



*International Civil Aviation Organization*

North American, Central American and Caribbean Office (NACC)

**First Meeting of the Steering Committee of the ICAO Cooperative Arrangement for the Prevention of the Spread of Communicable Disease through Air Travel (CAPSCA) – Americas Project (RLA/08/901)**

**(CAPSCA SCM/1)**

Mexico City, Mexico, 25 – 26 June 2009

CAPSCA-SCM/1 – WP/03

20/05/09

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**PROJECT DOCUMENT**

(Presented by the Secretariat)

**SUMMARY**

The ICAO CAPSCA Americas Project Document is presented in this working paper. States, Territories and International Organizations are invited to becoming participating and contributing members of the project.

*Strategic  
Objectives*

*This working paper is related to Strategic Objectives D and E.*

**1. Introduction**

1.1 ICAO has been actively engaged with States and organizations such as the World Health Organization (WHO), International Air Transport Association (IATA), Airports Council International (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 related Standards and Recommended Practices contained in Annexes 6, 9, 11 and 14. The amendments to Annexes 6, 11 and 14 will become applicable in November 2009. In addition, ICAO has published the “ICAO Guidelines for States concerning the management of communicable disease posing a serious public health risk”.

1.2 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.

1.3 ICAO has established the Cooperative Arrangement for the Prevention of the Spread of Communicable Disease through Air Travel (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. Experience with

the Severe Acute Respiratory Syndrome (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.

1.4 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. In the course of the CAPSCA Americas project, ICAO, State and International Organisation aviation medicine experts will visit airports of participating States and Territories to evaluate the implementation of the ICAO guidelines and relevant aspects of the International Health Regulations (2005), and to provide training of personnel from the participating civil aviation, airports and public health authorities, as well as airlines.

1.5 A grant of approximately USD 400,000 from the UN Central Fund for Influenza Action (CFIA) has been allocated to ICAO for this 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. State contributions during the initial phase of the project will be requested in the form of in-kind loans of aviation medicine experts to be trained and undertake airport evaluation missions to participating member States and Territories.

1.6 ICAO encourages all States and Territories in the Americas Regions to become a participating and contributing member of the project.

## **2. Project Document**

2.1 The ICAO CAPSCA Americas Project Document was sent to States and Territories in April 2009, and is presented in **Appendix A**.

## **3. Action suggested**

3.1 The Meeting is invited to:

- a) Review the Project Document and provide any comments.
- b) Receive commitments from States, Territories and International Organisations to participate in the project.

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## INTERNATIONAL CIVIL AVIATION ORGANIZATION

### PROJECT DOCUMENT

**Title:** Cooperative Arrangement for the Prevention of the Spread of Communicable Disease through Air Travel (CAPSCA) – Americas

**Number:** RLA/08/901

**Initial Duration:** 24 months

**Project Site:** The Americas Region

**Sector & Sub-Sector:** Transport and Communications

**Government  
Implementing Agencies:** Civil Aviation Administrations and Airport Authorities in Participating States

**Executing Agency:** International Civil Aviation Organization (ICAO)

**Estimated Starting Date:** May 2009

**Initial Project Cost:** USD 399,960 (UN CFIA grant approved and received)

Signed on behalf of:	Name	Signature	Position	Date
Anguilla				
Antigua and Barbuda				
Argentina				
Aruba				
Bahamas				
Barbados				
Belize				
Bermuda				
Bolivia				
Brazil				
British Virgin Islands				
Canada				
Cayman Islands				
Chile				
Colombia				
Costa Rica				
Cuba				
Dominican Republic				
Ecuador				
El Salvador				
Falkland Islands				
France				
French Antilles				
French Guiana				
Grenada				
Guatemala				
Guyana				

<b>Signed on behalf of:</b>	<b>Name</b>	<b>Signature</b>	<b>Position</b>	<b>Date</b>
Haiti				
Honduras				
Jamaica				
México				
Montserrat				
Netherlands Antilles				
Nicaragua				
Panama				
Paraguay				
Peru				
Saint Kitts and Nevis				
Saint Lucia				
Saint Vincent and the Grenadines				
Suriname				
Trinidad and Tobago				
Turks and Caicos Islands				
United Kingdom				
United States				
Uruguay				
Venezuela				
COCESNA				
ECCAA				
ICAO	Taïeb Chérif		Secretary General	

## **A. CONTEXT**

### **1.1 Background**

1.1.1 The rise and spread of Severe Acute Respiratory Syndrome (SARS) in 2003 raised the concern of ICAO, the World Health Organization (WHO) and a number of States particularly in South East Asia and led to the development and implementation of Anti-SARS protective measures and guidelines at certain airports as a means of controlling SARS and preventing its spread through air travel.

