



| ICAO

UNITING AVIATION

APAC CAPSCA MEETING

CAPSCA Update and CART Recommendations





Aviation public health-related measures

Recommendation 4: Global and regional harmonization of procedures is essential to strengthen public and passenger confidence in air travel. To that end, Member States should establish aviation public health procedures aligned with the guidance in the *Take-off: Guidance for Air Travel through the COVID-19 Public Health Crisis*.

Recommendation 5: In order to support the fastest possible return to normal aviation operations, Member States should regularly review the necessity of continuing the application of risk mitigation measures as the risk of COVID-19 transmission diminishes; and measures which are no longer needed should be discontinued.

Draft dated 26 April 2020

IMPLEMENTING A PUBLIC HEALTH CORRIDOR TO PROTECT CREW AND FACILITATE CARGO OPERATIONS DURING THE COVID-19 PANDEMIC

Presented by the Collaborative Arrangement for the Prevention and Management of Public Health Events in Civil Aviation (CAPSCA)

CREW COVID-19 STATUS CARD							
Information required for State health officials to be confident that crew members have taken reasonable precautions to ensure they are COVID-19 virus free.							
<p>1. Have you been in contact* with a person with probable or confirmed COVID-19 during the 2 days before or 14 days after that person had the onset of symptoms?</p> <p>*WHO definition of contact</p> <ol style="list-style-type: none"> Face-to-face contact within 1 meter and for more than 15 minutes; Direct physical contact with a probable or confirmed case; Direct care for a patient with probable or confirmed COVID-19 disease without using proper personal protective equipment; or Other situations as indicated by local risk assessments. <p style="text-align: right;">Yes <input type="checkbox"/> No <input type="checkbox"/></p>							
<p>2. Have you had any of the following symptoms during the past 14 days:</p> <table style="width: 100%; border: none;"> <tr> <td style="padding-right: 20px;">Fever</td> <td>Yes <input type="checkbox"/> No <input type="checkbox"/></td> </tr> <tr> <td>Coughing</td> <td>Yes <input type="checkbox"/> No <input type="checkbox"/></td> </tr> <tr> <td>Breathing difficulties</td> <td>Yes <input type="checkbox"/> No <input type="checkbox"/></td> </tr> </table>		Fever	Yes <input type="checkbox"/> No <input type="checkbox"/>	Coughing	Yes <input type="checkbox"/> No <input type="checkbox"/>	Breathing difficulties	Yes <input type="checkbox"/> No <input type="checkbox"/>
Fever	Yes <input type="checkbox"/> No <input type="checkbox"/>						
Coughing	Yes <input type="checkbox"/> No <input type="checkbox"/>						
Breathing difficulties	Yes <input type="checkbox"/> No <input type="checkbox"/>						
<p>3. *Temperature at duty start: Date: _____ Time: _____</p>							

