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Virtual Meeting with the President of the Council and the Secretary General of ICAO for Ministers of Health, Tourism and Transportation and Civil Aviation Authorities Directors General on Aviation Recovery in the North American, Central American and Caribbean (NACC) States

State Challenges and Concerns for Implementing the Council Aviation Recovery Taskforce (CART) Recommendations and Guidelines

Presented by the Secretariat

28 to 29 October 2020

P/06

Aspects related to Public Health (1/2)

- ❖ Lack of harmonization at national, regional and international levels between policies, communications and guidance material from various organizations and stakeholders.
- ❖ Lack of 'weighing' of public health related measures (e.g. to distinguish between essential, desirable or optional) in the "Take-off" Guidance Document (TODG) and therefore on the COVID-19 Response and Recovery Implementation Centre (CRRIC)
- ❖ Lack of endorsement of CART products by the World Health Organization (WHO) to facilitate recognition by States Public Health Authorities
- ❖ Lack of harmonization in the performance of risk assessments to support border re-opening, including health requirements to permit inbound persons (quarantine and testing requirements)
- ❖ Practical challenges in verifying implementation of measures (e.g. physical distancing; sanitation), due to lack of oversight/Public Health Authority personnel at airports.
- ❖ Lack of consensus to facilitate the travel of recovered COVID-19 patients due to patients' possible positive test results up to 6 months after persons are no longer infectious.

Aspects related to Public Health (2/2)

- ✈ Airport Module:
  - ✈ Difficulty to incorporate technology (e.g. digital identification, self-service bag drops, contactless kiosks) into otherwise manual verification processes due to financial/operational constraints.
  - ✈ Infrastructural/financial/human constraints – implement physical distancing and screening during high demand.
  - ✈ Challenges concerning testing within airports.
- ✈ Lack of coordinated/harmonized system to assess the airport capacities and public health related measures implementation (CAPSCA, ACI, EASA, WHO have different programmes)
- ✈ Aircraft Module: difficulty in reserving one lavatory for crew use
- ✈ Crew Module: crew still subjected to screening or restrictions
- ✈ Cargo Module: difficulty for crew rotations to maintain for 14-day periods to avoid cross-infection due operational/resource constraints
- ✈ Disinfection procedures
- ✈ Lack of public health related procedures for the restart of domestic operations (aerodromes without customs and immigration services).
- ✈ Lack of centralized source of information at State level (various sources, including CAA, Public Health Authorities, central government)

- ✈ Decision-making regarding extension/termination of alleviations related to flight crew proficiency/competency amid the ongoing travel restrictions/quarantine requirements

- ✈ Determining and implementing appropriate risk mitigation measures for alleviations

- ✈ Addressing safety and security issues related to prolonged time of parked aircraft

- ✈ Civil Aviation Authorities (CAAs) that have yet to return to their normal working places are challenged with signing documents

- ✈ Lack of, or ineffective National Air Transport Facilitation Committee; lack of coordination collaboration and communication between the various stakeholders

- ✈ Lack of collaboration/involvement by the Health Authorities in the aviation-related decisions and implementation

- ✈ Managing unruly VIP passenger situations relating to non-respect of essential aviation public health and safety measures

- ✈ Conducting effective oversight both on implementing effective AVSEC measures and their related health risk mitigation measures during the pandemic
- ✈ Conducting security risk assessments under 'new normal' conditions.
- ✈ Maintaining security screening staff competency during prolonged inactivity/reduced operations
- ✈ Budgetary constraints in implementing technological security equipment (e.g. body scanner, etc.) to reduce physical contact screening
- ✈ Lack of coordination among the different State actors (e.g. CAA and Security Authority)

- ✈ Lack of State ability to provide financial support to ensure viability of operations and without prejudice to fair competition

- ✈ Increased prospect of States not implementing ICAO's policies on charges and taxes

- ✈ Need of information and data to assess the situation and make decisions of appropriate economic and financial measures.

- ✈ Competing priorities of States in providing financial support; lack of information on the economic benefits of aviation

- ✈ Lack of coordination amongst concerned government departments

✈ Lack of State activity on the COVID-19 Response and Recovery Implementation Center (CRRIC):

  ✈ Lack of designation and/or involvement of a State Focal Point and support team

  ✈ Coordination challenges with the concerned entities in the State

  ✈ Need of assistance (from the ICAO Regional Office) to understand CART recommendations and guidance and how to assess the level of implementation or adoption

  ✈ Fear of reporting (fear of being perceived as an 'unsafe' State to fly to)

✈ Lack of human resources (esp. for smaller CAAs) and/or lack of expertise to understand and implement the CART Recommendations and guidance, including for aspects related to risk management.

✈ Lack of financial resources provided by States and industry to implement the measures outlined in the CART report and Global Implementation Roadmap.

✈ Lack of support by States to ICAO Secretariat's efforts to engage with International Financial Institutions (IFIs) and Multilateral Development Banks (MDBs) to mobilize resources to support States implement the CART recommendations and guidance.

✈ Communication challenges. Insufficient reach-out from the aviation sector to the general public, which has limited awareness and/or understanding of the public health measures taken to maintain a safe environment for travel.

THANK YOU!