1.1.2 The rapid and wide dissemination of Avian Influenza in 2005 and the potential for human pandemic influenza raised even greater concern and led the WHO to hold a meeting in Geneva during November 2005. The aim of the meeting was the building of consensus on a common approach to the worldwide concern about avian influenza and the possibility of a human pandemic.

1.1.3 The WHO meeting in which 600 experts and representatives of States and international organizations participated, including ICAO, reached a consensus that neither the timing nor the severity of the next pandemic could be predicted with any certainty due to the unpredictable behaviour of influenza viruses. Therefore, information had to be compiled to help policy makers and the public remain informed about a rapidly evolving situation. Consequently, governments around the world needed to take the threat seriously, mobilize resources and take appropriate preparatory actions.

1.1.4 Article 14 of the Chicago Convention on International Civil Aviation requires each contracting State to take effective measures to prevent the spread by means of air navigation of communicable diseases. To that end, Contracting States will keep in close consultation with the agencies concerned with international regulations relating to sanitary measures applicable to aircraft.

1.1.5 The ICAO standard contained in Annex 9 – Facilitation, Paragraph 8.16, states that “*A Contracting State shall establish a national aviation plan in preparation for an outbreak of a communicable disease posing a public health risk or public health emergency of international concern*”.

1.1.6 Therefore, ICAO and its Member States consider it necessary to address the topic of a potential human influenza pandemic, as well as other communicable diseases of serious public health concern, and air travel. An aviation-related preparedness plan needs to be developed by States to prevent, as much as possible, the spread of avian influenza and similar communicable diseases by air travellers and to mitigate the socioeconomic consequences.

1.1.7 Guidelines for States have been prepared by ICAO and are posted on the medical section of its website under the title “Guidelines for States concerning the management of communicable disease posing a serious public health risk.

**B. PROJECT JUSTIFICATION**

**1. Problems to be addressed: pre-project situation**

**1.1 Identification of the problem**

1.1.1 The level of implementation of the “*ICAO Guidelines for States concerning the management of communicable disease posing a serious public health risk*” in States and Territories of the Americas region by airport operators, air traffic service providers and aircraft operators has not been determined but is understood to be minimal. It is important to ensure States and their airports and airlines are well prepared in the event of a pandemic through the implementation of the guidelines.

1.1.2 The implementation of an aviation preparedness plan requires extensive coordination between different government sectors, airlines, airport operators and air navigation service providers. A mechanism is therefore required to advise and assist States and Territories to increase the awareness, provide the training, assist the implementation and undertake evaluations.

1.1.3 Regional cooperation among States in a given region for the prevention and mitigation of the effects from the spread of communicable diseases offers the best practical and cost-effective method of addressing the need for preparedness planning.

**1.2 Strategy to be followed in achieving the project objective**

1.2.1 The overall management for the project will be the responsibility of the Chief of the Aviation Medicine Section of ICAO. A Steering Committee with representatives of the project members and donors will provide advice on the scope, implementation schedule and priorities for the project activities and create a database of experts from States and International Organisations who will be provided on loan in-kind to undertake training and evaluation missions. The Terms of Reference for the Steering Committee (SC) will be formulated at its first meeting. A Project Coordinator will also be provided by a State or International Organisation on loan in-kind and on a part-time basis to support the ICAO Project Manager and Project Steering Committee. The project coordination will be undertaken by the ICAO NACC and SAM Regional Offices.

1.2.2 Encourage the Americas States and Territories to join CAPSCA by communicating and promoting the existence and objectives of the project at seminars and meetings.

1.2.3 Continuously develop and update the ICAO preparedness guidelines to prevent, to the extent possible, the spread of communicable diseases by air travellers. Ensure the ICAO guidelines are based on, and consistent with, the IHR (2005) and any WHO guidance material.

1.2.4 Form a network of trained experts from States and international organizations to provide assistance to Civil Aviation Administrations and airport authorities in the development and implementation of the guidelines.

1.2.5 Conduct evaluation visits to airports as needed to determine the adoption and proper implementation of the ICAO guidelines. Such visits would be arranged, as far as possible, for a group of airports in the same area to be evaluated during one mission so that the experts' travel cost element per airport is reduced. It is planned to commence with evaluations of one international airport in each State and Territory. Each evaluation is expected to require a 2 day visit.

1.2.6 Provide a seminar/workshop and on-the-job training to personnel from participating civil aviation and airport authorities, to facilitate the continued implementation of the guidelines.

