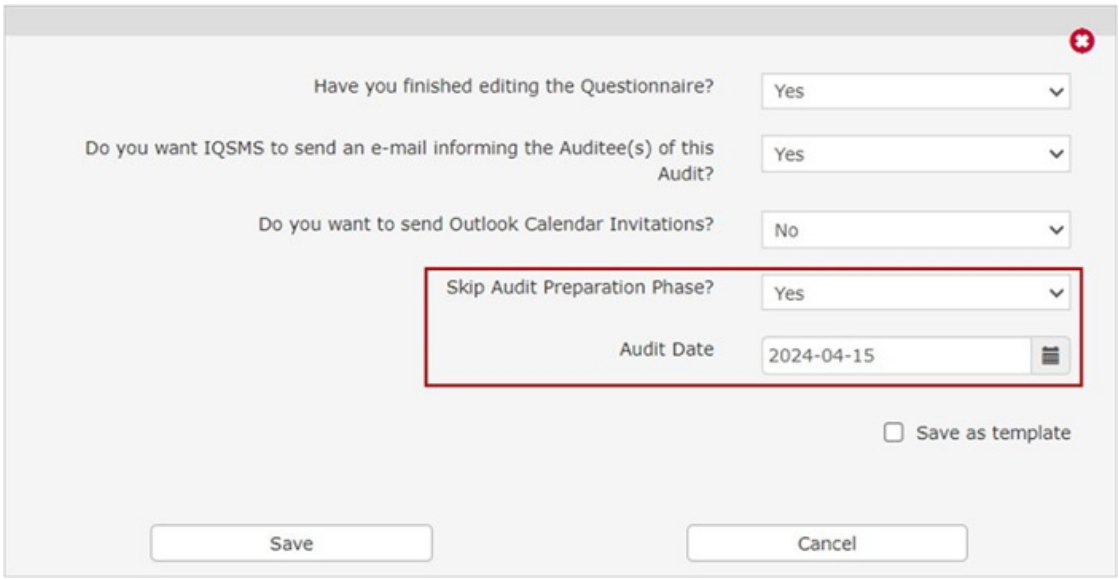
Under “Regulation” select the applicable module, then highlight the “Chapter” and select “Add whole Chapter”. Repeat this step until all applicable modules have been added to the checklist. Once done, click on “Save”.

Once a module has been selected, all questions in this module are applicable. Therefore, only add “Whole Chapters”, do not select “Sub-Chapters”. It is not permitted to delete questions from a given module.



Step 2: Finishing the Questionnaire

Once the checklist has been created by selecting the appropriate chapters and clicking “Save”, a new window appears. The following selections shall be made:



It is important to select “Yes for Skip Audit Preparation Phase”. In addition, the actual start date of the audit as agreed with the auditees shall be entered at this stage.

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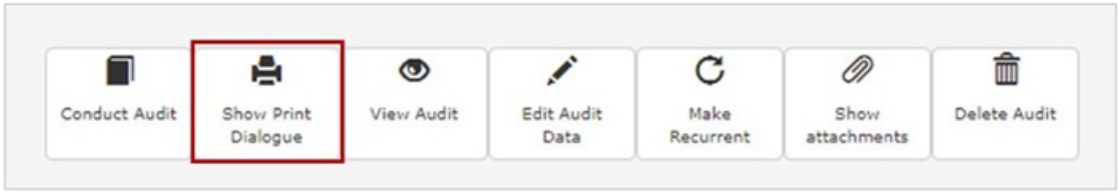
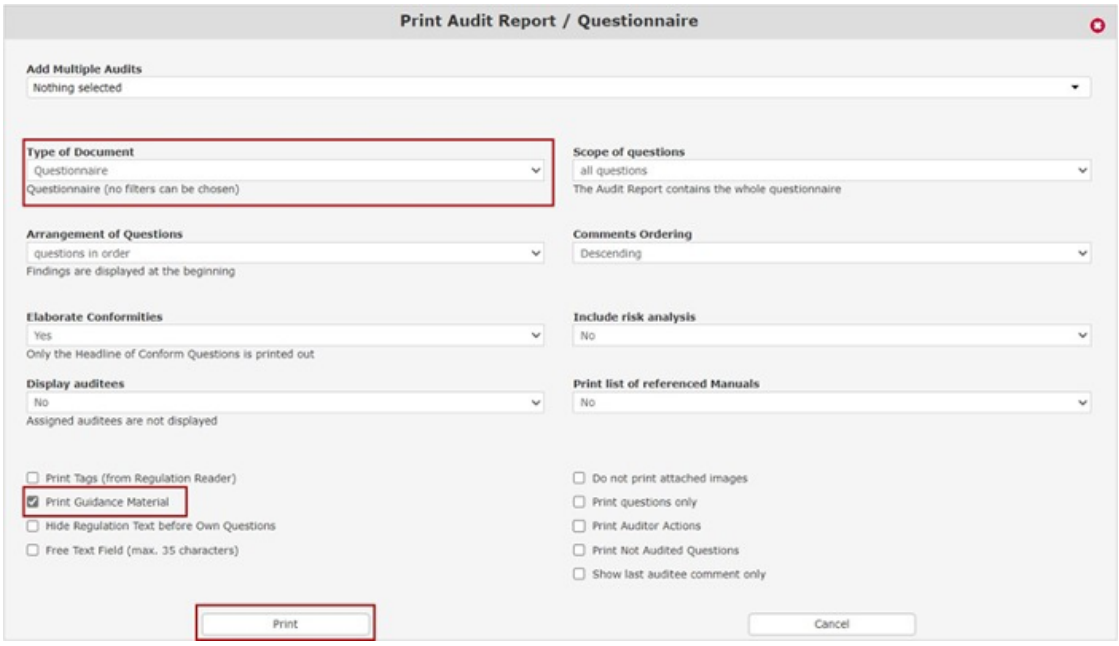
2b.11.2.1.4 Communicating the Questionnaire with the Auditees

