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COVID-19 risk based approach in international travel

8 July 2022

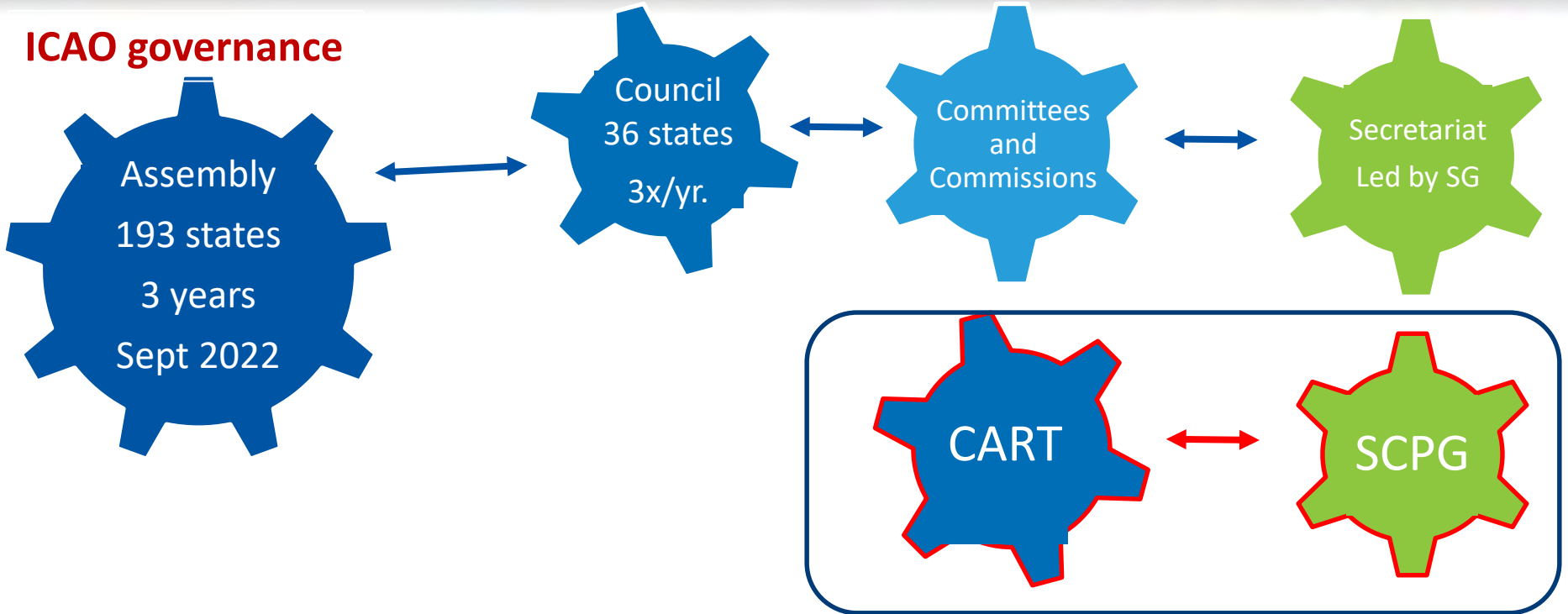


UN specialized agency – 1944

- Promote the safe and orderly development of international civil aviation
- Headquarters in Montréal, Canada
- 193 Contracting States
- Standards and Recommended Practices - 19 annexes
- Corresponding guidance material, implementation assistance and audits



ICAO governance



COVID-19 process



3 reports

- 10 key principles
- 20 recommendations
- All aspects of aviation



TOGD 4th Edition

- Public health measures
- Multilayered risk management
- 4 modules (Airport, aircraft, crew, cargo)



Doc 10152 3rd Edition

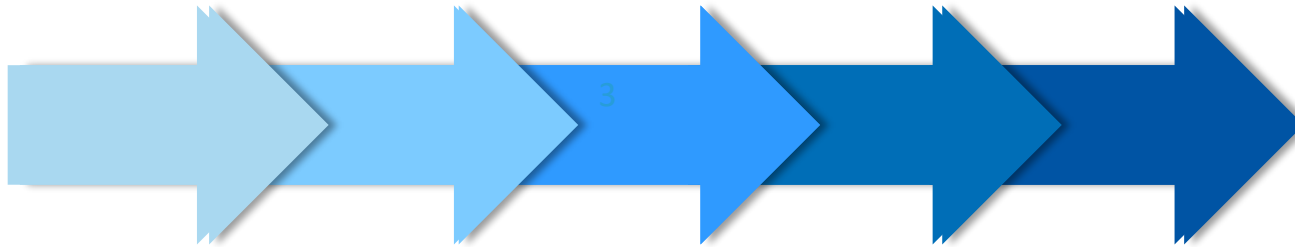


PHC iPack

- Restore international travel
- Share information
- Mutually accepted public health measures
- Bilateral/ multilateral agreements
- Capacity building

