MANAGEMENT OF PUBLIC HEALTH EMERGENCIES IN AVIATION - FUNDING THE CAPSCA PROGRAMME BEYOND 2012

International Civil Aviation Organization

49th CONFERENCE OF DIRECTORS GENERAL OF CIVIL AVIATION ASIA AND PACIFIC REGIONS
New Delhi, India
(8 - 12 October 2012)
Presentation Outline

- Introduction - CAPSCA
- CAPSCA Achievements
- CAPSCA Benefits
- Assistance Visit Observations
- ICAO CAPSCA Next Steps
- ICAO CAPSCA Funding Status / Needs
- Conclusion
- Action by the meeting

* CAPSCA - Cooperative Arrangement for the Prevention of Spread of Communicable Disease through Air Travel
Introduction - CAPSCA

✈ Aviation a contributory factor to rapid dissemination of disease
✈ Economic impact of public health emergencies
✈ To mitigate - emergency preparedness is essential
✈ Article 14 of the Chicago Convention – prevent spread of communicable diseases by air transport
✈ ICAO established **Cooperative Arrangement for the Prevention of Spread of Communicable Disease through Air Travel (CAPSCA)** in 2006 to assist States with the major challenge of multi-sector collaboration.
CAPSCA Partner Organisations
Interlinking guidelines

- A guide for public health Emergency contingency planning at designated points of entry
- Guide to hygiene and Sanitation in aviation
- Case Management of Influenza A(H1N1) in air transport

World Health Organization
International Health Regulations (2005)

International Civil Aviation Organization / Civil aviation authority guidelines

Airports Council International airport guidelines

International Air Transport Association airline guidelines
ICAO CAPSCA Activities

- Foster collaboration between civil aviation and health sectors – WHO/ICAO, PHA/CAA, Government authorities/industry service providers, etc.
- Facilitate implementation of relevant parts of WHO IHR(2005)
- Organise regional meetings/ training events/ seminar/ workshop
- Conduct **Assistance Visits** to States and International Airports to improve their preparedness to PH threats
- Assist States with National Aviation PHEPs
- Developing guidance material
- Web resource ([www.capsca.org](http://www.capsca.org))
ICAO CAPSCA Achievements (1)

- Global Programme - 5 Regional Projects
- Partner Organisations (United Nations Agencies and Aviation Industry)
- 84 Member States
- 38 State and Airport Assistance Visits
- 17 Trained State Technical Advisors with OJT for Assistance Visits
- Amendments to five ICAO Annexes (6, 9, 11, 14, 18)
- Incorporation of questions on PHE preparedness in ICAO USOAP (CMA)
- Assembly Resolution A37-13
ICAO CAPSCA Achievements (2)

- CAPSCA guidelines, checklist, report template
- Template for National Aviation PHE Preparedness Plan
- CAPSCA web site (www.capsca.org)
- WHO collaboration on training and visits
- National implementation of CAPSCA methodology
### Plans and Procedures for Public Health Emergencies in the Aviation Sector

- **WHO International Health Regulations (IHR) – 2005**
- **ICAO Annexes 6, 9, 11, 14 & 18 and Doc. 4444 (PANS-ATM)**

#### National Public Health Emergency Contingency Plan (PHA)

- **National Aviation Regulations updated with international standards related to public health (CAA)**

#### National Aviation Plan for a Public Health Emergency (CAA)

- **Aerodrome** Emergency Plan including public health emergencies
- **Air Traffic Services (ATS)** contingency plan including public health emergencies
- **ATS** Procedures for notification of suspected public health risk on board an aircraft
- **Aircraft Operators** Procedures for suspected public health risk on board an aircraft
From 2013 the USOAP audit protocol (CMA) will include questions on public health emergency (PHE) planning.
NOTIFICATION OF SUSPECTED COMMUNICABLE DISEASE, OR OTHER PUBLIC HEALTH RISK, ON BOARD AN AIRCRAFT

ICAO Aircraft General Declaration
- Declaration of Health
(IAOC Annex 9, Appendix 1 & IHR (2005) Annex 9)

- Aircraft Callsign (ID)
- Dep. Aerodrome
- Dest. Aerodrome
- Est. Time Arrival
- Number of persons on board
- Number of susp. cases
- Nature of public health risk

Aircraft Operator
(or handling agency)
at destination aerodrome

• Airport Operator
• Public Health Authority
• Other agency(ies)

Destination Aerodrome
TWR ATC

Air Traffic Controller

Voice or data link e.g. AFTN*

Voice or data link

*Voice or data link

Via local procedure
(Aerodrome Emergency Plan)

• Air Traffic Controller

Via local procedure
(Aerodrome Emergency Plan)

*AFTN = Aeronautical Fixed Telecommunication Network
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<th>Year of Establishment</th>
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** April 2012 data**
18 States (i.e. Afghanistan, China P.R, Hong Kong China, Macao China, India, Indonesia, Malaysia, Mongolia, Myanmar, Nepal, *New Zealand*, Papua New Guinea, Philippines, Singapore, Solomon Islands, Thailand, Tonga, and Vietnam) in the Asia Pacific Region have joined the CAPSCA Asia Pacific project.

