



ICAO BANGKOK

UNITING AVIATION

# CAPSCA – AP/15 Conclusions - Summary

Presented by the Secretariat

*CAPSCA-AP/16*

*Bangkok, Thailand, 15 Nov. 2023*





## Conclusion 1

The meeting urged States/Administrations to establish requirements for the involvement of,

- public health stakeholders;
- academia;
- aviation stakeholders (airport/aircraft operators, ANSPs etc.; and
- other sectors, as appropriate,

in the development of health-related Standard Operating Procedures (SOPs) and contingency plans in aviation.



## Conclusion 2.

The meeting recommended that States/Administrations;

- a. Continue to support the work of the Task Force on Health Issues Outbreaks in Aviation (TF-HIOA);
- b. Review the new and revised ICAO SARPS contained in Amendment 29 to ICAO Annex 9 – Facilitation (applicable as of 18 November 2022) and ensure that these are incorporated into national and airport level requirements and procedures as appropriate;
- c. Make use of the ICAO Facilitation related guidance material and training opportunities;
- d. Continue to support and implement the ICAO (Traveller Identification Programme (TRIP) Strategy elements; and
- e. Consider preparations to issue eTravel Documents where not already doing so, and if issuing such documents, join the ICAO PKD and upload relevant data in order to fully benefit from the system.



## Conclusion 3.

The meeting urged States/Administrations to support the strengthening of the Collaborative Arrangement for the Prevention and Management of Public Health Events in Civil Aviation (CAPSCA) programme with active participation to ensure that its goals are achieved.



## Conclusion 4

Acknowledging preparedness planning for public health events is a continuously evolving collaborative and coordinated process involving all relevant stakeholders from both public and private sectors, the meeting encouraged States/Administrations to,

- improve coordination mechanisms, multisectoral at national and local level; and
- cross border at regional and global level

for information exchange and mutual recognition and harmonization of measures when responding to Public Health Emergencies of International Concern (PHEIC).

In that regard,

- improving communication strategies;
- remaining evidence-based and risk-based in responding to PHEIC;
- adequately resourcing the State machinery; and assisting less resourced States

may receive priority consideration.



## Conclusion 5

As global aviation recovers and return to the pre-COVID travel volumes, States/Administrations and all relevant stakeholders are requested to take a critical review of the lessons learned from the COVID-19 pandemic including from the various control measures taken and their impact on aviation, economies and societies in general.

In particular, aviation and health officials may focus on the following key areas and share best practices through the CAPSCA website.

- a. Proportionate, risk-based and time-limited health measures
- b. Mutual-recognition of health credentials
- c. Clear and timely communication from governments
- d. Economic and social cost of travel restrictions



## Conclusion 6

States/Administrations are urged to share the lesson learned from the COVID-19 pandemic as a continuous improvement measure to formulate control and mitigation measures in preparation of future pandemics.



## Conclusion 7

States/Administrations are requested to take note of the additional indicator included in WHO's International Health Regulations (IHR 2005) monitoring and evaluation tools to not only assess the prevention, preparedness and response capacities at points of entry (airports, ports and ground crossings), but also to account for the institutional multisectoral capacity of countries to determine the adoption and review of travel-related measures during health emergency responses.





## Conclusion 8

For cross border travel, the key message is: there is strong need to strengthen cross border collaboration and sharing of information to support risk assessment, and international contact tracing.

Collaborative efforts between States/Administration with support from WHO, ICAO and partners will allow for implementation of coordinated travel measures to prevent unnecessary interference with international travel and trade.



## Conclusion 9

Collaboration across sectors, including between public health and civil aviation authorities, is paramount in aviation related public health emergencies; a lesson learnt from the response to the COVID-19 pandemic.

Nonetheless, it does not come without challenges. At the global level, WHO and ICAO have signed a Memorandum of Understanding in November 2022, which will lead to the development of a joint workplan in 2023 as a way for both organizations to further discuss and agree on their means of collaboration and joint activities to strengthen civil aviation and public health collaboration for health emergency preparedness and response at global, regional and country levels.

States/Admins are encouraged to take this as a good example to follow at State level to develop and improve collaboration between PH and aviation authorities.



## Conclusion 10

Infection prevention & control (IPC) standard precautions such as masking, hand hygiene, and physical distancing (when possible) are proven to be effective risk reduction strategies for COVID-19 and other infections.

States/Administrations are invited to take note of the guidance published now in WHO's infection prevention and control in the context of coronavirus disease (COVID-19): a living guideline, which focuses on health care settings, but includes information relevant to air travel, such as the latest recommendations on masking in the general public.

<https://app.magicapp.org/#/guideline/Lr2a8L>.



## Conclusion 11

States/Administrations may note that ICAO Implementation Package on Public Health Corridors (PHC i-Pack) provides comprehensive tools to make science based risk assessment and manage border opening. PHC iPack may be considered a better way to introduce standardization to establish safe travel corridors between States.



## Conclusion 12

While Acknowledging the suite of the specialized services provided by the air ambulance community such as the critical care transportation, infectious disease transportation, repatriation flights and MEDEVAC etc., the meeting noted the importance of timely responses to the urgent operational needs of the air ambulance flights by the States including necessary approvals.

The meeting also noted the consensus of the air ambulance community to develop a multi-disciplinary program to develop a comprehensive air ambulance operations framework, based on the risk management principles.



