



| ICAO SECURITY & FACILITATION

# Grupo Regional sobre Seguridad de la Aviación y Facilitación NAM/CAR y SAM OACI/CLAC (AVSEC/FAL/RG)

## Reunión Extraordinaria virtual

**Ricardo G. Delgado y José María Peral Pecharromán (NACC)**

**Pablo Lampariello y Leonardo Boszczowski (SAM)**

**Especialistas Regionales de Seguridad de la Aviación y Facilitación de OACI**

**28 mayo 2020**





## Sumario



- ✈ Impacto COVID-19
- ✈ Comunicación
- ✈ Material guía disponible
- ✈ Protección del personal de seguridad a cargo de la inspección
- ✈ Matriz AVSEC COVID-19
- ✈ Coordinación



- ✈ **Tráfico aéreo de pasajeros** declive estimado 35%-65% en 2020 comparado con 2019 (**ICAO**)
- ✈ Pérdida para **aeropuertos** entre 50-57% del tráfico de pasajeros o sobre USD 97 billones en ingresos aeroportuarios en 2020 comparado con el escenario normal (**ACI**)
- ✈ Las **aerolíneas** sufrirán una caída del 48% de ingresos por pasajero y kilómetro (RPKs, tanto internacional como doméstico) en 2020 comparado con 2019 (**IATA**)
- ✈ El **turismo internacional** caerá 910 – 1170 billones en 2020 comparado con los USD 1.5 trillones generados en 2019, con 96% de los destinos a nivel mundial aplicando restricciones al viaje (**UNWTO**)
- ✈ El volumen de **comercio** de mercancías global caerá 13%-32% en 2020 comparado con 2019 (**WTO**)
- ✈ **Economía global** – Se proyecta una contracción del -3% en el PIB mundial en 2020, mucho peor que la crisis financiera del 2008-09 (**IMF**)

Bancarrotas:



SOUTH AFRICAN AIRWAYS



australia





**CAPSCA:** *Arreglo de colaboración para la prevención y gestión de sucesos de salud pública en la aviación civil*



ICAO Updates



WHO Updates



ICAO Useful Documents and Websites



WHO Useful Documents and Websites



References from States



References from Other Entities (ACI, CDC, EASA, European Union, IATA)



