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## Pilot wasn't fit to fly chopper

Search and rescue flight crew poorly trained, says report on Canso tragedy

By MICHAEL TUTTON The Canadian Press

The pilot of a military helicopter that crashed 18 months ago, killing three men, wasn't qualified to be at the controls, says a draft report of a military investigation that found the skills of Canada's search and rescue pilots have "degraded" due to inadequate training.

The seven crew aboard the CH-149 Cormorant were preparing to practise a nighttime hoist from a fishing boat off Canso when the chopper piloted by Maj. Gordon Ireland crashed nose down in the ocean at 120 kilometres per hour, tearing the aircraft in two.

The draft report into the July 13, 2006, crash, obtained by The Canadian Press, says Ireland hadn't fulfilled the requirements to retrain after a 90-day leave and was "not qualified" to be in the pilot's seat that night.

The report says Ireland's "inappropriate" use of manual flying techniques had overridden an autopilot system that might have allowed the helicopter to gain more altitude.

As the aircraft descended, the co-pilot, Capt. Ron Busch, divided his attention "between attempting to locate switches" and looking at the ocean, rather than monitoring his flying instruments, the report says.

As well, Capt. Gabriel Ringuette, the air captain in charge of the flight, was sitting behind the other pilots and was out of reach of the controls, a seating arrangement that was permitted but "put too much faith" in the previous experience of the two pilots, the report says.

Ringuette, who had discretion over the roles of the pilots, was unaware that Ireland's qualifications had lapsed, the report says.

The report links errors made by the flight crew to a flawed training system.

"The overall lack of aircraft system knowledge and flying proficiency . . . contributed to the accident," the report says.

The investigation reveals:

- British instructors who train and test Cormorant crews on simulators in England told investigators the Canadian pilots "were performing to a lower level than other operators" around the world who fly the Agusta-Westland helicopters.
- The instructors' views "corroborate other observations that the overall proficiency of the CH-149 crews was degraded."
- Internal surveys of crew members found they believed they lacked sufficient flying time because of frequent inspections of the rear rotor half hub and parts shortages, leading to a "steady decline in the overall proficiency."
- The Cormorant training materials, partially based on a previous generation of Labrador helicopters, neglected the autopilot capabilities of the new aircraft. They also didn't provide sufficient information on co-pilot duties.

The report has been circulated for comment to the manufacturer of the helicopter, the maintenance company and surviving crew members. It is subject to revisions by the air force's senior command.

The draft report does not identify the personnel on board the helicopter, but sources confirm the identities of the pilot and co-pilot as well as the air captain in charge of the flight.

The military's Directorate of Flight Safety completed the document last April, but there have been a series of delays in its release, prompting the families of the victims to complain they have been kept in the dark.

Spokesmen for the directorate have said delays in release were due to investigators being occupied with other projects, a lengthy review process and some parties taking longer than anticipated to respond.

A spokesman for the safety agency said investigators will not comment until the final report is released in several weeks.

"We have to wait until the report is finalized. It's not fair to start commenting on this until it's finalized," said Capt. Jim Hutcheson.

The agency's investigators concluded all members of the crew survived the helicopter's initial impact, but three crewmen — Sgt. Duane Brazil, 39, Master Cpl. Trevor McDavid, 31, and Cpl. Kirk Noel, 31 — died after they were unable to escape from the submerged aircraft.

Aside from training problems, the report also zeros in on the qualifications and proficiency of the crew.

Ireland, an experienced search and rescue pilot, had been on leave for personal reasons last year between April 6 and July 5, eight days before the accident.

When he returned to duty, he had flown 10 1/2 hours in a Cormorant over a three-month period, rather than the 30 hours required by military rules, the report says.

According to the investigation, Ireland was therefore "not current" to fly the helicopter.

"On his return from leave in July, the acting aircraft captain (Ireland) was scheduled for a 90-day check but he advised one of the check pilots that he only required a 30-day check to regain his flying currency," the report says, referring to the pilots responsible for ensuring the flying proficiency of their peers.

