Competency Management Systems

for Aeronautical Meteorological Service Providers

Part 1: Key guidance

0. Introduction
In recent years organizations delivering meteorological information and services to civil aviation have been required to implement a Quality Management System\(^1\) (QMS). Now, many organizations are in the process of implementing a Safety Management System (SMS), highlighting the role of aviation meteorology in operation's safety and associated risks.

ICAO and WMO have identified the growing importance of a competency approach in aviation meteorology and, as a result, Aeronautical Meteorological Personnel (AMP) competencies were defined by WMO and mandated by ICAO as a standard required of AMP providing services to international air navigation\(^2\). The CAeM Expert Team on Education, Training and Competency (ET-ETC) has identified a need for guidance on how organizations manage the different aspects of this competency approach.

This document is intended to guide the development of a structured and consolidated system, fully coherent with QMS and SMS. Thus the term **Competency Management System (CMS)** is used.

The intent is to provide a reference for those organizations developing or wishing to review competency systems already in place. This document is not intended to replace any existing organizational policies on competency management, but rather to refine them.

The guidance can be applied to any organizational structure. A sound CMS aligns organizational needs with personal development needs within the organization, and helps develop a 'competency architecture'\(^3\). The CMS will demonstrate that AMP are competent according to their job descriptions, and that they are continually developing alongside changing technologies and regulations.

The competency management process aligns to the following principles:

1) Demonstrating the commitment of the organization’s leadership to a competency approach;

2) Recognizing meteorology as a critical business activity pertaining to aviation safety;

3) Setting procedures and standards regarding competency of AMP;

4) Consistency of competencies and competency assessment with organization standards;

5) Taking actions to continually improve the competency of AMP.

1. Purpose and Objectives
The purpose of a CMS is to manage, in a logical and integrated manner, a cycle of activities that assures the continual competency of AMP. The aim is that individuals are clear about the performance expected from them, have received relevant training, development, assessment and re-assessment, and they maintain their competency over time.

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\(^1\) ICAO Annex 3, paragraph 2.2.2
\(^2\) ICAO Annex 3, paragraph 2.1.5
\(^3\) A competency architecture describes the common rules for defining competencies within the organization.

It includes the guiding principles that describe how the profiles will be designed - e.g., the format for displaying the competency profile, content for the profile (e.g. behavioural competencies and technical / professional competencies), generic vs. specific competencies, etc.)
A CMS developed in accordance with this guidance should enable staff to perform activities at recognised standards of competency, so that organizations:

- reduce risks;
- comply with regulatory requirements (as defined by WMO/ICAO, national regulators, organizational procedures and priorities);
- meet business objectives; and
- meet quality and safety standards.

2. Competency approach

WMO has developed first and ‘second-level’ competencies for AMP that are to be adapted to organizational requirements to ensure that they are authentic. The second-level competencies cover all aspects of performance and are intended to be linked to current job descriptions.

Competencies should be transferable from one work situation to another, but the extent to which this is possible depends on the context of the competencies.

Assuring AMP competency requires a process of continuous improvement. When people begin to acquire competency for a new task, or begin progressing to a higher level of competency, they will be unaware, at least to some extent, of what they can and cannot do. Through training and development activities, they will first become aware of their limitations and then overcome those limitations to become competent.

The risk is that, through routine or overconfidence, people can once again become unaware of their limitations. To avoid this, monitoring and competency assessment is required at the individual level, and therefore audit and review is needed at the system level.

3. Competency and performance criteria

To be used in a CMS, second-level competencies need to be adapted at a national level by the national regulator or, if adapted by an Aeronautical Meteorological Service Provider, approved by the regulator. Performance criteria have to be authentic according to job descriptions, and documented against applicable rules and regulations.

4. Structure of CMS

In this guidance, we identify five steps in developing a CMS - plan, design, implement, assess/maintain and verify/audit. Each step contains one or more management principles, and for each principle there is a set of recommended actions.
Step I: PLAN
- Specify all work activities to be included in the CMS;
- Define the purpose and scope of the CMS;
- Define roles and responsibilities to be covered by the CMS; and
- Identify applicable rules and regulations.

