Agenda Item 7: Regional and Technical Co-operation Matters

7.1 ICAO Cooperative Arrangement for the Prevention of Spread of Communicable Disease through Air Travel (CAPSCA) – Americas Project (RLA/08/901)

ICAO CAPSCA – AMERICAS PROJECT

(Presented by the Secretariat)

**SUMMARY**

After the significant impact on air travel from the Severe Acute Respiratory Syndrome (SARS) in 2003, ICAO strengthened its support of Article 14 to the Convention on International Civil Aviation – Prevention of Spread of Disease. The emerging threat from pandemic avian influenza in 2005, further focused efforts in this area and the ICAO CAPSCA project commenced in Asia Pacific in September 2006. In November 2006 preparedness planning guidelines for States were published by ICAO and in July 2007, related SARPs in ICAO Annex 9 - Facilitation became applicable. In 2008 CAPSCA commenced in Africa and the project commenced in the Americas at an aviation medicine seminar in Lima, Peru, in April 2009.

In late April 2009 the Influenza A(H1N1) outbreak, which later developed into the current pandemic, highlighted the need for robust preparedness planning in the aviation sector.

The ICAO CAPSCA Americas Project is presented in this working paper. States, Territories and International Organizations are invited to become participating and contributing members of the project. The paper also summarises the results of the 1st Steering Committee Meeting which approved the Project’s Organisation, Steering Committee and Work Plan, and the 1st Regional Aviation Medicine Team Meeting which trained airport evaluators nominated by States.

**References:**

- Doc 7300, Convention on International Civil Aviation
- Annexes 6, 9, 11 and 14.
- PANS-ATM (Doc. 4444)
- ICAO Guidelines for States Concerning the Management of Communicable Disease Posing a Serious Public Health Risk
- CAPSCA Americas Project 1st Regional Aviation Medicine Team Meeting

**Strategic Objectives**

- This Working Paper relates to Strategic Objectives D: Efficiency - Enhance the efficiency of aviation operations and E: Continuity - Maintain the continuity of aviation operations.
1. Introduction

1.1 The World Health Organization (WHO) on 11 June 2009 raised the influenza alert level of the current A(H1N1) influenza outbreak to Phase 6, signifying a “pandemic”. It noted this reflected an increase in geographical spread of disease and not an increase in severity. This should further prompt ICAO Member States to review their preparedness and be ready to take effective measures to prevent the spread of communicable disease, in accordance with Article 14 of the Convention on International Civil Aviation.

1.2 During the past two years, ICAO has developed, in collaboration with the WHO, International Air Transport Association (IATA), Airports Council International (ACI) and other concerned parties, guidance material to assist States prepare for a serious public health event. In addition, changes to Annex 6 – Operation of Aircraft, Annex 9 – Facilitation, Annex 11 – Air Traffic Services (and PANS-ATM Doc. 4444) and Annex 14 – Aerodromes, strengthen the Standards and Recommended Practices (SARPs) and Procedures dealing with public health events.

1.3 The ICAO website provides a link to the current guidelines – http://www.icao.int/icao/en/med/guidelines.htm. States/Territories are urged to consult the guidelines and familiarize themselves with the relevant applicable SARPs in Annexes 6, 9, 11 and 14.

1.4 This paper provides an overview of the ICAO CAPSCA Americas Project and a summary of its first Steering Committee Meeting held in the ICAO NACC Regional Office in Mexico on 25 and 26 June 2009, and the first Regional Aviation Medicine Team Meeting held in the ICAO South American (SAM) Regional Office in Peru from 2 to 4 December 2009.

2. Background

2.1 The WHO 2005 International Health Regulations (IHR) entered into force in June 2007, and includes many references to airports and aircraft.