After the questionnaire (checklist) has been generated, it can be printed and communicated to all auditees.

Go to the audit and select “Show Print Dialogue”.



Select “Type of Document = Questionnaire” and “Print Guidance Material”. Click on “Print”.



A copy of the questionnaire will be downloaded and can now be communicated to the auditee by email.

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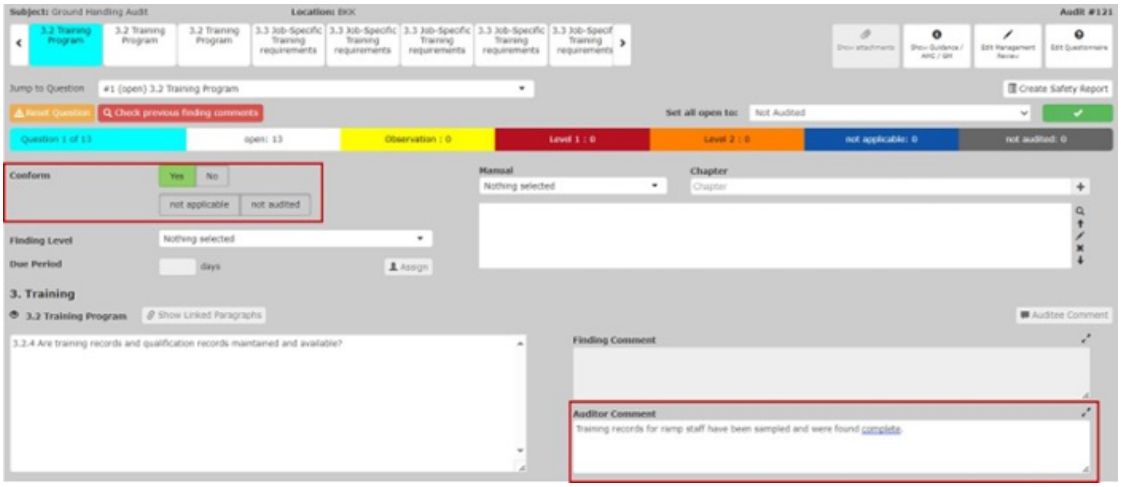
2b.11.2.2 Conducting the Audit

2b.11.2.2.1 General Guidelines

While conducting the audit it is mandatory to answer every question in the generated questionnaire. The following details are mandatory:

- Indicate conformity or non-conformity
- Complete “Auditor Comment”: Please fill in a comment for each question and describe what has been observed/checked during the audit
- For non-conformities: Indicate Level 1 or 2 Finding; assign auditee to action the finding; complete “Finding Comment” and “Auditor Comment”
- If a question is not applicable or marked as not audited, a justification shall be provided in the “Auditor Comments”
- Complete the Executive Summary under “Edit Management Review”

Example Conformity:



Example Non-Conformity:



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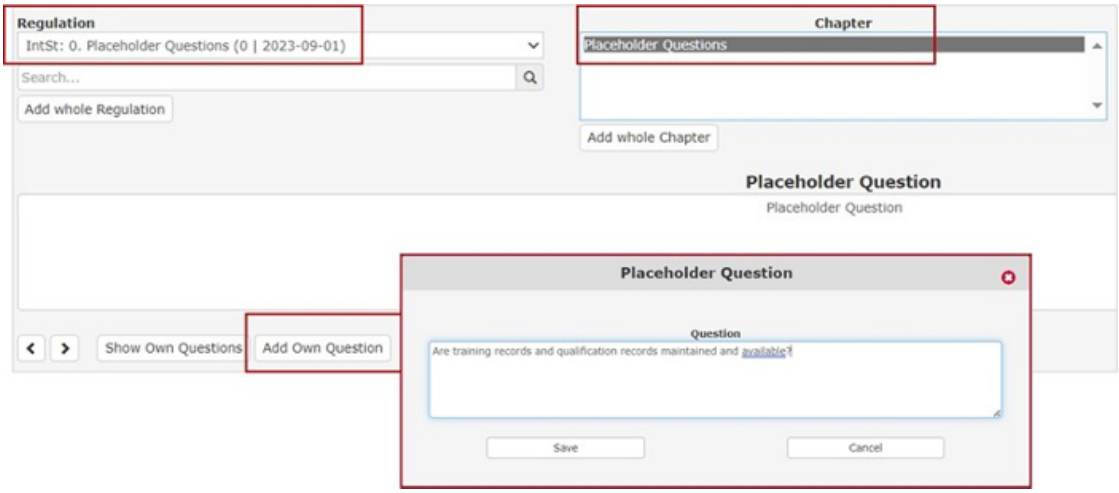
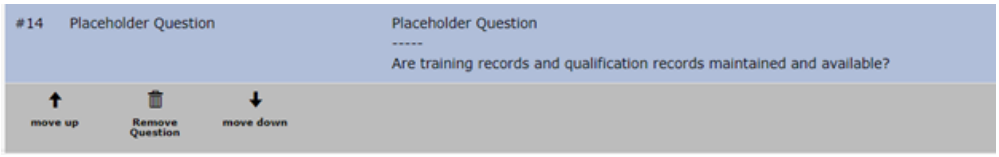
2b.11.2.2.2 Adding Additional Questions

IQSMS only allows raising one finding per question. In case multiple findings have to be raised for the same question, it becomes necessary to create an additional question in the question bank. This is possible in the “Edit Questionnaire” section of the audit. The following steps shall be taken:

- Regulation: Select “0. Placeholder Questions”
- Chapter: “Highlight Placeholder Questions”
- Click on Add Own Question
- Copy the text of the question that you want to clone



Once the question has been added, it is possible to move its location by using the “move up “ and “move down” arrows.



A new finding can now be raised for the “placeholder question” and assigned to an auditee.

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2b.11.2.2.3 Finishing the Audit

Once all questions have been completed, the “Finish Audit” button becomes available.

Step 1: Review Data

The following fields shall be completed / reviewed:

- Define “Audit Published” date: This is the date that will be used to calculate the available finding closure time. The auditee will have 30 days from the “Audit Published” date to complete Level 2 findings (7 days for Level 1 findings).

  Note: This field needs to be manually adjusted by the auditor, if required. As a default, it will show the date the audit was conducted. If additional time for audit approval is required, this has to be taken into account by the auditor and a date in the future selected.

  For instance, an audit was conducted on 31st March and the checklist completed in IQSMS the same day. It is estimated that the approval of the report will take approximately 3 days. Therefore, the 3rd April should be selected as “Audit Published” date. The finding closure time will be calculated as 30 days from 3rd April for a Level 2 finding.

- Review “Audit Start Date”, “Audit Location”, and “Audit Subject”: These fields are pre-defined and it should typically not be necessary to change them
- Review the Executive Summary under “Management Review”
- Review the “Auditor Team” and “Auditee Team” for completeness

Step 2: Define Distribution List

Define the distribution list for the audit report. Guidelines for the minimum distribution list were provided in section **2b.6.1.3 - Notification**.

Note: The audit report can be sent directly from the system to all recipients by entering all relevant email addresses. Alternatively, the auditor may decide to send the report to themselves and then distribute it further by email. It is upon discretion of the Regional Audit Program Managers / Airline Quality Managers to decide how the reports will be distributed, however, the use of the system is encouraged.

Step 3: Reschedule the Audit

It is the responsibility of the auditor to reschedule the audit to the following year. The original planned audit date shall be used to calculate the next due date for the following year. The audit shall be rescheduled to the last day of the month the following year.

For instance, an audit was originally scheduled for the month of September 2023, but took place on 10th October 2023. The re-schedule date will be 30th September 2024. Click “Reschedule & Send for Approval”.

