



Working with Public Health Authority to Revive Air Travel

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An aerial photograph of a vast aircraft storage lot, likely at an airport. Hundreds of commercial jet aircraft are parked in neat, parallel rows across a large, flat, brownish-tan area. The planes are mostly white with blue and red accents. In the background, airport infrastructure like runways and taxiways is visible under a clear sky.

We need to revive air travel

**to save jobs, resuscitate the economy,
reconnect people, goods, and capital**

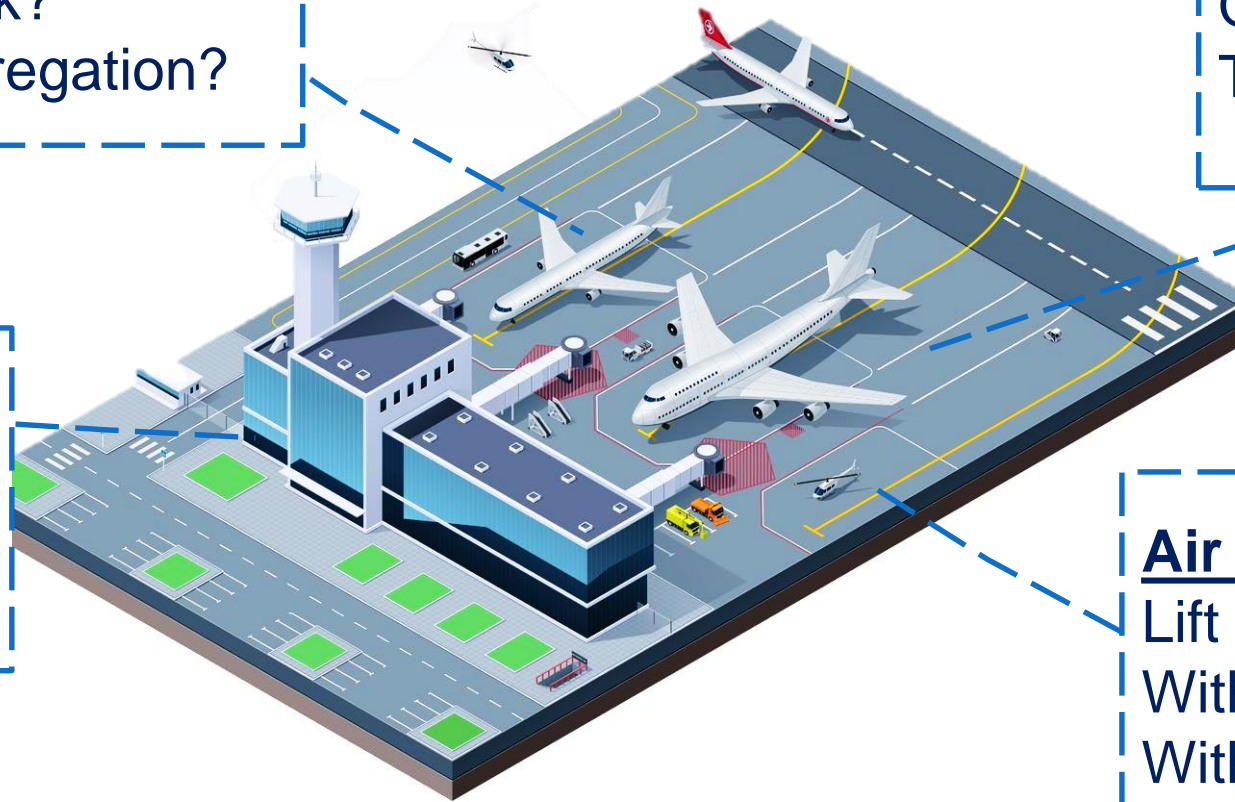
How?

Aircraft

Mask?
Segregation?

Air Crew

Quarantine?
Testing?



Airport

Temperature
screening?
Post-arrival testing?

Air Travel

Lift border controls?
With testing?
With quarantine?

- not decided by CAAs alone, if at all

Working with Public Health Authority

- Setting up a structure to facilitate cooperation
- Agreeing on shared objectives
- Agreeing to make decisions based on facts

1. Setting up structure to facilitate collaboration

- Set up Ministerial-Level Multi-Ministry Taskforce
- Comprises 24 agencies, including health, transport and immigration
- Since 23 Jan, meeting every Monday and Thursday, 8am to 1pm
- Issues for discussion and approval include plans to revive air travel

2. Agreeing on shared objectives

- Reviving air travel
- Protecting jobs
- Preserving core capabilities
- Safeguarding public health

**Not CAA's, not PHA's
but for Singapore and Singaporeans**

3. Agreeing to make decisions based on facts

- COVID-19 is infectious, asymptomatic, and has incubation period
 - Temperature screening and testing alone not adequate
- But need to manage risk not at individual but at system level
 - Asking PHA for risk budget: how many cases without overloading system
- Adopt risk-based approach
 - Ease measures on countries with comparable infection situation
 - No quarantine, but testing to give Public Health Authority assurance
 - Start with a few countries first to gain public acceptance

Proposal: Working Together to Revive Air Travel

- Most PHAs impose testing requirement
 - But tests are imperfect: those who have recovered will still test positive, although they are no longer infectious
- Number of recovered big (close to 20m now) and growing
 - Big problem if they all cannot fly
- Need to accept “Discharge Letters” from authoritative healthcare institutions
 - Bring CAAs and PHAs together to work on a policy to accept these “Letters”
 - Can be a concrete deliverable for ACCRPG



Thank You