### **Paperwork Reduction Act Burden Statement**

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid Office of Management and Budget (OMB) Control Number. The OMB Control Number for this information collection is 2120-XXXX (expires: mm/dd/yyyy). Public reporting for this collection of information is estimated to be approximately six hundred minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

All responses to this collection of information are voluntary. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Aviation Administration, 10101 Hillwood Parkway, Fort Worth, TX 76177-1524.

**Greetings!** On October 5, 2018, the President signed the FAA Reauthorization Act of 2018. Section 213 of the Act established a multidisciplinary expert review panel to conduct a survey of ODA Holders and applicants to obtain feedback on the FAA's efforts involving the ODA program and make recommendations to improve the FAA's ODA-related activities.

Thank you in advance for completing the following survey. Survey results will guide the FAA-Industry Panel's recommendations to Congress and FAA leadership. *We fully expect these recommendations to drive future ODA improvements. Your contribution (via survey completion) is invaluable to improving the ODA program. Thank you for your support!* 

#### Expectations & How to Take the Survey

# Please read this section in its entirety...

This fillable PDF version of the ODA survey is intended to assist ODA Lead Administrators to coordinate responses across the ODA, and represent those inputs in a single response to the FAA using an online survey. Lead Administrators are charged with using these inputs from the PDF version of the survey to provide the full scope of ODA perspective, and not only the opinion of the Lead Administrator.

Please note that each question will identify who we are targeting to answer each question, i.e., unit members, ODA Holder, or Lead Administrator. We identify who should answer the question at the end of each question by stating, for example, "Holder to Answer". This indicates that we want the ODA Holder to answer the question. Similarly, we may state "Lead Administrator to Answer" or "Unit Members to answer", which mean we want the Lead Administrator or Unit Members to answer each of those questions, respectively.

Based on who we have identified, we would like ODA lead administrators to consult with those individuals to complete each question. Please also feel free to consult with anyone else you feel is best able to help answer each question. While Lead Administrators are responsible for responding for the identified personnel, we expect you will answer each question for those we are targeting, and not based on your own personal opinion, should your opinions differ.

**WARNING: PLEASE** do not enter personally identifiable information (PII) in your survey responses. PII is defined as, "information that can be used to distinguish or trace an individual's identity, either alone or when combined with other personal or identifying information that is linked or linkable to a specific individual." This survey requires NO submission of PII. Certain open comment boxes in the survey don't prevent you from entering PII, and so survey administrators will take efforts to immediately remove PII from survey responses before we conduct analysis from survey results. You may review SurveyMonkey's privacy policy at https://www.faa.gov/privacy/.

Finally, this is a long survey and we fully appreciate the time and energy required for you to complete it – thank you for that. To ease the administrative burden, you may start, stop, save, and edit your responses. Thank you in advance for your participation!

ODA Improvement	Survey
-----------------	--------

#### **General Information**

1. Please select all the ODA types your company holds: (Lead Administrator to answer)

Note to Program Applicants: please provide the ODA types you expect to hold in the future

- TC ODA
- PC ODA
- STC ODA
- TSOA ODA
- MRA ODA
- PMA ODA

2. To my best estimation, my ODA's level of activity is: (Lead Administrator to answer) **Note to Program Applicants:** please provide your predicted ODA level of activity.

- O Very High
- O High
- O Medium
- O Low
- Very low

3. How many employees does your parent company have in total?

(Lead Administrator to answer)

4. Approximately, what percent of time do your ODA personnel support ODA-activities? (Lead Administrator to answer) **Note:** ODA personnel include all unit members, administrators, and support staff. **For Program Applicants,** please provide a predicted value.

5. Please identify which FAA Aircraft Certification Offices you generally interact with: (Lead Administrator to answer)

Note: you may identify up to five offices (you may need to scroll right, or down, on your browser to make your selection).

6. Please identify which FAA Manufacturing Inspection District Offices you generally interact with: (Lead Administrator to answer)

Note: you may identify up to five offices (you may need to scroll right, or down, on your browser to make your selection).

MIDOs

ODA Improvement Survey
7. Please identify which FAA Standards Staff Offices you most interact with: (Lead Administrator to answer)
Note: you may identify up to four offices.
Standards Staff Offices
8. Please identify which FAA Flight Standards District Offices you generally interact with: (Lead Administrator to answer)
Note: you may identify up to five offices.
FSDOs
9. Please identify which FAA Flight Standards District Offices you generally interact with: (Lead Administrator to answer)
Note: you may identify up to five offices.
AEGs

ODA Improvement Survey
<ul> <li>10. Please identify how many years has your company been an ODA Unit (for each ODA type), or held an organizational designation authorization? <i>Select all that apply.</i> (Lead Administrator to answer) <ul> <li>We do not hold a Designation yet (i.e., Program Applicant)</li> <li>0 to 1 years</li> <li>1 to 2 years</li> <li>2 to 3 years</li> <li>3 to 4 years</li> <li>4 to 5 years</li> </ul> </li> </ul>
5 to 6 years 6 to 7 years
7 to 8 years         8 to 9 years         9 to 10 years
More than 10 years Note: You can select multiple answers based on each ODA type. If you've held a designation for less than 3 years, we ask you to complete the applicant section of the survey.