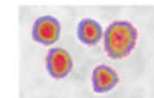
CAPSCA Home



ICAO Aviation Medicine Home



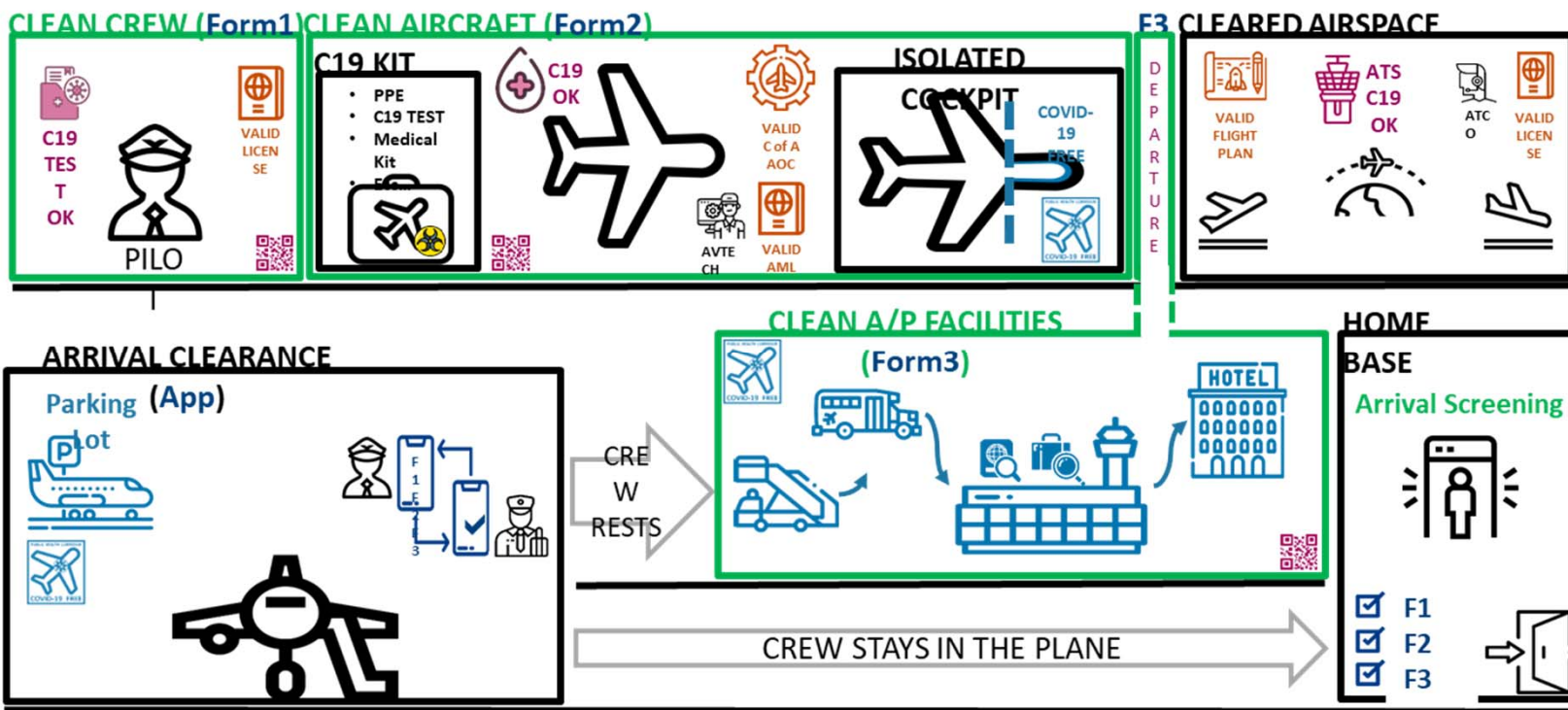
CAPSCA



Coronavirus References



## PUBLIC HEALTH CORRIDORS (PHC) CONCEPT/Concepto de Corredor de Salud Pública



OPERATIONAL

CREDENTIALS

CLEAN CERTIFICATION

PHC COVID-19 FREE



## Concepto de Corredor de Salud Pública (PHC)

### Aspectos Operacionales

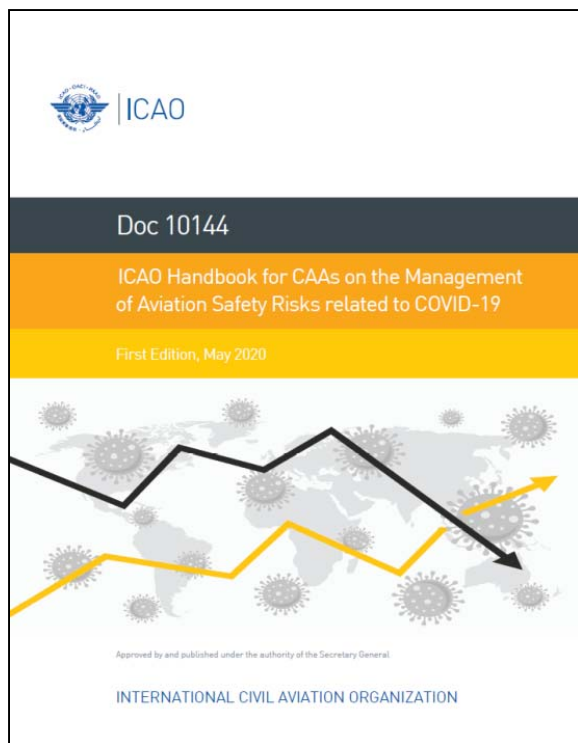
- **Validez de la licencia (entrenamiento/médica)**
  - Pilotos
  - ATCOs
  - Técnicos
- **Mantenimiento de Aeronaves**
  - Validez de los Certificados
  - Almacenamiento de Aeronaves y regreso al servicio

