

SAFE COORDINATIONS IN THE PROVISION OF CAPSCA – AIRLINES

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Objective

- To describe the coordination importance, requirements and procedures among responders in case of pandemics or spread of communicable diseases event in aviation;
- To illustrate safety indicators and risk management matrix with regard to emergency planning.



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- Coordination
- Airline ERP
- Actions by PIC
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Coordination

- Rationally CAPSCA may require coordination between Airlines, Airport Operations, other units and local public health authorities in order to maintain safe and expeditious flow of Information.
- Coordination shall only be effected through negotiations between two or more parties who are vested with the authority to make executive decisions appropriate to the task being discharged. (MoUs)
- Coordination should only be agreed between qualified and well-trained persons.
- Coordination should only be effected through an agreed course of action based on known information.
- Responsibility for obtaining and ensuring implementation of an agreed course of action should be vested in one of the parties involved.



Coordination

- The coordination helps to illustrate that aviation, like the world it serves, is much more interdependent and interconnected today than it has ever been.
- Every State and region knows that the global network can work to the benefit of all, but only when every player in our network cooperates Importantly, the Global Plan helps to assure the needed consistency and continuity of our safetyrelated work by stressing the importance of:-



Coordination

- The information needed to identify emerging safety trends and risks;
- > The international requirements that effectively address such risks, as well as the necessary human and technical resources to ensure their implementation; and the principles which formalize a collaborative approach, among all Member States, industry and partner organizations.



Airlines – Airport ERP

- Airlines–Airport Operations has to establish a clear procedure (Emergency Response Plan) in response to a suspected communicable disease or passengers with ill health with the potential to pose a serious public health risk.
- The procedure (Emergency Response Plan) should be documented and adheres to IATA Communicable Disease recommended guidelines in collaboration with the WHO.



AIRLINE EMERGENCY RESPONSE PUBLIC HEALTH PLAN

- Ground Staff Screening Process .
- **Procedure** if a communicable disease is suspected and a customer is denied boarding.
- **Procedure** if a communicable disease Is suspected and a customer is allowed to board .
- On Board Action Plan Suspected Communicable disease .
- **PIC Actions** .
- Cabin Crew procedures to identify , evaluate and manage passengers with a suspected communicable diseases.
- Guidelines for Cabin Crew .

- Coordination with Airport Authorities .
- Safe Transport of DG by Air Procedure .
- **Disinsection Procedure** of the aircraft.
- Training Procedure .



Actions by PIC

- The Pilot in command shall notify immediately, authorities at the destination airport Local/ International flights in accordance to the specified Operation Manual procedures (as defined in the ICAO regulations) of contagious disease or potential cases, death or illnesses among passengers or crew members to the nearest airport or airport of arrival.
- The pilot in command of an aircraft may take such emergency measures in flight as may be necessary for the health and safety of persons on board.
- A pilot, on being informed of a suspected case(s) of a communicable disease, or any other public health risk on board an aircraft, shall advise the nearest ATSU with the information below :



Pilot in Command Actions

- Aircraft identification;
- Departure aerodrome;
- Destination aerodrome;
- Estimated time of arrival;
- Number of persons on board;
- Number of suspected case(s) on board;
- Nature of the public health risk, if known and
- Any special handling required by the flight by ATC and Airport Authorities



Actions by Cabin Crew

- Cabin Crew are the first front main defense group for management and prevention of spread of any communicable disease in flights and from there to destination airports ,because they are the first group to discover, deal with and report it .
- General Guidelines for cabin crew for Management of Communicable Disease Events During Flight is of utmost important to help them to suspect and manage a traveler with (communicable disease) in order to reduce the potential transmission on board and to prepare follow-up actions with airport, operators and local public health authorities at destination or transit stops. They should use the GD- (Declaration of Health) as a reference for such suspicion



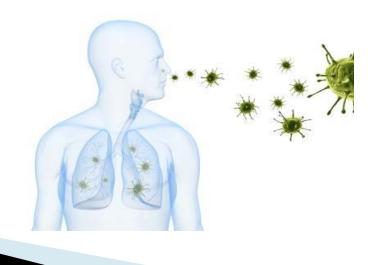
Actions by Cabin Crew

- Cabin crew have no time to read (Declaration of Health) during flight.
- It is better to train Cabin Crew **to suspect** a communicable disease when a traveler develop the following situations in this real time flight clinical order :-
- ✓ If a Traveler develop a Fever with a temperature of (38°C/100°F or greater),
- Appearing obviously unwell WITH Confusion of recent onset



