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| IALA Guideline |

G1100

the Accreditation and Approval Process for AtoN Personnel Training

Edition 2.0

December 2017

Revisions to this IALA Document are to be noted in the table prior to the issue of a revised document.

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| To be added |  | First issue |
| December 2017 | Whole document | Complete review and addition of annexes to ensure compatibility with Guideline G1014 on the accreditation and approval process for VTS personnel |
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# Introduction

## Overview

The International Association of Marine Aids to Navigation and Lighthouse Authorities (IALA) recognises that training in all aspects of the management of Aids to Navigation (AtoN) service delivery is critical to the consistent provision of that AtoN service.

In accordance with SOLAS Chapter V Regulation 13 – establishment and operation of aids to navigation - and IALA Recommendation R0141 on Standards for the Training and Certification of AtoN personnel, it is the responsibility of a national Competent Authority (CA) to accredit and audit AtoN training organisations (TO) as well as approve AtoN training courses.

This guideline, including Annexes A to F, sets out the process by which AtoN TOs can achieve accreditation and approval of their AtoN training courses by their CA leading to the issue of:

* “Level 1” Certificates for AtoN managers in accordance with IALA Model Course L1.1 on Level 1 AtoN Manager Training

This course can be delivered in one month or in a number of Complementary Modules. However, the final Certificate of Competency can only be awarded once a candidate has successfully completed all of its modules[[1]](#footnote-1).

* “Level 2” Certificates for AtoN Technicians are issued in accordance with IALA WWA publication IALA WWA.L2.0 – Model Course Overview on Level 2 Technician Training.

Note that not all Technicians need to complete the full suite of Level 2 model courses because their organisations may not operate all the equipments covered by the complete suite of model courses. They will therefore be awarded a certificate for each Level 2 Model course that has been completed successfully.

## Aim and Objectives

The aim of this Guideline is to ensure conformance with the standards and requirements of AtoN training. Competent Authorities as well as TOs are encouraged to adopt this Guideline on the Accreditation and Approval process for AtoN personnel training. It is similar to guidance set out in IALA Guideline 1014 on the Accreditation and Approval Process for VTS Training to ensure that a common standard is maintained across all aspects of the provision of AtoN services.

The objectives are to ensure that all training and assessment of AtoN personnel for the purpose of certification is:

* structured in accordance with established training procedures based on clearly communicated, measurable and achievable objectives;
* able to ensure that the standard of competence set out in IALA Recommendation R0141 is met and maintained;
* conducted, monitored, evaluated and supported by appropriately qualified instructors as set out in Part D of IALA Model Course L1.1.
* managed in a manner that ensures relevancy and accuracy according to experience gained, technological advances, national and international recommendations, rules and regulations.

# General considerations for the Approval of AtoN Training Courses

AtoN training delivered by TOs should be approved in accordance with this IALA Guideline. If necessary, a CA can liaise with IALA, as represented by the IALA World-Wide Academy (WWA), before and during the accreditation/approval process.

AtoN training should be conducted in accordance with the model courses developed by IALA. TOs providing AtoN training should deliver such courses within the framework of a recognised[[2]](#footnote-2) quality and training management system (QMS and TMS). See Annexes C and D below. CAs should develop and promulgate procedures regarding the application of both accreditation and approval for AtoN training.

## Approval

The STCW Convention requires that training leading to the issue of a certificate is 'approved'. Although a particular TO may already have accreditation for STCW training and approval for such courses, that TO is **not** automatically accredited to deliver specialist AtoN training courses. TO intending to provide AtoN training should first of all apply for accreditation to the Competent Authority of the country in which it is located[[3]](#footnote-3). Separate approval to deliver either Level 1 or the suite of Level 2 AtoN courses will then be required from the Competent Authority.

## recognition of training organisations in another country

The CA of some Member States may decide to recognise a TO based in another Member State so that AtoN training can be delivered to its nationals abroad. In that case, the foreign TO may be defined as an ATO by the local CA.

## recognition of the iala world-wide academy as an ato

AtoN courses delivered by the IALA WWA shall be subject to quality control as part of its existing audited QMS and TMS. All participants attending IALA WWA delivered training or who participate in its blended distance learning modular courses and who are employed by a national AtoN service provider must be nominated by the CA of their Member State. The CA of that State therefore will have recognised *de facto* the IALA WWA as an ATO.

The IALA WWA holds a full suite of training documentation, including MS PowerPoint® presentations, covering the full syllabus of IALA Model Course L1.1 for AtoN managers. A CA that intends to accredit one or more TOs in its country might wish to use IALA’s training resource to avoid the necessity of developing its own suite of documentation. Should that be the case, then IALA could be invited to work with the CA to facilitate the accreditation and approval process including the provision of its training documentation. The precise terms of this facilitation would be subject to the signature of a formal Memorandum of Understanding between the CA and IALA. It should be noted that IALA would retain full copyright© over all its documentation supplied to a CA for use by an ATO.

## Use of the IALA logo on national certificates

The use of the IALA logo on any training documentation, including certificates, can only be used by an ATO in an IALA Member State. The use of the logo indicates that the whole process is in compliance with this Guideline. Such certificates are considered to be valid **only** within the State that issued them. There may however, be instances where an 'arrangement' includes provisions previously established between States for the reciprocal recognition of national AtoN certificates, similar to that as allowed under the STCW Convention. The guiding principle is that the decision to recognise such certificates and the process whereby such certificates are recognised rests entirely with the CA of each Member State.

## international AtoN certificates

Only the IALA WWA or CAs who have signed a MoU with IALA can use the wording “International Aids to Navigation Certificate” on certificates issued by an ATO in that State. It is expected that the CAs of all IALA Member States will recognise “International” AtoN certificates.

## audit of training organisations

The CA should set up appropriate audit arrangements to ensure that its requirements are met by a potential TO. The recommended audit process is set out in Annex B. Periodic re-audits of ATOs should also be considered. These audits should include:

* TMS including suitability of instructors and training facilities[[4]](#footnote-4);
* L1.1 course documentation including lesson plans;
* Maintenance of training records.

The CA may decide to recognise a third-party organisation, such as an international Certification Company, or another national authority or organisation, as qualified fully to conduct audits of potential TOs on its behalf. In that case, the CA should ensure that the audit process has been conducted in accordance with this Guideline.