COVID-19 Guidance

Cargo and crew Repatriation Passengers Unilateral Bilateral/ Multilateral



Guidance material – SL, EB, CART, Manual

Implementation: CART, Manual, iPack



- Established 2006
- Managed by ICAO with support from WHO and partners
- Multi-sector multi-partner collaboration
- Focus on Aviation & Public health
- Global, regional, national and local levels
- Implementation of aviation SARPs & WHO IHR



- United Nations entities
- Public Health Authorities
- Airlines
- Airports
- Flight crew and cabin crew
- Aircraft manufacturers
- Aviation safety
- Business Aviation



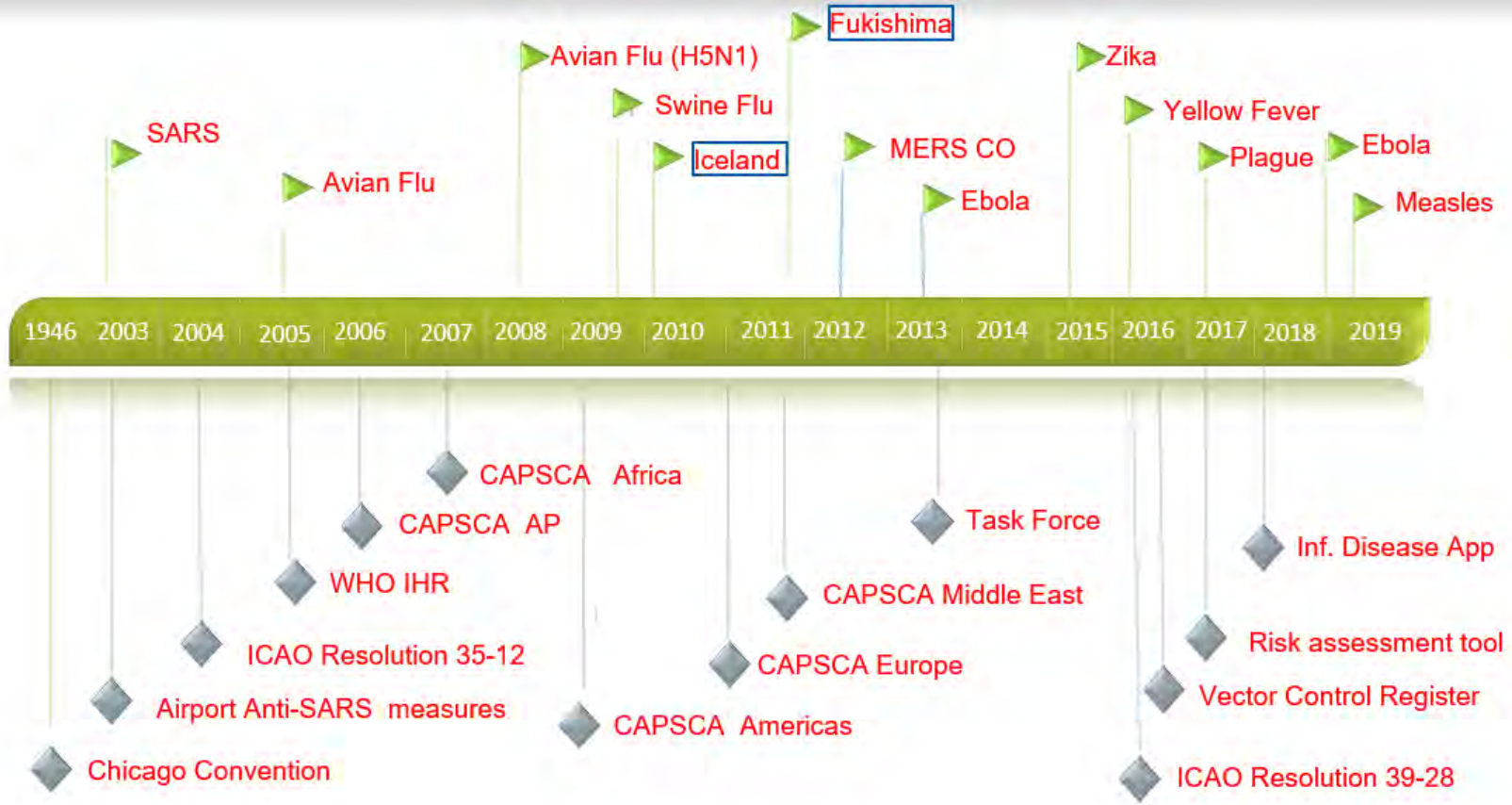
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CAPSCA