Step II: DESIGN
- Define the elements that the CMS covers;
- Design repeatable processes and procedures that are consistent with the principles in this guidance;
- Define the quality assurance procedures for all system elements;
- For Aeronautical Meteorological Forecasters: adapt the BIP-M to the area of responsibility and local requirements;
- Design competency criteria according to the job profile;
- Specify how each competency criterion is met, assessed and recorded;
- Establish the tools used for competency assessment and how often the assessment shall be conducted;
- Establish training needs and assessment requirements for each competency criterion;
- Establish tools and methods of CMS improvement.

Step III: IMPLEMENT
- Apply the CMS procedures and methods to selection and recruitment activities;
- Train to the defined competencies associated with the job profile;
- Assess competency;
- Ensure that AMPs undertake only aviation work for which they have been assessed as competent;
- Monitor, maintain and develop the competency of staff; and
- Evaluate the impact of any competency short-comings and take appropriate actions.

Step IV: ASSESS AND MAINTAIN
- Maintain the competency of CMS managers and assessors;
- Record information on the operation of the CMS;
- Monitor changes in the external environment and the operational activities of the organization;
- Ensure that the CMS conforms with QMS requirements; and
- Review the output and impact of the CMS on the organization’s Key Performance Indicators.

Step V: VERIFY AND AUDIT
- Implement a method of systematic verification of the CMS
- Audit or arrange for the audit of the CMS
- Identify the need for changes and implement these changes.
This supplementary material suggests ways to realise each of the management principles presented in Part 1 – Key guidance. Some suggestions may not be applicable to your own organisation. For example the resources necessary for some suggestions may not be proportionate to the resources, or appropriate for the size of your undertaking. The intention is not to prescribe a way to establish the CMS so that it satisfies each management principle; rather it is to stimulate you to establish your own policies and processes, drawing on the suggestions that are offered here only if you find them appropriate.

Even if in Part 1 the management principles were presented in a logical progression, they might not be introduced or executed sequentially. In adapting or developing your CMS you will probably change the order of activities or adapt them to your own organization during the design, operation and maintenance.

**Preliminary actions**

Before starting to plan the development or the implementation of a CMS, the following prerequisites have to be in place:

- If AMPs are not familiar with the concept of maintaining evidence of competency, as required for assessment, the organization will have to develop dedicated processes to enable them to do this efficiently and effectively.

- To facilitate gradual introduction of a CMS, a process improvement approach associated with the implemented QMS might be adopted.

- Even if the organization has not already mapped the existing management system processes to the requirements of a CMS, some existing management processes can be used, such as the ones for AMP appraisal, assigning to particular tasks, training and development or others like these.

- A good start is to work from the beginning with the concept of continuous improvement, by comparing what is already in place with the appropriate principles in this guidance and adapting the existing processes.

- The availability of assessors is one of the most common issues in implementation of the CMS. Some competency criteria have to be defined for assessors to select the appropriate staff. To make a CMS work, the assessors have to be competent both to perform competency-based assessment and to advise on training and other professional development needs.

- Usually competency implementation faces AMP reluctance, being perceived in some cases, as a punishment or a threat. To solve this problem, the organization should increase acceptance of the introduction of the CMS by clearly explaining how AMPs will be affected. Such communication can include, for instance:
  - the reasons and the benefits to staff and to the organization;
  - the strategy; and
  - that continuous feedback and coordination with operational staff is essential.
Step I: PLANNING

I.1. Specify all work activities to be included in the CMS

Work activities included depend upon the organization structure and activities.

I.2. Define the purpose and scope of the CMS

I.2.1 A CMS should assure the organization and NSAs that all staff involved in operational meteorology activities are demonstrating the necessary competency associated with job descriptions.

I.2.2 The purpose of the CMS is to:

- Assure the organization, AMPs and, where appropriate, external bodies that the workforce is competent now and that there are processes in place to maintain competency into the future;
- Prioritise regulatory requirements, process safety, and any other operational requirements in the workplace;
- Comply with regulations / requirements regarding AMP competency;
- Comply with organizations’ procedures;
- Support individuals in developing and demonstrating competency;
- Demonstrate fair, consistent and authentic competency assessment techniques;
- Support organization systems and models in managing performance safely and effectively from an individual, management and organizational perspective;
- Align, wherever possible, to nationally recognised qualifications and standards or their equivalent and encompass assessment procedures;
- Identify training needs for individuals, teams and the organization to meet and support competency requirements;
- Identify accountabilities and responsibilities;
- Accommodate change and support the management of change;
- Maintain appropriate and auditable records of training and competency-based assessment; and
- Improve the system based on evaluations, audits and other forms of feedback.