If the CA is satisfied entirely that a potential TO has met its requirements for the delivery of AtoN training, the CA will accredit the TO and approve the specific AtoN courses that it delivers. The CA should then inform IALA by letter of the name and details of the ATO and the courses that it has been approved to deliver. The minimum information required on a certificate of accreditation is at Annex E. Example certificates of approval to deliver specific courses and periodic audit checks are at Annex F. The CA should also forward a copy of the final audit report to IALA as an enclosure to the letter of accreditation. See Annex B.4 – Phase 3 of the audit process.

Any CA may request assistance from IALA in the conduct or facilitation of its audit process. Agreement for such assistance would normally form part of an MoU. IALA can only make recommendations to the CA concerned. IALA cannot ‘accredit’ a TO itself. That decision remains firmly with the CA of each Member State.

If a CA signs a MoU with IALA, then the WWA will normally meet with the CA and its ATO after the delivery of each major AtoN course to determine how the course can be improved as part of a QMS review. This joint CA-IALA review will be based, where appropriate, on the periodic audit process set out in Annex B.5.

## interim approval arrangements

In order to facilitate the start-up operation of AtoN training at new or existing training organisations, the CA may decide to provide interim approval.

Accreditation is quite separate from the approval process, as approval is provided for each individual course whilst Accreditation is for the training organisation itself. Interim approval is based upon:

* satisfactory completion of the Phase 1 audit activities set out at Annex B;
* validation of instructor qualifications;
* plans for full implementation of the system by the time of the initial accreditation assessment;
* key TMS personnel being familiar with the implementation plans.

Training organisations having achieved interim accreditation will not be required to repeat Phase 1 activities prior to the Phase 2 audit.

## publication of ato details by iala

On receipt of a validated copy of the Certificate of Accreditation and Certificate of Approval, IALA will display the name of the Member State, the name and details of the ATO and the list of approved courses on the Academy/Training page of its website. If the ATO can accept foreign participants on specific courses, this will also be stated. It will be for the relevant CA and ATO to determine the suitability of any foreign applicant.

## period of validity of certificates of accreditation and approval

Each CA will determine the period of validity for the Certificate of Accreditation and the Certificate of Approval that it has issued. It is recommended that the period of validity should not exceed 5 years. The CA may decide to conduct an interim audit of specific courses at appropriate intervals to ensure continuity of standards. Such periodic audits may include Phases 2 and 3 audit activities specified in Annex B.

# procedures for the Accreditation and Approval process for AtoN Training

A flow-chart for the initial accreditation process is at Figure 1 below

## step 1 – the to submits an accreditation request to the ca

The training organisation needs to obtain the requirements from the Competent Authority.

The TO should be familiar with the documentation relevant to its own TMS as well as IALA guidance on AtoN training which can be downloaded free of charge from the IALA website[[5]](#footnote-5).

Prior to submission of an accreditation request to the CA, it is recommended that the TO carries out its own internal checks using the pre-audit questionnaire shown at Annex A.

The CA should inform IALA by letter shortly after the accreditation application by the TO has been received and request assistance if required (see 2.6 above).

## step 2 – the to submits a completed pre-audit questionnaire to the CA

The TO submits a completed pre-audit questionnaire and supporting documentation to the CA under a suitable covering letter. The TO should ensure that these documents are submitted in sufficient time to allow the CA to assess properly the submission.

The CA evaluates the questionnaire and supporting documentation to ensure compatibility with IALA Recommendation R0141 and Model course(s) L1.1 and/or L2.0, seeking IALA WWA assistance if required.

If the CA is satisfied with the evaluation, it will set a mutually convenient date for the initial audit visit.

If the CA is not satisfied, it will inform the TO so that corrective action can be taken before resubmission.

## step 3 – initial audit procedure

The CA conducts the initial audit based on the procedure set out in Annex B, with IALA WWA assistance if required.

If the CA is satisfied with the audit, it will prepare a Certificate of Accreditation for AtoN training (Annex E).

If the CA is not satisfied, it will identify shortcomings so that the TO can take appropriate corrective action before resubmission.

## step 4 – ca issues certificate of accreditation

The CA issues a Certificate of Accreditation based on the proposed format shown at Annex E. The actual format of this certificate will remain at the complete discretion of the CA.

A copy of the interim or final certificate of accreditation and a copy of the final audit report should be sent to IALA under a suitable covering letter.

## step 5 – the ca issues certificate(s) of approval

The CA issues a certificate of approval listing the specific courses that have been approved based on the format shown at Annex F. The actual format of this certificate will remain at the complete discretion of the CA. If the CA is an IALA member, the certificate(s) should ideally include the logos of both the CA and IALA.

1. Accreditation and Approval Process

TO conduct internal audit

CA requirement

N

Y

Y

N

N

IALA updates records and website

Inform IALA

Issue certificates of Accreditation and Approval

CA review process

Prepare certificates

Meets CA requirement?

CA conducts audit

Y

Y

Ask IALA

N

Meets CA requirement?

CA full evaluation

IALA assistance required?

CA initial evaluation

Submit to CA

Meets CA requirement?

The Competent Authority should send a copy of the approval certificate(s) to IALA under a suitable covering letter. Subject to the approval of the Member State in question, IALA will display the information on its website (see 2.8 above).

A sample of the periodic and additional audit certificate is also shown at ANNEX F.

# definitions

The definitions of terms used in this Guideline can be found in the International Dictionary of Marine Aids to Navigation (IALA Dictionary) at <http://www.iala-aism.org/wiki/dictionary> and were checked as correct at the time of going to print. Where conflict arises, the IALA Dictionary should be considered as the authoritative source of definitions used in IALA documents.

# acronyms

ATO Accredited Training Organisation

AtoN Aids to Navigation

CA Competent Authority

CAPA Corrective Action and Preventative Action

IALA International Association of Marine Aids to Navigation and Lighthouse Authorities – AISM

IMO International Maritime Organization

MoU Memorandum of Understanding

MSC Maritime Safety Committee (IMO)

OJT On-the-Job Training

QMS Quality Management System

SOLAS International Convention for the Safety of Life at Sea (IMO 1974 as amended)

STCW International Convention on Standards of Training, Certification and Watchkeeping for Seafarers (IMO)

TMS Training Management System

TO Training Organisations

WWA IALA World-Wide Academy

# references

[1] IALA Recommendation R0141 (E-141) on Standards for the Training and Certification of AtoN personnel

[2] IALA model course L1.1 - Level 1 Aids to Navigation Manager Training

[3] IALA model course IALA.WWA.L2 – Level 2 Aids to Navigation Technician Training