2.2 ICAO has been actively engaged with States and organizations such as the WHO, IATA, ACI and the United States Centers for Disease Control and Prevention (CDC), in an effort to develop and implement safeguards in the event of an outbreak of a serious communicable disease. Such disease outbreaks are inevitable, usually unpredictable, events that are often characterized by uncertainty, confusion and sense of urgency. Planning in advance for such an eventuality is therefore essential and a requirement under Article 14 of the Convention on International Civil Aviation and the new applicable SARPs contained in Annexes 6, 9, 11 and 14, and related procedures in PANS-ATM (Doc. 4444). In addition, ICAO has published the “ICAO Guidelines for States concerning the management of communicable disease posing a serious public health risk”.

2.3 It is considered that, in the interest of all States and Territories, the development of an integrated and coordinated national, regional and global response with particular emphasis on cross organizational links prior to an outbreak of a serious communicable disease offers the best option to ensure adequate preparedness. The main challenge facing the aviation sector is to bring together the various organizations that need to be involved in preparedness planning to ensure that the aviation response to a serious public health risk is effective and proportionate to the risk.
3. **ICAO CAPSCA Project**

3.1 ICAO has established the CAPSCA project to assist States and Territories in the implementation of the new requirements. The CAPSCA project aims at reducing the risk of spreading communicable diseases by air travellers and in mitigating the effects of such disease, should they occur, on the health of populations and on the economy of States, through cooperative arrangements between the Participating States/Administrations, Airports, Airlines and Public Health Authorities (PHAs). Experience with the SARS and knowledge of the potential for widespread ill health from a human form of avian influenza has demonstrated that the damaging effect of communicable diseases can be significant. However, effective action can be taken through implementation of ICAO SARPs and guidelines for preventing the spread of communicable disease at major international airports and aircraft.

3.2 The phased implementation of the CAPSCA project on a regional basis commenced in the Asia Pacific region in 2006. In 2008, the CAPSCA project was launched in the Africa region, and in 2009, the project has started in the Americas region. Funding thus far has been provided by grants from the UN Central Fund for Influenza Action (CFIA). In the course of the CAPSCA Americas project, experts from ICAO, WHO/PAHO and States will visit airports of participating States and Territories to evaluate the implementation of the ICAO guidelines and relevant aspects of the IHR (2005), and to provide assistance and training to personnel from the participating civil aviation, airports and public health authorities.

4. **ICAO CAPSCA Americas Project**

4.1 A grant of approximately USD 400,000 from the UN CFIA has been allocated to ICAO for the Americas project. The purpose of this contribution is to meet the costs of the activities to be conducted during the first phase of implementation of the project for an expected duration of 24 months. No financial contributions are required from States and Territories for the first phase of the project.

4.2 However, State contributions during the initial phase of the project are requested in the form of in-kind loans of experts to be trained and undertake airport evaluation missions to participating member States and Territories. The desirable qualifications for airport evaluators are as follows:

- interest in improving pandemic preparedness planning in the aviation sector;
- availability to undertake international airport evaluations for preparedness (travel and daily expenses, but not salary, will be met from the CAPSCA project funds);
- qualification and experience in aviation medicine and/or;
- qualification and experience in public health medicine and/or;
- experience in contingency/emergency planning in the aviation sector.

It is noted that qualification in medicine or aviation medicine is not mandatory to become an airport evaluator.

4.3 The ICAO CAPSCA – Americas Project was launched during the ICAO Pandemic Preparedness Planning Seminar held in Lima, Peru, from 1 to 3 April 2009. The ICAO CAPSCA Americas Project Document was sent to NAM/CAR States and Territories with the ICAO NACC Regional Office letter dated 3 April 2009 (Ref.: EMX242), inviting States and Territories to join the project. ICAO encourages all States and Territories in the Americas Regions to become a participating and contributing member of the project.
5. **ICAO CAPSCA Americas Project 1st Steering Committee Meeting**

5.1 The First Steering Committee Meeting (SCM) of the ICAO CAPSCA – Americas Project was held at the ICAO NACC Regional Office in Mexico City, Mexico, from 25 to 26 June 2009. The main objectives of the SCM of the ICAO CAPSCA Americas Project were to establish the Project Steering Committee and its Terms of Reference and develop the Project Work Plan.