### Aspectos de Facilitación

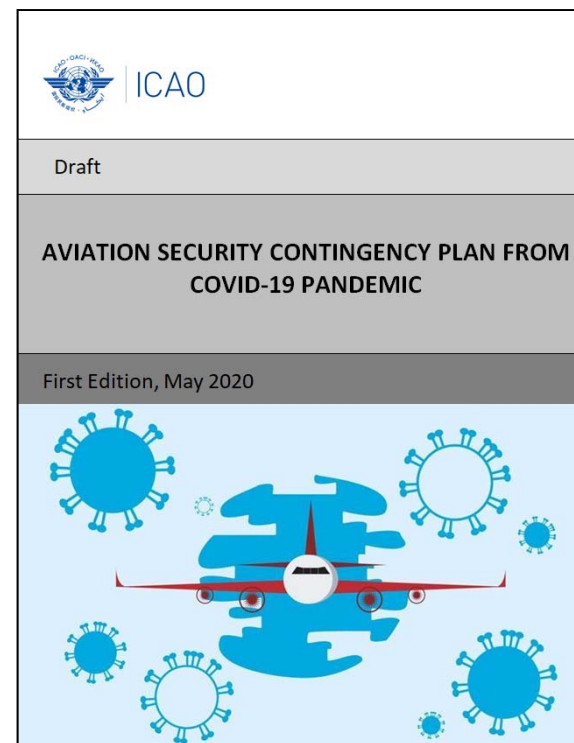
- **Tripulación Sana (Certificada)**
  - Pre-Checks/Tests
  - COVID19 kit
- **Aeronave Limpia (Certificada)**
  - Desinfección/Limpieza de la Aeronave
- **Instalaciones limpias (Certificadas)**
  - Parking lots exclusivos para COVID
  - Procedimientos de handling exclusivos para COVID
  - Filas/lineas exclusivas para COVID, en los controles fronterizos y de seguridad
  - Instalaciones de alojamiento exclusivas para COVID



Página web de **OACI** dedicada al COVID-19: <https://www.icao.int/Security/COVID-19/Pages/default.aspx>



Proceso de decisión basado en el riesgo y sustentado por la recopilación y análisis de datos





Material guía útil y de referencia publicado por otras organizaciones:

**Operational considerations for managing COVID-19 cases or outbreak in aviation**  
Interim guidance  
18 March 2020

**World Health Organization**

**Background**

This document is based on the evidence currently available about coronavirus disease (COVID-19) transmission. Decisions to resume operations, primarily to regulatory bodies, should be based on evidence with WHO's Handbook for the Management of Public Health Emergencies in Air Transport.

The report addresses any authority involved in public health response to a public health event in aviation, including International Health Regulations (2005) National Public Health (NPH) health authorities at airports, local, provincial and national health authorities and response systems, as well as civil aviation authorities, airport operators, aircraft operators, airports and airlines.

**Awareness of aviation personnel**

Airport operators, aircraft operators, airlines, and airports should provide guidance to crew and ground staff on the recognition of signs and symptoms of COVID-19. Crew and ground personnel should be further reminded about measures to prevent transmission of COVID-19, including social distancing, hand hygiene, respiratory etiquette, environmental cleaning, waste disposal, when and how to use a mask, avoidance of contact with people presenting respiratory symptoms, and making careful advice early if signs and symptoms develop.

Medical first aid should be reserved for persons with respiratory symptoms (and who are reluctant) to avoid contamination to others.

Personnel should be trained on hand hygiene and how to put on and remove personal protective equipment (PPE).

Personnel in close contact with symptomatic persons in a wide proximity (but not direct nose-to-nose contact, eye-to-eye contact (See hand of glove), gloves, and gowns).

WHO advice and technical guidance for COVID-19 is available on the [WHO website](#).

