

# Zero error culture – an attainable goal?

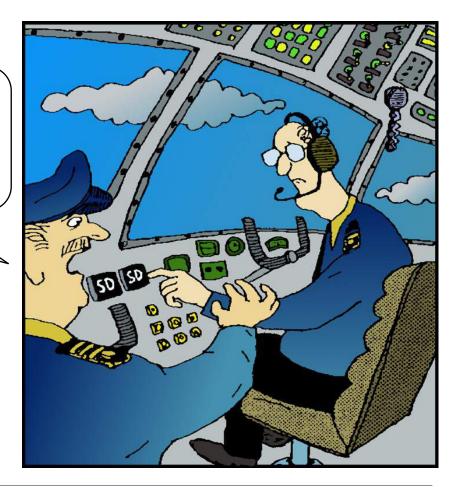
Cross-functional contribution to BIM Community 2017 in Aarhus

Stephan Lange | Quality Manager Aircraft component Services | 04<sup>th</sup> Oct 2017



# "MAN - A creature that was created at the end of the week when God was very tired." Mark Twain

"No! No! That's Self-Destruct!
Set Distance is the one on the left."



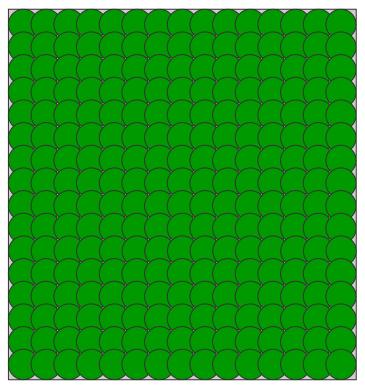
# **Agenda**

Capacity Modell

General Flight Safety Aspects

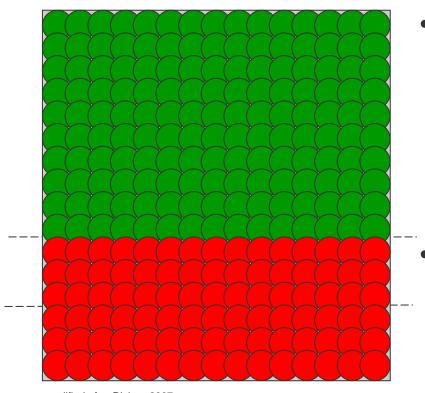
Human Error Theory Aspects

Lufthansa Techik Error Management



modified after Richter 2007

- Individual resources as "Performance Capacity" to cope succesfully with situation
- Amount of "green bubbles available may vary:
  - day by day
  - from individual to individual

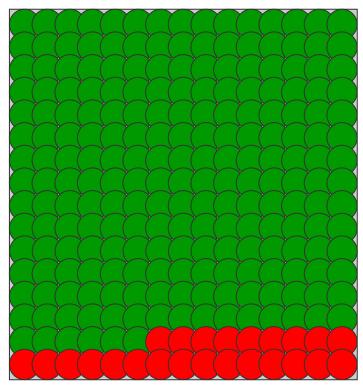


Individual Resources

Psychological & physiological factors do have limiting effect on resources available.

modified after Richter 2007

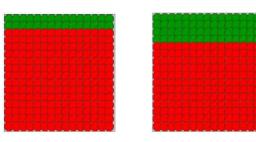
- 1. Question is, how much resources have we got at a specific time/ place/ situation to avoid making errors?
- 2. Revelation about current disposition does safe lifes and does save costs.



modified after Richter 2007

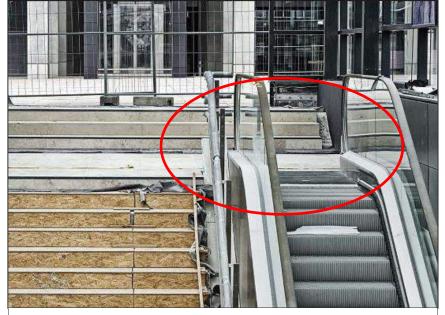
- My personal capacity model today
- Limited by nervousness and sleep deficit by 4 weeks old daughter
- Extension by personal motivation to support BIM Community 2017 approach to reflect and challenge "zero error culture"

#### **BER Airport staircase**



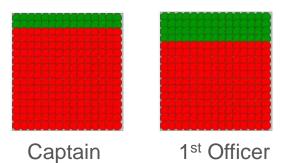
Manager

Architect



"Staircase" as one of many deficiencies of BER Airport supposed to start operation in 2011. Still closed.

#### Air Canada 759 "near miss" 7th July 2017



Air Canada 759

PAL 115

17,90 Meter

16,80 Meter

UAL 1

ACA 759

ACA 759 cleared to land on RWY 28R of San Francisco Airport but almost landed and crashed into 4 Aircrafts waiting on Taxiway.

#### ACA 759 – mental set issue?

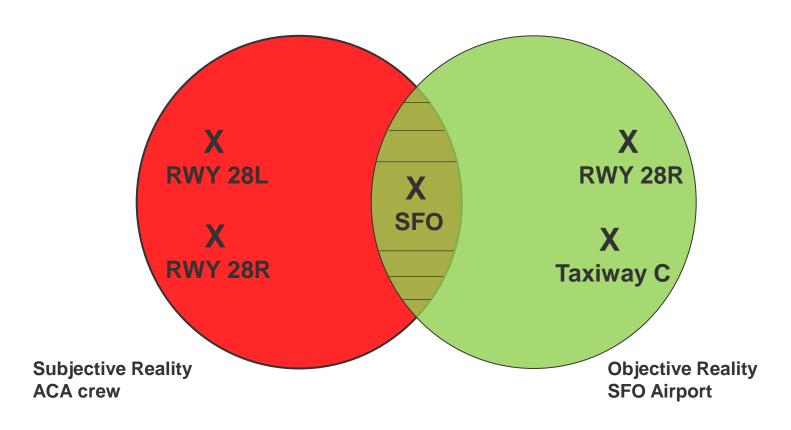


- Runway 28L (left) was closed and marked accordingly.
- ACA 759 was cleared to land on RWY 28R (right) but somehow mistakenly thought that the Taxiway C is RWY 28R.
- Taxiway "C" occupied with 4 Aircrafts

No investigation report yet. Could have been biggest air disaster ever.