Survey of health restrictions during the COVID-19 PANDEMIC

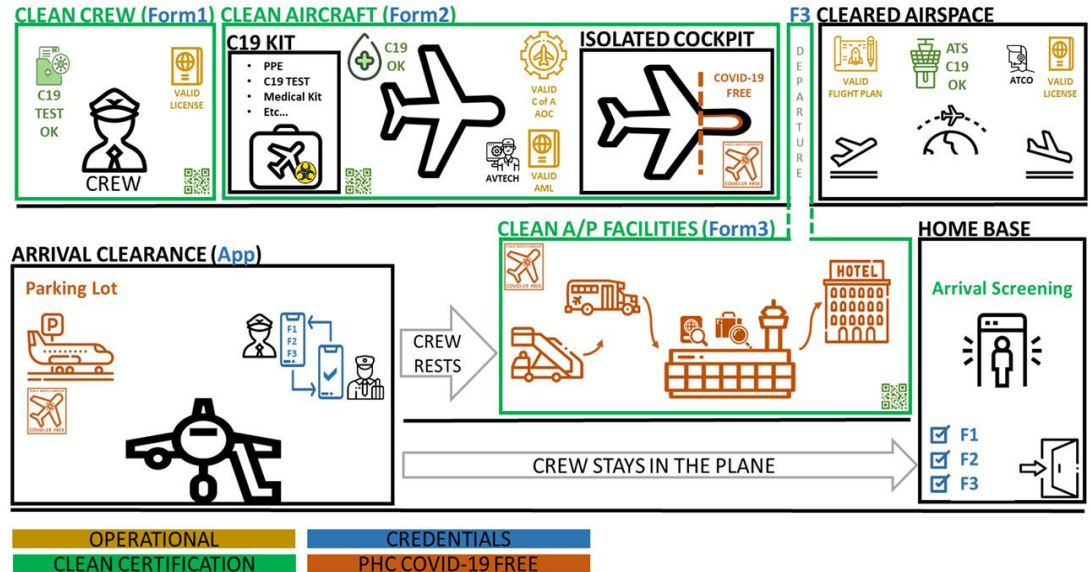
OBJECTIVE OF THIS SURVEY

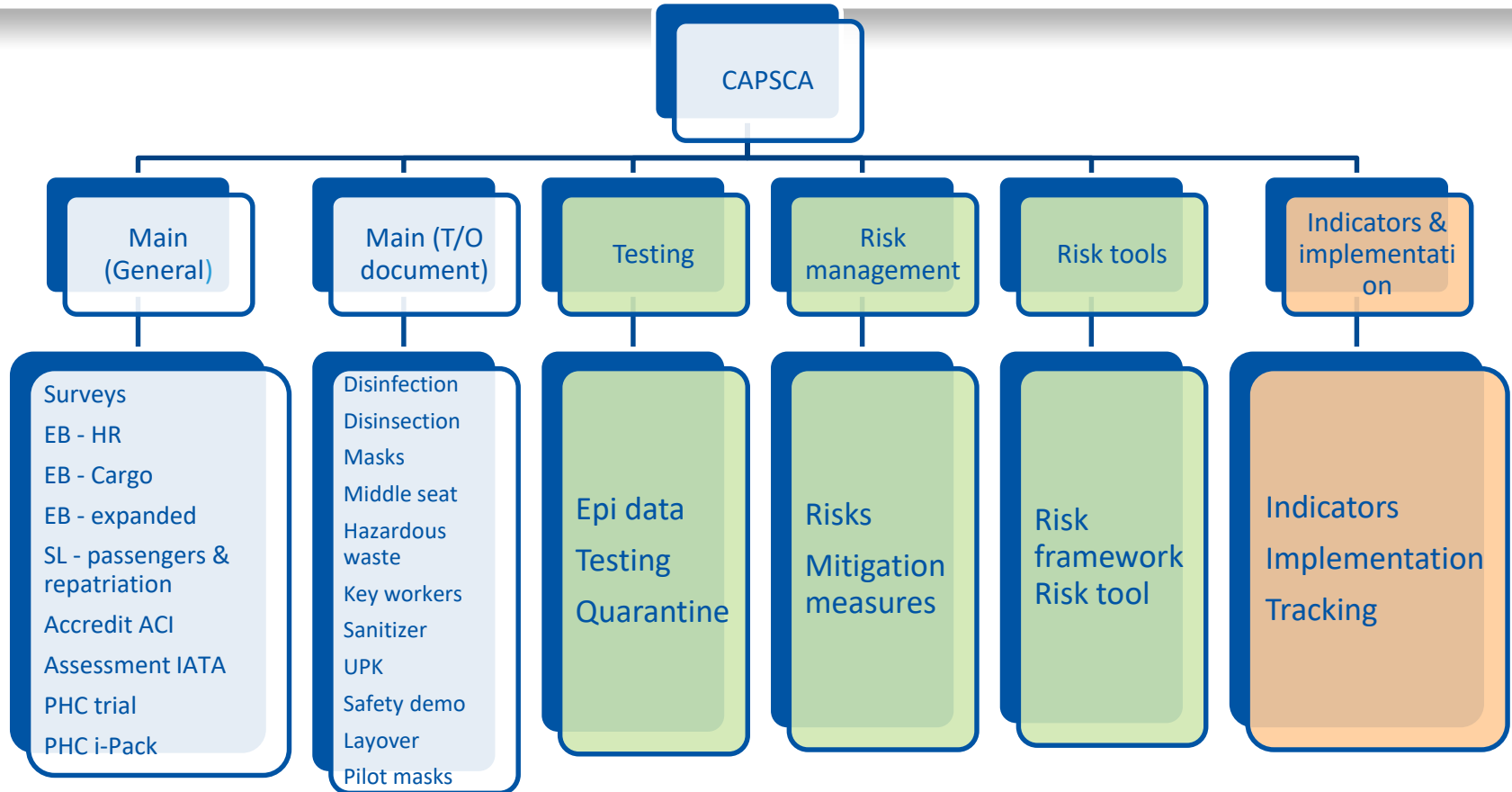
Under the framework of CAPSCA and in order to facilitate the air operations of relief and cargo flights during the COVID-19 pandemic, ICAO is requesting Member States and International Organisations to provide information about the restrictions and procedures in place for relief and cargo flights. The responses to this survey will be used in developing guidance material to ensure the minimum disruption to operations due to the implementation of health measures during the COVID-19 pandemic.