Advice for crew and ground staff working or staying in areas where local or community transmission is being reported:

- Be familiar with local protocols for the reporting and management of ill travellers and fever possible contacts, in the context of COVID-19.
- Take precautionary measures to reduce the possibility of infection:
  - Avoid contact in public transport and use private transport when possible, including

contact with other people while waiting between the airport and ground transportation.

- Minimize time spent in public areas, applying social distancing whenever not in public (by maintaining a distance of at least 1 metre (3 feet)).
- From other people
- Touch hands frequently with soap and water as well as an alcohol-based hand rub of hands are not readily available.
- Avoid touching eyes, nose, and mouth.
- Self-isolation: If you develop fever, cough, or difficulty breathing, immediately isolate yourself according to local health procedures, wear a mask, report the situation to your employer, and seek medical attention. The aircraft operator or airline concerned should report it to the local health authority immediately.
- If you develop fever, cough, and difficulty breathing during flight, discontinue your work duties as soon as it is safe to do so, unless other crew and ground staff are available to perform a replacement crew, as described in Global Standards for Human Resources with coronavirus disease (COVID-19).

**Management of a suspected case**

**Case definition:**

Please refer to the Global Surveillance for Human Infection with coronavirus disease (COVID-19) for the latest WHO case definitions for suspected case of COVID-19.

**Suspected case at airport**

Suspected cases should be managed under the framework of the airport public health emergency plan in consultation with support health authorities. For further detail, please refer to WHO guidance document on the Management of ill travellers at Points of Entry - International airports, reports and ground coverage - in the context of COVID-19.

Suspected cases should also be managed in accordance with ICAO Annex 9 (Facilities required for implementation of public health measures) and the aviation emergency plan (ICAO Annex 14), coordinating the response with the all agencies that would be of assistance in responding to an emergency. Please refer to ICAO Annex 9 and 14 and the ICAO guidance document (Facilities Manual and Model National Air Transport Facilities Progression) available at <http://www.icao.int/Annexes/COVID-19/Pages/9And14.aspx>

Support services may include aircraft cleaners, cargo and baggage handlers, waste handling services, and waste

**IATA**

**Restarting aviation following COVID-19**

Medical evidence for various strategies being discussed as at 8 May 2020 IATA Medical Advisory Group

**IATA**

**Introduction**

Many international groups are exploring possible pathways to facilitate a "restart" of international airline aviation. The resumption of international flights will require a number of hurdles to be crossed in order for Governments to allow travel, and further hurdles in terms of the passenger journey, which includes the airports of departure and arrival, the flights themselves, and other elements. Discussion by all of the groups involved includes a number of key elements which depend on sound medical evidence. The aim of this note is to review the current state of medical evidence regarding those elements.

The state of knowledge is changing rapidly; hundreds of research articles have been published since the start of the outbreak, and an enormous amount of work is in progress with both researchers and industry. Therefore, this document must be read with the latest review date in mind.

There are many logistical, financial, and political aspects to the restart plans well beyond the scope of this discussion, which will be confined to the medical aspects. There are also reports specific to airports and air traffic procedures which are also out of scope here. This report has been prepared by IATA's Medical Advisor along with the Medical Advisory Group of 10 airline medical directors, on the basis of extensive review of available literature, advice and expertise during the pandemic thus far.

Little is available in the way of published research on in-flight transmission of COVID-19. One paper from Canada reports careful follow-up of a long-haul flight on which someone later confirmed to have been unwell at the time, but no secondary cases resulted. A recent public report shows that a flight on 31 March from USA to China Taipei with 12 people subsequently confirmed to be symptomatic at the time of flight, generated no secondary confirmed cases from the 328 other passengers and crew members, who all tested negative.

