

Learning Objectives

Immediate Arrangements for Travellers, Aircraft, Airport and Other Stakeholders

At the end of the session participants will be able to:

- Explain the immediate arrangements to be made for travellers/aircraft and Airports**



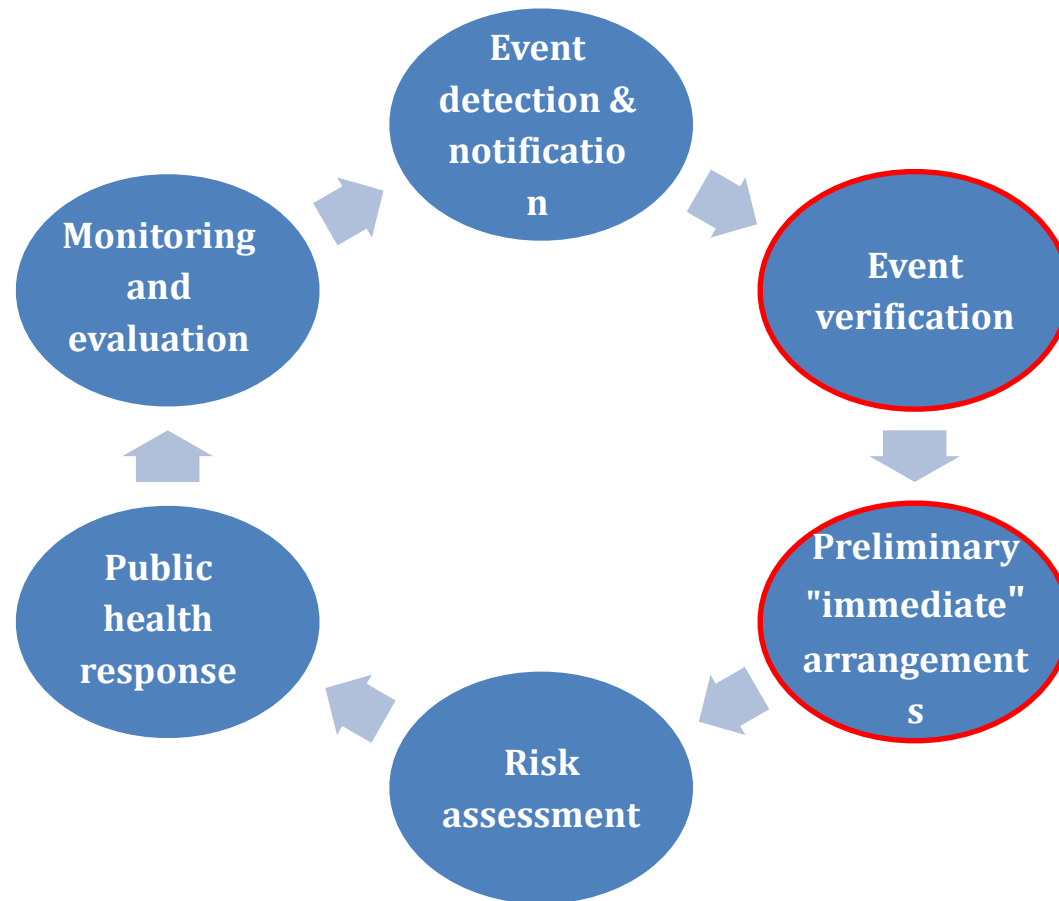
**World Health
Organization**

Immediate Arrangements for Travellers, Aircraft, Airport and Other Stakeholders

- Event Verification and Preliminary Risk Assessment:
- A) In Flight – Infection Control, Gastrointestinal Illness, Respiratory Illness, Contact with Body Fluids, Medical Emergencies – Upon Arrival
- B) Information Sharing and Possible Activation of Contingency Plans – Port Health and First Responders, Immigration and Customs Authorities, Support Services
- C) Diversion of Aircraft
- D) Aircraft Parking Position at Airport
- E) Port Health Assessment and Recommendations for cleaning and disinfection of aircraft
- F) Immediate Arrangements for Airport



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- Event Verification and Preliminary Risk Assessment: Verify the facts! Collect information from all potential sources. The following is the basic information to be collected:
- Airport and Country of Origin
- Intermediary Airports (during transit)
- Airport and Country at Destination
- Final Destination (including transport from airport to destination)
- Estimated time of and amount of exposure
- What type of exposure? (infectious agent, chemical or radiological)
- Signs and Symptoms of illness that has occurred
- Current Status of Persons Exposed (including medical assessment, release, hospitalization, or death)
- Nationality of Passengers
- Ill passengers seat number
- Who were the close contacts of the ill passenger (cabin crew, medical personnel, companions?)



