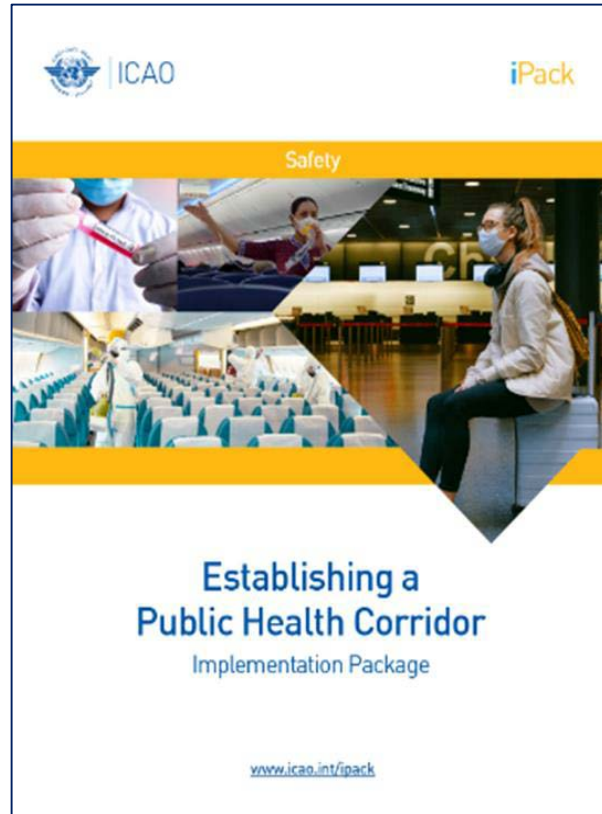


Deployment of ICAO iPack on PHC to Armenia, Belarus, Kazakhstan



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Period of iPack deployment

- April 7, 2022 – Kick-off meeting
- April 21, 2022 – Actual starting point – (delay in start due to some logistical problems)
- At the beginning of iPack - Flight operations have been restored in all 3 states, all restrictions have been lifted

The states' needs

- Priority to engage the Public Health Authorities in the common work to implement a PHC
- Familiarization with the role of aviation sector in the assessment and management of public health risks in air travel is required
- Familiarization with the multi-layered disease defense strategy in risk evaluation and risk mitigation in aviation for the safe travel throughout the end-to-end air travel journey.
- Training is of high importance for representatives of all agencies, departments, stakeholders involved in air travel. Specifically, the training in:
 - provisions of the ICAO Annexes and documents related to the management of public health risks in air travel, including the management of risks in COVID-19,
 - managing cross-border health risks during international air travel based on knowledge and lessons learned during the COVID pandemic