5.2 Mexico had informed ICAO of its intention to join the CAPSCA Americas Project as a participating member State, and therefore applying the procedures adopted by the established CAPSCA Asia Pacific and Africa projects, the State in which the Steering Committee meeting is held should designate the Chairperson for the Steering Committee and meeting for the period until the start of the next meeting, approximately one year. Mexico duly nominated Dr. José Valente Aguilar Zinser as Chairman.

5.3 The Meeting was attended by 45 participants from 10 States and 8 International Organizations. State participants included representatives of civil aviation authorities (CAAs), public health authorities (PHAs), airports and airlines. The only E/CAR State that participated in the meeting was United States.

5.4 The SCM was provided with presentations by the Mexico Ministry of Communications and Transport (SCT), WHO, ACI, United States CDC, Transport Canada, Public Health Agency of Canada (PHAC), International Federation of Air Line Pilots’ Associations (IFALPA), Office for the Coordination of Humanitarian Affairs (OCHA), World Food Programme (WFP), International Organization for Migration (IOM), World Tourism Organization (UNWTO), and ICAO, for which it presented its appreciation. State presentations were also provided by Chile, Cuba, El Salvador, Nicaragua and Panama.

5.5 The Meeting conclusions are presented in Appendix A, however the most significant are summarised below:

- WHO/PAHO agreed to cooperate with ICAO and become donors to the project, supporting PHA coordination with CAAs and participation in CAPSCA (Conclusion 2).

- Brazil, Cuba, El Salvador, Mexico, Nicaragua, Panama, Peru and Venezuela confirmed their participation in the project (Conclusion 4).

- SCM approved the CAPSCA-Americas Project Organisation, Steering Committee Membership and Terms of Reference, and Work Plan (Conclusion 7).

- Regional Aviation Medicine Team (RAMT) was established and the 1st meeting, training and airport evaluation was scheduled to take place in the ICAO SAM Regional Office and at Jorge Chavez International Airport in Lima during the 1st week of December 2009 (Conclusion 8).

5.6 The ICAO CAPSCA Americas Project Organisation is presented in Appendix B. It is unique for the aviation and health communities to collaborate through so many different international aviation organisations and United Nations agencies.

5.7 The ICAO CAPSCA Americas Project Steering Committee and its Terms of Reference are presented in Appendix C.
5.8 The ICAO CAPSCA Americas Project Work Plan is presented in Appendix D. This work plan depends on contributions in-kind from States, Territories and International Organisations which will include the following:

- Nomination of experts to join the RAMT and be trained and undertake periodic airport evaluations in States and Territories which are participating members of the project (Project to fund travel and per diems but experts’ salary to continue to be paid by respective employers).
- Offer to host Project meetings and training events (including provision of simultaneous interpretation).
- Volunteer airports to be evaluated by the Project.

5.9 Following the SCM, the ICAO CAPSCA Americas Project Document was updated in collaboration with WHO and PAHO and sent to NAM/CAR States and Territories with the ICAO NACC Regional Office letter dated 7 August 2009 (Ref.: EMX681) with a reminder inviting States and Territories to join the project.

6. CAPSCA Americas 1st Regional Aviation Medicine Team Meeting

6.1 The First Regional Aviation Medicine Team Meeting (RAMT) of the ICAO CAPSCA – Americas Project was held at the ICAO SAM Regional Office in Lima, Peru, from 2 to 4 December 2009. The main objective of the RAMT was to provide an update and share experiences on the current pandemic; review applicable ICAO, WHO, ACI and IATA SARPs, regulations and guidelines; review and update the RAMT Terms of Reference (Appendix E); and to train airport evaluators from experts nominated by States.

6.2 The Meeting was attended by 38 participants from 15 States and 5 International Organizations. State participants included representatives of civil aviation authorities (CAAs) and Public Health Authorities (PHAs). The only E/CAR State that participated in the meeting was United States.