1. PRE-AUDIT QUESTIONNAIRE
2. General Information

|  |  |
| --- | --- |
| Training programme to be audited |  |
| Name of training organisation (TO) |  |
| Address of TO |  |
| Contact person in TO |  |
| Telephone number of TO |  |
| Facsimile number of TO |  |
| e-mail of TO |  |
| ***To be filled in by the Competent Authority:*** |  |
| Auditing organisation |  |
| Contact person in auditing org. |  |
| Contact information of auditing org. |  |

1. Training Management System (TMS)

|  |  |  |
| --- | --- | --- |
| Quality Policy | Yes/No | Comments |
| Declaration of general aims and objectives of the training institute in relation to the training of AtoN Personnel | Yes No |  |
| Relevance of the quality policy to the participant training needs in general | Yes No |  |
| Relevance to applicable requirements of R0141 and appropriate model courses | Yes No |  |
| Expression of the organisations commitment to *achieving* its goals and objectives and to fulfilling the training needs of the participant | Yes No |  |
| Confirmation that the quality policy is available to and understood by, as well as maintained and implemented, at all levels of the organisation | Yes No |  |

1. Organisational arrangements

|  |  |  |
| --- | --- | --- |
| Responsibility and authority | Yes/No | Comments |
| Are the responsibility and authority of all personnel who perform and verify work affecting training defined and documented? | Yes No |  |
| Is there facility in the system to: |  |  |
| initiate action to prevent the occurrence of any non-conformities relating the TMS? | Yes No |  |
| identify and record any problems relating to the TMS? | Yes No |  |
| initiate, recommend or provide solutions to identify problems through designated channels? | Yes No |  |
| verify the implementation of solutions? | Yes No |  |
| identify pertinent changes to participant training and competence requirements? | Yes No |  |
| initiate action to incorporate appropriate changes to the AtoN training programs? | Yes No |  |
| Management representative | Yes/No | Comments |
| Has a manager been appointed with the responsibility for: |  |  |
| ensuring that a TMS is established, implemented and maintained? | Yes No |  |
| reporting on the performance of the TMS to the management? | Yes No |  |

1. Internal TMS audits

|  |  |  |
| --- | --- | --- |
| Internal TMS audits | Yes/No | Comments |
| Are documented procedures in place for planning and performing internal audits in order to verify whether activities comply with the requirements of the TMS? | Yes No |  |
| Is the TMS audited at least annually? | Yes No |  |
| Are internal audit records maintained? | Yes No |  |

1. Corrective and preventative action

|  |  |  |
| --- | --- | --- |
| Corrective/preventative action | Yes/No | Comments |
| Are TMS deficiencies documented? | Yes No |  |
| Are appropriate sources of information, such as non-conformance reports, audit reports, participant and customer complaints, and quality records to detect eliminate potential deficiencies reviewed? | Yes No |  |
| Are participant learning deficiencies for adverse trends that shall indicate a deficiency in the training plan or training delivery procedures analysed? | Yes No |  |
| Are root causes of deficiencies determined and corrective action to eliminate the deficiency implemented? | Yes No |  |
| Are TMS records of these activities maintained? | Yes No |  |

1. Management review

|  |  |  |
| --- | --- | --- |
| Management review | Yes/No | Comments |
| Are management reviews carried out at regular intervals? | Yes No |  |
| Are records of management reviews maintained? | Yes No |  |

1. Training Management System Requirements

| Training Management Manual | Yes/No | Comments |
| --- | --- | --- |
| Is a TMS established, documented and maintained to conform to IALA requirements that ensures that participants are trained in accordance with R0141 and the requirements of the authority? | Yes No |  |
| Does TMS include a Training Management Manual? | Yes No |  |
| Does this manual provide: |  |  |
| 1. a copy of quality policy? | Yes No |  |
| 1. an overview of the TMS? | Yes No |  |
| 1. an outline of TMS documentation structure? | Yes No |  |
| 1. cross reference to the requirements of this standard? | Yes No |  |
| 1. references to pertinent TMS documentation? | Yes No |  |
| TMS procedures | Yes/No | Comments |
| Are procedures documented and consistent with the requirements of IALA and the stated quality policy? | Yes No |  |
| Are TMS and documented procedures effectively implemented? | Yes No |  |
| Is the level of details within the TMS procedures appropriate to the level of: |  |  |
| 1. complexity of training and support functions? | Yes No |  |
| 1. the skills on instructors and support personnel? | Yes No |  |
| 1. the internal TMS training provided to organisation personnel? | Yes No |  |

1. Document and data control

|  |  |  |
| --- | --- | --- |
| Document and data control | Yes/No | Comments |
| Does a documented procedure exist for the control of all documents and data that relate to the requirements of IALA, R0141 and the CA? | Yes No |  |
| Document/data approval and issue | Yes/No | Comments |
| Is TMS documentation reviewed and approved for adequacy by approved personnel? | Yes No |  |
| Does the procedure ensure that: |  |  |
| 1. those involved with the review process are provided with the appropriate reference material and background information? | Yes No |  |
| 1. the revision status of TMS documents can be readily identified? | Yes No |  |
| 1. TMS documents are available at all locations where work essential to TMS is performed? | Yes No |  |
| 1. instructor’s manuals and materials issued to participants are current? | Yes No |  |
| 1. invalid or dated documents are removed from all points of use? | Yes No |  |
| 1. archived, obsolete documents are suitably identified and stored in order to preclude unintended use? | Yes No |  |
| 1. records of changes are maintained? | Yes No |  |
| Storage of materials | Yes/No | Comments |
| Does a documented procedure exist for the storage of training materials to preclude damage of deterioration? | Yes No |  |

1. Resources

|  |  |  |
| --- | --- | --- |
| Resources identification | Yes/No | Comments |
| Is there suitably qualified and trained staff to manage, support, conduct and verify training activities? | Yes No |  |
| Are there adequate facilities, equipment and materials essential to the support of the TMS? | Yes No |  |
| Training of organisation personnel | Yes/No | Comments |
| Do documented procedures exist for identifying the training needs of personnel performing management, training, examination and support functions? | Yes No |  |
| Have all personnel directly involved in participant training activities satisfactorily completed pertinent instructor training requirements? | Yes No |  |