**Program Applicant Questions** 

11. The FAA clearly communicated expectations throughout the ODA application process. (Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

12. If in the previous question you are neutral or disagree: Please provide recommendations on how the FAA can more clearly communicate expectations regarding the ODA application process: (Holder to answer)

13. The FAA provided sufficient resources to support my ODA application, while also providing appropriate support for my non-ODA activities. (Holder/Applicant to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

14. If in the previous question you are neutral or disagree: Please provide recommendations how the FAA can better support your ODA application without disruption to existing non-ODA activities: (Holder to answer)

15. I agree with the FAA's evaluation of my company's capabilities to perform ODA Holder responsibilities (e.g., corrective action management, self-audit, training, oversight, etc.). (Holder to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

16. If in the previous question you are neutral or disagree: Please describe in what ways you disagree with the FAA's evaluation of your company's capabilities to perform ODA Holder responsibilities: (Holder to answer)

ODA Improvement	Survey
-----------------	--------

17. I agree with the FAA's evaluation of my company's capabilities to perform authorized activities (e.g., Chapter 2 of FAA Order 8100.15, Unit Member qualifications, etc.). (Holder to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

18. If in the previous question you are neutral or disagree: did you experience any issues that you tried to resolve during the application process?

(Holder to answer, skip if you agreed or Significantly agreed in question 17)

Yes

No

Other (please specify)

19. If you answered YES in 18, What steps did you use resolve your issue?

(Holder to answer)

20. If you answered No in 18,Were you aware you could resolve your differences via existing processes (e.g., managing office escalation, Consistency and Standardization Initiative process, Partnership for Safety Plans, etc.)?(Holder to answer)

Yes

No

Other (please specify)

21. The FAA clearly set expectations regarding the ODA demonstration process when applying to become

an ODA. (Holder to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

22. Please provide recommendations on how the FAA can better communicate expectations regarding the ODA demonstration process: (Holder to answer)

23. Regarding the ODA application process, please provide recommendations on how to improve FAA Order 8100.15:

(Holder to answer)

24. The FAA encouraged the use of working agreements prior to submitting an ODA application. (Holder to answer)

**Note:** working agreements may include Partnership for Safety Plans, Memorandum of Agreement, Minor Change Agreements, Data Retention Agreements, among others.

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

25. If you utilized working agreements, did you feel they were effective at advancing your ODA application? (Holder to answer)

No

N/A

Other (please specify)

ODA Improvement Survey	
26. The FAA was consistent throughout all FAA Offices you interacted with during the processing of your ODA	
application.(Holder to answer)	
Significantly agree	
Agree	
Neither agree nor disagree	
Disagree	
Significantly disagree	
27. Please provide feedback on how the FAA can be more consistent in its processing of ODA applications throughout all FAA Offices. (Holder to answer)	
28. Please provide insight on why your company decided to make ODA application: (Holder to Answer)	
29. Please provide any other feedback you would like to help improve the ODA application process: (Lead Administrator to A	(nswer)

<b>ODA</b> Improvement	Survey
------------------------	--------

30. Did you indicate your organization is an ODA Program Applicant (i.e., does *not* have an ODA designation yet)? (Lead Administrator to Answer)

Yes, send me to the end of the survey

No, send me to the next section for ODA Holders

ertif	cation
31	. How do you most commonly interact with your OMT?(Lead Administrator to answer, applies to all
	DAs. You may select more than one option.)
	Virtual meetings
	Phone calls
	Emails
	Instant messaging
	Text messaging
	We do not interact much with our OMT
	Other (please specify)
32	In general, I am satisfied with the OMT's ability to make timely decisions throughout the certification
pro	cess.(Holder to answer, applies to all ODAs)
	Significantly agree
	Agree
	Neither agree nor disagree
	Disagree
	Significantly disagree
	. Please describe challenges have you experienced with the OMT's <i>inability</i> to make timely decisions oughout the certification process: (Holder to answer, applies to all ODAs)

34. After obtaining your ODA authorization, your project schedules have become more predictable. (Holder to answer, applies to all ODAs)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

35. Please provide recommendations on how the FAA can help make your schedules more predictable: (Holder to answer)

36. When a certification plan is **not accepted**, the OMT clearly communicates the reasons why.

(Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

37. Please describe in what ways the OMT fails to clearly communicate their assessment:

(Lead Administrator to answer)

