



Recreational aviation medical certificates – the Australian experience

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Declarations

The content of this presentation does not represent official CASA policy

I have no financial declarations

Walawaani njindiwan

Recreational medical certification - overview

What is recreational aviation?

Why does it need medical certification?

Australia's approach

Where to from here?

The pilots think....



The public thinks...



The doctors think...



What it really is....

An opportunity for individuals to experience aviation in a way that is safe, accessible and enjoyable

Without compromising the safety and integrity of the aviation industry and the vital social functions that depend on a safe aviation system

Safety – Regulator / Government responsibility

- Participants
- Bystanders

- "Innocent"
- "Ignorant"
- "Trusting"

Public confidence

Insurance

Road transport accidents, 2019-2020, AIHW
Aviation fatalities, ATSB

Excludes cyclists, pedestrians.

Deaths - road	1300
Hospitalisations – car	21,327
Hospitalisations – motorbike	16,817
Deaths – GA	17
Deaths - Recreational	18

^{*}absolute numbers = fruit salad

The aviation industry "ecosystem"

Recreational & private →

→ Clubs and societies

→ Schools and instructors

→ Industry

Australia's approach(es) to recreational aviation medical certificates

Class 2

RAMPC

Basic Class 2

Part 149 ASAOs

new - Class 4?

Class 2

- Non-military, non-commercial option
 - Recreational Pilots License
 - Private Pilots License
- ICAO medical standards
 - Medical examiners
 - Flexibility provisions / accredited medical conclusions
 - Conditions and restrictions
 - Regulator-issued and managed

Class 2

RPL – distance limit (25nm)

PPL – navigation, instruments, endorsements, ratings

Medically – "too restrictive" for low-risk operations.

Recreational aviation medical practitioner's certificate - RAMPC

Australian private drivers license standard +

- Additional guidance for diseases not included in driving standard
- *no* medical conditions (glasses only)
- Doctor for clinical examination and certification
- No discretion / flexibility
- 2 years (age <65) or annual (age 65+)

RAMPC

Operations:

- Aircraft piston, MTOW 1500kg or less
- Passengers one
- Flight profile
 - Day VFR
 - Altitude below 10,000 feet
 - No aerobatics

RAMPC - outcomes

Limited uptake:

- Medical standard too strict
- Operations too limited

Fading away....

Part 149

Aviation self-administering organisations

Recreational Aviation Australia (RAAus)

Sports Aviation Australia

Gliding

Parachuting

Part 149 - RAAus

Self-declared private drivers license standard

- Medical practitioner review only if any disease or of age 75+
- Gaps in the drivers license standard
 - Neurology, respiratory, malignancy
- Self-managed governance oversight
 - CASA has the discretion to audit

Part 149 - RAAus

Operations:

- Aircraft piston, MTOW <760kg, 1-2 seat
- Passengers 1
- Flight profile
 - Day VFR
 - Altitude
 - No aerobatics
- Same as Class 2 RPL

Part 149 – RAAus - Outcomes

- Very popular
 - "don't need a medical"
- Unpopular aircraft and flight limits
- Large numbers, large organization
 - → strong advocacy to broaden operations

BUT

Unknown unknowns

Basic Class 2 exemption

- Not required to hold a Class 2 medical certificate if:
 - Meet the unconditional commercial drivers license medical standard
 - Glasses and hearing aids

Basic Class 2 exemption

- Assessed & issued by a medical practitioner
 - No aviation element to the medical standard
 - No flexibility / discretion for the doctor
- Not eligible if refused a Part 67 medical
- Documentation reviewed & held by CASA

Basic Class 2 exemption

Operations:

- Aircraft piston, MTOW <8618kg
- Passengers up to five
- Flight profile
 - Day VFR
 - Altitude below 10,000 feet
 - No aerobatics, instructing, instruments

Recreational imperfections

Issues with RAMPC:

- Too restrictive operationally and aeromedically
- Medical practitioners with no aeromedical knowledge Issues with Basic Class 2 exemption:
- Too restrictive operationally and aeromedically
- Medical practitioners with no aeromedical knowledge Issues with RAAus:
- Too restrictive operationally
- Unregulated aeromedically

What does "perfect" look like?

Not quite so restrictive operationally or medically

- Permit "most" non-commercial, "low-risk" operations
- Permit "most" pilots

Where to from here for Australia?

International comparison

- FAA BasicMed; CAA UK LAPL; CAA NZ DL9
 Risk assessment
- Acceptable operational profile
 - More passengers?
 - Bigger aircraft?
 - Instruments, aerobatics?
 - Controlled airspace?

Where to from here?

Medical standards

- Aeromedical considerations
 - Use of flexibility and certificate conditions?
- Suitably qualified medical practitioner
 - Family or occupational physicians?
 - Training and currency?

Where to from here for Australia?

Assessment and issuance

- Pilots trusted to self-assess
 - But verified with audit
- Non-AME Doctors trusted to make an assessment
 - but only with training and supervision

Governance

- Audit process for quality and safety assurance Implementation
- Legislative changes ("instrument of exemption")

Summary

Recreational aviation is an important part of the aviation ecosystem

RA can't survive and thrive if it isn't safe

Safety needs governance

Recreational aviation needs governance

Summary

Finding the "sweet spot"

- Combine self-assessment with medical review
- Allow medical reviewer some flexibility
- Use a fit-for purpose recreational aviation standard
- Allow expanded flight operations

Watch this space... "Class 4" in 2023?

Questions and thankyou

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