An informal survey of 18 major airlines in correspondence with IATA has identified, during Jan-Mar 2020, just three episodes of suspected in-flight transmission, all from passenger to crew, and a further four episodes of apparent transmission from pilot to pilot, which could have been in-flight or before/after (including airports); there were 22 instances of suspected passenger-to-passenger transmission reported by the group of airlines. The group of airlines represents 14% of global traffic for that period. A request to a much larger group of 70

**ICAO**

**AIRPORT PROTOCOLS TO REACTIVATE AIR TRANSPORT IN THE LATIN AMERICA AND CARIBBEAN REGION**

**1. INTRODUCTION**

AD/AC airports wish to reestablish air transport operations in their respective countries and in the region as soon as possible. To achieve this goal, airports want to demonstrate to governments and society at large that they are taking concrete steps to protect passengers and airport workers from Covid-19 contagion.

In particular, due to the importance of international air transport in our region, airports want to adopt common protocols that are acceptable to most governments.

This document suggests measures that airports can take based on international best practices for the protection of passengers and personnel at airports.

These measures are temporary and their main objective is to reactivate air transport. These measures should be reviewed, and even eliminated, as the pandemic is controlled and the de-escalation of sanitary measures begins until reaching the "new normal" at the national, regional and global levels.

**2. PRINCIPLES USED**

The following principles have been considered in the elaboration of these measures:

- Simple and practical.
- Low financial investment.
- Intended to increase passenger confidence.
- In line with ACI and IATA recommendations.

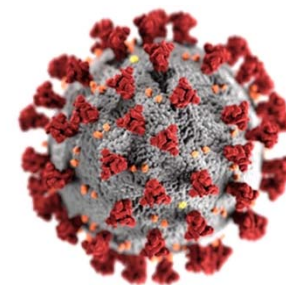
**3. CONSIDERATIONS TO BE TAKEN BY THE AIRPORT OPERATOR**

In addition to the measures presented in the document, airport operators are recommended to consider the following:

- Coordinate with the national government and relevant authorities, as well as other industry stakeholders;
- Communicate effectively the messages concerning public health and the procedures adopted at airports.
- Review their SMS, to detect new hazards and evaluate their risk matrix.



- ✈ Página web del COVID-19 ICAO/CAPSCA: <http://www.capsca.org/CAPSCARefs.html> (**CAPSCA**)
- ✈ Página web del COVID-19 WHO: <https://www.who.int/health-topics/coronavirus> (**WHO**)
- ✈ Página web del COVID-19 IOM: <https://www.iom.int/covid19> (**IOM**)
- ✈ Página web del COVID-19 ICAO SAM: <https://www.icao.int/SAM/SECURITY-FACILITATION/COVID-19/Pages/default.aspx>
- ✈ Página web del COVID-19 ICAO NACC: <https://www.icao.int/NACC/Pages/NACC-COVID19.aspx>
- ✈ COVID-19: Recursos para líneas aéreas & profesionales de la aviación (**IATA**):  
<https://www.iata.org/en/programs/covid-19-resources-guidelines/>
- ✈ Información sobre la pandemia del COVID-19:  
<https://aci.aero/about-aci/priorities/health/covid-19/> (**ACI International**)  
<https://www.eurocontrol.int/covid19>





Declaración extraoficial del **Grupo de trabajo en Amenaza y Riesgo** sobre el COVID-19:

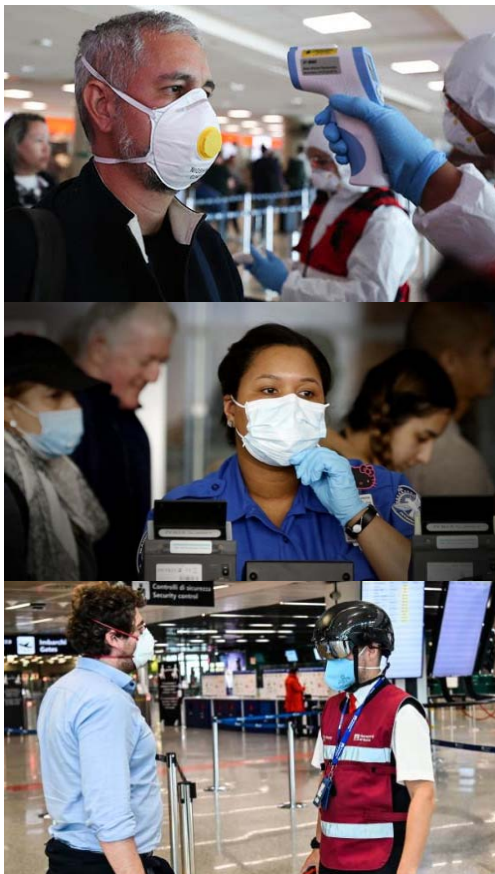
- ✈ Disminución de la capacidad terrorista vs. Incremento de la vulnerabilidad
- ✈ Cualquier interrupción en el sistema de transporte de carga aérea puede traer consecuencias severas
- ✈ Evitar vulnerabilidades prolongadas
- ✈ Intercambio sobre información de modificaciones a medidas de seguridad entre autoridades
- ✈ Seguridad de la carga aérea adquiere más importancia mientras que otros temas (ej. amenaza interna) son menos claros con posibles consecuencias inesperadas



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## Protección del personal AVSEC



### ✈️ Reforzar la vigilancia sanitaria:

- Gestión de la salud de los empleados
- Reporte de las condiciones de salud
- Toma de temperatura corporal antes de entrada en servicio
- Mecanismos de reporte de condiciones de salud

### ✈️ Usar equipo de protección personal (PPE) en base al riesgo del puesto

- Máscaras N95 y máscaras médicas desechables
- Guantes desechables (ej. goma, nitrilo)
- Gafas/antiparras (goggles) protectoras
- Cubre cabello o gorras desechables



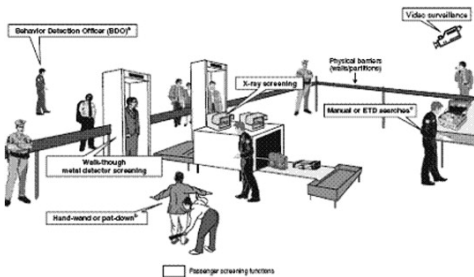
### ✈️ Reforzar desinfección de uniformes de trabajo y protecciones



# Controles de seguridad



- ✈ Líneas con **mayor separación entre personas** (mínimo 1.5 metros / mínimo 6ft)
- ✈ Si es posible, **evitar la inspección en líneas adyacentes** (lado a lado) (ej. que compartan arco detector de metales)



- ✈ Distribuir pasajeros en varios canales de inspección y **minimizar la aglomeración**
- ✈ Si es posible, el personal aeroportuario debe acceder a SRAs por **controles de seguridad dedicados**



- ✈ Promover equipo de seguridad que **limite las inspecciones manuales** (ej. body scanner, ETD, EDD, EDS para equipaje de cabina)
- ✈ Reorganizar posiciones del personal de seguridad para **mantener la distancia de seguridad**
- ✈ **Exención médica para gel / líquido anti-bacterial de manos?**



## Distancia social

- ✈ Claras marcas para asegurar distancia entre pasajeros (mínimo 1.5 metros / mínimo 6ft)
- ✈ Instalar mamparas de acrílico cuando sea posible (ej. mostradores de chequeo, información, migración)
- ✈ Designación de áreas para cuarentena y desinfección
- ✈ Restringir ingreso a terminales sólo a los pasajeros debidamente identificados?





- ✈ Mejorar la ventilación de los lugares de trabajo (preferiblemente ventilación natural)
- ✈ Intensificar desinfección regular de áreas de trabajo
  - Áreas clave (ej. mostradores, bandejas, contenedores)
  - Equipos de seguridad (ej. detector de metales portátil, consolas de equipos de rayos-x)
- ✈ Desinfección completa de áreas públicas
  - Tiradores de puertas, escaleras mecánicas y elevadores, sanitarios, mostradores de facturación automáticos, carros portaequipajes, maquinas expendedoras, buses
- ✈ Distribuir estaciones de desinfección de manos en la terminal





- ✈ Presenta las diferentes medidas de protección a aplicarse en aeropuertos, a través de las distintas áreas y circuitos que realizan los pasajeros en su paso por un aeropuerto;
- ✈ Oportunidad de obtener ideas para armonizar medidas que puedan ser adoptadas a futuro en aras de recuperar la confianza de nuestros usuarios;
- ✈ Alineado con la propuesta de Marco Estratégico para la Recuperación del Transporte Aéreo Internacional en la Región SAM en respuesta al COVID-19.