1. Purchasing

|  |  |  |
| --- | --- | --- |
| Purchasing | Yes/No | Comments |
| Do documented procedures exist which ensures essential services, facilities, equipment and materials support training and comply with IALA recommendations and the CA’s requirements? | Yes No |  |
| Do these procedures ensure that: |  |  |
| subcontracted instructors are suitably trained? | Yes No |  |
| external facilities utilised in the training of participants comply with the require­ments of the applicable training plan? | Yes No |  |
| equipment purchased for training is suitable for the applicable training plan? | Yes No |  |
| subcontracted organisations providing part or all of the training meet the requirements of the training plan? | Yes No |  |
| Evaluation of subcontractors | Yes/No | Comments |
| Is there a procedure to evaluate subcontractors? | Yes No |  |
| Are the criteria applied and the methods of evaluation used appropriately to assess the impact of the service, facility, equipment or material on the training provided? | Yes No |  |

1. Training development

|  |  |  |
| --- | --- | --- |
| Training course development | Yes/No | Comments |
| Is there a documented procedure to control and verify the development in training courses in order to ensure that training requirements are met? | Yes No |  |
| Does the training course development procedure ensure that: |  |  |
| 1. responsibility and authority for training course development and review activities are assigned to qualified personnel? | Yes No |  |
| 1. requirements for the pertinent model course and the authority are taken into account? | Yes No |  |
| 1. training course objectives are defined in terms of targeted qualifications? | Yes No |  |
| 1. Participants’ knowledge and competence requirements are taken into account? | Yes No |  |
| 1. appropriate use of simulators is taken into account? | Yes No |  |
| 1. appropriate reference documents are made available to persons involved in training course development? | Yes No |  |
| 1. ambiguities within the training course documentation are resolved? | Yes No |  |
| 1. review of training course documentation is controlled? | Yes No |  |
| 1. Are records of training course development maintained? | Yes No |  |
| Training plan | Yes/No | Comments |
| Are the training plans for each course defined and documented? | Yes No |  |
| Do these plans include: |  |  |
| 1. a description of the training course? | Yes No |  |
| 1. prerequisite participant qualifications? | Yes No |  |
| 1. identification of required resources? | Yes No |  |
| 1. instructor/examiner qualification requirements? | Yes No |  |
| 1. instructor to participant ratio? | Yes No |  |
| 1. reference to course materials, applicable TMS procedures and documentation? | Yes No |  |
| 1. procedures or instructions specific to delivery of the course? | Yes No |  |
| 1. criteria for and methods of evaluating participants’ competence, knowledge, understanding and proficiency as documented in IALA Recommendation R0141 and model course L1.1? | Yes No |  |

1. Training support procedures

|  |  |  |
| --- | --- | --- |
| Training support procedures | Yes/No | Comments |
| Do documented procedures exist for functions that support the delivery of training? | Yes No |  |
| Are these activities identified, planned and conducted under controlled conditions? | Yes No |  |
| Do these controlled conditions include: |  |  |
| 1. documented procedures where their absence could adversely affect training? | Yes No |  |
| 1. use and availability of suitable equipment and facilities? | Yes No |  |
| 1. maintenance of facilities and equipment that have a direct impact upon training? | Yes No |  |
| 1. observance of documented safety procedures? | Yes No |  |

1. Application review

|  |  |  |
| --- | --- | --- |
| Application review | Yes/No | Comments |
| Do documented procedures exist for reviewing the qualification of applicants? | Yes No |  |
| Do these procedures: |  |  |
| 1. identify the qualification sought by the applicant? | Yes No |  |
| 1. evaluate applicant’s stated qualification against prerequisite requirements for the pertinent training course? | Yes No |  |
| 1. determine suitability of the training course for providing qualifications sought by the applicant? | Yes No |  |
| 1. communicate with the applicant regarding suitability of course(s) and curricula offered to fulfil the participants’ qualifications needs? | Yes No |  |
| Are records of application review maintained | Yes No |  |

1. Verification of participants’ competence

|  |  |  |
| --- | --- | --- |
| Aptitude/assessment testing | Yes/No | Comments |
| Is a procedure in place to test potential participants suitability for AtoN training? | Yes No |  |
| Acceptance verification | Yes/No | Comments |
| Is there a procedure in place to ensure potential participants fulfil prerequisite requirements detailed in the applicable training plan? | Yes No |  |
| Is the identity of potential participants confirmed and suitable evidence of prerequisite qualifications sought prior to commencement of training? | Yes No |  |
| Examinations and competence | Yes/No | Comments |
| Is there a process of ensuring that potential participants adequately demonstrate all applicable knowledge and competence requirements prior to being considered as having successfully completed the training course? | Yes No |  |
| Do documented procedures exist for the development and administration of examinations and tests of competence? | Yes No |  |
| Is the responsibility and authority for evaluation of participants’ knowledge or competence defined? | Yes No |  |
| Satisfactory completion | Yes/No | Comments |
| Are records of examinations of participants’ knowledge and competence maintained in accordance the requirements of the CA? | Yes No |  |
| Participant progress | Yes/No | Comments |
| Does a documented procedure exist for identifying and recording participants’ progress from application through completion of training? | Yes No |  |

1. Certification and endorsement

|  |  |  |
| --- | --- | --- |
| Certification and endorsement | Yes/No | Comments |
| Do documented procedures exist for informing the CA(s) of a participant’s successful completion of training, if required? | Yes No |  |
| Does a documented procedure exist for issuing AtoN course certificates? | Yes No |  |

1. Control of participant learning deficiencies

|  |  |  |
| --- | --- | --- |
| Control of participant learning | Yes/No | Comments |
| Do documented procedures exist for the evaluation of participants’ knowledge and competence | Yes No |  |
| Where appropriate, are participants: |  |  |
| 1. retained and re-examined in the specific area where deficiencies are noted? | Yes No |  |
| 1. failed and required to repeat the training course? | Yes No |  |
| 1. recommended to cease training? | Yes No |  |

1. Control of TMS records

|  |  |  |
| --- | --- | --- |
| Control of TMS records | Yes/No | Comments |
| Do documented procedures exist for the identification, collection, indexing, access, filing, storage, maintenance and disposition of TMS records in accordance with the requirements of the authority? | Yes No |  |
| Are TMS records maintained in order to demonstrate: |  |  |
| Participants’ satisfactory completion of training and applicable competence requirements? | Yes No |  |
| effective functioning of the TMS? | Yes No |  |

1. GENERAL COMMENTS

|  |  |
| --- | --- |
| Date |  |
| Name of training organisation |  |
|  |  |
| Signature |  |

*Official stamp of training organisation*

1. PROCEDURES FOR THE AUDIT PROCESS
2. INTRODUCTION

It is the responsibility of the Competent Authority (CA) to ensure that the audit process is compliant with these guidelines.

