

ACCIDENT

Aircraft Type and Registration:	Cessna 172S, G-CFIO	
No & Type of Engines:	1 Lycoming IO-360-L2A piston engine	
Year of Manufacture:	2002 (Serial no: 172S9079)	
Date & Time (UTC):	10 September 2021 at 0942 hrs	
Location:	Ruckinge, Kent	
Type of Flight:	Private (unauthorised)	
Persons on Board:	Crew - 1	Passengers - None
Injuries:	Crew - 1 (Fatal)	Passengers - N/A
Nature of Damage:	Aircraft destroyed	
Commander's Licence:	Student pilot	
Commander's Age:	67 years	
Commander's Flying Experience:	74 hours (of which 74 were on type) Last 90 days - 16 hours Last 28 days - 2 hours	
Information Source:	AAIB Field Investigation	

Synopsis

At 0958 hrs on 10 September 2021, without permission from the operator or clearance from the air traffic radio operator, a student pilot took off from Rochester Airport in G-CFIO. The aircraft was later observed to enter a steep descent to the left before it struck the ground in a field adjacent to Tar Pot Lane near Ruckinge in Kent. The pilot did not survive the accident.

Immediately prior to taking off, the pilot had reported over the aircraft radio that he had been diagnosed with a terminal illness and indicated that he intended to deliberately crash the aircraft. The pilot had not declared his diagnosis to the doctor who issued his aviation medical certificate.

History of the flight

At 0958 hrs on 10 September 2021 a Cessna 172S Skyhawk aircraft, registration G-CFIO, took off from Rochester Airport and was later found extensively damaged in a farmer's field near Ruckinge, Kent. At the controls was a student pilot who was supposed to be flying a dual training exercise with an instructor. When the instructor went via the Air Traffic Control building to gain flight approval, the pilot proceeded directly to G-CFIO, boarded it and then, without the instructor on board and without air traffic approval, taxied and took off. Prior to taking off, the pilot indicated over the radio his terminal diagnosis and his intention to deliberately crash the aircraft.

Radar evidence showed that after departing Rochester Airport, G-CFIO had flown to an area south of Ashford before loitering and carrying out a sustained series of turns. At 1044 hrs a witness 1.5 km south-southeast of the accident site saw a white aircraft to the north of them and at low level enter a “sharp” descending turn to the left. The nature, location and timing of the sighting correlated with the location of the accident site. The pilot did not survive the accident.

Accident site

Impact evidence indicated that G-CFIO had struck the ground while in a descending left turn. The area surrounding the accident site was relatively benign for a field landing. Several flat fields of an acceptable length were available to choose from, including the one in which G-CFIO's wreckage was discovered. While the accident field was suitably long, the approach track was aligned across one corner rather than down the length of the field, leaving insufficient obstacle-free distance for a safe landing. A 30° track change to the right would have given ample ground distance for a successful field landing. There were no significant vertical obstacles close to G-CFIO's final flight path that would have required the pilot to take avoiding action by entering a turn.

Aircraft technical examination

A detailed technical examination of the aircraft revealed several overload failures but no evidence of any pre-impact disconnection or restriction of the flight controls. The fuel tanks still contained fuel and there was evidence that the engine was under power when the aircraft struck the ground.

Medical

While the pilot reported over the radio that he had received a terminal diagnosis, this had not been declared to the Aero-medical Examiner (AME) who renewed his Class 2 flying medical certificate in June 2021. Unless an AME is the applicant's own General Practitioner (GP) they are not entitled to review a pilot's central medical records. Instead, pilots are required to disclose any significant medical conditions to their AME prior to issue of, and at any time during the validity of, their flying medical certificate. A diagnosis of cancer can result in the revocation of a flying medical certificate and pilots receiving such diagnoses are obliged to inform their AME.

The pilot's GP confirmed that the pilot was diagnosed in July 2021.

Analysis

The pilot had renewed his aviation medical before receiving the terminal diagnosis but had not subsequently informed the issuing AME of the change in his medical fitness. GPs are not under any obligation to inform AMEs of significant changes to a pilot's health.

The investigation did not find evidence of any technical failure that would have caused the aircraft to enter an uncontrolled descending left turn leading to it striking the ground.

Unless the pilot was distracted, disorientated, or medically impaired at the time, until shortly before the aircraft contacted the ground, the pilot could have levelled the wings and established an appropriate flightpath to achieve a successful landing in the accident field. The aircraft was not equipped with recording devices capable of capturing evidence of pilot distraction, disorientation, or impairment.

Conclusion

The area where G-CFIO crashed was suitable for a powered or unpowered field landing. There was no evident operational or technical reason which might explain why the aircraft approached the ground in a descending left turn from which a safe landing could not be reasonably assured. The investigation did not find evidence to support or discount a finding that pilot distraction, disorientation, or impairment contributed to the accident. Had his AME been made aware of the pilot's diagnosis, it is likely that they would have revoked the pilot's flying medical certificate.

Inquest verdict

At the pilot's inquest, the presiding Coroner recorded a verdict of suicide.

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