Likely cause: low situational awareness due to mental set of 2 RWY and target fixation.

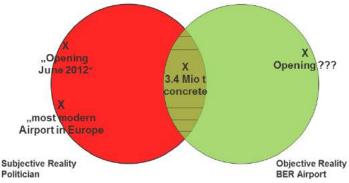
### Mental set of two runways?



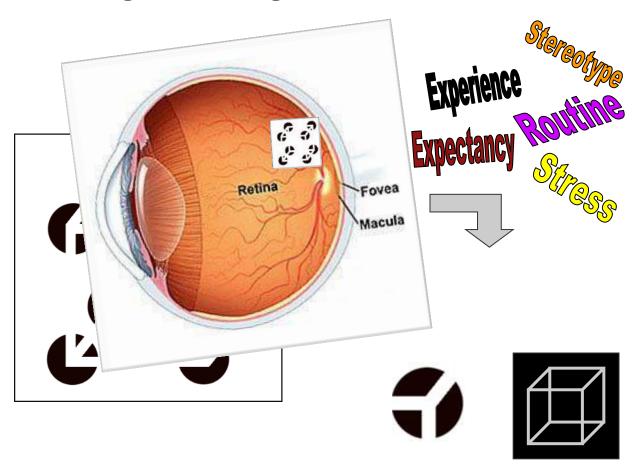
- Situational Awareness measures the degree of coincidence between subjective and objective reality.
- **Mental set** is a readiness for a particular thought process to the exclusion of others resulting in **fixation and/ or selective perception** to perceive the things we want to have them.