The audit process is designed to ensure that:

* training is being provided within a functioning training management system based upon an approved quality system standard;
* instructors and examiners are properly qualified to provide training as well as being able to assess competency of participants;
* course materials and curricula comply with IALA Recommendation R0141 and associated model courses.

The auditor should identify and report any areas where the documentation or the training does not comply with any of the above requirements.

The audit process is conducted in three phases and a follow-up phase.

To assist with planning and preparation for an audit (including the completion of the pre-audit questionnaire), the following should be considered:

Indicate the names of persons with key responsibilities within the training management system;

Identify the organisational units or functions to be audited;

Use of organisational diagrams and flow charts;

Identify the activities to be audited;

Identify the training management system documentation;

Use of a project management approach in order to assist with the setting of timetables and the consideration of budget and resources;

Identify the training course curricula and materials;

Indicate the name(s) of the auditor(s);

Indicate the date(s), time(s) and place(s) of the audit;

Identify location(s) to be audited;

Indicate the language of the audit;

Identify any unique requirements of the CA relevant to the audit;

The time and effort that may be required to complete the process;

If time and resources permit, it could be useful to conduct an internal pre-audit.

1. Phase 1

Phase 1 activities should be conducted sufficiently in advance of the Phase 2 audit to allow the training organisation sufficient time to correct any Phase 1 non-conformities prior to the commencement of Phase 2.

Phase 1 should consist of:

* Training Management System documentation review.

The TMS documentation should confirm that a training management system, including internal audit programs, is in place and is used to review and improve the quality of training at the ATON training organisation. A comparison of the training management system documentation against the requirements of an approved quality system standard which is recognised by the CA should be performed. The training management system should at a minimum reflect ANNEX C of this Guideline.

* Training course materials, curricula and simulator capability review.

The curricula, course materials and simulator capabilities should be compared with the various IALA recommendations, guidelines, model courses and any additional requirements of the CA.

* Review of instructor and examiner qualifications.

Documents certifying instructor and examiner qualifications should be reviewed to ensure the individuals are suitable for the functions they perform.

* Review of internal audit program.

The training organisation’s internal audit program schedule should have a plan to correct non-conformities found in the phase 1 of the audit prior to initiation of the Phase 2 audit.

* Reporting.

The results of Phase 1 audit activities should be documented in a report. The report should list the documents reviewed, and summarise the results of the Phase 1 audit.

The auditor should identify any non-conformities in the compliance with the TMS documentation, course curricula, course materials, or instructor/examiner qualifications. The training organisation should correct the non-conformities and report the proposed corrections to the auditor for the appropriate response prior to Phase 2 of the audit.

1. Phase 2

Phase 2 should consist of:

* Audit planning and scheduling. Phase 2 of the audit should be conducted in accordance with the plan developed by the auditor. Implementation of the plan should be co-ordinated with the AtoN training organisation.
* Audit of TMS implementation

The audit should determine the effective functioning and implementation of the training management system and verify conformity with documented procedures and instructions. The audit should be scheduled to coincide with the presentation of the appropriate ATON training activities.

The on-site audit may consist of:

* an opening meeting;
* review of internal audits;
* review of management review reports;
* review of corrective action system including customer complaints and outstanding non-conformities and observations;
* review of changes to TMS;
* review of changes to management responsibility and authority;
* confirmation of instructor/examiner qualifications;
* examination of programmed areas/activities including on-site monitoring of the course;
* review of training records;
* preparation of draft programme for next visit;
* closing meeting.

The opening meeting should include the introduction of the audit team, a brief review of the audit process, and a review of the audit plan. The audit plan should be revised, if necessary, during the opening meeting to accommodate reasonable contingencies prior to proceeding with the onsite audit.

The audit should proceed with interviews of personnel with key responsibility within the TMS, a review of training records, and observance of training delivery activities.

Those portions of training reflected in the audit plan should be monitored to confirm compliance. The instructor’s delivery, the interaction between instructor and participants and the participant assessment activities should be observed. The auditor should ensure that the records are being handled in compliance with the TMS.

At the closing meeting the results of the audit, including the non-conformities identified, the remedial action to be taken and the recommendation regarding approval, should be reviewed with representatives of the organisation providing ATON training.

**Reporting**. The Phase 2 results of the audit activities should be documented in a report.

The report should:

* summarise the results of the phase 2 audit;
* include identified non-conformities;
* indicate requirements for timely corrective action and any follow-up activities;
* indicate the recommendation for approval.

Where practicable, the audit report should be prepared for presentation at the closing meeting.

1. Phase 3

Phase 3 should consist of:

* Audit follow-up activities

The training organisation is responsible for correcting any non-conformities identified during the audit. The training organisation should report proposed corrective actions to the auditor for review and acceptance. The auditor should review the proposed corrective actions submitted by the training organisation and determine their acceptability.

If the proposed corrective actions are acceptable, the auditor should, by documented correspondence with the training organisation, indicate the acceptability of the proposed corrective actions. Depending on the nature of the non-conformities the auditor may require a follow-up audit to confirm effectiveness of the implemented corrective actions.

* Issuing the Certificate of Approval

Upon satisfactory closure of audit activities, a Certificate of Approval valid for a period set by the CA[[6]](#footnote-6) and subject to periodic audit of the TMS, should be issued to the training organisation.

The CA should retain one copy of the certificate and one copy should be sent to IALA under a suitable covering letter together with a soft copy of the final audit report. If possible, the Certificate should be sent to IALA in electronic format ([contact@iala-aism.org](mailto:contact@iala-aism.org)).

1. Follow-up phase

After the initial accreditation, there should be periodic audits for the continued validity of the Accreditation Certificate.

The follow-up phase should consist of:

* Periodic audit activities

The training organisation is responsible for correcting any deficiencies identified during the periodic audit. The training organisation should report corrective actions to the auditor for review and acceptance. The auditor should review the corrective actions submitted by the training organisation and determine their acceptability.

If the corrective actions are acceptable, the auditor should, by documented correspondence with the training organisation, indicate the acceptability of the corrective actions. Depending on the nature of the non-conformities the auditor may require a follow-up audit to confirm effectiveness of the implemented corrective actions or, in the case of major non-conformities, recommend that the Approval Certificate be suspended until corrective action has been undertaken successfully.

* Endorsement of the Approval Certificate

Upon satisfactory completion of the periodic audit activities an endorsement should be made on the Approval Certificate.