Actions by Cabin Crew

- Persistent coughing WITH Impaired breathing Associated with:
- Persistent vomiting;
- Persistent diarrhea;
- Bruising or bleeding without previous injury; and
- ✓ Skin **rash**-





Coordination with ATS Unit

- The ATSU, upon receipt of information from a pilot regarding a suspected case(s) of a communicable disease on board an aircraft, shall as soon as possible notify the following parties of the information as received in point above.
- The destination Aerodrome;
- The next ATSU sector that the Aircraft will operate through;
- The Aircraft Operator and ,
- The SCAA (official form may be used for notification).



Coordination with ATS Unit

- An ATSU serving the destination Aerodrome shall upon receipt of notification of a suspected case(s) of communicable disease, or other public health risk on board an aircraft, from another ATSU or from an Aircraft or Aircraft Operator, shall forward this notification as soon as possible to The Concern Department such as :
- Airport (KIA) emergency center .
- The local Port Health Authority (PHA) and ,
- The Airline Operator.



Aircraft Parking

- > The pilot in command (PIC) shall be advised where to park the aircraft – such information will normally be communicated to the PIC by Air Traffic Control after receipt from the Airport Authority.
- The decision for the parking place usually will be taken by the public health authority in consultation with airline and airport operators.
- This should be on a remote stand, without a passenger boarding bridge attached, which have all the relevant facilities which enable continued ventilation of the aircraft and allow easy accessibility for public health personnel to assess any suspect case(s) and permit efficient clearance of passengers.



Aircraft Disinsection





Aircraft disinsection

WHO defines "disinsection" as :

- The procedure whereby health measures are taken to control or kill the insect vectors of human diseases present in baggage, cargo, containers, conveyances, goods and postal parcels.
- Long-standing WHO' recommendations cover the use of disinsection techniques in aircraft to help to minimize the spread of mosquito-borne diseases (WHO, 1985).



ASSESSING SAFETY AND EFFICIENCY

- Safety and efficiency indicators are critical links between organizational context factors and CAA management, and between the agency and external groups, Safety and efficiency indicators can both encourage changes to the formal organizational context and help to validate its effects.
- Policies and procedures to manage the achievement of these two organizational goals constitute a key feature of the organizational context.
- Accident rates, incident rates (aircraft incidents, Communicable disease on board Cases, deviations, operational errors and hazards) are major indicators of the level of safety.

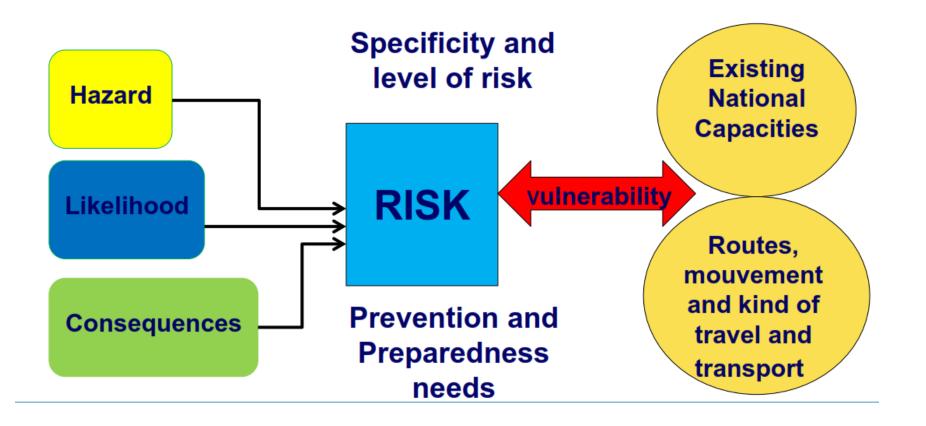


ASSESSING SAFETY AND EFFICIENCY

- Inadequacies at the organizational level can contribute directly to hazards, incidents, and accidents, for example, by failing to provide adequate resources to Airport and local health authorities, establishing inappropriate or conflicting rules for operations, incorrectly predicting the consequences of using the resources according to the rules, and neglecting to provide processes for reporting and analyzing safety issues and for correcting them.
- These direct links between antecedent formal organizational context variables and safety outcomes are critically important.



Risk Assessment





Thank you



ENJOY THE SKY Capt. Ahmed Hashim Hussein