# Berlin Airport – low situational awareness selective perception of most modern airport in Europe?



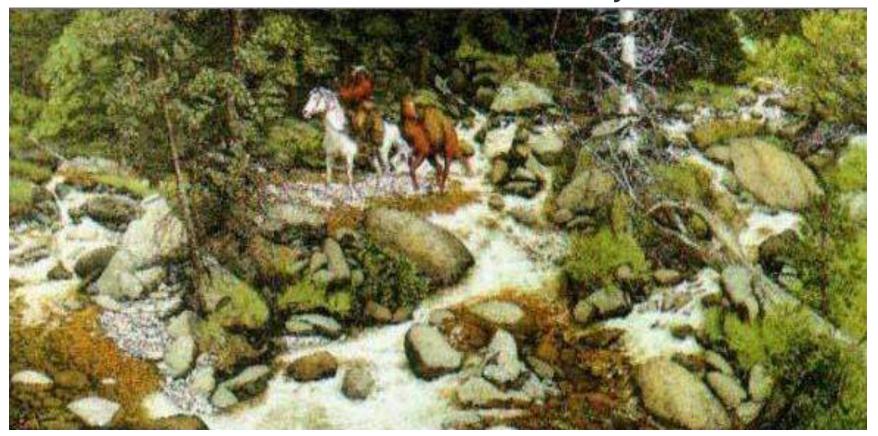


Seeing ≠ Perceiving



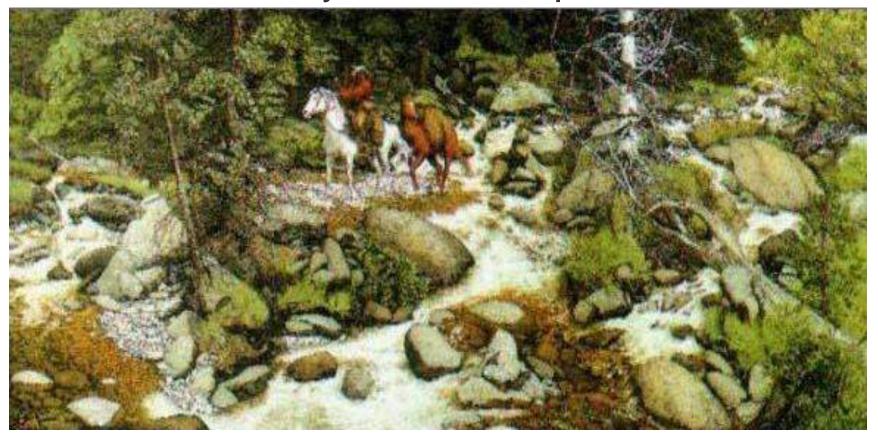
### **Selective Perception**

# On which horse does the cowboy sit on?



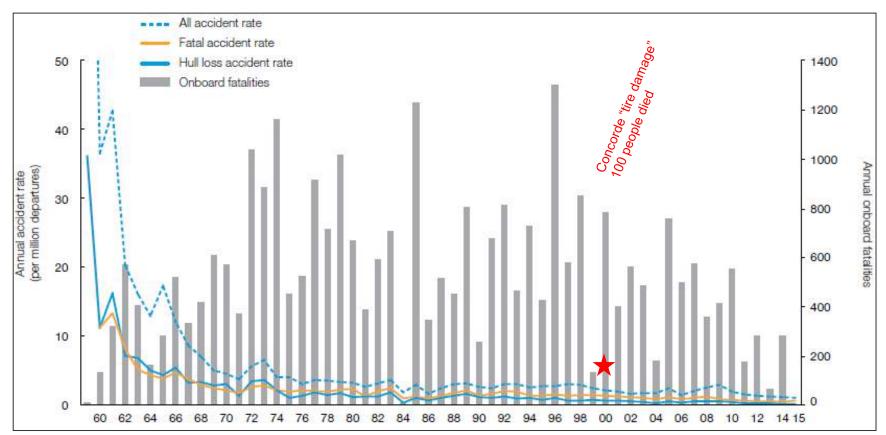
### **Selective Perception**

## How many faces are on the picture?



# **General Flight Safety Aspects**

Worldwide accident rates and onboard fatalities by year 1959 through 2015\*

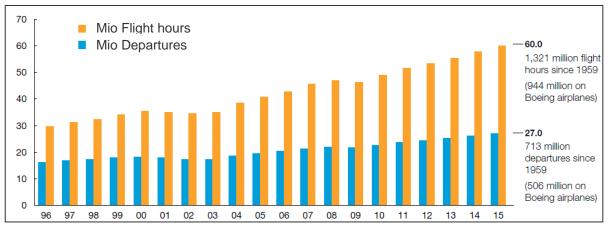


BOEING statistical summary via www.aviation-safety.net

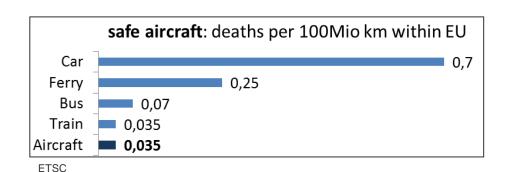
- Significant decrease of flight accidents past 60 years caused by
  - technical improvements and increase of reliability & cockpit automation (1960s)
  - first Human factor studies late 70s which became mandatory part of pilot qualification syllabus as "Crew Resource Management Training focusing on non technical skills (90s)
  - 3.7 Billion passengers in 2017 expecting to grow to 7 Billion in 2037 (IATA)

# **General Flight Safety Aspects**

## Worldwide departures, flight hours 1996 – 2015 and some safety figures



BOEING statistical summary via www.aviation-safety.net

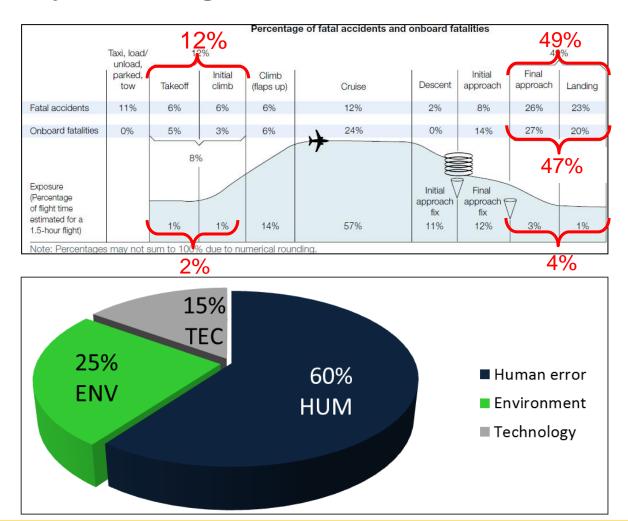


JACDEC					
RANK	AIRLINE	CODECS			
1	Cathay Pacific Airways	CX, CPA	会		
2	Air New Zealand	NZ, ANZ	***		
3	Hainan Airlines	HU, CHH	_		
4	Qatar Airways	QR, QTR			
5	KLM	KL, KLM	=		
6	EVA Air	BR, EVA			
7	Emirates	EK, UAE			
8	Etihad Airways	EY, ETD			
9	QANTAS	QF, QFA	***		
10	Japan Airlines	JL, JAL	•		
11	All Nippon Airways	NH, ANA	•		
12	Lufthansa	LH, DLH			
13	TAP Portugal	TP, TA			
14	Virgin Atlantic Airways				
15	Delta Air Lines				
16	Air Canada				

- Flight hours and departures doubled past 20 years to 60Mio hrs and 27Mio departures p.a.
- Generally Aircrafts are very safe by 0.035 deaths per 100Mio km
- "If you fly once a day you will have to wait 14000 years to encounter fatal accident" JACDEC \*exclusions defined by BOEING

# **General Flight Safety aspects**

## Accidents by Phase of flight and Causes of aircraft accidents



- ~ 50% of fatal accidents during final approach/landing although this phase takes 4% time only
- ~ 50% to 75% of all accidents caused by human error

# **General Flight Safety aspects**

# **WHY Crew Resource Management**

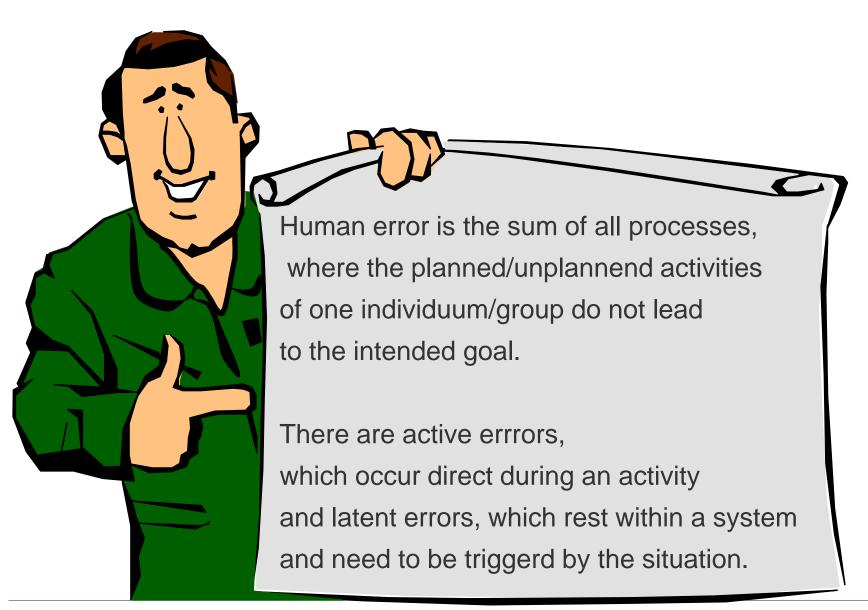


CRM Modules/ Syllabus		
Error Management		
Company Safety Culture		
Stress Management		
Decision making & Risk Assessment		
Communication & Cooperation		
Leadership		
Situational Awareness		
Case studies		

Crew Resource Management (CRM) is the effective use of all available resources to achieve safe and efficient operation and ha,

...to start from the beginning, what does makes this scene so interresting?