6.3 The RAMT was provided with presentations by Canada (PHAC), Mexico, Peru (PHA and Lima Airport), United States (FAA and CDC), IATA, OCHA, PAHO, and ICAO.

6.4 Experts nominated by States were trained as airport evaluators. The training encompassed the evaluation of Lima and Cuzco international airports to provide the required OJT. Dr. José Valente Aguilar Zinser of Mexico, Chairman of the CAPSCA Americas SCM, was designated as the first RAMT Leader.

7. Conclusions

7.1 The ICAO CAPSCA Americas Project objectives can be summarised as follows:

- Public Health Protection – aviation personnel, air travellers and general public.

- States establish national aviation pandemic preparedness plans, involving civil aviation authorities, public health authorities, airports, air traffic services, and airlines, thereby satisfying:
- adherence to Article 14 of the Convention on International Civil Aviation;
- compliance with related ICAO SARPs (Annexes 6, 9, 11 and 14) and Procedures (PANS-ATM);
- compliance with WHO IHR (2005) regulations; and
- implementation of ICAO, WHO, ACI and IATA guidelines.

- Regional cooperation among States and Territories – the Project provides a mechanism for pooling and sharing expertise and resources.
- Provision of advice, personnel training and airport evaluations for States & Territories.
- Further development and improvement of guidelines for the aviation sector.

7.2 States which have confirmed participation in the project to date are the following: Brazil, Canada, Chile, Cuba, Dominican Republic, El Salvador, Mexico, Nicaragua, Panama, Peru, United States and Venezuela.

7.3 Experts have been nominated and trained as airport evaluators from the following States: Argentina, Canada, Chile, Colombia, Cuba, Dominican Republic, Mexico, Peru, United States, Uruguay and Venezuela.

7.4 The first airports which have been evaluated by the CAPSCA Americas project are Lima and Cuzco International Airports in Peru. It is planned to evaluate international airports in all States which are participating in the project during 2010. Each airport evaluation mission will evaluate two States, of one international airport in each State, conducted by two evaluators over a one week period, including travel time. The airport evaluation missions will also serve to provide OJT to the airport evaluators who did not complete the training in Peru in December 2009.

7.5 The 2nd Steering Committee Meeting and 2nd Regional Aviation Medicine Team Meeting are planned to be held in May and November 2010, respectively, for which States are invited to consider hosting and to advise the ICAO NACC Regional Office accordingly. The SCM/2 meeting will be combined with an awareness seminar and/or an airport exercise. The RAMT/2 meeting will be combined with further airport evaluator training and/or an airport exercise.

7.6 E/CAR States and Territories are encouraged to join the ICAO CAPSCA Americas Project to receive the assistance and training that the project offers for States and Territories to assist them in meeting their international aviation, health and social obligations by improving their preparedness for a future pandemic, or a development of the current pandemic (which may be more severe than the Influenza A(H1N1) pandemic that is currently being experienced).

7.7 E/CAR States and Territories are also encouraged to nominate experts to join the RAMT and attend future meetings, training and airport evaluation which are planned to take place in 2010.
8. **Suggested Action**

8.1 The Meeting is invited to review the content of this paper and consider adopting the following draft conclusion:

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**DRAFT CONCLUSION 22/X**

**ICAO COOPERATIVE ARRANGEMENT FOR THE PREVENTION OF SPREAD OF COMMUNICABLE DISEASE THROUGH AIR TRAVEL (CAPSCA) – AMERICAS PROJECT**

That E/CAR States and Territories are encouraged to:

a) prepare, test and update aviation pandemic preparedness plans in collaboration with public health authorities;

b) become participating members of the ICAO CAPSCA-Americas Project by informing the ICAO NACC Regional Office;

c) nominate experts to join the ICAO CAPSCA-Americas Regional Aviation Medicine Team (RAMT) who will be trained by ICAO and undertake airport evaluations at international airports of States and Territories, which are participating in the project, and inform the ICAO NACC Regional Office; and

d) volunteer international airports to be evaluated by the ICAO CAPSCA-Americas Project and inform the ICAO NACC Regional Office.
APPENDIX A