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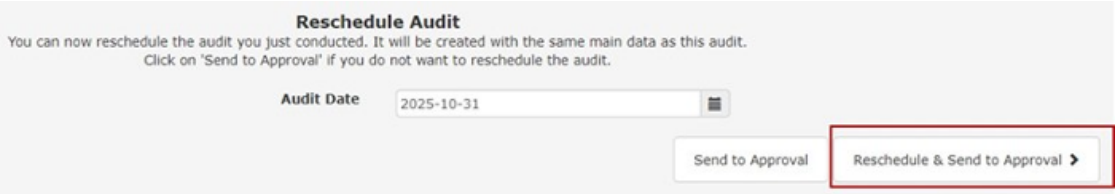


The rescheduled audit dates will be reviewed as part of the annual scheduling conducted by Global Airside (December of each year).

2b.11.2.3 Audit Approval

Before the audit report will be sent out to the defined distribution list, it requires approval from a second person (i.e. approver) in IQSMS. It is the responsibility of the Regional Airside Teams / Airlines to communicate nominated approvers to Global Airside. Approvers will be assigned the QM Entity role.

Please note that all automated emails advising QM entity users about pending approvals have been disabled in IQSMS.

It is the responsibility of the auditor to advise the auditing entity (Regional Airside department / Airline) once a report is ready for approval.

As a rule, if an audit is being conducted by a regional airside auditor, it shall be approved by the QM entity user(s) of that regional airside department. If an audit is conducted by an airline auditor, the audit shall be approved by the QM entity user(s) of the concerned airline.

QM entity users that are not involved in a given audit shall never approve audits within IQSMS.

If the audit report is being approved, the system will automatically send the report to the pre-defined distribution list.

If an audit report is being rejected by an approver, the auditor will automatically be notified and the audit status will change back to audit being conducted. The auditor can adjust the report in the system accordingly. Once all changes have been made, the report will be sent out again for approval. The auditor shall advise the applicable QM Entity accordingly.

2b.11.3 Handling Audit Findings for Auditees

Once the audit report has been sent out, it is the responsibility of the auditee to close the open non-conformities. Open findings will be shown in the auditee's dashboard or via the Auditee tab.

Step 1: Root Cause Analysis and Corrective Action Plan (CAP)

It is the responsibility of the auditee to complete the root cause analysis and to come up with a corrective action plan (CAP) within 7 calendar days for a Level 2 finding and within 3 calendar days for a Level 1 finding.

Three actions are required:

- Complete the 5WHY Analysis
- Summarize the Root Cause
- Propose a Corrective Action Plan (CAP)

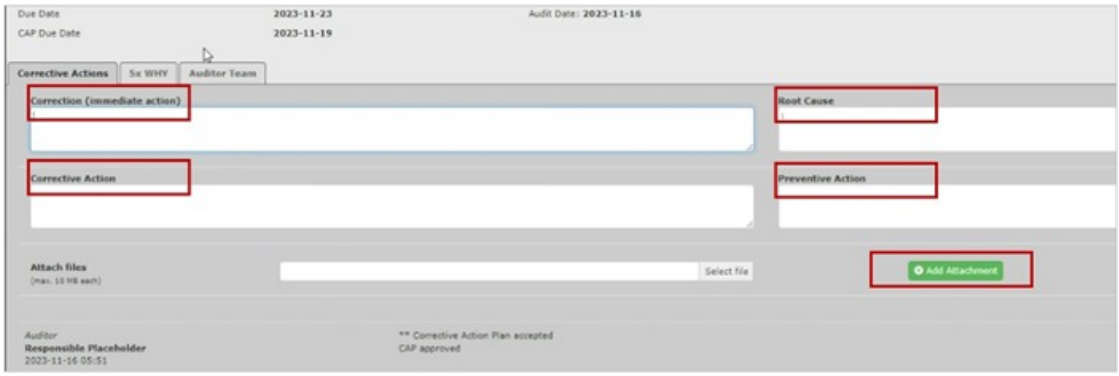


Once the auditee has completed the required actions and saved the record, an automatic email will be sent to the auditor advising that the CAP has been completed.

Step 2: Corrective and Preventive Action

Once the auditor has approved the CAP, it is the responsibility of the auditee to close the open finding. Five actions are required:

- Summary of Root Cause (this field is typically pre-populated from Step1)
- Correction (i.e. immediate corrective action taken)
- Corrective Action (i.e. action taken to address the root cause)
- Preventive Action (i.e. action taken to prevent any future occurrence)
- Attach Evidence of Implementation



Once the auditee has completed the required actions and saved the record, an automatic email will be sent to the auditor advising that the corrective actions have been taken.