1.2.7 Develop a cooperative follow up and supervisory mechanism within the region for the continued development and implementation of the guidelines for preventing the spread of communicable diseases.

## **2. IMMEDIATE OBJECTIVES, OUTPUTS AND ACTIVITIES**

### **Immediate Objective 1 (Pre-project implementation stage)**

Establishment of the Steering Committee.

#### **Output 1.1**

A Project Steering Committee (SC) comprising representatives of the States' Civil Aviation Administrations, ICAO Technical Cooperation Bureau, ICAO NACC and SAM Regional Offices, ICAO Chief, Aviation Medicine Section, and airports, airlines and of public health authorities will have been established in the pre-project implementation stage and its Terms of Reference and project work plan will have been prepared and agreed.

#### **Activity 1.1.1**

Appoint members of SC.

#### **Activity 1.1.2**

ICAO. Review and revision of the terms of reference for the Steering Committee proposed by

#### **Activity 1.1.3**

Review and revision of the project work plan and associated budget proposed by ICAO.



## **Immediate Objective 2**

Establishment of project implementation teams

### **Output 2.1**

Qualified project personnel from the Region will have been identified to undertake the required tasks.

#### **Activities 2.1.1**

Identify highly qualified regional experts in the field of aviation medicine. A database of experts from States and international organizations to provide assistance to Civil Aviation Administrations and airport authorities in the development and implementation of the guidelines.

#### **Activity 2.1.2**

Develop a network of trained medical personnel with expert skills in communicable diseases, airport and airline operations, and aviation regulation in participating States and airports.

### **Output 2.2**

Establishment of two Regional Aviation Medicine Teams (RAMT) under the Steering Committee; one RAMT will work in Spanish and the other in English.

#### **Activity 2.2.1**

Request States to provide suitable candidates from the civil aviation administrations/Airport Authorities/Airlines/Public Health Administration.

#### **Activity 2.2.2**

Train the RAMT experts to undertake the evaluations.

### **Immediate Objective 3**

Contribute to global efforts for preventing the spread of communicable diseases of international public health concern by reducing the risk of transmission by air travellers.

#### **Output 3.1**

ICAO SARPs and guidelines related to the prevention of the spread of communicable diseases will have been applied and implemented.

##### **Activity 3.1.1**

Organize awareness seminar/workshop within the region to encourage States to join the Project and participate actively in prevention measures, and to which relevant international organizations and potential donors should be invited.

##### **Activity 3.1.2**

Select and appoint experts (from the RAMTs) to visit and evaluate major international airports in participating States to ensure application and implementation of the ICAO guidelines on the Global Preparedness Plan (Aviation Aspects) for Communicable Diseases.

##### **Activity 3.1.3**

Provide on-the-job training, needed, to civil aviation, airport and airline personnel from the participating States for carrying out subsequent evaluations of major airports in their own countries or at airports in other participating States.

##### **Activity 3.1.4**

Provide advice and guidance to participating aviation administrations and airports on rectifying any deficiencies noted in application of preventive measures and implementation of the guidelines identified during the evaluations.

##### **Activity 3.1.5**

Develop a regional cooperative follow up and supervisory mechanism composed of participating authorities and agencies concerned, to ensure the continued implementation of the relevant SARPs, associated guidelines and preventive measures, and on steps needed to mitigate the potential health and socioeconomic consequences associated with the spread of any communicable disease of global health concern.

##### **Activity 3.1.6**

Prepare Project Terminal Report in ICAO format.

### **3. INPUTS**

#### **3.1 Government / Airport / Sponsor Inputs**

- a) Personnel: qualified medical personnel from the participating States to undertake activities related to the application and implementation of the ICAO SARPs and guidelines on the Aviation Aspects of the Global Preparedness Plan and to act as needed as a counterpart to the ICAO experts and/or RAMT members evaluating their State/airport.
- b) Air and ground transportation for travel to and from airports in the same State.
- c) Local coordination and support for the evaluations, as required.
- d) Funding as determined by the Steering Committee if the UN CFIA grant is found to be insufficient for the budget required to implement the agreed work plan, if the project is extended and/or expanded in duration and scope, respectively.
- e) Financial contributions to extend the utilisation of the available budget and sustainability of the programme in the future.

#### **3.2 ICAO Inputs**

- a) ICAO Experts in Aviation Medicine and communicable diseases.
- b) Travel costs for ICAO Experts and
- c) Mission costs for ICAO personnel to support/monitor/evaluate the project, as needed, as well as attendance of ICAO's Chief of Aviation Medicine at occasional planning or development meetings with other organizations, especially WHO.
- d) Miscellaneous costs including reporting, sundry expenses and ICAO handling charge.