#### Active error vs. latent condition

# Active Failure

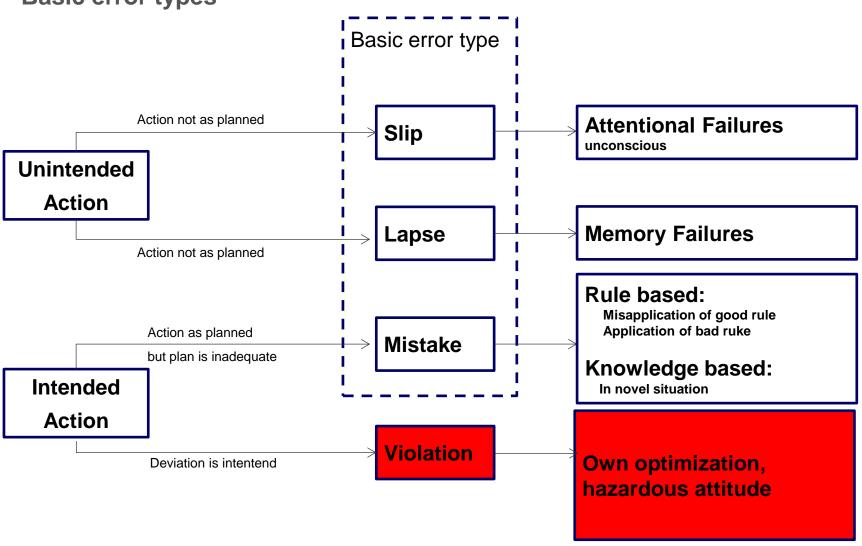
- unsafe acts, done be sharp enders/ operators
- always connected with negative consequencies
- create weaknesses in protective layers

Latent condition

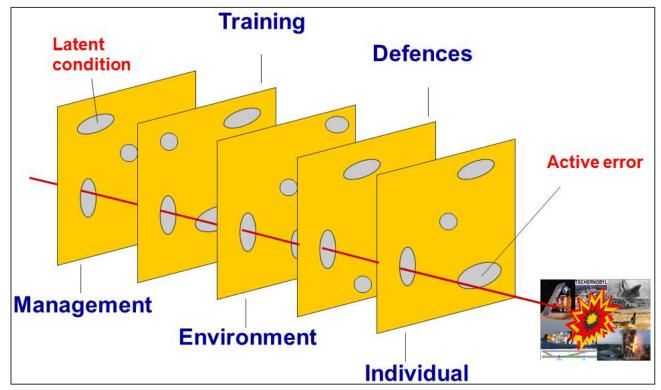
- longer lasting than active failures
- they are present within a system prior to an advers event and have not been recognised as long an icident/accident occurs
- often unwittingly seeded by designers, engineers, managers

All attempts to discover and neutralize latent errors are more successful, than fighting active errors.

#### **Basic error types**



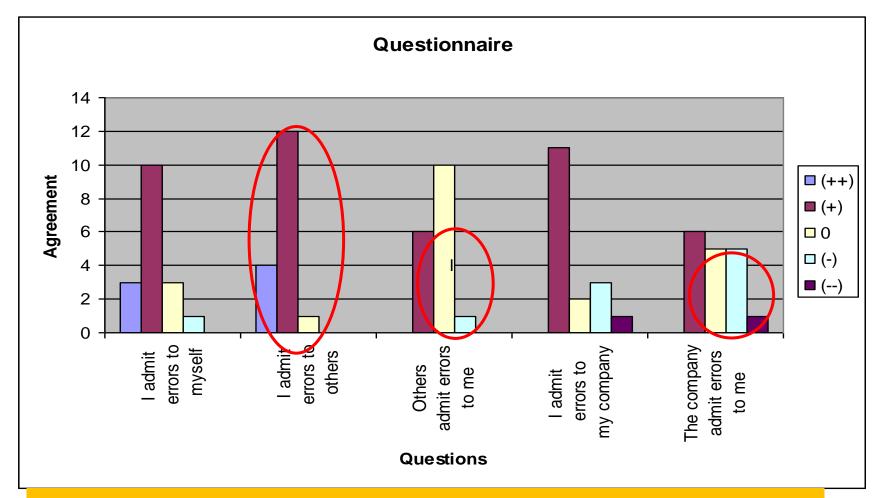
#### **Swiss Chees Modell**



modified after Reason

- Systemic approach by J. Reason
- Safety barriers/ strategies to be established by organizations to avoid direct trajectory of erros
- Active erros and latent condition create weaknesses and holes

#### Quick check for error culture



 For quick check ask your team/ organization of how thy feel when it comes to mistakes. Interesting results to talk about...

# Concorde accident at Charles de Gaulle Airport Paris 7/2000

background information

#### Cause

According to french investigation report (BAE) catastrophe was caused by 43cm stainless metal strip which laid on Runway. Contrary to the original part which was made of aluminium this metal strip was made of titanium. If tyre had rolled over the original part, the tyre would have been damaged.