1. TRAINING MANAGEMENT SYSTEM (TMS) AS A QUALITY SYSTEM MODEL FOR TRAINING ORGANISATIONS
2. INTRODUCTION

This Training Management System (TMS) model for training organisations serves as an “approved quality system standard” for training of ATON Personnel. This standard focuses strictly on the quality provision of training and should be applied to the training of ATON managers and technicians provided by training organisations.

This standard is compatible with other existing quality system standards and the requirements identified within it can easily be incorporated into existing quality systems. The standard does however, constitute a model for compliance with other quality system standards; its requirements identify those issues having the most significant impact on the successful training of ATON Personnel.

Training organisations that have already implemented a formal quality system should use this standard to ensure that their system addresses adequately relevant training concerns. Training organisations that have not implemented a formal quality system should use this standard as the basis for the development of a quality training system.

An audit of a training management system should include the issues identified by this standard.

* 1. Scope

This standard applies to organisations that provide training to, and verify the competence of, individuals seeking qualifications AtoN managers and technicians in accordance with the provisions of IALA Recommendation R0141 on Standards for the Training and Certification of AtoN personnel. Training organisations should establish, implement and maintain a TMS to ensure that participants are provided with the training necessary to achieve the competence required for the relevant qualifications being sought as an AtoN manager or technician.

1. TRAINING MANAGEMENT REQUIREMENTS
   1. Quality Policy

The senior management of the training organisation should define and document its policy for quality. The quality policy should:

* Take into account the overall goals and objectives of the training organisation pertaining to the training of potential ATON managers and technicians.
* Be relevant to:
  + participant training needs;
  + applicable requirements of R0141 and the appropriate model course(s).
* Express the commitment of the training organisation to achieving its goals and objectives and to fulfilling the training needs of the participants.

Senior management should ensure that this policy is understood, implemented and maintained at all levels of the training organisation.

* 1. Organisational Arrangements
     1. Responsibility and authority

The responsibility, authority and interrelation of all personnel including management, instructors, examiners and support staff, who perform and verify work affecting training should be defined and documented. Particular attention should be paid to personnel who need the organisational freedom to:

* Initiate action to prevent the occurrence of any non-conformities relating to the TMS:
  + Identify and record any problems relating to the TMS.
  + Initiate, recommend or provide solutions to identified problems through designated channels.
  + Verify the implementation of solutions.
  + Identify pertinent changes to participant training and competence requirements and initiate action to incorporate appropriate changes to ATON training programs.
    1. Management representative

The senior management of the training organisation should appoint a member of its own management who, irrespective of other responsibilities, should have defined authority for:

* Ensuring that the TMS is established, implemented and maintained in accordance with this standard; and
* Reporting on the performance of the TMS to the management of the training organisation for review and as a basis of improvement.
  + 1. Internal TMS Audits

The training organisation should establish and maintain documented procedures for planning and performing internal audits in order to verify whether activities comply with the requirements of the TMS.

Internal audits should be scheduled on the basis of the importance of the activity with respect to participant training. Personnel independent of those having direct responsibility for the area being audited should carry out internal audits. The complete TMS should be effectively audited at least annually.

The results of internal audits should be provided to personnel having assigned responsibility for the activity and the authority to perform corrective action where deficiencies are noted. Responsible personnel should perform timely corrective action on deficiencies discovered during the internal audit.

Follow-up audits should be conducted to verify and record the effectiveness of corrective action taken.

A record of internal audits should be maintained.

* + 1. Corrective and Preventive Action (CAPA)

The training organisation should:

* Establish and maintain documented procedures for the identification and correction of TMS deficiencies:
  + Review appropriate sources of information, such as non-conformance reports, audit reports, participant and customer complaints, and quality records to detect and eliminate potential deficiencies.
  + Analyse participant learning deficiencies for adverse trends that shall indicate a deficiency in the training plan or training delivery procedures.
  + Determine the root cause of deficiencies and implement corrective action to eliminate the deficiency.

Records of these activities should be maintained.

* + 1. Management Review

Senior management of the training organisation should review the TMS in accordance with documented procedures in order to ensure its continuing suitability and effectiveness in satisfying the organisation’s quality policy and training needs of the participants.

Internal management review should include the review of internal and external audit reports, reports of non-conformities and corrective actions taken and their effectiveness. Management should determine the need for any changes to policy or the TMS based upon the results of this review.

Management review should be conducted at least annually. A record of management reviews should be maintained.

* + 1. TMS Requirements

**General**.

The training organisation should establish, document, and maintain a TMS in conformance with the requirements of this standard as a means of ensuring that participants are trained in accordance with the requirements of pertinent model courses and any additional requirements of the Competent Authority.

**Training Management Manual**

TMS documentation should include a Training Management Manual. The Training Management Manual should at a minimum provide:

* A copy of the quality policy:
  + - An overview of the TMS of the training organisation.
    - An outline of the documentation structure of the TMS.
    - Cross references to the requirements of this standard.
    - References to pertinent TMS documentation.
* TMS procedures

The training organisation should:

* Document procedures consistent with the requirements of this standard and the stated quality policy;
* Effectively implement the TMS and its documented procedures. The level of detail provided in TMS procedures should be appropriate to the level of:
  + - Complexity of training and support functions.
    - The skills of instructors and support personnel.
    - Internal TMS training provided to training organisation personnel.
    1. Document and Data Control

**General**

The training organisation should establish and maintain documented procedures for the control of all documents and data, including those of external origin, that relate to the requirements of this standard, IALA Recommendation R0141 and the associated model courses and the Competent Authority.

**Document and data approval and issue**

TMS documentation should be reviewed and approved for adequacy by authorised personnel prior to issue. Document and data control procedures should ensure that:

* All documents and data are reviewed and approved for adequacy by authorised personnel;
* Personnel involved in review are provided with appropriate reference materials and background information upon which to base their approval;
  + - The revision status of TMS documents can be readily identified.
    - Pertinent TMS documents are available at all locations where work essential to the TMS is performed.
    - Instructor’s manuals and materials, and materials issued to participants are current.
    - Invalid or obsolete documents are removed from all points of use.
    - Obsolete documents retained for historical purposes are suitably identified and stored in order to preclude unintended use.

A record of all changes should be maintained.

**Storage of materials**.

Where appropriate, the training organisation should establish and maintain documented procedures for storage of training materials to preclude damage or deterioration.

* + 1. Resources

**Resources identification**

Senior management of the training organisation should identify and provide resources required to manage, support, conduct, and verify training activities. Resources at a minimum should include:

* Suitably qualified and trained personnel (i.e., instructors, examiners, etc.).
* Facilities, equipment and materials essential to the support of the TMS.