**Upcoming CAPSCA AP Activities**

- **Nepal CAPSCA Assistance Visit**
  (10-11 Dec 2012)
- **Technical Advisor Training W/shop, Bangkok**
  (13-14 Dec 2012)
- **6th CAPSCA AP Meeting, Philippines**
  (April 2013)
ICAO CAPSCA Benefits

- Synergistic development of standards and guidance, utilising resources from different sources, both public and private
- Improved and harmonized emergency response planning, preparedness and management
- Multi-sector framework and network within State, between States and between International Organisations
- Before, during and after a PHE: improved communication, coordination, cooperation and collaboration
- Optimize resources for PHE response
- Improved management of risk perception
- Reduced impact of public health emergencies on populations
CAPSCA Assistance Visit missions review aviation sector PHE preparedness plans to ensure that harmonized and relevant policies, training and communication procedures are in place.

- PHAs resist engaging with CAAs & Airports resist engaging with PHA & CAA
- Civil aviation regulations have not been updated with PHE SARPs
- Insufficient communication, cooperation, coordination and collaboration between aviation and public health sectors
- Inadequate knowledge of each other's standards and regulations
- Little participation in the development and harmonisation of each other's plans and preparedness
- Duplication of efforts between different aviation and health stakeholders
States do not consider the possibility of an outbreak in their own State
PHEs not incorporated in AEPs and if so, not enough awareness, training and exercises
Notification of in-flight suspected case not via ATC
Passenger screening affects passenger flows
Designated aircraft parking position inconvenient for access or operations
Template for the Health Part of General Declaration not adopted
Template Public Health Passenger Locator Card not adopted
Communication issues (passengers, crew, airport staff, media) not adequately addressed
Common Actions required by States

航空和公共卫生当局应制定正式框架和程序，用于共同工作制定国家性的PHEP航空计划。

航空法规应包含与PHE相关的SARPs。

AEPs应包含为PHEs制定的程序和协议，与航空部门的国家性的PHEP相协调。

CAA和PHA应共同审议AEP。

人员需要在AEP中接受培训，并应通过试验和模拟来锻炼AEP。

整个社会应对紧急规划考虑。 (注意：与非传统合作伙伴建立合作关系可有助于提高公共卫生问题的灾难准备性。)
**CAPSCA Next Steps/Future work**

- Regional Coordinators to follow-up with States on State Action Plans and implementation of CAPSCA Assistance Visit Recommendations
- Review lessons learned and improve the assistance visit process and CAPSCA Follow-up Visits to States
- Enhance ICAO/WHO collaboration:
  - for ICAO SARPs and WHO IHR (2005) Implementation
  - to harmonise and include respective cross references in technical guidance and tools
  - joint technical assistance visits
  - harmonising the ICAO safety oversight audit programme and WHO IHR (2005) designated airport certification requirements
- Business continuity and communications guidance
- Expand scope of CAPSCA beyond communicable diseases to incorporate all types of events (“all-hazards”) with the potential to become a public health emergency with an international impact
UN Central Fund for Influenza Action (CFIA) grants expire on 31 December 2012

No funds allotted to CAPSCA in ICAO 2011 – 2013 regular programme budget approved by States in 2010 Assembly

CAPSCA requires funding to continue activities beyond 2012
ICAO CAPSCA Funding Needs

✈ USD 300,000 per year based on average expenditure during 2010 and 2011 for *global* activities

✈ Note: For CAPSCA AP approx. $60k per year, would enable ICAO to arrange an annual CAPSCA AP regional meeting/seminar and a few assistance visits at no cost to States.
CAPSCA Potential Sources of Funding

✈️ ICAO
- Regular budget year-end carry-over funds
- Special implementation project(s)
- SAFE
- Regional Projects
- HQ ANB and Regional Office regular programme allotments

✈️ States & Airports
- Voluntary contributions
- Cost recovery for visits
- Project participation fee
- Technical Advisor Assistance Visit travel

✈️ Organizations
- UN funds
- Industry
- Regional
- National
- Private
Concluding Remarks

- Aviation is affected early during a PHE
- National economies adversely affected by reduction of aviation traffic
- UN CFIA funding enabled CAPSCA to be developed
- The CFIA is being wound up at the end of 2012, so no further grants will be available from this source
- Without additional sources the CAPSCA work will need to be scaled back significantly
- Additional funding sources must be identified
- Endorsement from States towards continuance of CAPSCA essential for ICAO to consider allocating regular programme funds to support CAPSCA in the next triennium.
Recognizing the effectiveness of CAPSCA with improving State capacities in the area of PHE preparedness and the need for this support to continue, States/Administrations are encouraged to:

- Support ICAO to continue the CAPSCA Programme beyond 2012;

- Propose to ICAO possible sources of and mechanisms for funding CAPSCA; and

- become participating members of the ICAO CAPSCA Asia Pacific project, if not yet members; and accept CAPSCA PHE Preparedness Assistance Visits by sending a letter to the ICAO APAC Regional Office
Thank you

www.capsca.org