I.2.3 The scope of the CMS should:

- Provide a structured and systematic approach to competency;
- Demonstrate assurance of obtaining and maintaining AMP competency; and
- Demonstrate a link between the Competency Management and the QMS and, by case, SMS.

I.2.4 Optionally, other factors can be considered that could affect the scope of the CMS, including specific legislation or guidance materials.

I.3 Define roles and responsibilities that are to be covered by the CMS

I.3.1 Identify and define a complete set of roles performed that covers all activities within the scope of the CMS starting from AMPs up to competency management.
I.4 Select applicable rules and regulations

I.4.1 A framework of rules and regulations that define performance and knowledge requirements underpins the CMS. Additional specific and local rules and regulations may need to be developed according to operational activities. Rules and regulations will be needed also for those operating the CMS.

I.4.2 Ensure that all the rules and regulations regarding CMS that are in force or will be developed are according with requirements established by the NSA.
Step II: DESIGN

II.1 Define the elements that CMS covers

- The procedures, methods and work instructions for operating the CMS;
- The competency standards and assessment criteria;
- The training, development and assessment requirements; and
- The competencies and responsibilities of those managing and operating the system.

The framework established by WMO defining second-level competencies in terms of performance and knowledge requirements underpins the CMS.

II.1.1 Standards will need to be set for the entire CMS. This will be related to QMS KPIs for operational activities.

II.1.2 Rules and regulations covering selection and recruitment, training and development, as well as system monitoring, verification, audit and review will be needed.

II.1.3 Competency standards and associated checklists should be made available to AMPs and the staff operating the CMS.

II.2 Establish efficient and consistently repeatable processes, procedures and methods that implement the requirements of the principles in this guidance.

II.2.1 Establish what is to be achieved in terms of measurable results and objectives for the CMS and determine the processes required to deliver them.

II.2.2 Nominate a person, who has the necessary competency and authority, to manage the implementation and operation of the CMS and to ensure its continued effectiveness.

II.2.3 Specify the CMS in terms of transparent and repeatable processes, derived from this guidance. Write procedures in a clear and unambiguous way to describe how all the tasks needed to operate the CMS are to be managed. Develop instructions expanding the procedures; define the methods to be used and the detail required to ensure consistency.

II.2.4 Establish processes for effective communication between all those included in the system, with clear standards for what information is to be communicated and when.

II.2.5 Define the roles required for those operating the CMS, and the associated responsibilities and competency requirements for each role.

II.3 Define the quality assurance procedures for all system elements

II.3.1 Define the competency assurance processes, procedures, methods, objectives and outcomes for the CMS.

II.3.5 Develop competency assurance procedures and work instructions to operate the CMS.

II.3.2 Procedures must be clear and unambiguous and describe how all the tasks needed to operate the CMS are to be managed. Work instructions that expand on the procedures have to be developed, with methods to be used defined and described.

II.3.3 Set the intended results, objectives and processes for the CMS.

II.3.4 Establish what is to be achieved in terms of measurable results and objectives for the CMS and determine the processes required to deliver them.

II.3.6 Ensure availability of all procedures and operational documents against which competency is measured.
II.3.7 Maintain records of training, refresher training, assessments and reassessments that can be audited internally and externally. Ensure that the methods and processes for producing records are clear, transparent, and provide a clear audit trail.

II.3.7.1 Records of training.
The records of training for each AMP should include:

- Date and duration of the training;
- Training scope and objectives;
- Expected outcomes;
- Curricula and number of hours allotted to each topic;
- Name of registered trainer(s);
- Methods of training;
- List of support materials;
- Records of training given and any further planned; and
- Records of continuing professional development (CPD) and any further training.

II.3.7.2 Records of assessment.
The records of competency-based assessment for each AMP should include:

- Assessment record, made at the time of the assessment along with any advice or feedback provided for further improvement and CPD;
- Achieved rating (if any) and performance / knowledge criteria met;
- Date(s) of assessment and/or reassessment;
- Name of registered assessor(s);
- Methods of assessment;
- List of support materials;
- Deficiencies in competency identified and proposed corrective/preventive actions;

II.3.8 Maintain records testifying an individual’s competency against the set standards.