INSTRUCTIONS FOR COMPLETING THE SURVEY

1. The survey is divided into 6 sections:
 - a. Flight exemptions, pre-authorizations and NOTAMs
 - b. Flight crew disembarking and lay-over considerations and procedures
 - c. Health measures and screening procedures upon arrival
 - d. Health measures and screening procedures upon departure
 - e. Health measures onboard aircraft
 - f. Aircraft disinfection and cargo handling

PUBLIC HEALTH CORRIDORS (PHC) CONCEPT





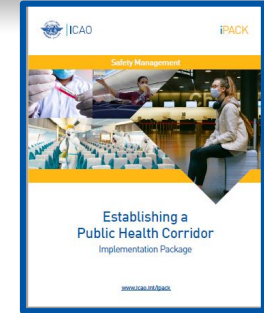
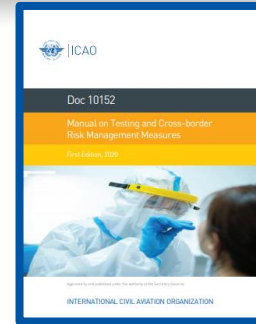
FACE COVERINGS AND MEDICAL MASKS			
COVERING/MASK	Efficiency at Filtering Large Droplets	Efficiency at Filtering Aerosols	Use in Aviation
N95 Mask	95.0%	95.0%	Not recommended. Only healthcare and other occupational settings
Surgical Mask	95.0%	92.0%	Recommended
Five-layer Cotton Mask	88.0%	82%	Recommended # 2 or more layers
Tee Towel or Dishcloth	60%	72.0%	Not Recommended
100% Cotton T-shirt	57%	51%	Not Recommended
SIR or Lace	50%	54%	Not Recommended
Scarf or Bandana	40%	46%	Not Recommended
Mask with Built-in Valve or Vent	90%	90%	Not allowed due to risk of transmitting the virus

Based on Source: Demerouti University of Thess, Dake University, Journal of Hospital Infection Public Health England, University of Chicago, University of Illinois at Urbana-Champaign



Recommendation 13 - Testing and cross border risk management measures

Recommendation 14 - Public Health Corridors (PHCs)



3 reports

- 10 key principles
- 20 recommendations

- Public Health
- Aviation safety
- Security & Facilitation
- Testing & Vaccination
- Public Health Corridors
- Communication
- Economic

TOGD 3rd Edition

- General measures
- 4 modules (Airport, aircraft, crew, cargo)
- Hazardous waste
- Mental health
- Forms
- Posters

Doc 10152 2nd Edition

- Risk management
- Epidemiology
- Testing
- Quarantine
- Vaccination
- Implementation
- PHC

PHC iPack

Restore international travel by supporting CAAs in sharing information, applying mutually accepted public health measures and concluding bilateral or multilateral agreements