1st Meeting of ICAO CAPSCA Americas Project Steering Committee Conclusions

Conclusion No. 1

The SCM was provided with a brief presentation on the history and status of ICAO’s CAPSCA Programme worldwide and noted with appreciation its accomplishments to date. The SCM agreed on the following recommendations:

- encourage participation by both public health and civil aviation authorities in the next Regional Aviation Medicine Team (RAMT) meeting for CAPSCA-Americas and in any future initiatives concerning public health preparedness planning in the aviation sector;

- encourage the exchange of relevant information between airport and aircraft operators, civil aviation authorities, air traffic service providers and public health authorities;

- encourage States to provide regional experts to assist with the evaluation of international airports (at least one international airport per participating State to assist in developing core capacities in all international airports) as part of the CAPSCA Project; and

- a letter be sent by ICAO to CAAs and by WHO/PAHO to national focal points for public health emphasizing the need for collaboration between the public health and aviation sectors. Such letters should also be sent by ACI and IATA to their members in the region. The letter should include a request for States to provide expertise “in-kind” to the CAPSCA project, especially for experts to assist with airport evaluations.

Conclusion No. 2

The SCM noted and encouraged:

The close cooperation between ICAO and WHO, and between their respective regional offices, in order to facilitate closer interaction between States’ aviation and public health sectors in their development of an aviation preparedness plan that is congruent with the national preparedness plan. In this regard,

- CAPSCA-Americas should explore the possibility of coordinating this project with WHO more closely and arranging for joint meetings, possibly collaborating in airport evaluations, thus strengthening the cooperation between public health officials and aviation medical officials; and

- the SCM noted with thanks the statement by PAHO of their commitment to contribute support for States’ PHA participation in CAPSCA Americas.
Conclusion No. 3

The SCM:

- urged all States/Administrations in the Americas that have not yet joined CAPSCA-Americas to do so at the earliest opportunity in order for the Project to reach its full objective;

- requested all participating States/Administrations to consider providing contributions in kind to support the Programme; and

- expressed its appreciation to the Central Fund for Influenza Action (CFIA), a fund administered by the United Nations Development Programme (UNDP), for the grant contribution it has made to CAPSCA-Americas. This grant will enable this project to continue its activities through 2010 and into 2011.

Conclusion No. 4

In addition to Mexico and Peru, which had already informed ICAO of their participation in the CAPSCA Americas project, the SCM noted the agreement, in principle, for the following States to join the CAPSCA-Americas project:

- Cuba
- El Salvador
- Nicaragua
- Panama
- Venezuela

Indications were received that additional States may join CAPSCA-Americas. Some of the other States represented in the meeting advised that confirmation of their participation in the project will be forthcoming following a consultative process within their national authorities and would be advised to ICAO by a letter sent to the ICAO Regional Office to which their State is accredited. The Secretariat informed that a positive indication had been received from Brazil by letter prior to the SCM and that the ICAO SAM Regional Office would follow-up with that State to confirm its intention to become a participating member of the project.

Conclusion No. 5

The SCM requested CAPSCA-Americas to continue its efforts at apprising States in the Region of the Project’s objectives.
Conclusion No. 6

The SCM noted the draft work plan for CAPSCA-Americas, which, utilising the grant funds provided for the Project, includes:

- holding the 1st Regional Aviation Medicine Team (RAMT) meeting and training event;
- further updating of the State (ICAO), Airport (ACI), Airline (IATA) and any relevant WHO guidelines for harmonized pandemic preparedness planning, using the benefit of experience resulting from the current Influenza A(H1N1) Pandemic;
- preparation of a generic template for a Communicable Disease Outbreak National Aviation Plan;
- carrying out evaluations at major international airports of CAPSCA-Americas member States;
- exploring the possibility of WHO becoming a collaborative partner, with ICAO, in implementing the CAPSCA project; and
- providing further training.