II.3.8.1 Records of competencies.
The record of competencies for each AMP should list, as a minimum, the following information:

- a certified copy of any certificate or licence issued;
- records, as part of the QMS that led to the issue of the certificate or licence;
- records of each activity that the person has been assessed or reassessed as competent to carry out;
- the standard achieved;
- name of certified assessor(s); and
- the expiry date of the current certificate or licence of competency as documented in the scope of the organisations QMS.

II.3.8.2 Records of significant events.
The records of significant events should include details of any incidents or other important events. Records should also be kept of reports of sub-standard performance, deficiencies in competency along with any feedback given and actions taken to address sub-standard performance.

II.3.9 Ensure compliance with QMS that is in force in the organization.
II.4 Establish an adapted BIP(M)\(^4\) according to job profile

II.4.1 Use BIP(M) as reference to establish authentic basic knowledge, skills and competencies that are needed to start a career as operational AMP according to the job position and organizational needs. In this respect, common (and updated) educational structure and training approach have to be considered.

The adapted BIP(M) will contain all elements regarding selection/recruitment and subsequent training, and will be the support in development of selection/recruitment criteria and basic training concept and content.

II.4.2 Establish selection/recruitment requirements based on an adapted BIP(M) according to a common educational structures.

The selection/recruitment requirements have to be developed according to common educational structure from each state, considering principles of equity but also fulfilling the basic underpinning knowledge and skill necessary for commencing training to become a entry-level AMP.

II.4.3 Establish training needs to fulfil established adapted BIP(M) to become an entry level AMP as defined according to national rules and regulations

Compare the established adapted BIP(M) with selection/recruitment requirements and fill the gaps.

II.5 Establish competency criteria according to the job profile:

II.5.1 Adapt from second-level competencies defined by WMO a suite of authentic performance criteria covering each of the operational activities within the scope of the CMS and giving sufficient confidence that all staff that meets particular criteria is competent to perform the related operational activities

II.5.2 Criteria should state the minimum requirements in assessment and demonstration of competency in accordance with national rules and regulations as established by the NSA.

II.5.3 Show how the criteria relate to operational activities within the organization, how they match the management and team structures, and how roles are broken into constituent activities.

II.6 Define how each competency criteria is met, assessed and recorded

II.6.1 For each performance criteria, adapted from WMO to be authentic, establish references against which each competency is assessed and compared to (e.g. procedures, documented methods, etc.).

II.6.2 Competency-based assessment should cover all procedures and processes detailed to a specific operational activity.

II.6.3 Establish assessment forms and associated documents that ensure traceability of the training and assessment processes.

II.6.4 Build assessment into the daily role of the individual as much as possible. This allows natural creation of evidence that assists in demonstrating competency.

II.6.5 Assessment and re-assessment should confirm that the competency achieved through training and learning is authentic according to job description.

II.7 Establish the tools used for AMP competency assessment and how often the assessment shall be conducted.

II.7.1 Use assessment methods appropriate to the activity. These methods might involve an assessment tool or a combination there-off from the WMO Competency Assessment Toolkit.

\(^4\) To be harmonised with BIP-M guidance
II.7.2 To ensure a structured approach, an assessment plan has to be developed. For each competency, the assessment plan should specify:

- Method of assessment;
- What will be assessed;
- How often the assessment will take place;
- All parties involved in the assessment process;
- Certification; and
- The frequency and number of re-assessments.

II.8 Establish the training needs and the assessment requirements for each competency criteria

AMP competencies can be met through training programmes that have been mapped to national / organizational rules and regulations.

II.8.1 Training and assessment needs to be linked, so that AMPs can progress through the competency development process, to improve performance.

II.8.2 To ensure a structured approach, training plans have to be developed. For each objective, the training plan should specify at least:

- Type of training;
- Content of training and objectives;
- Training duration;
- How often the training will take place (in case of recurrent training);
- All parties involved in the training process;
- Certification; and
- The frequency and number of re-assessments.

II.8.3 Training and assessment needs to be linked, so that staff can progress through the competency development process, increasing the range of activities they are assessed as being sufficiently competent to do.

II.8.4 Establish the needs for training and assessment of staff to meet existing, new or modified rules and regulations.

II.8.5 Consider that newly selected/recruited staff may need considerable training and development, and may need to learn the fundamentals of operational and health and safety risks.