Recommendation 17 – Testing certificates

Recommendations 18 and 19 – Vaccinations

Recommendation 20 – Communication

Recommendation 14 (revised) – Public Health Corridors (PHCs)



Recommendation 17 – Testing certificates

Member States should **implement testing certificates** based on the protocol, minimum dataset and implementation approaches outlined in the *Manual on Testing and Cross-Border Risk Management Measures* (Doc 10152) to facilitate air travel. States are encouraged to **request evidence of testing** that is secure, trustworthy, verifiable, convenient to use, compliant with data protection legislation and internationally/globally interoperable. Existing solutions should be considered and could incorporate a Visible Digital Seal. This **may be applicable to vaccination certificates**.



Recommendation 17 – Testing certificates



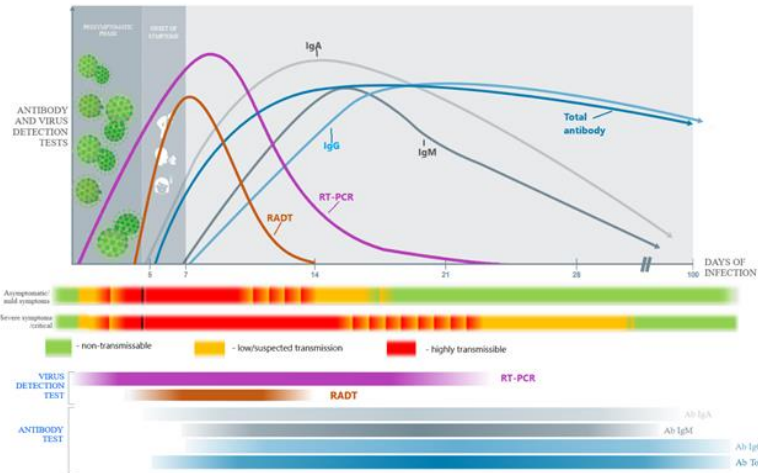
Member States should implement testing certificates based on the protocol, minimum dataset and implementation approaches outlined in the *Manual on Testing and Cross-Border Risk Management Measures* (Doc 10152)

Recommendation 13 – Testing

*While testing is not universally recommended by public health authorities as a routine health screening method, States contemplating testing in their COVID-19 risk management strategy should apply the approach outlined in the **ICAO Testing and Cross-Border Risk Management Measures Manual**.*

Updated protocols for testing

Minimum dataset



- (1) Personal information of test subject:
 - a) full name (surname, given name);
 - b) date of birth (YYYYMMDD);
 - c) ID document type²¹ (mandatory); and
 - d) ID document number (mandatory);
- (2) Service provider:
 - a) name of testing facility or service provider (mandatory);
 - b) country of test (mandatory); and
 - c) contact details (mandatory);
- (3) date and time of test and report:
 - a) date and time of specimen collection (mandatory); and
 - b) date and time of report issuance (mandatory);
- (4) test result:
 - a) type of test conducted: molecular (PCR); molecular (other); antigen; antibody (type) (mandatory);
 - b) result of test (normal/abnormal or positive/negative) (mandatory); and
 - c) sampling method (nasopharyngeal, oropharyngeal, saliva, blood, other (optional));
- (5) optional data field: Issued at the discretion of the issuing authority.



Recommendation 17 Testing certificates

States are encouraged to request evidence of testing that is secure, trustworthy, verifiable, convenient to use, compliant with data protection legislation and internationally/globally interoperable



Could the data have been altered after issuance? (integrity)



Can issuance by a trusted authority be confirmed? (authenticity)



Are my systems capable of verifying integrity and authenticity?



Will the certificate be efficiently read within existing processes and infrastructure?

