Lessons Learned from CAPSCA Assistance Visits to States and Airports

4th CAPSCA Africa Meeting
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<tr>
<th>CAPSCA Regional Projects</th>
<th>Asia-Pacific</th>
<th>Africa</th>
<th>Americas</th>
<th>Europe</th>
<th>Middle East</th>
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<tr>
<td><strong>Year of Establishment</strong></td>
<td>2006</td>
<td>2007</td>
<td>2009</td>
<td>2011</td>
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<td><strong>100 Member States</strong></td>
<td>20</td>
<td>26</td>
<td>34</td>
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<td><strong>26 State Technical Advisors Trained by ICAO (OJT completed)</strong></td>
<td>4</td>
<td>6</td>
<td>14</td>
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<td><strong>54 State &amp; Airport Assistance Visits Completed</strong></td>
<td>11</td>
<td>8 (incl. 2 States repeated; last visit one year ago)</td>
<td>31 (incl. only 2 follow-up visits globally)</td>
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<td>References (<a href="http://www.capsca.org">www.capsca.org</a>)</td>
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<td>ICAO Annexes 6, 9, 11, 14 SARPs</td>
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<td>PANS-ATM (Doc 4444) &amp; Technical Instructions for the Safe Transport of Dangerous Goods by Air (Doc 9284)</td>
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<td>WHO IHR (2005)</td>
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<td>ICAO, WHO, ACI, IATA guidelines</td>
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<td>WHO IHR Assessment tool for core capacity requirements at designated airports, ports and ground crossings</td>
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<td>Facilitation Manual (Doc. 9957) &amp; Airport Services Manual (Doc 9137) Part 7 – Airport Emergency Planning</td>
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<td>Template for National Aviation PHE Preparedness Plan</td>
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<td>ICAO USOAP Audit Protocol Questions</td>
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Plans and Procedures for Public Health Emergencies in the Aviation Sector

• International Health Regulations (IHR) published by WHO
• ICAO An. 6, 9, 11, 14 & Docs 4444 (PANS-ATM), 9284 (DG)

• National Public Health Emergency Plan (PHA)
• National Aviation Regulations with standards related to public health (CAA)
• National Aviation Plan for a Public Health Emergency (CAA)
• Airport (PoE) Public Health Emergency Contingency Plan – PHECP (PHA, CAA & Airport)
• Framework, mechanism, agreement and procedures for CCCCs between sectors

Aerodrome Emergency Plan and Aerodrome Manual including public health emergencies
Air Traffic Services (ATS) contingency plan including public health emergencies
ATS Procedures for PIC notification of suspected public health risk on board an aircraft
Aircraft Operators Procedures for mgmt of suspected public health risk on board an aircraft

Business Continuity Management Plans and Procedures for essential services
Airport Visit Methodology

Visit shall not affect normal airport operations

The visit should demonstrate preparedness for management of a PHE

Scenario of the arrival of an aircraft with a suspected communicable disease, or other public health risk, on board an aircraft or a scenario of a local outbreak of a PHE in the State in the vicinity of the airport

Walkthrough observations and interviews

Recommendations for improvements
General (1)

- Commitment and mandate of Governments at ministerial level & top management in authorities and service providers
- Formal framework, mechanism and agreement for aviation and public health authorities to work together
- Communication, cooperation, coordination and collaboration between aviation and public health sectors
- Complete stakeholder participation in the development of plans and preparedness
- Harmonisation between national and service provider plans in both sectors
General (2)

- No duplication of efforts between different aviation and health stakeholders
- Knowledge of international standards and regulations
- Use of standard procedures and terminology
- Plans and Procedures Documentation, Approval, Dissemination, Awareness, Training, Exercises
- Consider local outbreak
Public Health Authority (PHA)

Consider and involve aviation sector

Knowledge of aviation SARPs, regulations and plans

Engage with CAA

National PHE Contingency Plan applicable to all types of public health events
Civil Aviation Authority (CAA)

Civil aviation regulations include PHE related SARPs

National aviation plan for a PHE

Knowledge of PHEs and IHR

Involve PHA in the certification of aerodromes to validate implementation of public health related SARPs

Engage with PHA
Airport Operator and Medical Services (1)

Airport (PoE) Public Health Emergency Contingency Plan (PHECP)

IHR Core capacity requirements for designated airport POEs

AEP include PHEs, not to be confused with medical emergencies

Involve CAA in development of AEP PHE part, to be harmonised with NAPPHE

Involve PHA in development of AEP PHE part, to be harmonised with NPHECP

Mutual aid agreements
Airport Operator and Medical Services (2)

- **CAA to approve the AEP**

- **Personnel awareness and training in AEP**

- **AEP PHE exercises, combined scenario with other emergency type**

- **EOC/CCC members, location, space, convenient and controlled access, facilities, equipment, documentation**

- **Designated aircraft parking position – identification, location, size, access, pax bridge, disembarkation, separation – not to be confused with isolated aircraft parking position for security incidents**

- **Procedure for handling aircraft with suspected case on board**
Airport Operator and Medical Services (3)

Arrival and departure passenger segregation and screening only when recommended by WHO or justified for other reasons - Screening areas and methods not to affect passenger flows.

Interview and assessment holding area for suspect cases and contacts – location, access, size, negative pressure/ventilation, facilities, services, furniture, equipment (toilets, water, beds).

Isolation and treatment facilities for affected ill pax.

PPE for all personnel with potential contact with suspect cases.

Transportation of cases in equipped ambulances to designated medical facility.

Procedure for reduced essential staffing due to illness and other absenteeism due to local outbreak or pandemic, e.g. ATS, RFFS, AVSEC, pax & bag handling.
Port Health

Presence at airport

Agreement with medical services

Collection of aircraft general declarations

Published info to provide pax who are not subject to interview / evaluation

Quarantine of suspect pax, preferably in facilities away from the point of entry, not to be confused with isolation
Air Navigation Service Provider (ANSP)

ATS contingency plans to consider PHEs

Procedure for reduced essential staffing due to illness and other absenteeism due to local outbreak or pandemic

Procedures for prompt relay of notification from aircraft to airport, airline, and PHA of suspected communicable disease, or other public health risk, on board an aircraft and communication to aircraft of the designated aircraft parking position
Aircraft Operator

- Procedures for the crew to identify, evaluate and manage a passenger with a suspected communicable disease
- Procedures for the pilot-in-command to promptly notify ATC of in-flight suspected communicable disease case
- Procedure for disinfection of aircraft with approved materials, not to be confused with disinsection
- Template for the General Declaration including Health Part
- Template for the Public Health Passenger Locator Form
Next Steps (1)

- Visit all CAPSCA participating States
- More joint ICAO/WHO visits
- Harmonised ICAO CAPSCA checklist/WHO IHR assessment tool
- Analyse observed regional trends and recommend typical actions
- Review lessons learned and improve the assistance visit process
Next Steps (2)

- State Action Plans and implementation
- ICAO CAPSCA Regional Coordinators follow-up
- Follow-up visits
- More State CAA & PHA Technical Advisors training by ICAO
- National implementation of CAPSCA concept & methodology
Recommended Actions

States are encouraged to:

- join CAPSCA by confirming during this meeting or by sending a letter to ICAO or WHO regional office (no cost)
- request Assistance Visit by sending a letter to ICAO or WHO Regional Office (cost recovery)
- offer to host the next CAPSCA Africa meeting in 2014
- volunteer technical advisor(s) from CAA and PHA to be trained by ICAO and participate in assistance visits