#### Chain reaction



Debris with transverse cut 32cm

The metal strip which had fallen from another aircraft damaged one tyre when Concorde rolled over it. Debris (4,5kg) was thrown against the wing structure leading to a rupture of a tank. A major fire, fuelled by the leak, broke out almost immediately under the left wing and finally caused the aircraft to crash in a hotel. 113 people died

#### **Question of guilt**

The titanium metal strip fell of from a another aircraft DC-10 (US operator) which had taken off 5min earlier. Investigation revealed that the maintenance staff deviated from maintenance instructions. Instead of using an aluminium part they used a titanium metal strip. Neither metal strip nor riveting work performed to assembly the strip was in accordance to maintenance manual of the OEM.



Metal strip on Rwy

# Concorde accident at Charles de Gaulle Airport Paris 7/2000 background information

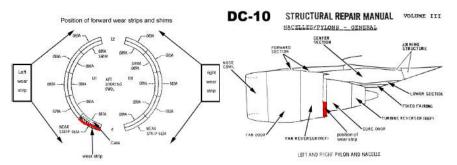


Figure 51: Diagram showing the position of the wear strips





Position of wearstrip at DC10 thrust reverser

#### **BAE Investigation:**

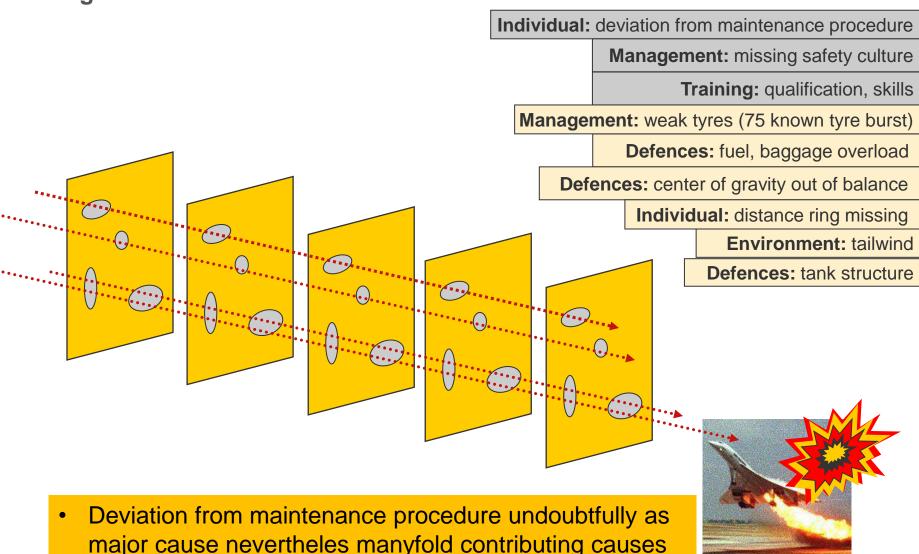
"In aviation, maintenance is a critical element for safety and it is indispensable to complete all the necessary checks, however urgent the operation may be....

The **loss of the wear strip** from the thrust reverser door on the Continental Airlines DC-10 originated **from lack of rigorous** maintenance...

...inadequate adherence to maintenance procedures by the various workshops that carried out work on the reverser cowl. Thus the engine cowl support was drilled with thirty-seven holes whereas the installation of the strip requires only twelve; equally, a titanium piece was used ...which is not normally used for this operation"

# Concorde accident at Charles de Gaulle Airport Paris 7/2000

background information



# **Lufthansa Technik Group – Facts & figures**

Leading provider of MRO services in the world's airline business

800+ customers worldwide



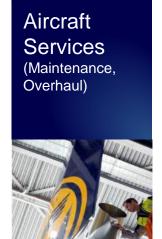




~21.000 employees worldwide\*







Engine Services



Component Services



Landing Gear Services



VIP & Special Mission Services

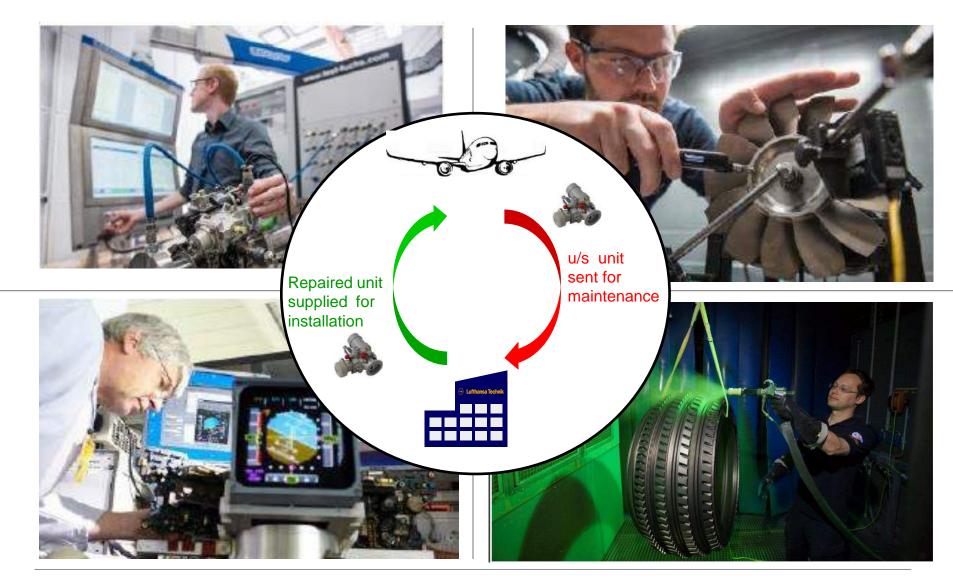


Digital Fleet Solution



# **Lufthansa Technik – Component Services**

**Every Aircraft of the world operates with parts from LHT Component Services** 



# **Lufthansa Technik – Component Services**

**Every Aircraft of the world operates with parts from LHT Component Services** 



Promote learnings from errors to prevent recurrence!