The report says retraining after 30 days of leave includes a supervised takeoff, landing and "an instrument approach" on the Cormorant. Ireland successfully completed these tasks, but the report says this was "insufficient to reset his currency" for a 90-day absence from flying.

"The check pilot did not verify that anything more was required."

The report says the check pilot considered Ireland a senior officer and assumed he was therefore aware of the rules, which led to the breach of procedure.

"There was a 'halo' effect and the check pilots assumed that he knew what was required and no further question or file review was done."

The report also suggests Ireland didn't know he was breaking the rules.

"The acting air captain (Ireland) was returned to duties, with both the acting aircraft captain and the check pilots apparently unaware that he (Ireland) was still not current and . . . not qualified."

Contacted at his new job with the Defence Department in Ottawa, Ireland declined

comment, saying he required approval from senior officers before being authorized to speak about the crash.

"At the moment, I'd prefer not to talk about it," he said.

The report says Ireland suffered from amnesia and couldn't recall what happened during the last few minutes of the flight.

However, investigators say they have key information from the helicopter's cockpit voice recorder, flight data recorder and interviews with other survivors.

A lack of experience was also cited in the case of co-pilot Busch, who had spent most of his career flying Griffon helicopters, the Canadian army's version of the Bell 412.

"He (Busch) was still becoming accustomed to the cockpit environment . . . and had received very limited exposure to some of the basic search and rescue sequences," the report says.

Busch declined comment when contacted in Nova Scotia.

"I'm not going to make any comment with regard to this, as the final proceedings have not been released," he said.

"It's a simple fact that the draft is an internal document . . . until the final report is complete, I can't comment."

On the night of the crash, as the Cormorant was closing in on the fishing boat and was about 20 metres above the water, Ireland was ordered by Ringuette to do a "go-around," which meant he was to fly past the boat and return to the original position.

As he started the manoeuvre, the aircraft assumed a "large nose-down attitude and a high descent rate," the report says.

It was difficult for the pilots to use visual cues from the water to tell how high they were because the ocean was unusually calm, the report says, noting that the pilots didn't recognize the danger because they "did not reference flight instruments."

Investigators singled out equipment problems in the rear cabin of the aircraft, such as tethers that were difficult to release, survival suits that were too buoyant and a ladder that blocked an escape hatch.

The key finding, however, is that the flying miscues of the pilots were related to deeper training issues, particularly at 14 Wing Greenwood in Nova Scotia, where the ill-fated Cormorant was based.

The flying course for the Cormorant is partially based on the flying methods for the decommissioned Labrador helicopter "and does not fully emphasize the new capabilities . . . that the Cormorant's highly capable automatic flight control system provide," the report says.

Moreover, because Canada didn't purchase its own simulator, Cormorant pilots are sent to the Royal Air Force base in Benson, England, once every 12 to 18 months.

British instructors have noted Canadian pilots presented "too much variability" on how they manoeuvre the aircraft, set up their displays and handle emergencies, the report says.

"They commonly see CH-149 pilots using techniques that are a carry-over from the manual flying days of the Labrador."

As well, the instruction manual for the Cormorant is "lacking in specifics on how manoeuvres are to be carried out."

The military has made some changes.

It has prohibited pilots who don't have air captain status from flying side by side, as occurred in the crash.

The report has also recommended that the Cormorant's flying manual be changed to include more details on the co-pilot's duties.

And there's a recommendation for pilots to pay closer attention to the "automatic flight control system" and to use the flight simulator in England more often.

As well, the report calls for the development of easier-to-release harnesses. The report says a ban has been placed on the type of survival suits worn by a search and rescue technician on the night of the crash.

Lt.-Col. Gilbert Thibault, squadron commanding officer at Greenwood, said he would like to comment but he cannot until the release of the final report.

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