38. When a certification plan is **not accepted**, in hindsight, you often agree with the OMT's feedback.

(Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

39. Please describe in what ways you often disagree with the OMT's feedback regarding certification plans:

(Lead Administrator to answer)

40. In general, the OMT provides adequate justification for why a finding was retained. (Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

41. If neutral or less: Please describe how the OMT can get better at providing adequate justification for why a finding was retained: (Lead Administrator to answer)

42. Please describe the top two challenges you experience regarding FAA involvement in your
ODA-managed projects? (Holder to answer)

43. Your ODA Holder is treated as an extension of the FAA.(Holder to answer)

Agree

Neither agree nor disagree

Disagree

Significantly disagree

44. If neutral or less: Please provide recommendations on how the FAA can better treat your ODA as an FAA extension: (Holder to answer)

Continued Operational Safety

45. When a Continued Operational Safety (COS) issue arises, my ODA appropriately prioritizes the COS issue over certification. (Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

46. If you agreed with the above: Please describe how your ODA appropriately prioritizes COS issues over certification: (Lead Administrator to answer)

47. If you disagreed with the above: Please describe ways your ODA could improve on prioritizing COS issues over certification: (Lead Administrator to answer)

48. The reporting requirements of 14 CFR 183.63 have significantly increased our administrative burden. (Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

49. Please provide recommendations on how to improve the 14 CFR 183.63 reporting requirements process: (Lead Administrator to answer)

Culture

50. Please describe how your ODA unit members obtain sufficient procedural and technical training to remain current/proficient in performing their duties as unit members?

(Lead Administrator to answer)

<b>ODA</b> Improvement	Survey
------------------------	--------

51. Complete this sentence:

OMT personnel changes have impacted your ODA \_\_\_\_\_.

(Lead Administrator to answer)

Positively

Negatively

Neither Positively nor Negatively

Both Positively and Negatively

Other (please specify)

52. Please describe how OMT personnel changes have impacted your

ODA:(Lead Administrator to answer)

53. Your ODA and the OMT have a collaborative relationship.

(Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

54. If you answered the last question negatively, please check the most likely reasons your ODA and the OMT fail to collaborate: (Lead Administrator to answer)

	Poor communication
--	--------------------

- Lack of participation
- OMT fails to reciprocate in the relationship
- Our ODA fails to reciprocate in the relationship
- Barriers exist that prevent the generation of a collaborative relationship
- Communication restrictions exist (from the OMT or your ODA)
- Other (please specify)

	A Improvement Survey What type of FAA-provided training for the ODA Holder would be most beneficial:
	<i>ct all that apply</i> .(Holder to answer)
Т	The ODA Holder is not currently in need of additional training
_ c	DDA Holder Senior Management Training
<u></u> ເ	Jndue Pressure
Y	/our Roles and Responsibilities
S	Showing Compliance
_ C	Obligations as an ODA Holder (e.g., COS, Self-Auditing, Self-Disclosure, Part 21, etc.)
C	Other (please specify)

56. The OMT is motivated to support your ODA.

(Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

57. Please provide recommendations on how to better incentivize the OMT, while still maintaining/promoting safety:

(Lead Administrator to answer)

58. I am satisfied with the OMT's willingness to work with us towards removing ODA-related limitations. (Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

59. Please describe ways the OMT can better work with your ODA to remove limitations: (Lead Administrator to answer)

60. Our ODA has an effective process for resolving undue pressure reports.

(Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

61. If you answered 'Significantly Agree', 'Agree', or 'Neither': Please describe what makes your ODA's undue pressure reporting process so effective:

(Lead Administrator to answer)

62. If you answered 'Significantly Disagree' or 'Disagree': Please provide ways your ODA could improve its undue pressure reporting process:

(Lead Administrator to answer)

63. Do you have an active process that *preemptively* determines the existence/level of undue pressure in your company? (Lead Administrator to answer)

Yes

No

Other (please specify)

64. If you answered yes, please describe the activities you use to *preemptively* identify undue pressure in your company: (Lead Administrator to answer)

Benefits of ODA

65. The benefits your company receives as a result of holding an ODA are worth the investment it takes to be an ODA Holder. (Holder to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

66. If you answered, 'Significantly Agree,' 'Agree," or, 'Neither agree nore disagree" Please describe the benefits your ODA receives that it expected as a result of having an ODA:

(Holder to answer)

67. If you answered 'Significantly Disagree', 'Disagree', or 'Neither': Please describe aspects of ODA that are the least value-added? (Holder to answer)

<b>ODA</b> Improvement	Survey
------------------------	--------

68. What changes would you make to improve the return on investment for your ODA? (Holder to answer)

69. How much would you guess the cost of certification has changed since you became an ODA? (Holder to answer)

70. Please describe what your *top two challenges* are for **each** of your ODA types:(Holder to answer)

71. The OMT is appropriately staffed to support my ODA's needs.(Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

72. If you selected, 'neither...' or, 'disagree,' Please describe why you feel the OMT is not appropriately staffed to support my ODA's needs:(Lead Administrator to answer)