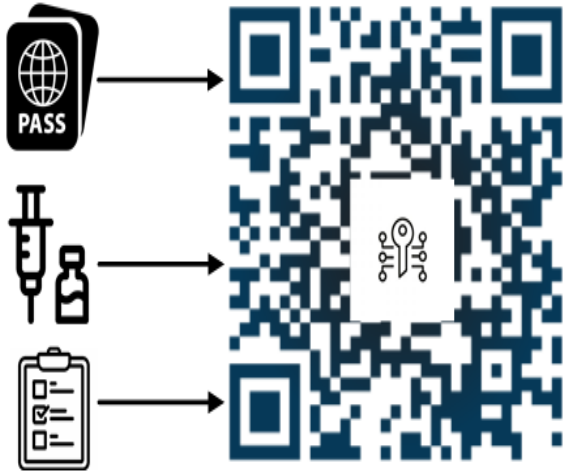


Compliant with legislation in State of use and State of nationality of the traveller



Will cross-border verification be possible?

The ICAO Visible Digital Seal



- Encodes minimum dataset for tests
- Machine readable using standard barcode scanners (e.g. at bag drop, boarding gates)
- Digitally signed (optional for test certificates), using the same infrastructure as >145 ePassport issuing States



Recommendation 18 – Vaccinations

Member States should facilitate access for air crew to vaccination as quickly as possible within the World Health Organization (WHO) Strategic Advisory Group of Experts on Immunization (SAGE) Stage III recommendations



- Vaccination is a critical public health tool to bring the COVID-19 pandemic under control globally.
- The SAGE prioritisation roadmap supports countries in planning and suggests public health strategies targeting priority groups for different levels of vaccine availability.
- Aviation workers are included in Stage III of the SAGE roadmap - to be vaccinated when there is moderate vaccine availability and between 21% and 50% of the national population has been vaccinated.
- More guidance on the vaccination of aviation workers is provided in the Manual (Doc 10152)



Recommendation 19 – Vaccinations

Vaccination **should not be a prerequisite** for international travel. If and at such time as **evidence shows that vaccinated persons would not transmit the SARS-CoV-2 virus** or would present a reduced risk of transmitting the virus, Member States could **consider exempting** such persons from testing and/or quarantine measures, in accordance with a State's accepted risk threshold, national framework, the COVID-19 situation and the multilayered risk mitigation framework described in the *Take-off: Guidance for Air Travel through the COVID-19 Public Health Crisis*.



WHO position

At the present time, it is WHO's position that national authorities and conveyance operators should not introduce requirements of proof of COVID-19 vaccination for international travel as a condition for departure or entry, given that there are still critical unknowns regarding the efficacy of vaccination in reducing transmission. In addition, considering that there is limited availability of vaccines, preferential vaccination of travellers could result in inadequate supplies of vaccines for priority populations considered at high risk of severe COVID-19 disease. WHO also recommends that people who are vaccinated should not be exempt from complying with other travel risk-reduction measures.

ICAO will continue to

- Monitor WHO recommendations and the developments in medical scientific knowledge;
- Update the multilayer risk mitigation framework in the Manual (Doc 10152); and
- Publish additional guidance material accordingly.

[WHO Interim Position Paper, 5 February 2021: https://www.who.int/news-room/articles-detail/interim-position-paper-considerations-regarding-proof-of-covid-19-vaccination-for-international-travellers](https://www.who.int/news-room/articles-detail/interim-position-paper-considerations-regarding-proof-of-covid-19-vaccination-for-international-travellers)



The knowns

- Reduce the number and severity of cases
- Protective effect for individuals
- Plays a role in bringing the pandemic under control
- May also play an important role in aviation recovery as the vaccinated proportion of the global population increases over time.
- Should not be mandatory
- Should not be a requirement for travel

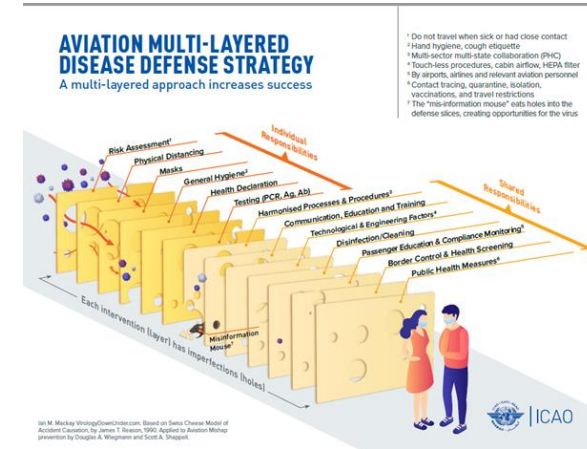
The unknowns and problems

- Global access to vaccination
- *Effectiveness against virus transmission*
- *Extent and duration of immunity*
- *Potential effect on travel restrictions*
- Different vaccines
- Emergence of Variants of Concern