1 AEROPUERTO.		A	B	C	E	G	P	P	S	U
Medidas de aplicación general/sectores públicos.		R	R	H	O	C	A	R	R	V
		G	A	L	L	U	N	E	E	N
1.1	Sanitización del Edificio Terminal en forma periódica (cada dos horas PAN).	X			X	X	X	X	X	X
1.2	Colocar alfombras desinfectantes en las áreas de migración control de seguridad de pasajeros y personal del aeropuerto.					X	X	X	X	X
1.3	Optimizar la ventilación del lugar y condiciones higiénicas sanitarias, evitar el contacto físico con las personas.				X	X		X	X	X
1.4	Distanciamiento de personas (mínimo 1.5 metros) o tanto como sea posible (2 metros ECU).	X	X	X	X	X	X	X	X	X
1.5	En las filas para controles, se deberán haber señales en el piso con una separación mínima de 1.5 metros entre cada persona o grupo familiar.	X					X	X	X	X
1.6	Uso de mascarilla para todas las personas (pasajeros, personal y público en general).	X	X	X	X	X	X	X	X	X
1.7	Todo el personal que tenga contacto o proximidad con pasajeros, tripulantes o equipajes, debe usar equipos de protección personal (EPP), tales como tapabocas, delantal y/o guantes.	X	X			X	X	X	X	X
1.8	Determinar puntos estratégicos para el acopio de los equipos de protección personal usados, material descartable posiblemente contaminado.	X			X	X		X	X	
1.9	Desechar el equipo de protección de manera adecuada y responsable después del examen de acuerdo con los requisitos de salud.					X		X	X	X
1.10	Capacitar al personal sobre el uso correcto de los EPP.							X	X	X
1.11	Limitar el acceso a la terminal (Únicamente ingresan pasajeros o personal aeroportuario).	X	X			X	X		X	
1.12	Control de ingreso sanitario sometido cuestionario, observación de síntomas, toma de temperatura a los pasajeros y usuarios al edificio terminal.	X	X					X	X	X
1.13	Toma de la temperatura al personal antes de ingresar a las instalaciones del mismo.	X				X		X	X	
1.14	Observación médica de los pasajeros antes de ingresar al patio de check-in, por oficiales de seguridad en colaboración con los oficiales de salud, las personas sintomáticas no podrán ingresar al patio de check-in, hasta someterse a una inspección de salud realizada por el (los) oficial (es) de salud del aeropuerto.	X				X		X	X	X
1.15	Adoptar procedimiento cuando se detecta una persona con síntomas de COVID-19 como: fiebre, tos, dificultad para respirar.	X				X		X	X	X
1.16	Se designara un área específica para el control de salud de los pasajeros sintomáticos.	X				X		X	X	X
1.17	Se prohibirá el acceso a las personas que se nieguen a cumplir con las medidas sanitarias	X	X			X		X	X	X



- ✈ **1. Circuito Aeropuerto:** Medidas de aplicación general/sectores públicos;
- ✈ **2. Circuito Partidas:** Medidas correspondientes al circuito de pasajeros de partida (y tránsito);
- ✈ **3. Circuito Arribos:** Medidas correspondientes al circuito de pasajeros arribados;
- ✈ **4. Circuito Equipaje de Bodega:** Medidas correspondientes al control de equipaje despachado en bodega;
- ✈ **5. Circuito Cargas:** Medidas correspondientes al control de cargas e instalaciones;
- ✈ **6. Circuito Personal Aeroportuario:** Medidas correspondientes al circuito de personal que accede a la ZSR.





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