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DEPT. OF TRANSPORTATION
DOCKETS

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October 16, 2002

Docket Management System
Department of Transportation
Room Plaza 401
400 Seventh Street, SW
Washington DC, 20590-0001

Re: Docket Number FAA-2002-11301 - 37

Dear Ladies and Gentlemen:

Attached is a letter I wrote to Mr. Jon L. Jordan, M.D., J.D – Federal Air Surgeon regarding an issue on the above notice of proposed rulemaking (NPRM). I realize the comment period has lapsed, however at the suggestion of Sarah MacLeod of the Aeronautical Repair Station Association (ARSA) I am sending you copy of the letter for your consideration and evaluation.

In the letter to Mr. Jordan I am seeking clarification whether or not it is an absolute requirement for FAA Approved repair stations to have actual copies of vendor drug pans on file at their facilities, or whether an electronic means such as an updated listing that the FAA could maintain, would be considered acceptable.

I believe this is an issue that is not well understood by the program managers for companies that have an Antidrug and Alcohol Misuse Program and it would certainly have a burdensome effect on every facility should the NPRM become the final rule.

Thank you very much for your consideration on this matter.

Respectfully,


Robert H. Dorsey
Manager of Quality Control / Chief Inspector

Beechcraft



Federal Aviation Administration
Mr. Jon L. Jordan, M.D., J.D. -- Federal Air Surgeon
Drug Abatement Division -- AAM – 800
800 Independence Ave, SW
Washington DC, 20591

October 15, 2002

Dear Mr. Jordan:

As the Chief Inspector for our repair station, I was recently asked to investigate the *requirement* of having actual copies of vendor / contractor Antidrug and Alcohol Misuse Prevention Program plans *on file* at our facility. After considerable review, it appears to me the regulatory intent is that we must “ensure” any given vendor we utilize has a FAA approved Antidrug and Anti Alcohol Misuse Plan. I spoke with Sarah MacLeod of ARSA regarding this issue and she suggested I also write you folks concerning this matter.

At present, one of the most common methods in our industry of ensuring that vendors have a plan is to request a copy and keep it on file. I also tend to believe that most program managers, and possibly most FAA auditors, believe that the *only* acceptable method is to have them on file. Some of the audit preparation material I’ve seen strongly indicate it is required. However, I would argue that this is just *one* method of ensuring vendor compliance, but not the only, and certainly not the most efficient means – especially with the electronic means available today.

In our situation, our company is comprised of four separate facilities in four Midwest cities. At this facility, we are a full service maintenance, avionics modification, instrument, paint, and interior facility, along with being a Raytheon Aircraft authorized service center for Bonanzas to Hawker jets. We also have a substantial retail parts organization. Our facility alone has approximately 100 vendors (and growing) that we deal with for new, used, repaired, and overhauled, parts, supplies, material, components and rotables. When dealing with a relatively large number of vendors it becomes a significant task to request, file, monitor, and continuously update every single vendor’s drug / alcohol plan. In light of the uncertainties and *extreme* cost consciousness of our business these days, we are looking for, and really *need* the most efficient and cost effective way to conduct any given area of our business, which includes ensuring that our vendors are on a drug / alcohol plan. Unfortunately, auditing and maintaining all of this paperwork for each and every vendor is not efficient, practical or a cost-effective method for us. As a post September 11 company in the aviation industry, we’re really struggling to “stay alive,” and having to even think about adding staff to maintain paperwork such as this is unacceptable. Our business managers want us to very critically evaluate the intent of the law, the actual requirement of the regulation, and then do that which is reasonable and prudent.

Beechcraft

In reviewing the NPRM for the new Antidrug and Alcohol Misuse Prevention Program, Docket Number FAA-2002-11301, if this were to go into effect the way it is written, especially with the "at any tier" wording, and if it is determined repair stations must have copies of drug plans on file, it would greatly increase and aggravate the record keeping requirements for all companies involved.

It seems it would be much more practical and efficient if the 4000 or so repair stations in the U.S. could access *one* site to ensure any given vendor has an approved drug/alcohol plan. Having 4000 repair stations auditing each other to death and maintaining mountains of paperwork is simply not the best way to accomplish this task. The FAA has all of the applicable information, and *could* maintain and regularly update a listing of companies with approved plans. It seems reasonable and logical that if the FAA were to properly maintain this listing, that repair stations most certainly could use it as a primary means of ensuring any given vendor has an approved plan. If there were any question about a particular vendor, for example if there is a new vendor that is not on the FAA listing, a request could be made to the vendor to have them fax of copy of their plan.

Up until approximately a month ago or so, the FAA had an Internet address that provided a listing of all of the companies that have approved Antidrug / Alcohol Plans (although the site had not been updated for quite some time). Then, out of the blue, this site has vanished. We've been trying to determine what happened to it and have not yet received an answer. I believe it is a tremendous disservice to the public to not maintain this list and by removing it from the Internet.

I would also add that we disagree with the "at any tier" wording in the NPRM. There is no question that a number of vendors we currently utilize will refuse to continue to business with us if this were to become law. This in turn forces us to seek out other "approved" vendors, which will typically increase cost, increase downtime, lessen customer satisfaction -- without a demonstrated, positive effect on enhancing safety.

Thank you very much for the opportunity to mention these concerns to you and I would appreciate any comments you may have regarding this matter.

Sincerely,



Robert H. Dorsey

Manager of Quality Control / Chief Inspector

CC: Diane J. Wood, Manager – Drug Abatement Division

Sarah MacLeod, ARSA

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