The solution

- Ongoing monitoring of evidence
- Update multilayer risk mitigation framework and other ICAO tools
- Publish additional guidance material

- Risk-based & evidence-based approach to support States in implementing a multi-layer risk management strategy.
- Updated acronyms and definitions
- Additional guidance - aviation multi-layer risk mitigation framework
- Testing protocols updated in view of latest scientific knowledge, with additional guidance on standardization and validation of testing certificates
- New section on vaccination concepts, its potential role in the multi-layered risk management strategy and vaccination protocols for aviation workers
- Expanded section on Public Health Corridors (PHC)
- Living document - regular updates (evolving technology & evidence)





- CAPSCA scientific review group completed report on vaccination efficacy to facilitate border re-opening – pathway for recommendations to be discussed in ICAO
- Manual & multilayer risk management strategy will be updated
- Developing certificate of recovery dataset and procedures
- Vaccination and recovery certificates to be included for mutual recognition in iPack
- Working on relaxation of public health measures i.e. exit strategy based on multi-layer risk management
- HLCC – working papers on CAPSCA and PHC implementation
- Review of CAPSCA framework



Recommendation 20 – Communication

Member States should ensure that ICAO's CART guidance is taken into consideration by the wider State administration in the decision-making processes on national recovery planning.

CAPSCA is good example



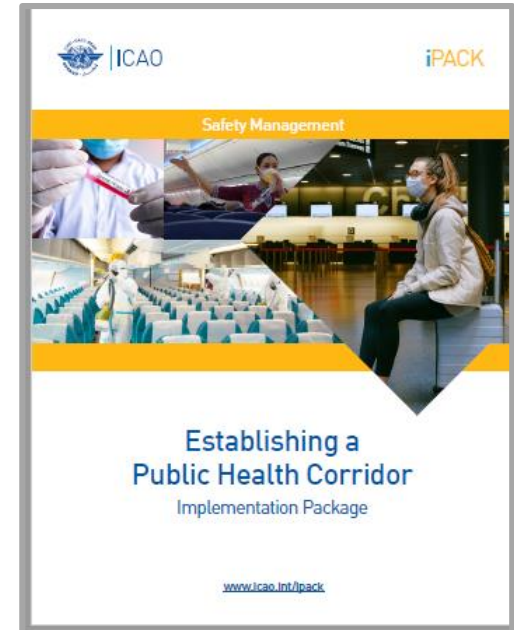
Recommendation 14 (revised) - Public Health Corridors (PHCs)

States considering the formation of a Public Health Corridor (PHC) should actively share information with each other to implement PHCs in a harmonized manner. To facilitate the implementation, the ICAO Implementation Package (iPack) on establishing a PHC is available to States, in addition to PHC-specific tools published on the ICAO website and the App providing a template PHC arrangement between States.



