CAPSCA Americas 1st RAMT
2nd & 3rd December 2009

Pandemic Preparedness
For The Aviation Sector –
Checklist for Evaluation

Dr. Jarnail Singh
An Evaluation

NOT an audit

We will be learning from each other
Aviation Pandemic Preparedness Plan

National Pandemic Preparedness Plan

ICAO & IHRs

WHO Pandemic Preparedness Guidelines + Rapid Containment Strategy

ACI & IATA

CDC & Other expert agencies

States

States

National Pandemic Preparedness Plan

Aviation Pandemic Preparedness Plan
Implementing The IHRs (2005)

World Health Organization
The International Health Regulations (2005)

- Established by negotiation between States
- Adopted at the World Health Assembly (2005) & legally binding on WHO’s Member States
- Entry into force on 15 June 2007
  - Voluntary early compliance – Avian Flu – 2006 WHA
- Five years to develop country core capacities
Purpose of IHR (2005)

« to prevent, protect against, control and provide a public health response to the international spread of disease in ways that are commensurate with and restricted to public health risks, and which avoid unnecessary interference with international traffic and trade »

A binding legal document between WHO and Member States with:
- rights
- obligations
- standardized procedures

But .. no mandatory enforcement…
From **control of borders** to **containment at source**

From **diseases list** to **all threats**

From **preset measures** to **adapted response**
IHRs Summary

• IHR is a legally binding international instrument developed through negotiation between States
• Purpose of IHR is to prevent and respond to the international spread of disease while avoiding unnecessary interference with international traffic and trade
• National legislation needs to be reviewed (and possibly revised)
• Core capacities need to be developed as soon as possible, but within 5 years (2012) – although extension is possible.
Recommendations - National actions

1. Establish a functioning National IHR Focal Point

2. Ensure adherence to reporting requirements and verification of public health events.

3. Adjust administrative and legislative arrangements (including certificates).

4. Assess core capacities (gap analysis) surveillance and response designated points of entry

5. Develop national plan and mobilize resources necessary to guarantee compliance with the provisions set in the IHR (2005)
Article 14, International Convention on Civil Aviation:

• ‘Each contracting State agrees to take effective measures to prevent the spread by means of air navigation of cholera, typhus (epidemic), smallpox, yellow fever, plague, and such other communicable diseases as the contracting States shall from time to time decide to designate....’
ICAO Assembly Resolution A35-12
(health risk to travellers)

...the protection of the health of passengers and crews on international flights is an integral element of safe air travel and that conditions should be in place to ensure its preservation in a timely and cost effective manner.
ICAO should, ‘as a matter of priority…develop Standards and Recommended Practices in the appropriate Annexes to the Convention in order to address contingency plans to prevent the spread of communicable diseases by air transport’
Resolution A35-12, ICAO Assembly, 2004 (3)

‘ICAO should establish suitable institutional arrangements to coordinate efforts by contracting States and other members of the international civil aviation community aimed at protecting the health of passengers and crews’
ICAO Annex 9 changes
ICAO Assembly, Oct 2004

Declared:

- the protection of the health of passengers and crews is an **integral element of safe air travel**

Requested the Council to:

- establish suitable institutional arrangements to coordinate efforts aimed at protecting the health of passengers and crews;
- develop new SARPs where appropriate with due consideration of global health issues;
- support further research on the consequences of air transport on the health of passengers and crews;
- develop SARPs in order to address contingency plans to prevent the spread of communicable diseases by air transport.
Standards and Recommended Practices

- Standards – mandatory
- Recommended practices – desirable
  - SARPS listed in 18 Annexes
- Annex 9 (Facilitation) changes agreed by Council 20 November 2006
- State letter notifying changes 1 December 2006
- Applicable Date: July 17 2007
Main points

• Standard – States to establish national aviation preparedness plan
  – Guidelines – ICAO web site: www.icao.int > Bureaux activities> Air Navigation Bureau >Aviation Medicine

• Requirements for 1st aid provision at airports uprated from Recommendation to Standard

• Pilot in Command (PIC) to inform air traffic control of suspected case of communicable disease
  – Previously to notify ‘health authorities’

• List of signs and symptoms on health part of aircraft general declaration revised

• Recommendation to use Passenger Locator Card (PLC)
• Public health emergency of international concern. An extraordinary event which is determined, as provided in the International Health Regulations (2005) of the World Health Organization: (i) to constitute a public health risk to other States through the international spread of disease and (ii) to potentially require a coordinated international response.
Changes to SARPs  2007

• Annex 9 - Facilitation
  – States must have a pandemic preparedness plan for aviation
F. Communicable disease outbreak national aviation plan

• 8.16 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.