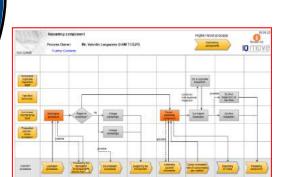
Work in accordance to maintenance manuals & Aviation Authority Requirements!

"Our products and services become ...



Integral part of our customers safety nets."

T. Stüger, Member of Executive Board



Report errors via occurrence reporting tool to ensure investigation & sustain correction!

Follow defined process to ensure high standardization!

# **Lufthansa Technik – Component Services**

incorrect position of ball in the valve assy

Customer PO	2278901		
LHT reference	accelerated pool supply request 24989589		
Part designation / description	VALVE ASSY-WASTE SYS		
Part Number	2651-357-13		
Serial Number	145416		
Engine type - Customer	./.		
Description of problem	Customer requested Valve assy P/N 2651-357-13 S/N 145416. In order to avoid AOG unit was accelerated by customer service. OVHL of this unit was performed according CMM ATA 38.38.10 Revison date 31.08.2009 and included cleaning, dissassembly and repair of parts. During assembly ball was assembled according to drawing of CMM but finally incorrect.		
Qty of parts	1		

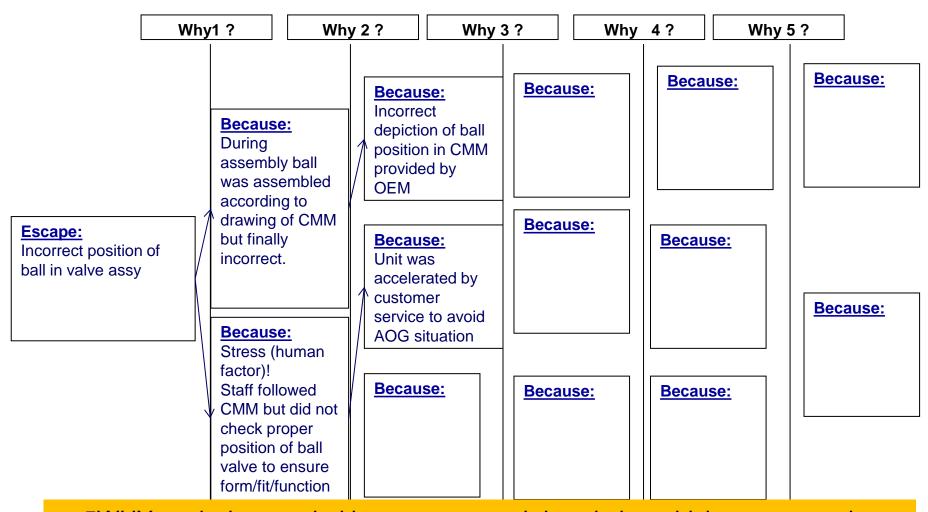
Customer complaint because of incorrect assembly.
 Component could not be installed on aircraft.

# 8D report\_ VALVE ASSY-WASTE SYS PN 2651-357-13 SN 145416

# incorrect position of ball in the valve assy

D1: Team  1. Team description	1		
D2: Problem  1. Supplier to describe discrepancy	1. see page 1		
D3: Risk control + immediate measure  1. Assess risk! (low-medium-high) 2. State immediate action! 3. Define impacted population! 4. State containment action! 5. Did supplier contain escape?	<ol> <li>medium (unit could not be assembled to aircraft but caused AOG situation)</li> <li>correct installation of ball in valve assy</li> <li>1ea</li> <li>stock check</li> <li>yes</li> </ol>		
D4: Root cause analysis  1. Do "5 Why"	1. next page		
D5: Planned corrective actions  1. Regarding creation 2. Regarding detection	<ol> <li>Product Engineer to inform OEM to ensure correct CMM with proper and clear explanation of ball position</li> <li>Creation of supplemental page to be embedded in LHTs component maintenance document system "CMDS" and information to all mechanics of this workshop in shop performance dialog. Additionally this case will be used as case study for next human factor training.</li> </ol>		
D6: Implemented corrective actions  1. Regarding creation 2. Regarding detection	No answer yet from OEM Rockwell Collins     See D5 & additionally stock check was performed by LHT including 1ea BOX home base unit SN 141689 which turned out to be assembled correctly      Implementation date: still open but follow up     Implementation date: 26.08.2015		
D7: Actions to prevent recurrence  1. FMEA or other actions 2. Provide evidences	<ol> <li>./.</li> <li>See pictures attached slide 4-5. Demonstration during BOX Audit calendar week 39.</li> </ol>		
D8: Congratulation 31. Nather ଦ୍ୟା ଓଡ଼ୋଗରୀ ଧାରଣ ଅଧାରଣ ଅଧାରଣ	Stephan Lange, 17.09.15  Lufthansa Technik		

# 8D report\_ VALVE ASSY-WASTE SYS PN 2651-357-13 SN 145416 incorrect position of ball in the valve assy

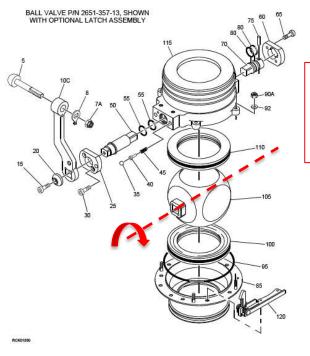


 5WHY analysis revealed incorrect manual description which was correctly followed but led to incorrect assembly

# 8D report Ball valve PN 2651-357-13 SN 145416 incorrect position of ball in the valve assy



#### Rockwell Collins COMPONENT MAINTENANCE MANUAL with IPL



Ball 105 with incorrect position as per CMM. If you rotate the ball 90° as shown the curved backside of the ball will be on top side in closed position.