Conclusion No. 7

The SCM approved, in principle, the CAPSCA-Americas Project Organisation, Steering Committee membership and Terms of Reference, and Work Plan as presented in the Appendices A, B and C to this report.

Conclusion No. 8

In order to carry forward the technical work of CAPSCA-Americas and to provide additional assistance on the subject to States/Administrations in the Region, the SCM endorsed the establishment of a Regional Aviation Medicine Team (RAMT) for the Americas under the CAPSCA-Americas Steering Committee. The RAMT consists of representatives of participant States/Administrations of CAPSCA-Americas (civil aviation and public health authorities), other partner States, international airports, airlines in the Region as well as regional/international organizations and other parties having a stake in pandemic preparedness planning for civil aviation. The 1st RAMT meeting, training and airport evaluation is planned to take place at the ICAO SAM Regional Office and Jorge Chavez International Airport, Lima, Peru, during the 1st week of December 2009.

Conclusion No. 9

The SCM confirmed that the ICAO Guidelines for States concerning the management of communicable disease posing a serious public health risk are a fundamental requirement for pandemic preparedness planning by States. The SCM endorsed the CAPSCA-Americas Project objective of a harmonized Pandemic Preparedness Plan for civil aviation, ensuring a cohesive multi-sectoral approach between all government departments concerned, and endorsed the need for the guidelines to be kept up to date.
Conclusion No. 10

The SCM endorsed holding regional CAPSCA-Americas seminars, including communications exercises between members, in order to evaluate ICAO State guidelines to effect a harmonised response.

Conclusion No. 11

OCHA and Mexico DGCA kindly offered to assist in the translation of the airport evaluation checklist from English to Spanish. This document may need revision by ICAO and WHO to ensure its applicability to the Americas regional characteristics and needs, national plans and lessons learned from H1N1.

Conclusion No. 12

The SCM agreed that the RAMT study the feasibility and practicality of training existing airport border control, airline cabin personnel and others in initial health screening.

Conclusion No. 13

The SCM agreed to the publication of these Conclusions on the ICAO public website in the aviation medicine section.
ICAO Cooperative Arrangement for the Prevention of Spread of Communicable Disease through Air Travel (CAPSCA) - Americas Project (RLA/08/901)

PROJECT STEERING COMMITTEE

Terms of Reference

1. Membership

- ICAO contracting States of the NAM/CAR/SAM Regions that participate in the Project – Civil Aviation Authorities and Public Health Authorities
- ICAO MED Section, TCB FAM Section, NACC and SAM Regional Offices
- Donor Agencies – UN CFIA and CAAS
- CAPSCA – Americas RAMT Leader
- WHO/PAHO

2. Observers

- Related International Organizations – ACI, IATA, IFALPA, IOM, OCHA, UNWTO, WFP, etc.
- Regional Safety Oversight Organisations – ACSA, CASSOS, SRVSOP (AVMED Panel)
- Airports and Airlines

3. Chairperson

Nominated by the State hosting the Steering Committee Meeting (SCM) for the period from the start of the meeting until the start of the following meeting. At the 1st SCM, Mexico designated Dr. José Valente Aguilar Zinser as Chairman.

4. Responsibilities

a) Main policy and decision-making body for the execution of the Project

b) Promote State participation in the Project
   - CAAs, PHAs, Airports, Airlines, etc.

c) Encourage State in-kind contributions to the Project
   - RAMT Leader, experts, hosting events, etc.

d) Provide direction and guidance to the RAMT Leader

e) Develop and manage the Project Work Plan and Schedule
   - plan priority and grouping for airport evaluations
   - schedule training events and develop programmes
f) Identify, secure and manage Project Personnel Resources
   • Formation of RAMT and their Terms of Reference

g) Identify and secure Project Donor States and Agencies – Funding & In-kind contributions

h) Monitor the project budget utilisation

i) Hold meetings at least once annually, and preferably in conjunction with CAPSCA training events and/or DCA meetings

j) Review the Project Annual Progress and Terminal Reports prepared by the RAMT Leader
APPENDIX D

ICAO Cooperative Arrangement for the Prevention of Spread of Communicable Disease through Air Travel (CAPSCA) - Americas Project (RLA/08/901)

PROJECT WORK PLAN

**Initial Project Duration:** 24 months (April 2009 – March 2011)


2. States establish national aviation plans, in collaboration with the national public health authority, in preparation for an outbreak of a communicable disease posing a public health risk or public health emergency (ongoing).