In case the CAP, corrective and/or preventive actions are not accepted by the auditor, the auditee will receive a follow-up email advising that further actions are required. Step 1 and/or 2 shall be repeated as required.

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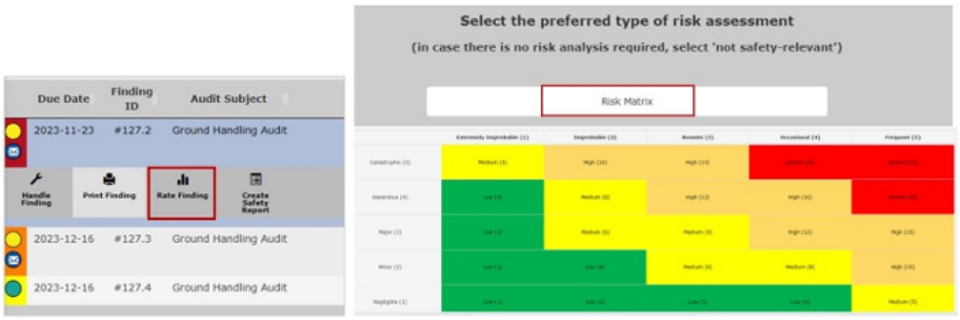
2b.11.4 Handling Findings for Auditors

2b.11.4.1 Risk Ratings

Open findings are displayed to the auditor in the dashboard or via the “Handle Finding” tab.

As part of the audit follow-up, it is the responsibility of the auditor to add a risk rating for each non-conformity after the audit report has been approved and published.

Select “Rate Finding” and “Risk Matrix” and complete the risk rating.



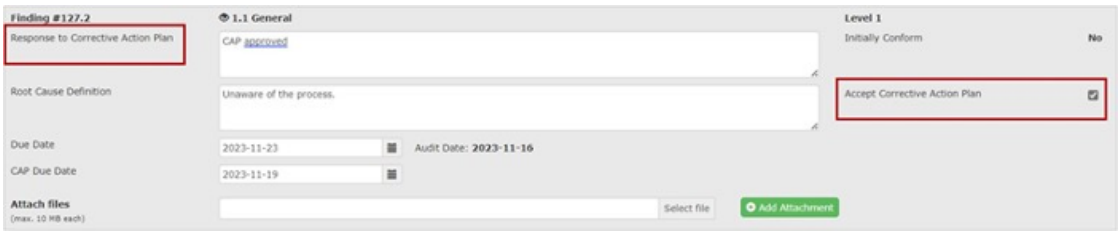
Guidance on the risk matrix used in iQSMS and the probability and severity levels is available in DHLAGOM **2.a Occurrence Reporting and Investigation Procedures**..

It is the responsibility of the Regional Airside Audit Program Managers / Airline Quality Managers to review, and if necessary, to adjust the risk ratings assigned by the auditors. All QM entity users are able to overwrite existing risk ratings.

2b.11.4.2 Accepting the Corrective Action Plan

Once the auditee has entered the corrective action plan (CAP), the system will trigger an email to the auditor advising that corrective actions have been taken.

It is the responsibility of the auditor to accept the root cause analysis and CAP by entering a comment and selecting “Accept Corrective Action Plan”.



In case the root cause and/or CAP are not sufficient, the auditor shall enter a comment into the “Response to Corrective Action Plan” and save the record (without selecting “Accept Corrective Action Plan”). A notification will be sent to the auditee that further actions are required.

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2b.11.4.3 Closure Findings

Once the auditee has entered the corrective and preventive actions, the system will trigger an email to the auditor advising that corrective actions have been taken.

It is the responsibility of the auditor to verify the information provided, including the adequacy of evidence of implementation provided. If the auditee's actions are satisfactory, the finding can be closed.

It is required to enter a comment and to select "Currently Conform: Yes" and "Finding Status: Closed".



In case the corrective actions are not sufficient, the auditor shall enter a comment and save the record. A notification will be sent to the auditee that further actions are required.

2b.11.4.4 Audit Closure

Once all findings have been closed, the audit status will automatically show "closed".

2b.11.5 Notification Overview

The following notifications are automatically triggered by IQSMS:

Approver	Auditor	Auditee
No notifications will be triggered by the system. It is the responsibility of the auditor to inform the QM entity users that a report is pending for approval.		
	Audit Report	Audit Report
	Auditee has completed the root cause analysis & CAP	
		Auditor has reviewed the CAP
	Auditee has completed the correction, root cause, corrective action, and preventive action	
		Auditor has closed a finding
	In case the CAP and/or corrective actions were not accepted by the auditor and additional actions are required by the auditee:	
	Auditee has taken corrective action	
		Auditor has reviewed corrective actions

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