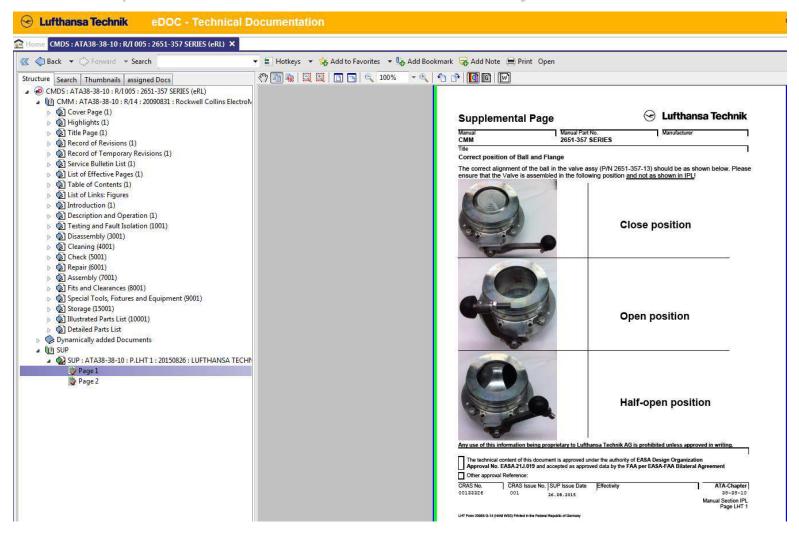
Panel Mounted Ball Valve Assembly (Sheet 10 of 12) IPL Figure 1

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Correct position of ball will ensure flat side on top in closed position.

**Lufthansa Technik** 

# 8D report\_ VALVE ASSY-WASTE SYS PN 2651-357-13 SN 145416 incorrect position of ball in the valve assy



Screenshot of supplemental page 1 embedded in CMDS explaining correct ball position

# **Core Message**

- 1. "To err is human." To strive for a "zero error" state, it is not an attainable goal! Errors are inevitably and reflect the strengths and weaknesses of human mental functioning.
- 2. Succesfull Error Management in organisations avoids "blaming" and reduces the negative consequences of errors. It promotes learning & innovation and it positively correlates with firm performance.
- 3. Try to find out circumstances which caused errors and figure out WHY the behaviour might have been rational to the people involved!
- 4. People are prone to make mistakes in novel situation. Nevertheless errors mark the boundaries of an acceptable, innovative way forward.
- 5. Difference between active errors and latent condition. Level of consciuosness differenciates slips, lapses, mistakes and violations.
- 6. Designers, Architects, Engineers ... are prone to seed latent failures/ conditions into a system which will rest there and which are present prior to an active failure.
- 7. Violations decline with age/ seniority, errors do not. Men at all ages violate more often than women whereas women are more lapse prone ("uppsis").

#### **End**



... and Dave from Lufthansa has finished his lecture.

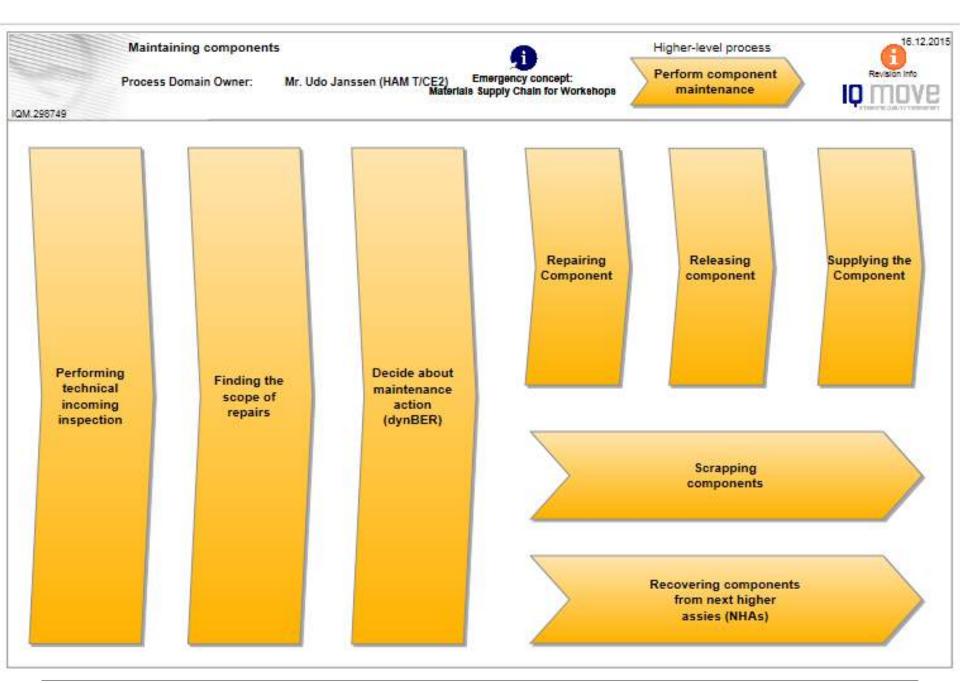
# Thank you very much for your patience...