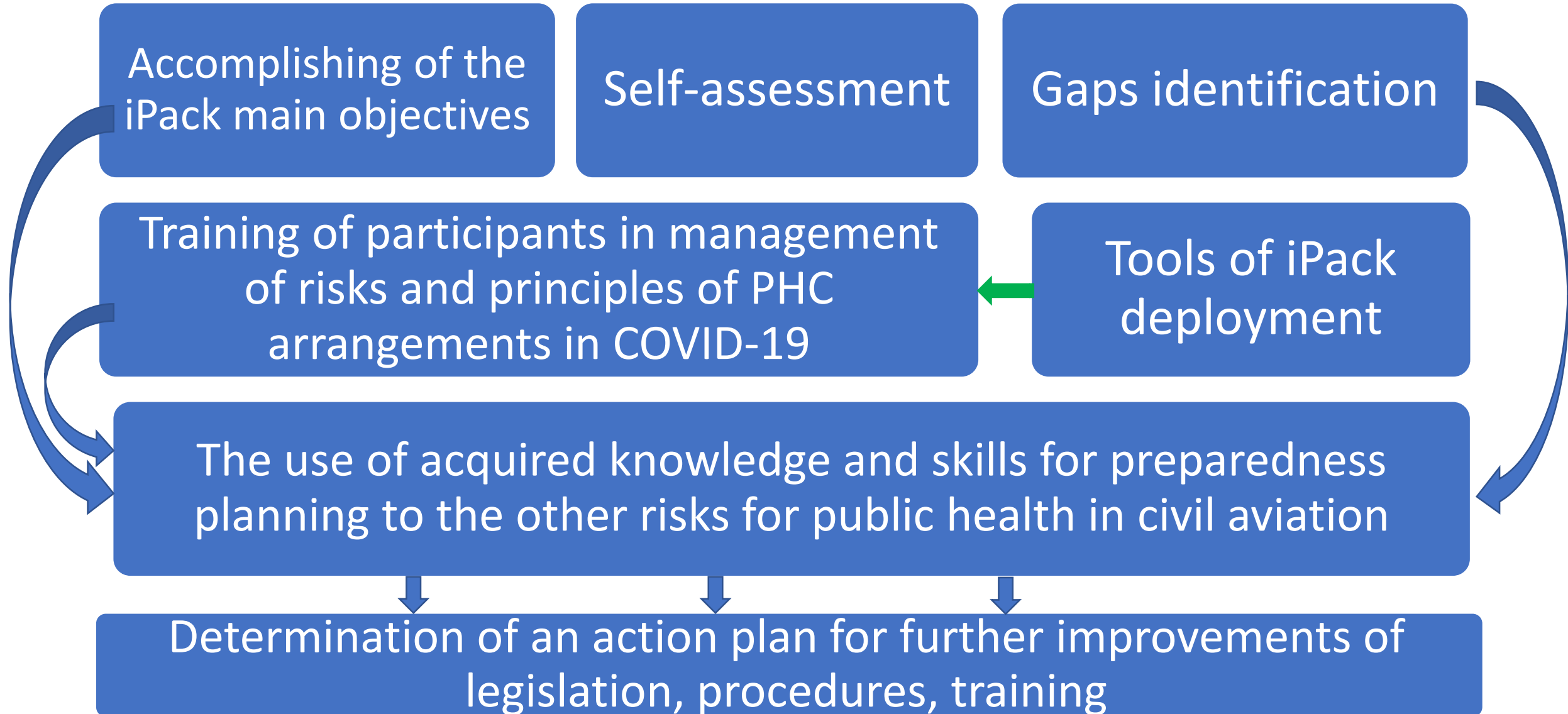
The states' needs

- The gap analysis between national provisions and associated ICAO SARPs, guidance material related to challenges of COVID-19 in aviation & an action plan for further improvement.
- Strategy and measures implemented by the states during the COVID-19 pandemic will be used as an experience for the states' capacity building in preparedness planning for the other possible risks to public health.
- Some specific needs expressed by states:
 - Armenia needs assistance in implementing PHC in the Airport,
 - Belarus needs assistance in encouraging mutual recognition of public health measures,
 - Kazakhstan underlined the difficulties in collaboration with Public Health Authority;

Goals of iPack

- **the main goal of the iPack to restore international travel through the implementation of Public Health Corridors** by supporting Civil Aviation Authorities (CAAs) in sharing information, applying mutually accepted public health measures, and concluding bilateral or multilateral agreements
- **additional goal** was established based on needs analysis provided by the states and the gaps identified on evaluation of the CAPSCA questionnaire on Management of COVID-19 in aviation – State self-assessment, completed by the states. This goal constitutes in the **support to states in civil aviation preparedness planning and capacity building for the response to the other possible risks to public health in aviation**

Realization of states needs



Lessons learned by states

1. The need for interaction between civil aviation and the public health authorities is of high importance

Joint procedures at "points of entry" – airports are needed;

2. Update of the National Facilitation Program is needed;

3. The need to develop a roadmap for implementation of a Public Health Corridor between States;

4. Review of airport emergency plans is needed.

Lessons learned by states

5. Training of staff on the application of international and national regulations in public health matters in aviation is needed

the involvement and interaction of all stakeholders is important, both at the leadership (decision making) level and at the level of implementation of rules and their enforcement;

6. Exchange of experience between states on public health issues in civil aviation is needed.

Belarus. Lessons learned

- «Open issues» between the civil aviation administration and public health authorities have been identified;
- The materials submitted during the project were accepted for work;
- The experience, the structure of measures to mitigate the risk to the public health of other states was adopted for work;
- The qualifications of specialists in both the aviation sector and public health specialists have been improved;
- The work on National Facilitation Program has been intensified;
- The work of the airport medical service was explained in the framework of emergency planning at the airport and during the normal operation of the airport.

Kazakhstan. Lessons Learned

- Understanding of:
 - What constitutes in a public health corridor;
 - The structure of the health corridor;
 - A multi-layered approach;
 - General principles of risk management applied to air transport in emergency situations.

States' opinion

iPack is well appreciated by all participants who represented different stakeholders. The success of the deployment is mainly related to the well-established objectives and also to the explanation of the possible ways of solving the actual problems that states experienced in aviation during pandemic and still have at present.

Recommendations

1. States are strongly encouraged to ensure the participation of public health authorities in the implementation of issues underlined in the iPack PHC;
2. The PHC iPack materials to be used by states in the work of preparedness planning in civil aviation;
3. All ICAO and WHO regulatory documents should be taken into the account for reviewing and updating the current national legislation related to the activities and measures of the states in the events of public health threats;
4. To use information received on training provided during iPack PHC including the CAPSCA State and airport assistance visit checklist as a basis for updating and improving the evaluation of the activities carried out in the airport as a “designated point of entry”;

Recommendations

5. To update the Facilitation Programs, the work of the National and Airport Facilitation Committees;
6. Preparedness planning for all kind of risks to public health events should be developed in collaboration with all stakeholders involved to ensure a successful result;
7. States are encouraged to consider the possibility of holding events in terms of the exchange of experience between the states participating in the PHC project. For example, inviting specialists to participate in training on public health risks in civil aviation matters, as well as to participate in exercises to respond to threats to public health epidemiological events at the airports
8. **for ICAO CAPSCA:** to initiate, to the extent possible, organisation of training meetings, events for the exchange of experience between states in response to the risks for public health in aviation.

SME personal considerations

Update of the iPack on PHC is needed and should include into it the objectives related to the implementation of SARP of ICAO and IHR of WHO with regards to the public health capacity building by the states.

SME personal considerations

- Public health services play an important, to say better – the leading role in organizing measures at the airport to prevent the impact of non compliance with hygiene and sanitary standards before any public health event takes place and also play a coordinating role between all stakeholders at the airport to respond to the public health event.
- For the airports, designated as points of entry, states should ensure the core capacities for public health matters according to WHO IHR (Annex 1 (B)) and ICAO Annex 9 chapter 8, Annex 14 chapter 9. There is no harmonization in complying to requirements of WHO and the ICAO standards within states.
- There is a need of presence and work of the public health authority at the airport for the entire period of the airport's operation and that should be accomplished at each international airport not only at the designated ones.



Together we will stand any threat against health and bright
future for ourselves, for our aviation!
THANK YOU FOR YOUR ATTENTION!

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