3. ICAO Letter inviting States to participate in the CAPSCA Americas Project (April 2009).

4. States Confirm participation in CAPSCA project (ongoing).

5. 1st Steering Committee Meeting (Mexico City, Mexico, 25 – 26 June 2009).
   - Project Organisation
   - Steering Committee Membership and Terms of Reference
   - Project Work Plan and Resources
   - Identify Potential Donors – Funding & In-kind contributors

6. ICAO Letter inviting States to (July 2009)
   - Join Project
   - Nominate experts for RAMT to be trained and perform evaluations
   - Offer airports for evaluation
   - Offer to host training events

7. States and International Organisations nominate experts (3rd Quarter 2009); periodic in-kind loan for airport evaluations; project to finance travel and per diems.

8. Form Regional Aviation Medicine Team (RAMT) - (3rd Quarter 2009).

9. States volunteer airports for evaluation (3rd Quarter 2009).

    - States nominate candidates for the RAMT Leader position
      - part-time in-kind loan based at home office plus missions for meetings, training and evaluations (project to finance travel and per diems).
    - ICAO appoint the RAMT Leader
11. Airport evaluations (1 international airport in each project participating member State / Territory – 2 days / airport) – (18 months, 4th Quarter 2009 – 1st Quarter 2011).

12. 2nd Steering Committee meeting and Project Awareness Seminar/Airport Exercise (2nd Quarter 2010)

13. 2nd RAMT Meeting and Airport Evaluator Training/Airport Exercise (4th Quarter 2010)

14. Project Results Seminar and 3rd Steering Committee meeting (2nd Quarter 2011)

15. RAMT Leader prepares the Project Terminal Report (2nd Quarter 2011).
APPENDIX E

ICAQ Cooperative Arrangement for the Prevention of Spread of Communicable Disease through Air Travel (CAPSCA) - Americas Project (RLA/08/901)

REGIONAL AVIATION MEDICINE TEAM (RAMT)

Terms of Reference

1. Membership
   - Experts nominated by ICAO Contracting States and Territories of the NAM/CAR/SAM Regions (Civil Aviation Authorities and Public Health Authorities) and International Organisations that participate in the Project
   - Trained Airport Evaluators

2. RAMT Leader
   Designated by ICAO from the pool of trained Airport Evaluators - Dr. José Valente Aguilar Zinser, Mexico.

3. Responsibilities
   1. Reports to the Steering Committee
   2. Reviews all guidelines, including those for airports and airlines
   3. Is open to anyone who can further the objectives of CAPSCA, including international organizations
   4. Interprets guidelines for applicability in region
   5. Provides suggestions to ICAO for improvement of guidelines
   6. Provides ongoing assessment, evaluation and planning advice to States, especially in the aviation sector
   7. Updates the checklist for airport evaluation
   8. Appoint and train evaluators to carry out airport evaluations in accordance with ICAO provisions and guidelines. Airport evaluations assist airport operators and other stakeholders to comply with these provisions and guidelines. An evaluation report will be provided by ICAO to the State civil aviation regulatory authority for their distribution as appropriate. The national health authority and airport operator should be included in such distribution.
9. Will be responsible for coordination and harmonization of preparedness planning amongst stakeholders

10. Will review and finalise a draft sample communicable disease plan for aviation (the RAMT would not be expected to write the plan, but will need to review it)

11. Will consider an on-line discussion group, facilitated by CAPSCA website when established

—END—