Implementation of Civil Aviation National plan for PHEIC

Sri Lankan Experience

Dr Bimal Dias

Civil Aviation Medical Examiner FP/CAPSCA AP Sri Lanka

- Sri Lanka maintains a very good standard in Aviation Safety compared with some other countries since modern aviation history in Sri Lanka began in 1912, when the first aircraft completed a successful flight from Sri Lankan soil.
- Keeping with this success the need of proper management of Public Health Events in air transport was given priority under the leadership of Dr. Ravindra Ruberu, Secretary, Ministry of Civil Aviation in 2012.
- In 2012 discussions were took place in the Ministry of Civil Aviation regarding the present status of PHEIC management in Civil Aviation and how we comply with the Intl. requirements.
- Discovered we don't have a mechanism to address the needs according to ICAO requirements.

 Dr Bimal Dias Appointed by the Secretary to look into these lacking areas, study the present status and to come out with a broad outline, how we should address this issue.

- The task was delegated to me in September 2012 by the Secretary, Ministry of Civil Aviation, Sri Lanka.
- Working group was formulated within the Aviation industry including Medical Officers from CAA, Airport & National Airline to study the present situation and to draft an action plan.
- SWOT analysis was done

Strengths

Government policy Ministerial support CAASL support

Weaknesses

No laid down procedures

Intermittent activities when problems arises

Poor communication among stake holders

Lack of trained Medical professionals on PHEIC in Civil Aviation sector

Lack of well defined roles and responsibilities of stake holders

SWOT

Opportunities

Availability of procedures, guidelines to provide effective intervention on PHEIC at PoE

Training/Awareness programs can be created to the Aviation staff

Management of PHEIC without interfering the air transport

Threats

May duplicate or overlap with the other programs which were in place (MoH, DMC)

Lack of awareness on PHEIC

Shortage of resources

Low communication and coordination between stake holders

Background preparation

Situational analysis was done after primary discussions with Health and Aviation authorities.

Communication with ICAO AP office regarding our requirements.

Referred to CAPSCA AP Coordinator in September 2012

Sri Lanka became a member of CAPSCA AP in December 2012.

Capacity Building - Our medical Team (from CAASL, AASL & Sri Lankan Airlines) participated the Technical Advisor Training in December 2012, Bangkok, Thailand.

Steps towards preparation of National Plan

Discussions with all stake holders (From Sep 2012)

Capacity Building Participation in Technical Advisor training Final meetings with main stake holders and expert inputs CAPSCA
Assistance visit in
May 2013 F:\ICAO
Visit photos

IHR(2005) Workshop 22nd October 2013 by WHO Final Draft of the National Civil Aviation Plan for PHEIC

- Ministry of Civil Aviation
- Ministry of Health
- WHO
- Civil Aviation Authority
- Airlines
- Ministry of Immigration
- Sri Lanka Customs
- Airport & Aviation Services
- Ministry of External Affairs
- Foreign Employment Bureau
- Ministry of Tourism

ICAO AP Office, Dec 2012, Bangkok

Technical
Advices from
CAPSCA
experts
Dr Jarneil Singh
& WHO
Country Office

Objectives of the Visit

Awareness program for All Stake Holders

Concurrence from all Stake Holders Draft finalized and ready to launch Sri Lanka got the opportunity to host 7th CAPSCA AP meeting in 2014.

Held in May 2014 in Colombo, Sri lanka

Launch of the National Civil Aviation Plan for PHEIC took place in the same meeting

F:\7th CAPSCA AP Photos

At present

The National Civil Aviation Plan for PHEIC is implemented in PoEs (BIA & MRIA)

As **WHO** has declared the EBOLA out break in Western Africa as a PHEIC, Sri Lanka is well prepared to face the situation under the newly launched National Plan.

Thank you

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