• Note.— Guidance in developing a national aviation plan may be found on the ICAO website on the Aviation Medicine page.
Action by PIC

8.16 The pilot-in-command of an aircraft operator shall ensure compliance with any requirement of a Contracting State whereby illness, that a suspected communicable disease other than suspected airsickness, on an aircraft is to be reported promptly by radio to health authorities air traffic control, in the Contracting State for which the aircraft is destined, in order to facilitate provision for the presence of any special medical personnel and equipment necessary for medical assistance and health procedures the management of public health risks on arrival.

Note 2.- In the event of a case of suspected communicable disease on board an aircraft, the pilot-in-command may need to follow his airline’s protocols and procedures, in addition to health-related legal requirements of the countries of departure and/or destination. The latter would normally be found in the Aeronautical Information Publications (AIPs) of the States concerned.
First Aid Facilities

6.57 **Recommended Practice.**— There should be maintained at international airports an organized, immediately responsive staff with facilities for first aid attendance on site, and appropriate arrangements should be available for expeditious referral of the occasional more serious case to pre-arranged competent medical attention.
# Aircraft General Declaration

**APPENDIX I. GENERAL DECLARATION**

## GENERAL DECLARATION

*(Outward/Inward)*

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<tr>
<th>Operator</th>
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<tbody>
<tr>
<td>Macks of Nationality and Registration*</td>
<td>Flight No</td>
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<tr>
<td>Departure from</td>
<td>Arrival at</td>
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</table>

## FLIGHT ROUTING

 (*"Place" Column always to list origin, every enroute stop and destination*)

<table>
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<tr>
<th>PLACE</th>
<th>TOTAL NUMBER OF CREW**</th>
<th>NUMBER OF PASSENGERS ON THIS STAGE**</th>
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**Declaration of Health**

*Name and last number or fraction of persons on board with illnesses other than disorders or the effects of accidents, who may be suffering from a communicable disease (e.g. fever, temperature ≥ 38°C/100°F or any associated with one or more of the following signs or symptoms, e.g. appetite loss, nausea, vomiting, dizziness, difficulty breathing, persistent coughing, diarrhea, persistent diarrhea, persistent vomiting, skin rash, fever, or bleeding without previous injury, or confusion, recent onset, increase in likelihood that the person is suffering a communicable disease) or persons with symptom(s) or signs of illness such as rash, fever, chills, nausea as well as those who cases of illness distributed during the flight during a previous stop.*

Any other conditions on board which may lead to the spread of disease...

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**Details of any disinfecting or sanitary treatment (place, date, time, method) during the flight.**

If any disinfecting has been carried out during the flight, give details of the most recent disinfecting...

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**Signature**

Authorized Agent or Pilot-in-command

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* To be completed only when required by the State.
** Not to be completed when passenger manifests are presented and to be completed only when required by the State.
Health Part of General Declaration

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**Declaration of Health**

Name and seat number or function of ___ persons on board with illnesses other than airsickness or the effects of accidents, who may be suffering from a communicable disease (a fever-temperature 38°C/100°F or greater-associated with one or more of the following signs or symptoms, e.g. appearing obviously unwell; persistent coughing; impaired breathing; persistent diarrhoea; persistent vomiting; skin rash; bruising or bleeding without previous injury; or confusion of recent onset, increases the likelihood that the person is suffering a communicable disease) (including persons with symptoms or signs of illness such as rash, fever, chills, itchiness) as well as those such cases of illness disembarked during the flight during a previous stop

Any other conditions on board which may lead to the spread of disease

Details of each disinfecting or sanitary treatment (place, date, time, method) during the flight. If no disinfecting has been carried out during the flight, give details of most recent disinfecting...