Delegation/Designation

73. In general, I agree with the limitations associated with my ODA authorization.

(Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

74. If you disagree with limitations, please explain why you feel your limitations are inappropriate: (Lead Administrator to answer)

75. If you disagree, Please select the most common reasons you are given for your limitations:(Lead

Administrator to answer)

Insufficient expertise of personnel

Insufficient experience demonstrated by the company

The need is not demonstrated

Performance deficiencies

Other (please specify)

76. In general, my ODA is allowed to use its delegation appropriately. (Lead Administrator to Answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

77. If you disagree with the previous question: Please describe ways your ODA is *not* able to use its delegation appropriately:

(Lead Administrator to answer)

78. I am satisfied with the OMT's willingness to work with my ODA to address how previously-retained findings can be delegated in the future.

(Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

79. If you disagree: Please describe ways the OMT can better work with your ODA to address how previously-retained findings can be delegated in the future: (Lead Administrator to answer)

80. In general, the OMT grants my ODA the appropriate level of delegation.

(Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

81. If neutral or disagree: Please describe how the OMT can get better at granting the appropriate level of delegation: (Lead Administrator to answer)

Procedures Manual

82. Would your ODA benefit from policy that further standardizes Procedures Manuals?

(Lead Administrator to answer)

83. What changes would you like to see in Procedures Manual policy to enable more flexibility?

(Lead Administrator to answer)

84. Have you experienced a significant rewrite of your approved Procedures Manuals? (Lead Administrator

to answer)

Yes

No

Other (please specify)

85. If yes, Approximately how long did it take for your rewritten Procedures Manual to get

approved?(Lead Administrator to answer)

86. If over 1 year: Please describe why your rewrite took so long. Please also provide recommendations to reduce future rewrite times: (Lead Administrator to answer)

ODA Internal Self-Audit

87 What system does your ODA use for a Voluntary Disclosure Reporting Program?

(Lead Administrator to answer)

No system

AC 00-58

AC 00-68

Other (please specify)

88. If you didn't answer, "No System:"

Please provide recommendations on how to improve your Voluntary Disclosure Reporting Program:

(Lead Administrator to answer)

89. My ODA would benefit from policy that standardizes Root Cause Analysis

processes.(Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

90. If you answered, 'Significantly Agree', 'Agree', or 'Neither': Please describe how your ODA would benefit from policy that standardizes Root Cause Analysis processes: (Lead Administrator to answer)

91. My ODA would benefit from policy that standardizes Corrective Action processes. (Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

92. If you answered, 'Significantly Agree', 'Agree', or 'Neither': Please describe how your ODA would benefit from policy that standardizes Corrective Action processes: (Lead Administrator to answer)

FAA Oversight

93. In general, the OMT is involved with our ODA an appropriate amount to conduct oversight. (Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

94. If neutral or less: please describe how the OMT can participate with your ODA a more appropriate amount: (Unit Members to answer)

95. In general, the level of effort required to address corrective action from FAA oversight is appropriately scaled for the severity of the issue. (Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

96. If you answered neutral or less to above: Please provide recommendations on how the FAA can better scale your ODA's level of effort in addressing FAA oversight feedback: (Lead Administrator to answer)

97. If you answered neutral or less to above: My ODA is able to provide the appropriate amount of resources to address FAA feedback.(Lead Administrator to answer)

Significantly agree

Agree

Neither agree nor disagree

Disagree

Significantly disagree

ODA Improvement Survey
98. Please provide your <i>top two recommendations</i> on how to improve how the FAA is currently exercising ODA Oversight: (Lead Administrator to answer)
99. Are you receiving sufficient feedback from your OMT regarding your performance as an ODA Unit?
(Lead Administrator to answer)
Yes
No Other (please specify)
Other (please specify)
100. If you answered No or Other: please describe how your OMT can provide better feedback: (Lead Administrator to answer)

egative egative either Positive nor Negative oth Positive and Negative	ositive egative either Positive nor Negative	Administrator to answer)		
either Positive nor Negative	either Positive nor Negative oth Positive and Negative	Positive		
oth Positive and Negative	oth Positive and Negative	Negative		
		Neither Positive nor Negative		
her (please specify)	ther (please specify)	<b>3oth</b> Positive and Negative		
		otner (please specify)		

Conclusion

We kindly thank you for taking time to complete this survey. We appreciate you helping us to influence positive change in the ODA program.

If you so choose, you may now email this survey PDF to your ODA Lead Administrator, who will use it to complete one consolidated survey for your ODA, or you may return to the beginning to review your answers. **Please save this PDF first** before selecting the "Email your responses" button.