

Landing Page Information (First page in Qualtrics before proceeding into the survey)

OMB Control Number:

OMB Expiration:

Summary (Annual numbers)	Reporting	Recordkeeping	Disclosure
# of Respondents	324	0	0
# of Responses per respondent	1	0	0
Time per Response	20 mins (1/3 hr)	0	0
Total # of responses	324	0	0
Total burden (hours)	108	0	0

This survey is designed to gather information on actions taken by operators in response to the Federal Aviation Administration's (FAA) Safety Alert for Operators (SAFO) 17007, titled *Manual Flight Operations Proficiency*. Your responses will provide critical informational support to a broader research effort to understand how manual flight operations proficiency is currently addressed and maintained, and how manual flight operations proficiency could be addressed and maintained in the future.

SAFO 17007 *Manual Flight Operations Proficiency* recommends operators use training and line-operation policies which encourage pilots to develop and maintain manual flight operation proficiency. The survey questions are specific to the actions taken by operators in response to the recommendations included in SAFO 17007.

If you would like to review SAFO 17007, it can be accessed by clicking the link below. If accessed, the SAFO will open in a separate window so you can keep it available for reference as you complete the survey.

[SAFO 17007 Manual Flight Operations Proficiency
\(https://www.faa.gov/other_visit/aviation_industry/airline_operators/airline_safety/safo/all_safos/media/2017/SAFO17007.pdf\)](https://www.faa.gov/other_visit/aviation_industry/airline_operators/airline_safety/safo/all_safos/media/2017/SAFO17007.pdf)

This survey is distributed by the MITRE Corporation under project funding from the Federal Aviation Administration (FAA).

All answers, and personal/organizational information associated with this survey will be de-identified. All information will be coded and summarized so that no individual person or organization can be identified in the results.

If you have any questions or comments about the survey, please do not hesitate to contact the project leader, Dr. Beth Lyall-Wilson at elyallwilson@mitre.org.

We want to make sure we have the best information available, so if you believe there are additional people in the organization that would be appropriate to take this survey, please “reply” to the email with the survey, or email Dr. Lyall-Wilson directly with name(s) and contact information so the survey can be sent directly to them.

NOTE: Please do not “forward” the survey to additional people because this link is specific for you.

Do you understand the purpose of this survey?

Yes

No (Please contact elyallwilson@mitre.org with questions, comments, concerns)

Do you agree to participate in the survey?

Yes

No

(This survey is completely voluntary. If you answer “No” and will not be participating in the survey, you will be directed to a short feedback section and an exit from the survey).

[A “no” response will branch them to a feedback text block and an exit from the survey at that point. The feedback text block will have this statement above it]

We would appreciate you letting us know why you will not be participating the survey and any other feedback you would like to provide. We are focused on improving aviation safety through our studies, and any feedback you give us will be used to better implement this survey and improve future survey development.

Feedback _____

Survey Content for Training

Each question in the survey will provide a free text area for Additional Feedback if you wish to elaborate further on any question. Please feel free to use this area to provide additional insights or comments. Some question responses may require Additional Feedback.

1. Are you currently employed by a Part 121 or Part 135 operator?
 - a. Part 121
 - b. Part 135
 - c. Other

Additional Feedback _____

2. What position do you currently hold with the Part 121 or Part 135 operator? (Select all that apply)
 - Director of Operations
 - Director of Standards
 - Director of Training
 - Director of Safety
 - Check Pilot
 - Training Pilot

- Line Pilot
- Other (please specify in the Additional Feedback area)

Additional Feedback _____

[A scrolling text box showing 5 lines of text at a time will be used for all free text areas regardless of how they're labeled.]

3. If known, which office/department at your operator is responsible for addressing SAFO-recommended actions when they are received? (Select all that apply)

- Training
- Corporate Safety
- Flight Safety
- Operations
- Standards
- Do not know
- Other (please specify in the "Additional Feedback" area if known)

Additional Feedback _____

4. If known, please select the specific actions that Training implemented in response to SAFO 17007 *Manual Flight Operations Proficiency* (Select all that apply).

- Updates or revisions to training policies on Manual Flight Operations
- Instituted new emphasis related to Manual Flight Operations opportunities for line pilots
- Instituted awareness campaign on Manual Flight Operations importance for line pilots
- Provided input to the development of new/revised training related to SAFO 17007
- Provided input to new safety initiatives related to SAFO 17007
- Do not know
- Other actions (Please specify in the Additional Feedback area if known)
- No Action (Please specify why no action was taken in the Additional Feedback area if known)

Additional Feedback _____

5. If known, approximately how long did it take to implement and complete SAFO 17007 – *Manual Flight Operations Proficiency* recommendations into your operational policies and guidelines? (i.e., approximately how long did it take from the publication date (May 2017))?

- We were already fully compliant with SAFO 17007 when it was published
- 1 – 3 months

- 3 – 6 months
- 6 – 9 months
- 9 months to 1 year
- More than 1 year
- Do not know
- Other (please specify in the Additional Feedback area)

Additional Feedback _____

6. If changes were implemented as a result of *SAFO 17007 Manual Flight Operations Proficiency*, what data sources were used to assess the effectiveness of the changes? (**Select all that apply**).

- ASAP data
- FOQA data
- LOSA data (or LOSA equivalent)
- Other data

Additional Feedback _____

7. For each data source used, please describe the metrics and how they were utilized in the text area provided.

If you used ASAP data, please describe your metrics and how they were utilized.

Text Box

If you used FOQA data, please describe your metrics and how they were utilized.

Text Box

If you used LOSA data (or LOSA equivalent), please describe your metrics and how they were utilized.

Text Box

If you used Other sources of data, please describe your metrics and how they were utilized.

Text Box

8. The following three recommendations are included in *SAFO 17007 Manual Flight Operations Proficiency*. Please indicate whether or not each recommendation is addressed and provide any other comments in the Additional Feedback area.

- a. SAFO 17007 Manual Flight Operations Proficiency: “Manual flight is the foundation upon which other technical flying skills are built. Therefore, the primacy of manual flight should be emphasized throughout all flight training syllabi, while recognizing that manual flight operations involve more than motor skills”.

- Yes
- No
- Do not know

Additional Feedback _____

- b. SAFO 17007 Manual Flight Operations Proficiency: “All curricula should include training and proficiency assessments of manual flight operations”.

- Yes
- No
- Do not know

Additional Feedback _____

- c. SAFO 17007 Manual Flight Operations Proficiency: “Potential training scenarios for manual flight operations, in addition to the new Part 121 training requirements, could include the following:
- i. Out of trim conditions – how to recover
 - ii. Workload management during manual flight (as it pertains to both the pilot flying (PF) and pilot monitoring (PM))
 - iii. Go-arounds initiated at other than minimum descent altitude (MDA)/decision altitude (DA)
 - iv. Visual approaches in various weather or light conditions
 - v. Operations in all approved combinations of automation based on aircraft equipage, e.g.,
 - 1. Flight director (FD) on, autopilot (AP) off, autothrottle/autothrust (AT) on
 - 2. FD on, AP off, AT off
 - 3. FD on, AP on, AT off
 - 4. FD off, AP off, AT off
 - 5. FD off, AP off, AT on”

- Yes
- No
- Do not know

Additional Feedback _____

9. Have Crew Resource Management (CRM) practices, requirements, or training changed in response to *SAFO 17007 Manual Flight Operations Proficiency* recommendations? (Please describe specific CRM practices or requirements that have changed).

Text Box

10. Please add any other information that you would like to share related to Manual Flight Operations Proficiency, including policies, procedures, training, or other topics.

Additional Feedback _____