Signed, if required, with time and date

Crew member concerned

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• Fever > 38C
• Obviously unwell
• Persistent coughing
• Impaired breathing
• Persistent diarrhoea
• Persistent vomiting
• Skin rash
• Bruising or bleeding without previous injury
• Confusion of recent onset
### Flight Information

1. **Airline and Flight Number**
   - *Airline*
   - *Flight Number*

2. **Date of arrival**
   - *DD MM YYYY*

3. **Seat Number where you actually sat on the aircraft**
   - *Number*

### Personal Information

4. **Name**
   - *Family Name*
   - *Given Name(s)*

   *Your Current Home Address (including country)*
   - *Street Name and Number*
   - *City* *
   - *State/Province*
   - *Country* *
   - *ZIP/Postal Code*

   *Your Contact Phone Number (Residential or Business or Mobile)*
   - *Country code* *
   - *Area code* *
   - *Phone Number* *
   - *E-mail address* *

   *Passport or Travel Document Number Issuing Country/Organization*

### Contact Information

5. **Address and phone number where you can be contacted during your stay or, if visiting many places, your cell phone and initial address**
   - *Street Name and Number*
   - *City* *
   - *State/Province*
   - *Country* *
   - *ZIP/Postal Code*
   - *Telephone Number (including country code) or mobile phone number*

6. **Contact information for the person who will best know where you are for the next 31 days, in case of emergency or to provide critical health information to you. Please provide the name of a close personal contact or a work contact. This must NOT be you**
   - a. **Name**
     - *Family Name*
     - *Given Name(s)*

   - b. **Telephone Number**
     - *Country Code* *
     - *Area Code* *
     - *Phone Number* *
     - *E-mail address* *

   - c. **Address**
     - *Street Name and Number*
     - *City* *
     - *State/Province*
     - *Country* *
     - *ZIP/Postal Code*

### Are you traveling with anyone else? YES/NO Circle appropriate response. If so, who? (name of Individual(s) or Group)

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**PUBLIC HEALTH PASSENGER LOCATOR CARD**

Public Health Passenger Locator Card to be completed when public health authorities suspect the presence of a communicable disease. The information you provide will assist the public health authorities to manage the public health event by enabling them to trace passengers who may have been exposed to communicable diseases. The information is intended to be held by the public health authorities in accordance with applicable law and to be used only for public health purposes.
Changes to SARPs 2009

• Annex 6 – Operation of Aircraft
  – On board medical supplies
  – Inclusion of a universal precaution kit
    • Managing on board communicable disease event
Changes to SARPs 2009

• Annex 11 – Air Traffic Services and PANS-ATM
  – Detailed procedure for utilising ATC for notifying destination of on board public health event
  – Public health emergencies included in contingency planning
Changes to SARPs 2009

- Annex 14 – Aerodromes
  - Public health emergencies included in aerodrome emergency plan
Checklist for Evaluation