II.8.6 A training need is typically triggered by one of the following events

- The recruitment of new personnel who may have to be trained in areas going beyond their current academic or vocational qualifications or experience.
- The introduction of new workplace regulations.
- A change in role by personnel, particularly where this change relates to safety, health or environmental responsibilities.
- A change to an existing process or piece of equipment.
- A change to, or the development of, a training course.
- A weakness identified by monitoring, review or audit.
- The need for re-training following people or organisational changes.
• The continuous training of existing staff that are required to maintain or upgrade their skills and knowledge.
• A gap identified through competency assessment

II.9 Management of changes in operational activities

II.9.1 Identify the impact of changes in operational activities on AMPs
II.9.2 Establish the needs for training and assessment of staff to meet new or modified rules and regulations.
II.9.3 Establish the training and assessment needs to reach the required levels of competency to carry out new or changed operational activities.

II.10 Establish the tools and methods of CMS improvement

II.10.1 A CMS shall be regarded as a continuous improving system. In this respect, all feedback from audit and evaluations has to be considered as an opportunity of developing the system an all its aspects.

II.10.2 The following sources / input for continuous improvement of the CMS shall be considered:
• Competency-based assessment of the AMPs;
• Internal evaluation and analysis;
• Feedback;
• Audit results; and
• Corrective and preventing actions.
Step III: IMPLEMENTATION

III.1 Apply the CMS procedures and methods to selection and recruitment activities

Selecting and recruiting the right staff is crucial if subsequent training, development and assessment is to be effective. A range of assessment tools can be used to indicate the suitability of candidates for their new work.

III.1.1 Select internally, and recruit externally, staff that has appropriate and demonstrable underpinning knowledge according to adapted BIP(M).

III.1.2 Select and recruit staff to carry out new activities using suitable selection methods.

III.1.3 The recruitment and selection process should identify the relevant experience, skills and knowledge required for candidates taking on new or similar work.

III.1.4 Methods include questionnaires, application forms, worked test examples, and interviews. A structured interview, with a single set of questions, can be used to compare candidates.

III.2 Train to the defined competencies associated to job profile

III.2.1 Initial and periodic training has to be delivered to ensure that individual competency is according to job profile.

III.4 Assess competency

III.4.1 Determine the extent to which staff currently meet the established competency criteria. Conduct competency-based assessments against the defined competency standards.

III.4.2 Carry out assessments of AMPs at the beginning of their career against the competency standards according to job description before the individual is deemed competent to carry out operational activities.

III.4.3 For existing staff already carrying out operational activities the assessment must aim to prove that the required level of competency is maintained.

III.4.4 Identify gaps where an individual does not possess the necessary level of competency according to the job description to define the individual's training needs in their PDP.

III.4.5 Verification of competency against the competency standards for a job role should be authentic.

III.4.6 Ensure experienced, knowledgeable assessors with sufficient practical understanding.

III.5 Ensure that AMPs undertake only work for which they have been assessed as competent.

III.6 Monitor, develop and maintain competency

III.6.1 Establish proactive mechanisms for monitoring competency and reactive mechanisms that capture other indications as they arise, which may include:

- self-assessment by individual staff;
- observations by supervisors or managers;
- appraisals and performance;
- investigating incidents and accidents;
- portfolios of evidence; and/or
- observations of repeated mistakes.
III.6.2 Monitor whether or not AMPs assessed as being competent are performing competently and initiate corrective action when necessary.

III.3.1 Extend and maintain the competency of AMP so that they are able to meet relevant competency criteria according to job descriptions and individual development.

III.3.2 For each individual, create, implement and maintain a personal development plan (PDP). The PDP gives details of proposed actions for individual training and/or development. Example actions include
- participation in a core training programme;
- participation in a dedicated training programme to fill the gaps identified through competency-based assessment;
- attending external courses;
- acquisition of experience through on-the-job training;
- refresher trainings; and/or
- mentoring.

III.7 Evaluate the impact of any failures to perform competently and take appropriate actions.

III.7.1 Act appropriately so that the impact on safety is minimised, including initiating corrective/preventive actions to restore individual competency accordingly with the Key Performance Indicators (KPI) included in the QMS documents.

III.7.2 Determine the reasons for the failure of an individual or a group of individuals to perform competently, including consideration of:
- organisational culture;
- team relationships;
- other circumstances that affect the work environment;
- personal situation; and
- failure of the CMS.