## Conclusion 13

The European Centre for Disease Prevention and Control (ECDC) is a public health agency of the European Union (EU), operational since 2005. ECDC experts collect, analyse and share data on infectious disease topics and assess the risks to Europe, and provide guidance to help countries prevent and respond to outbreaks and public health threats.

Noting the benefit of a regional Entity/Society having a mandate to provide technical advice on aviation related public health matters to the Asia and Pacific States, the meeting encouraged the APAC States/Administrations to explore the possibilities of establishing such an expert group.



## Conclusion 14

As an interim measure, the meeting recommended that States/Administrations may consider establishing a regional Aviation Medical Examiner Group.



## Conclusion 15

Acknowledging the interest of the Aviation Medical Examiners to receive regular updates in the field of aviation medicine, the meeting requested CAPSCA to consider conducting the regional Aviation Medical Examiner Workshop including also the relevant USOAP-CMA PQ updates on regular basis.

In this regard, the meeting noted the possibility of the APAC COSCAPs providing such training at the request of their respective Member States/Administrations.





## Conclusion 16

The meeting acknowledged the benefits that a full CAPSCA Assistance Visit or a CAPSCA AV Demo Visit (in conjunction with hosting a CAPSCA AP meeting) could deliver to a State, thus encouraged States/Administrations to give due consideration to having such visits at the earliest opportunity.



## Conclusion 17

The meeting acknowledged the invaluable contribution of late Dr. Jarnail Singh, the CAPSCA pioneer from the APAC region, whose dedication to build CAPSCA around the collaboration from aviation, public health and other relevant stakeholders led the way to what CAPSCA is today.



# CAPSCA

## Roles and Objectives



## CAPSCA

Established in 2006, CAPSCA is a voluntary cross-sectorial, multi-organizational collaboration programme managed by the International Civil Aviation Organization (ICAO) with support from the World Health Organization (WHO). It brings together international, regional, national and local organizations to combine efforts to improve preparedness planning and response to public health events that affect the aviation sector. It functions under the supervision of the Medical Provisions Study Group (MPSG)



# CAPSCA Partners



## ICAO Assembly Resolutions

Assembly Resolutions A37-13: Prevention of spread of communicable disease through air travel, A39 24: Strategy on disaster risk reduction and response mechanisms in aviation, A40-14: Mitigation of the spread of disease through, inter alia, aircraft disinsection and vector control methods, and the importance of CAPSCA for implementation and A41-12: Maintaining health and sustaining safe international air transport during public health emergencies affecting air travel were adopted by the Assembly during its 37th, 39<sup>th</sup>, 40<sup>th</sup> and 41st Sessions, respectively



## CAPSCA's Work:

- Communicable diseases (pandemic influenza, Zika, Ebola, Coronavirus);
- Chemical events (nuclear power-plant accidents);
- Bioterrorism;
- Volcanic ash;
- Water and food safety;
- Hygiene and waste management;
- Drones in humanitarian operations;
- Disaster management (natural or man-made disasters).



## CAPSCA's objectives:

- Public health protection - the general public, air travellers and aviation personnel;
- Ensure safe and economically viable air transport, with minimal effect on international travel and trade (Chicago Convention);
- Assistance to States/Territories with the implementation of ICAO Standards and Regulations (SARPs) and WHO International Health Regulations (IHR);
- Capacity building - Assistance to States/Territories to establish national aviation pandemic preparedness plans and develop core capabilities;
- Facilitate multi-sector collaboration and cooperation (civil aviation authorities, public health authorities, airports, air traffic services, airlines, immigration, customs, security and handling personnel) - a mechanism for pooling and sharing expertise, resources and best practices;
- Training of CAPSCA assessors;
- Assess State readiness to manage (prevent and respond) to public health events in aviation and provision of advice to States and Territories;
- Further development and improvement of guidelines for the aviation sector.





	Asia Pacific	Africa	Americas	Europe	Middle East
Established	2006	2007	2009	2011	2011
WHO Partner Regional Coordinator	WPRO, SEARO	AFRO	AMRO/ PAHO	EURO	EMRO
ICAO States	41	48	34	56	15
CAPSCA States	28	34	35 (+ territories)	27	12
% Membership	68%	71%	100%	48%	80%



## Chicago Convention

Article 13  
Entry and  
clearance

Article 14  
Prevention spread of  
disease

Article 22  
Facilitation of  
formalities

## Regulatory Framework SARPs & PANS

Annex 6  
Aircraft  
Operations

Annex 9  
Facilitation

Annex 11  
Air Traffic  
Services

Annex 14  
Aerodromes

Annex 15  
Aeronautical  
Information  
Services

Annex 18  
Dangerous  
Goods

PANS-ATM  
Doc 4444  
Air Traffic  
Management

**Assembly  
Resolutions**



## CAPSCA in Summary..

- Provides a Collaborative Arrangement for the Prevention and Management of Public Health Events in Civil Aviation
- CAPSCA membership is voluntary
- Assist States with implementation of ICAO SARPs and WHO IHR (2005)
- Multi-sector collaboration at all levels – international, regional, national, local
- Help ensure a safe and economically viable air transport network, with minimal effect on international travel and trade
- Improve preparedness planning and ability to deliver a prompt response to public health events affecting Civil Aviation



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THANK YOU