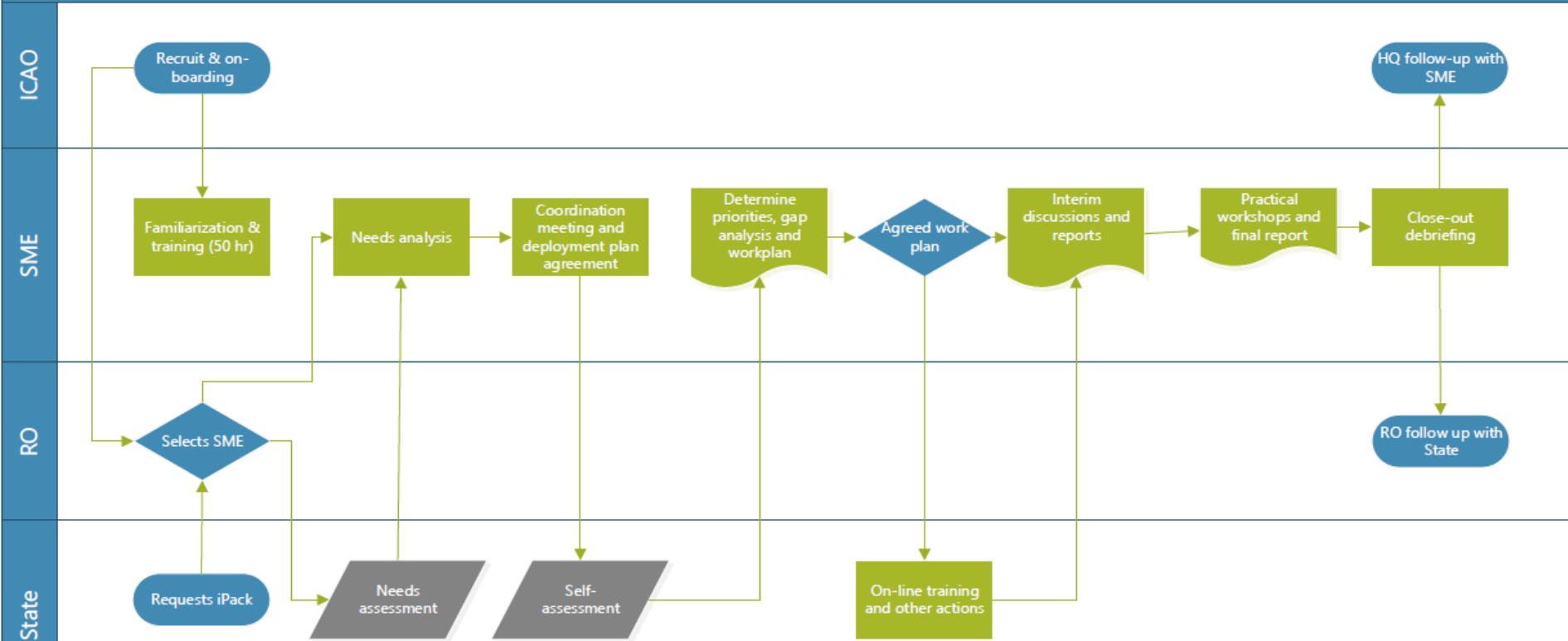
Recommendation 14 Public Health Corridors (PHCs)

- A PHC opens one or more routes between cities, regions and States
- Pre-requisite – participants from different national departments and stakeholders
- Sharing of iPacks between States
- Considering developing high-level iPack for application on a regional basis
- Could be used for all modes of transport
- Ready for deployment end June





iPack Process Summary



Overview of the PHC iPack Components

COMPONENTS:



Expert assistance

Dedicated CAPSCA Subject Matter Expert (15 work days).



Training

- Public Health Corridor: Online Course;
- Conducting a Technical Assistance Visit to CAPSCA Member States and Airports: Online Course.



Workshops

Public Health Corridor: customized workshop

Introductory/familiarization webinars;

Panel discussions and customized hands-on exercises.



Tools

- Checklists;
- Framework;
- Decisions aids;
- Templates;
- Accreditation procedures;
- Forms and posters;
- Online reporting systems; and
- PHC Application.



Guidance Material

- ICAO Testing and Cross-Border Risk Management Measures Manual;
- CAPSCA partner guidance material;
- Other associated guidance material; and
- Relevant ICAO Annexes.



Tools

- Checklists;
- Framework;
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- Accreditation procedures;
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- PHC Application.

Workshops

Public Health
Corridor:
customized
workshop

Panel discussions
and customized
hands-on
exercises.

- Stakeholder involvement
- Risk framework
- Mutual recognition testing
- Mutual recognition vaccination
- Case studies
- Exercise implementing a PHC using the PHC APP



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UNITING AVIATION



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(MID) Office
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THANK YOU