III.7.3 Plan, implement and review corrective action as appropriate. Possible remedies include directed defining and/or communicating required standards, revising CMS procedures and practice, etc.

III.7.4 If the failure is found not to be the fault of the individual (i.e. a failure in the CMS procedures), make this clear and record appropriately. Revise the individual's PDP and schedule reassessment.
Step IV: ASSESS AND MAINTAIN CMS

IV.1 Maintain the competency of CMS managers and assessors.

IV.1.1 Ensure that senior managers, managers of the CMS and assessors are competent to support and fulfil the requirements of the CMS.

IV.1.2 Ensure that the requirements presented in this guidance are fully applied to managers of the CMS, including:
- assigning overall responsibility for the CMS to the person who has sufficient competency and authority;
- assigning responsibilities to the managers for operating the CMS;
- establishing competency criteria for the managers and carrying out regular assessments against these criteria; and
- effective monitoring of managers’ competency.

IV.1.3 Ensure that the requirements presented in this guidance are fully applied to assessors, including:
- establishing competency criteria and carrying out regular assessments against these criteria;
- guarding against potential conflicts of interest;
- effective monitoring, verification and review; and
- adequate management of assessors’ competency where they belong to an external organisation.

IV.2 Document and maintain accurate information from the operation of the CMS.

IV.3 Monitor changes in the external environment and the internal operation of the organization.

IV.3.1 Monitor changes in the internal operation of the organisation and its external environment, to determine implications for AMPs and the CMS and to initiate changes as appropriate.

IV.3.2 Monitor the organisation for changes that may be relevant to the CMS or to AMP competency, including changes in:
- working practices;
- tools, techniques and equipment;
- operational activities and products;
- communication chains; and
- coordination procedures.

IV.3.3 Monitor the external environment for changes that may be relevant to the CMS or to AMP competency, including:
- additions and changes in rules and regulations;
- interpretation or guidance on rules and regulations;
- standards and industry needs; and
- published incidents.

IV.3.4 Decide how best to accommodate identified changes, such as through revisions to:
- CMS procedures;
- AMP competency criteria;
- additional training at organization level;
- PDPs and competency-based assessment for the change impact; and
- plans or schedules for CMS audit or review.
IV.3.5 Liaise with NSA and refresh/review competency standards to ensure continued compliance of AMP competencies with national rules and regulations.

IV.4 Ensure that CMS complies with the Quality Management System requirements.
Applying the CMS requirements shall not go against the QMS, and therefore all applicable procedures, working documents and records shall comply with the organization's QMS.

IV.5 Review the output and impact of the CMS on Key Performance Indicators.
Whenever necessary, due to the application of the CMS, the KPIs shall be modified and adapted accordingly.
Step V: VERIFICATION AND AUDIT OF THE CMS

V.1 Verification of the CMS
V.1.1 Verification should be directed towards determining compliance with the agreed standards, rules and procedures.
V.1.2 Verification should cover the systematic monitoring of the assessment process in terms of how well the assessments are carried out, and how the assessment process is applied.

V.2 Audit or arrange for the audit of the CMS
V.2.1 Audit should inspect the whole CMS and judge compliance against the defined quality assurance procedures. Audit will assess the efficiency, compliance and reliability of the whole system.
V.3.1 Conducting audits or arranging for the audit of the CMS identifies(ying) gaps in the CMS. The audit of CMS should be integrated in the QMS.
V.3.2 Audit the CMS frequently enough to give confidence that it is meeting its objectives and operating as intended, and to initiate improvement action where appropriate.

V.3 Identify the need for changes and implement identified changes
V.3.1 Based on internal evaluation and analysis, carry out periodic reviews to ensure that the CMS remains effective. The review should assess performance of the overall system against agreed standards, KPIs and recommendations resulting from verification and audit.
V.3.2 The review should assess performance of the overall system against agreed standards, KPIs and recommendations resulting from verification and audit.
V.3.3 When the review has been completed the results and recommendations need to be feedback into the relevant phases of the process leading to a systematic and regular updating and improvement of the CMS

V.4 Continuous Improvement of the CMS.
V.4.1 It is part of the continuous improvement process stated in the QMS, based on reviewing the feedback and audit outcomes make the necessary changes to ensure a fit for purpose and accurate system.