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Table 1. Questions to guide preliminary risk assessment and immediate arrangements for travellers/aircraft

Question	Specific options for action	Other considerations
Has a potential public health event been reported from an aircraft?	Pilot to communicate with ATS in accordance with ICAO Doc. 4444 (2). ATS will forward the message to the arrival airport. This will be communicated with the PHA, aircraft operator and airport stakeholders in accordance with the aerodrome emergency plan so necessary arrangements can be made for receiving ill and healthy travellers.	Time available to organize immediate response may be short.
Has the traveller received medical assistance on board/during the flight?	Collect information from flight crew and any medical assistants prior to arrival. After notification of the event through the ATS, further communication with an aircraft in flight for public health purposes must be through the aircraft operator's own communication channels – not via ATS. Arrange medical assessment upon arrival at the airport.	Was there a universal precautions kit on board and if so, was it used? Were appropriate medical supplies available and used?

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<p>Does the traveller require medical attention upon arrival? What are the clinical signs and symptoms among travellers, including severity?</p>	<p>Arrange for first responders and possible transfer to medical facility by ambulance.</p>	<p>Identification of the receiving medical facility.</p> <p>Communication to first responder: Note if communicable disease is suspected.</p>
<p>Is a public health event suspected with potential for in-flight transmission? How many passengers were exposed?</p>	<p>Alert port health to meet the aircraft at the arrival gate.</p> <p>Ensure sufficient port health staff are available.</p>	<p>Access to gate by first responders.</p>
<p>Is the aircraft coming from an affected area where WHO has recommended public health measures?</p>	<p>Consult WHO website for recommendations on health measures.</p> <p>If exit screening was recommended, request information on implementation and affected traveller(s).</p>	<p>If appropriate, ask for support and information sharing from other authorities/experts.</p>
<p>Are there a large number of ill travellers or those suspected of being ill on the arriving aircraft?</p>	<p>Identify space requirements for interviews and health assessments of arriving travellers.</p>	<p>The space should have access to toilet facilities and seating.</p>
<p>Is the use of PLFs warranted in order to conduct follow-up contact tracing?</p>	<p>Ensure PLFs are available on board the aircraft or from port health at the destination airport. Determine which travellers should be requested to complete the PLF.</p>	<p>Have the capacity to collect, use and securely store personal information on PLFs. Plan for their use, confidential storage and subsequent safe disposal.</p>
<p>Do disembarking travellers require information in the event of subsequent illness?</p>	<p>Prepare in advance basic health information to be used in the event of respiratory or gastrointestinal illnesses. Provide regional or national public health contact information in the event of subsequent illness.</p> <p>If PHEIC, customize templates provided by WHO, if available.</p>	<p>Know the language requirements for the health information.</p> <p>Known or unknown mode of transmission?</p>

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<p>Have any deaths been linked with the event?</p>	<p>Arrange for judicial authority to be present at the gate upon arrival.</p> <p>Investigate cause of death and ensure that an autopsy has been arranged, if necessary,</p> <p>Ensure that the death has been registered.</p>	<p>Monitor the event, obtain new information and undertake risk assessment.</p> <p>Plan for holding/storage of dead bodies and transport following medical examination.</p>
<p>When is the aircraft scheduled to depart? Are there a large number of connections to international or domestic flights?</p>	<p>Prepare for triage to minimize flight disruptions.</p> <p>Plan ongoing communications with airline, airport and ATS.</p>	<p>Plan for communications to travellers related to delays or missed connections.</p>
<p>Is the event related to a hazard where other authorities/experts should be involved (i.e. chemical or radiological)?</p>	<p>Communicate with airport operations to request advice from port health or authorities/experts (e.g. clinicians, epidemiologists, environmental or OH specialists).</p>	<p>The aircraft manufacturer should be consulted in order to consider any potential damage to aircraft components arising from the hazard. Arrange for support from persons with necessary expertise.</p>
<p>Will the aircraft require disinfection or decontamination prior to further departure?</p>	<p>Alert the ground handling crew, communicate any potential public health concerns and provide guidance, if requested.</p>	<p>Ground handling staff should have contingency plans that include requirements for cleaning and disinfection or decontamination, including the use of PPE.</p> <p>Ensure any disinfection or decontamination is conducted using products licensed for use in the country occupied and approved by the aircraft manufacturer.</p>