### **4. MANAGEMENT AND COORDINATION**

4.1 ICAO will manage the project and organize the field visits of its experts and RAMT evaluators in coordination with the civil aviation administrations/airport authorities/Public health Departments participating in the project in accordance with its relevant rules and regulations. It will select the experts and arrange payment of their travel expenses, maintain financial accounting, provide backstopping and monitoring, as well as accurate and timely reporting.

### **5. MONITORING AND REPORTING**

5.1 The ICAO Project Manager (Chief Aviation Medicine Section) and the Steering Committee, supported by the ICAO NACC and SAM Regional offices, will monitor the project through review of the reports submitted by the experts and project reviews at periodic Steering Committee meetings.

5.2 A draft Project Terminal Report will be prepared by the project coordinator prior to the end of the project. The Report will be finalized by the ICAO Project Manager and provided to the civil aviation administrations concerned.

**6. RISK ASSESSMENT**

6.1 Initial Major Risk Factors

6.1.1 Delay in the approval of the project

Risk Level - Low

ICAO will work with the countries in the Americas Region and the WHO to facilitate the signing of the project document and will assist in resource mobilization.

6.2 Long-term Risk Factors

6.2.1 Delay in the fielding of the experts.

Risk Level: - Low to Medium

ICAO will review its roster of experts and work with the WHO, etc., if required, to ensure candidates are identified for fielding under this project.

6.2.2 Non-participation of appropriate experts and Government Officials.

Risk Level: - Low to Medium

ICAO will continue to work with the international organizations, experts and governments to ensure that the necessary action and involvement continues regarding avian influenza.

6.2.3 Delay in the responses of States for the evaluations of their airports

Risk level: Medium to High

An assistance program will be submitted for approval at the 1st Steering Committee meeting and therefore to obtain a formal commitment from States. ICAO will continuously follow-up to ensure the progress of the approved program.

**INTERNATIONAL CIVIL AVIATION ORGANIZATION**

**TECHNICAL CO-OPERATION BUREAU**

**JOB DESCRIPTION**

- Title:** Aviation Medicine Expert / Project Coordinator  
(In-kind loan from State/International Organisation)
- Duty Stations:** Based at home office except for travel in relation to attendance of SC meetings, training events and evaluation missions
- Date Required:** May 2009
- Initial Duration:** 12 months with possibility of extension (Part-time)
- Qualification Requirements:**
1. University degree in Medicine, preferably with experience of pandemic planning in communicable diseases.
  2. A minimum of 15 years experience in the field of aviation medicine, with government and/or at an international organization.
  3. In-depth knowledge of ICAO SARPs and guidelines related to Aviation Medicine and communicable diseases.
  4. Experience in the evaluation of airport medical control procedures, including health screening, quarantine, etc.
  5. Experience in the investigation and evaluation of the transmission of communicable diseases and preventive measures, including those relevant to major international airports.
  6. Knowledge of avian influenza prevention measures and passenger screening procedures at major international airports.
  7. Knowledge of the Aviation Preparedness Planning Guidelines for preventing the spread of avian influenza and other communicable diseases by air travellers.
  8. Computer literate.
  9. Fluency in the Spanish and English languages, including proven ability to write clear and concise reports.
  10. Initiative, tact, sound judgement and the ability to foster and maintain harmonious working relationships in an international team.

**Duties:**

- 1 Support the ICAO Project Manager (Chief Aviation Medicine Section) in managing the project.
- 2 Advise and assist the Steering Committee and coordinate and support its meetings.
3. Establish and lead the Regional Aviation Medicine Teams (RAMTs).
4. Provide seminars and workshops in conjunction with RAMTs to make States aware of the importance of the on-going project and its objectives
5. In consultation with the participating civil aviation administrations/airport authorities, organize a programme of visits to evaluate the effectiveness of communicable diseases screening and control at the participating international airports.
6. Undertake an evaluation visit to each participating airport, with the objective of assessing the implementation of communicable diseases protective measures and the application of ICAO SARPs guidelines in this regard with special emphasis on health, medical screening and quarantine procedures.
7. Discuss the outcome of the evaluation with airport and medical authorities concerned and recommend corrective action where needed, particularly in medical aspects.
8. Submit a draft report on the evaluations carried out, with findings and recommendations regarding communicable diseases protective measures applied.
9. Provide on-the-job training to personnel from participating civil aviation and airport authorities.
10. Prepare the draft Project Terminal Report.