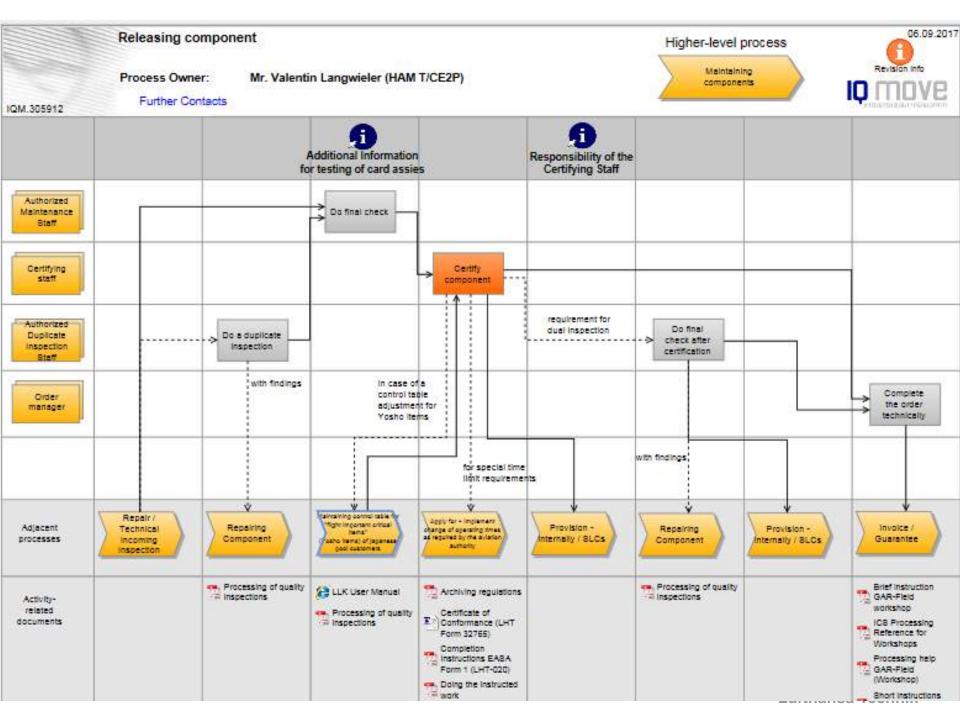
...and don't forget that only a does not have any corners and edges.

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صر 02, 03... oder 0200, 0500, 0300... oder AB

const freilassen

Issue 30 03 JAN 2017

 Feldweise Ausfüllanleitung für Instandhaltung (Part-145) / Completion of each single Block for Maintenance (Part-145)

Feld/ Block			
1	Vorgedruckt – keine Eintragung erforderlich.	Pre-printed – no entry required.	
2	Vorgedruckt – keine Eintragung erforderlich.	Pre-printed – no entry required.	
3	Vergeben Sie eine eindeutige, rückidentifizierbare Nummer (kann alphanumerisch sein) aus der EDV	Enter a unique, traceable number ( alphanumerical) from the EDP syst	
	ODER	OR	
	generieren Sie eine Nummer der folgenden Form und	Generate and enter a number in the following format:	
	tragen Sie diese ein:	"LHT-Group Approval Company Ab	breviation/ Workshop
	"Abkürzung der LHT Group Approval Firma / Werkstatt- Organisationszeichen, falls genutzt / Datum (dd MMM	Abbreviation, if used / date (dd MMM yyyy) / consecutive number for current date"	
	yyyy) / laufende Tagesnummer"	E.g.:	
	z. B.:	(1) LHT/WG225/03NOV2010/003 (meaning: the third certificate issued by LHT workshop WG225 on 03 November 2010) (2) LTB/03AUG2011/001 (meaning: first certificate issued by LHT Budapest on 03 August 2011)	
	(1) LHT/WG225/03NOV2010/003 (bedeutet: drittes Zertifikat von LHT-WG225 am 3. November 2010)		
	(2) LTB/03AUG2011/001 (bedeutet: erstes Zertifikat von LHT Budapest am 3. August 2011)		
4	Vorgedruckt – gleicher Name und gleiche Adresse für alle LHT Group Approval Firmen unter der gleichen LBA-Genehmigung.	Pre-printed – same name and address for all LHT Group Approval companies under the same LBA approval.	
			Ausfülla
5	Bei Kunden-Einzelaufträgen: Tragen Sie die Kundenbestellnummer ein, ansonsten die interne	For one-off customer one	
	Auftragsnummer.		Instruct
6	Bei der Freigabe von mehr als einer Teilenummer:		
	Tragen Sie die Zeilennummerierung (1 2 3 oder 0		1 Δhh

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#### Ausfüllanleitung EASA Form 1 / Instructions for completing EASA Form 1

Issue 30 03 JAN 2017

 Abbildung der EASA Form 1 (LHT Form 30800) / Facsimile of EASA Form 1 (LHT Form 30800)

Approving Competent     Authority / Country			3. Form Tracking Number			
LBA / Germany AUTHORISED RELEASE CERTIFICATE EASA FORM 1						
4. Organisation Name and Address:  Lufthansa Technik  Lufthansa Technik  Unthansa Technik AS Weg bein Jager 193 22358 Hemburg  S. Work OrderiContract/Invoice						
6. Item 7. Description	8. Part No.	9. Qty. 10. Serial No.	11. Status / Work			
12. Remarks	TP MK-No. Pack Code	Resp. Workshop	Workshop Station			
		FAA Certificate	condisione with 14 CFR part 43 and additional additiona			
		TCCA Approval	No.:			
		reference number see	performed are attached either in a Workshop Report blocks 3 and 5 or in other applicable documents			
Certifies that the items identified above were ma     approved design data and are in     a condition for safe operation	non-approved design data specified in block 12 Certified in block 12	Part-145.A-50 Release to Service less that unless otherwise specified in block 12, the 12, was accomplished in accordance with Paul dered ready for release to service.	Other Regulation specified in block 12			
13b. Authorised Signature	13c. Approval / Authorisation Number DE.21G.0047					
Name .	13e. Date (dd mmm yyyy)					