Limit Exposure to Airline, Health and Other Personnel

- NOTE: Travellers with Medical Emergencies should receive Medical Treatment as soon as possible.
- Designate one cabin crew member to look after the ill traveller, preferably the one that has already been dealing with this traveller;
- Practice hand hygiene (hand washing or hand rub);
- Use appropriate personal protective equipment (PPE) when handling blood, body substances, excretions and secretions;
- Handle any blankets, trays or other personal products used by the traveller carefully;
- Practice environmental cleaning and spills-management;
- Handle all waste in accordance with regulatory requirements or guidelines. *ILLNESS TRANSMITTED BY DIRECT CONTACT WITH BODY FLUIDS (BLOOD, VOMIT, DIARRHOEA) (I.E. EVD)*
- In the event of illness in a traveller from an affected country who exhibits signs or symptoms related to that illness, cabin crew should follow the protocols established by the aviation sector, their airline or as provided by WHO.
- Cabin crew may wear masks when assisting the ill travellers.
- Universal precaution measures should be implemented by the cabin crew if they could be exposed to body fluids when assisting the ill traveller or when cleaning up spilled body fluids.



Arrangements for Aircraft

Gastrointestinal Illness

- Ill travellers should be moved to a seat near a washroom if several empty seats are available so that seating arrangement can be made without increasing the risk of contamination. (i.e. if the ill passenger has already soiled the seat or area, other passengers should not use that seat];
- That lavatory should be restricted to their use, if possible, or if not possible, the lavatory should be cleaned following use by the ill travellers.

Note: If a public vomiting or faecal incident occurs, cabin crew must follow the protocols established by their airlines, including the use of appropriate tools/procedures to limit the contamination.

- If the flight is not full, a better solution is to move the surrounding passengers away from the ill passenger.

Respiratory Illness

- An appropriate (surgical or procedure) mask should be provided to the traveller, if available and tolerated by him/her. If the ill traveller cannot tolerate a mask, healthy travellers adjacent to the ill traveller may be offered masks.
- In all cases, the adjacent seat(s) should be left unoccupied, if feasible.
- Ensure the flight crew maintain continuous operation of the aircraft's air recirculation system (HEPA filters are fitted to the majority of large aircraft).
- Isolating the ill traveller by relocating travellers in the adjacent seats is advisable, if feasible.

Arrangements Upon Arrival

On board the aircraft

- Basic First Aid to passenger(s)
- Majority of Medical Issues are fainting, dizziness and hyperventilation
- Medical Supply Kit and Universal Precaution Kit
- Diversion of aircraft may be necessary if original airport is not equipped to apply health measures.
- Arrive at a dedicated gate or area on the tarmac
- Keep air recirculation operating on aircraft if possible

Health Authorities

- Passengers other than those suspected of being ill and close contacts should normally be disembarked first
- If affected person is seriously ill then a medical responder should meet the plane.



Arrangements Upon Arrival

1. Treat ill passenger. If passenger is suspected of a communicable disease isolate the passenger. Allow medical responders on board immediately if passenger needs immediate medical attention.
2. If a communicable disease is suspected, hand out Passenger Locator Forms to those identified by health authorities and collected before leaving the gate.
3. Aircraft should be parked, with aircraft recirculation system operating, where medical responders have access and passengers can be disembarked and segregated, interviewed, treated and released.
4. Ensure security measures are in place to facilitate entry and exit screening.
5. If necessary make arrangements to notify friends and relatives waiting for passengers of the delay.
6. Involve Immigration and Customs if it is an international flight.

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Timeline
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