CAPSCA
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<th>Examples of implementation to be reviewed</th>
<th>Presentation of evidence</th>
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</thead>
</table>
| Aviation focal point as part of National Pandemic Preparedness Plan | 1. Letter of appointment  
2. Terms of reference  
3. Link with National Pandemic Planning Authority  
4. Communication with National Pandemic Planning Authority | 1. Documentation  
2. Interviews |
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>International Health Regulations &amp; ICAO Annex 9, 6, 11, 14</td>
<td>Awareness and compliance with IHRs in particular the following:</td>
<td>1. Awareness of IHR 2005</td>
<td>1. Documentation</td>
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<td>Articles 24, 25, 27, 28, 30, 31, 32, 35, 36, 38, 40, 41, 43, 46.</td>
<td>2. States’ intention regarding implementation of IHR 2005</td>
<td>2. Interviews</td>
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<td>Annex 1(B), 4, 5, 9.</td>
<td>3. Awareness of ICAO guidelines incorporating these IHRs</td>
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<td>4. Do airport procedures reflect compliance with these IHRs</td>
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<td>5. Exercises / Trials</td>
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<td>Communications with public and relevant workers in the aviation industry</td>
<td>Communication of information on travel and spread of communicable diseases</td>
<td>Consistent advice and information on the prevention and containment of communicable diseases to the travelling public and to workers in the aviation industry</td>
<td>Documentation of methods of information dissemination</td>
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| WHO guidelines on pandemic preparedness + WHO’s Rapid Containment Strategy | Awareness of WHO preparedness guidelines and implications to the aviation industry | Airport pandemic preparedness planning official’s awareness of WHO guidelines and the ICAO guidelines relating to the WHO phases | 1. Documentation  
2. Interviews  
3. SOPs  
4. Communication network and links  
5. Anti-virals stockpiling and distribution policies |
<table>
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</thead>
</table>
| Airport Specific ICAO      | Awareness and implementation of ICAO airport specific guidelines                        | 3. Communication links:  
<p>| Guidelines                |                                                                                        | 1. Contact point for policy formulation and operational organization of pandemic preparedness plan        | 1. Documentation        |
|                            |                                                                                        | 2. “On the day” implementation of preparedness plan                                                     | 2. Exercises            |
|                            |                                                                                        | 3. Communication links:                                                                                 | 3. Interviews           |
|                            |                                                                                        | • Airlines                                                                                               | 4. Walk through evaluation |
|                            |                                                                                        | • Handling agents                                                                                        |                         |
|                            |                                                                                        | • Air Traffic Services                                                                                    |                         |</p>
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<td>Awareness and implementation of ICAO airport specific guidelines</td>
<td>3. Communication links:</td>
<td>1. Documentation</td>
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<td>ICAO Guidelines</td>
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<td>• Local public health agency</td>
<td>2. Exercises</td>
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<td>• Local hospital(s)</td>
<td>3. Interviews</td>
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<td>• Police</td>
<td>4. Walk through evaluation</td>
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<td>• Customs</td>
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<td>• Security</td>
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<td>• Travel agents</td>
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<td>• Airport retailers</td>
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<td>• Information / customer relations services</td>
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<td>Airport Specific ICAO Guidelines</td>
<td>Awareness and implementation of ICAO airport specific guidelines</td>
<td>3. Communication links:</td>
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<td>• Other stake holders</td>
<td>1. Documentation</td>
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<td>• External</td>
<td>2. Exercises</td>
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<td>• Passengers (before reaching airport and within terminal building)</td>
<td>3. Interviews</td>
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<td>• Other airports in same State/Region</td>
<td>4. Walk through evaluation</td>
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<td>• Other airports outside State/Region</td>
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<td>• Media</td>
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<td>Airport Specific ICAO Guidelines</td>
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<td>4 &amp; 5. For departing and arriving passengers:</td>
<td>1. Documentation</td>
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<td>• Screening methods</td>
<td>2. Exercises</td>
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<td>• Trained personnel</td>
<td>3. Interviews</td>
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<td>• Reliable equipment serviced according to manufacturer’s specifications</td>
<td>4. Walk through evaluation</td>
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<td>6. Screening methods:</td>
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<td>• Visual inspection</td>
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<td>• Questionnaire</td>
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<td>• Temperature screen</td>
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| Airport Specific ICAO Guidelines | Awareness and implementation of ICAO airport specific guidelines                      | 7. Area for screening  
8. Designated areas & facilities for:  
  • Review of suspect cases  
  • Possible isolation and quarantine (case assessment)  
  • Transport of cases to designated medical facility  
9. Use of PPE  
10. Baggage, security and customs/immigration clearance | 1. Documentation  
2. Exercises  
3. Interviews  
4. Walk through evaluation |
<table>
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</table>
| Airport Specific ICAO Guidelines  | Awareness and implementation of ICAO airport specific guidelines                       | 11. Consideration and planning for the possibility of reduced staffing levels at the airport due to sickness absenteeism during a pandemic.  
12. Consideration of procedures concerning airspace restriction and/or aircraft diversion when a suspected case of communicable disease is on board an arriving aircraft | 1. Documentation  
2. Exercises  
3. Interviews  
4. Walk through evaluation |
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<tr>
<td>Airline Guidelines</td>
<td>Awareness of ICAO &amp; IATA Airline guidelines.</td>
<td>1. Consideration and planning for the possibility of a pandemic situation and reaction by the airlines of the State</td>
<td>Airline standard operating procedures</td>
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<td>Implementation of airline guidelines – monitoring by Civil Aviation Authority</td>
<td>2. Procedures dealing with a suspected case of communicable disease on board an aircraft</td>
<td>Awareness of ICAO &amp; IATA Guidelines and incorporation into airline SOPs</td>
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<td>3. Implementation of changes to ICAO Annex 9</td>
<td>Monitoring by CAA</td>
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<td>4. Exercises held to practise implementation</td>
<td>Exercises</td>
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<td>IOSA / ISAGO</td>
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<tr>
<td>Communication Network</td>
<td>Communication links internally, externally and regional / internationally</td>
<td>Aviation / airport authority with National Authority / ICAO / WHO / Other States</td>
<td>Documentation</td>
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<td>Comms</td>
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<td>Focal points</td>
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Thank you for your kind attention!

Jarnail Singh