**Training of personnel of the organisation**

The training organisation should establish and maintain documented procedures for identifying the training needs of personnel performing management, training, examination and support functions. The organisation shall arrange for required training.

All personnel directly involved in participant training activities should have satisfactorily completed pertinent instructor training requirements prior to undertaking training responsibilities.

* + 1. Purchasing

**General**

The training organisation should establish and maintain documented procedures to ensure that essential services, facilities, equipment and materials supporting training comply with requirements including that:

* Subcontracted instructors are suitably qualified:
  + External facilities utilised in the training of participants comply with the requirements of the applicable training plan.
  + Equipment purchased for training is suitable for the applicable training plan.
  + Subcontracted organisations providing part or all of the training meet the requirements of the training plan.

**Evaluation of subcontractors**

Subcontractors should be evaluated on their ability to fulfil subcontract requirements. The training organisation should define subcontractor evaluation criteria and methods. The criteria applied and methods of evaluation should be appropriate to the impact of the service, facility, equipment or material on the training provided.

* + 1. Training Development

**Training course development.**

The training organisation should establish and maintain documented procedures to control and verify the development of training courses in order to ensure that training requirements are met. Training course development should ensure that:

* Responsibility and authority for training course development and review activities are assigned to qualified personnel:
  + - * Requirements of the pertinent model course and the Competent Authority are taken into account.
      * Training course objectives are defined in terms of targeted qualifications.
      * Participant knowledge and competence requirements are taken into account.
      * The appropriate use of simulators is taken into account.
      * Appropriate reference documents are made available to persons involved in training course development.
      * Materials are reviewed by pertinent functions within the training organisation.
      * Ambiguities within training course documentation are resolved.
      * Training course documentation review is controlled.

Records of development in ATON training courses should be maintained.

**Training course description**.

The training organisation should identify and document descriptions of each training course provided. Each training course description should include:

* The goals and objectives of the course:
  + - A course outline.
    - A course schedule.
    - The certificate or endorsement to be issued upon successful completion of the course.

**Training plan.**

The training organisation should plan how requirements for training shall be met. Training plans for each course should be defined and documented and include:

* A description of the training course: (see paragraph above).
  + - * Prerequisite participant qualifications.
      * Identification of required resources.
      * Instructor and/or examiner qualification requirements.
      * Instructor to participant ratio.
      * References to the course materials and applicable TMS procedures and documentation.
      * Procedures or instructions specific to delivery of the course.
      * Criteria for and methods of evaluating participant competence, knowledge, understanding and proficiency as documented in IALA Recommendation R0141.

Note: Instructor and/or examiner qualifications should include, where appropriate, skills in the use of simulators for instruction and verification of competence.

* + 1. Training Support Procedures

The training organisation should establish and maintain documented procedures for functions that support the delivery of training. The organisation should identify and plan these activities and ensure that they are conducted under controlled conditions. Controlled conditions include:

* Documented procedures where their absence could adversely affect training:
  + Use and availability of suitable equipment and facilities.
  + Maintenance of facilities and equipment that have a direct impact upon training
  + Observance of documented safety procedures.
    1. Application Review

The training organisation should establish and maintain documented procedures for reviewing the qualifications of applicants. The review should:

* Identify the qualifications sought by the applicant:
  + Evaluate applicant’s stated qualifications against prerequisite requirements for the pertinent training course.
  + Determine suitability of the training course for providing qualifications sought by the applicant.
  + Communicate with the applicant regarding suitability of course(s) and curricula offered to fulfil the participant’s qualification needs.

A record of all application reviews should be maintained.

* + 1. Verification of Participants’ Competence

**General.**

The training organisation should establish and maintain documented procedures for training verification activities.

**Acceptance verification**.

The training organisation should ensure that participant candidates fulfil prerequisite requirements detailed in the applicable training plan. The organisation should confirm the identity of participant candidates and verify suitable evidence of prerequisite qualifications prior to commencement of training.

In the event that prerequisite requirements cannot be verified prior to commencement of training, the organisation should take special note and ensure that the participant training is not considered completed until prerequisite requirements have been verified.

**Examinations and competence**

The training organisation should ensure that participant candidates adequately demonstrate all applicable knowledge and competence requirements prior to being considered as having successfully completed the training course.

Participants should be required to demonstrate adequate knowledge and competence in accordance with requirements of the training plan in order to be appropriately qualified.

The training organisation should establish and maintain documented procedures for the development and administration of examinations and tests for competence. As a minimum, examinations and criteria for evaluation of competence shall include applicable requirements of R0141, and of the Competent Authority.

Responsibility and authority for evaluation of participant knowledge or competence should be defined.

**Satisfactory completion**

The training organisation should maintain records of examinations of participant knowledge and competence in accordance with the requirements of the competent authority.

**Participant progress**

The training organisation should establish and maintain documented procedures for identifying and recording participant progress from application through completion of training.

Records of participant progress should be maintained.

* + 1. Certification and Endorsement

The training organisation should establish and maintain documented procedures for informing the Competent Authority (or Authorities if participants come from more than 1 nation) of the successful completion of participants’ training, if required.

The organisation should establish and maintain documented procedures for awarding ATON Course Certificates.

* + 1. Control of Participant Learning Deficiencies

Responsibility and authority for evaluation of participant knowledge and competence deficiencies should be defined. Deficiencies in regard to knowledge or competence should be reviewed in accordance with documented procedures. Where appropriate, participants should be:

* Retrained and re-examined in the specific area where deficiencies are noted;
* Failed and required to repeat the training course;
* Recommended to cease training.
  + 1. Control of TMS Records

The training organisation should establish and maintain documented procedures for the identification, collection, indexing, access, filing, storage, maintenance and disposition of TMS records in accordance with the competent authority or their representative.

TMS records should be maintained in order to demonstrate:

* Participants’ satisfactory completion of training and applicable competence requirements.
* Effective functioning of the TMS.

TMS records should be legible and stored in such a manner to preclude damage.

1. RECOMMENDED PRACTICES FOR ATON TRAINING ORGANISATIONS
2. PRACTICES AND PROCEDURES

Organisations providing ATON training should:

* Plan the teaching and training process that directly influences the quality of teaching and learning, and ensure that these processes are properly carried out.
* Clearly identify and carry out an assessment of prior learning to ensure all competencies, as indicated in IALA Recommendation R0141, are met.
* Establish and maintain documented procedures that specify:
* The approach to planning and application of course plans and lesson plans including use of teaching principles, methods and equipment in classrooms and simulator rooms;
* control and assessment activities put in place to ensure trainees acquire the necessary levels of competence for each module of the appropriate model course.
* appropriate training facilities to meet the documented training objectives.
* maintenance procedures for the training facility’s equipment.
* qualifications and competence requirements of instructors and assessors.
* adherence to appropriate health and safety requirements and regulations.
* Ensure all aspects of study progression are documented and disseminated to trainees, ATON Authorities and course managers as required.
* Continually control and evaluate teaching activities to ensure the learning results are in accordance with the appropriate course plan.
* Ensure that trainees who present themselves for final tests, examination, simulation evaluations or equivalent, have completed all the required course work and exercises, including simulator exercises where appropriate.
* Establish procedures for the maintenance and use of equipment during the training in order to ensure that:
* equipment and systems are maintained in accordance with the manufacturer’s instructions and, where appropriate, calibrated as and when necessary.
* equipment and systems are operated in a safe and efficient manner.
* working conditions in the training environment, such as lighting, ventilation and heating, conform to appropriate rules and regulations.
* Ensure that any consumable stores necessary to maintain equipment and systems in full working order are properly controlled and stored. Where the consumable stores could lead to pollution of the environment, the procedures should reflect workplace hazardous materials requirements.

1. ACTIONS FOR ENSURING TRAINING RESULTS

The organisation providing ATON training should:

* Arrange and carry out final assessments.
* Ensure that any assessment is carried out in accordance with the course plan, or other documented procedures, so that proof of the training results in accordance with the requirements specified in IALA Recommendation R0141 and the appropriate model courses, as well as any national requirements are met.
* Record training results and retain these as evidence that the competence of trainees is tested and controlled. These records should indicate the results obtained by trainees for each ‘subject area’ of each module of the appropriate model course.
* Establish, document and maintain procedures for any complaint received. Responsibilities for reviewing, handling and following-up complaints should be defined.

1. SAMPLE OF INFORMATION REQUIRED ON CERTIFICATE OF ACCREDITATION

COMPILATION OF A CERTIFICATE OF ACCREDITATION

The issuing authority/organisation should complete the texts in Italics in the example in the following manner

|  |  |  |
| --- | --- | --- |
| 1. | *Number* | A unique serial number should be inserted. |
| 2. | *Name of Training Organisation* | The full name of the organisation, as given in their official documentation should be inserted. |
| 3. | *Address of Training Organisation* | The full address of the organisation, as given in their official documentation, should be inserted. This may not necessarily be the address where the audit took place or where the training will be given. |
| 4. | *Dates of audit* | The dates on which the audit started and when it was completed satisfactorily should be inserted. |
| 5. | *Issuing Authority/Organisation* | The name of the issuing authority or organisation should be inserted. |
| 6. | *Name of Competent Authority* | The full name of the Competent Authority (CA) issuing the certificate should be inserted. |
| 7. | *Date of certificate* | The date on which the certificate is awarded should be inserted. This may not necessarily be the same as the date on which the audit was completed. |
| 8. | *Expiry date* | The date to be inserted should normally be five years less one day after the date on which the certificate was awarded. |
| 9. | *Dates (on page 2 - Periodic and additional audits)* | The first date to be inserted should normally be two years after the date on which the certificate was awarded. The second date to be inserted should be one year after the first date inserted.  (Only if required.) |

1. SAMPLE CERTIFICATE OF APPROVAL FOR AtoN TRAINING COURSES

|  |  |  |
| --- | --- | --- |
| Logo of IALA if the accreditation /approval process has conducted in accordance with IALA Guideline G1100  **Certificate of Approval**  **of AtoN Training Course** |  | Logo of issuing Competent Authority or designated body/organisation on behalf of the Competent Authority |
|  | **Certificate Number**  *[Enter number]* |  |

**This is to certify that:**

*[Enter name of Training Institute*]

*[Enter address of Training Institute]*

**has been audited during the period [***Enter dates of the audit]* **for the provision of**

**AtoN Training and found to be in compliance with**

**IALA Guideline G1100 on the Accreditation and Approval Process for**

**AtoN Training Courses.**

**The following training course has been verified to meet the IALA R0141 standards:**

|  |  |
| --- | --- |
| **Name of the Course (example)** | **Standard and version** |
| **Level 1 Aids to Navigation Manager** | **Model Course L1.1**  **[month / YYYY]** |

Issued by [*Issuing Authority/Org.]* on behalf of [*Enter name of CA]* on*[Enter date of certificate]* and valid until *[Enter expiry date ]*, subject to periodic audit(s) as required.

Authorised Signature

|  |
| --- |
| Space for any specific conditions of the Competent Authority |

*This certificate consists of 2 pages.* Page 1/2

**Sample of Periodic and Additional Audits**

|  |  |  |
| --- | --- | --- |
| Logo of IALA if the accreditation /approval process has conducted in accordance with IALA Guideline G1100 | **Certificate of Approval**  **of AtoN Training Course** | Logo of issuing Competent Authority or designated body/organisation on behalf of the Competent Authority |

**Certificate Number** *[Enter Number]*

**Periodic and Additional Audits** (*if required*)

|  |  |  |  |
| --- | --- | --- | --- |
| **Planned Periodic Audits** |  |  |  |
| **To be carried out between** | **Date audit carried out** | **Name of Auditor** | **Signature & Stamp** |
| **…../…../….. and …. /…. /….** *[Enter Number]* |  |  |  |
|  |  |  |  |
| **Additional Audits** |  |  |  |
| **Purpose and authorisation** | **Date audit carried out** | **Name of Auditor** | **Signature & Stamp** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. Note that potential Level 1 Managers should, where appropriate, participate in an IALA WWA Risk Management Workshop based on Model Course IALA WWA.L1.3 (Reference Model Course L1.1). [↑](#footnote-ref-1)
2. Recognised by the Competent Authority [↑](#footnote-ref-2)
3. Note that in some States, the CA responsible for STCW training may be different from the CA responsible for AtoN training. [↑](#footnote-ref-3)
4. IALA Recommendation L1.1 Section 4 provides guidance on instructors and teaching facilities. [↑](#footnote-ref-4)
5. Principally IALA Recommendation E-141 and model courses L1.1 and/or IALA WWA.L2.0 downloadable from the Publications page at www.iala-aism.org [↑](#footnote-ref-5)
6. recommended to be no longer than five years [↑](#footnote-ref-6)