Collaborative Arrangement for the Prevention and Management of Public Health Events in Civil Aviation

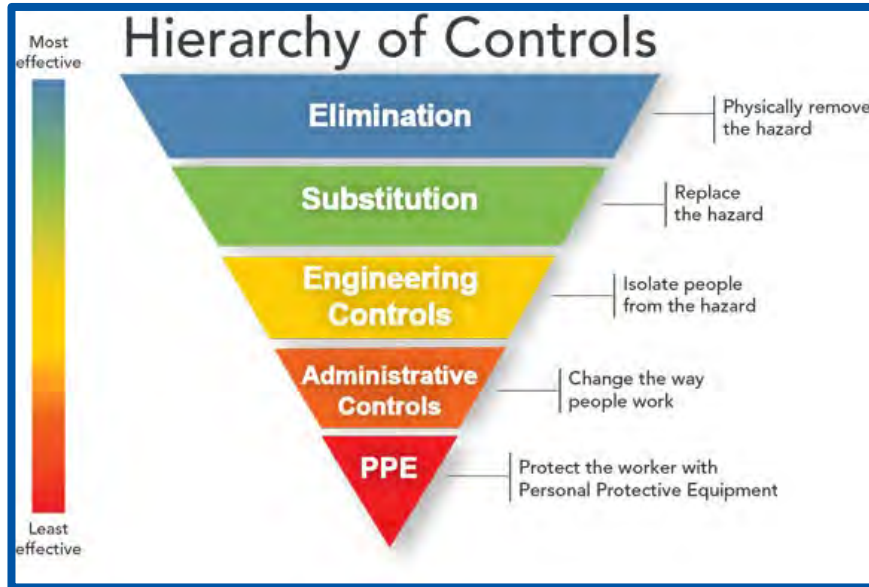


NO COUNTRY LEFT BEHIND





Risk mitigation



Source: under investigation

Immunity: previous infection & vaccination

Border closures: not prevent, only delay

Ventilation: HEPA filters

Differentiate: on-board vs. aviation-associated
Aircraft manufacturers projects

Testing objective: on-board, export, genetics

Timing and type of test

Masks: Efficacy of types
Impact on flight safety

CAPSCA activities

Scientific group

Efficacy of measures

Innovation



CAPSCA considerations

State sovereignty
 Collaborative decisions
 Alignment Sendai Framework
 & Emergency Management

Bilateral/ multilateral
 agreements

Global, regional and national
 Operational environment
 Public Health Corridors
 Assistance visits
 CAPSCA manual
 CAPSCA iPack
 Aviation Health Plan
 PANS: Health

Policy

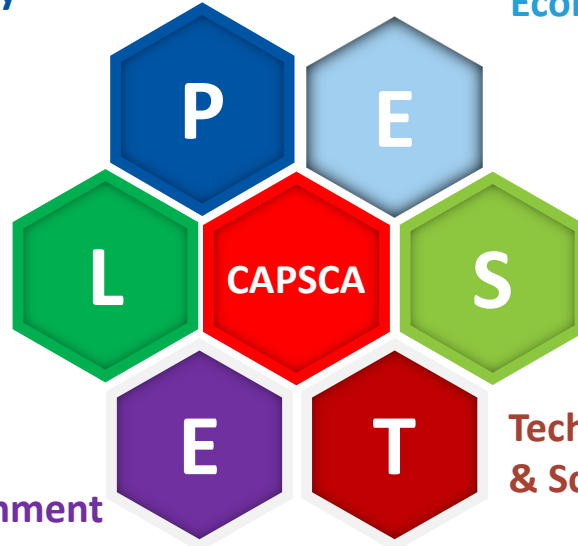
Economy

No country left behind
 Leveraging existing SME groups

Social

Human resources
 Capacity building
 Human behaviour

Legal



Risk Assessment Models
 Multilayer risk framework
 Customizable Templates
 CASAG (scientific group)
 Innovation e.g. telemedicine
 Digital tools
 Digital information sharing
 platform
 Innovation working group

Environment

**Technology
 & Science**



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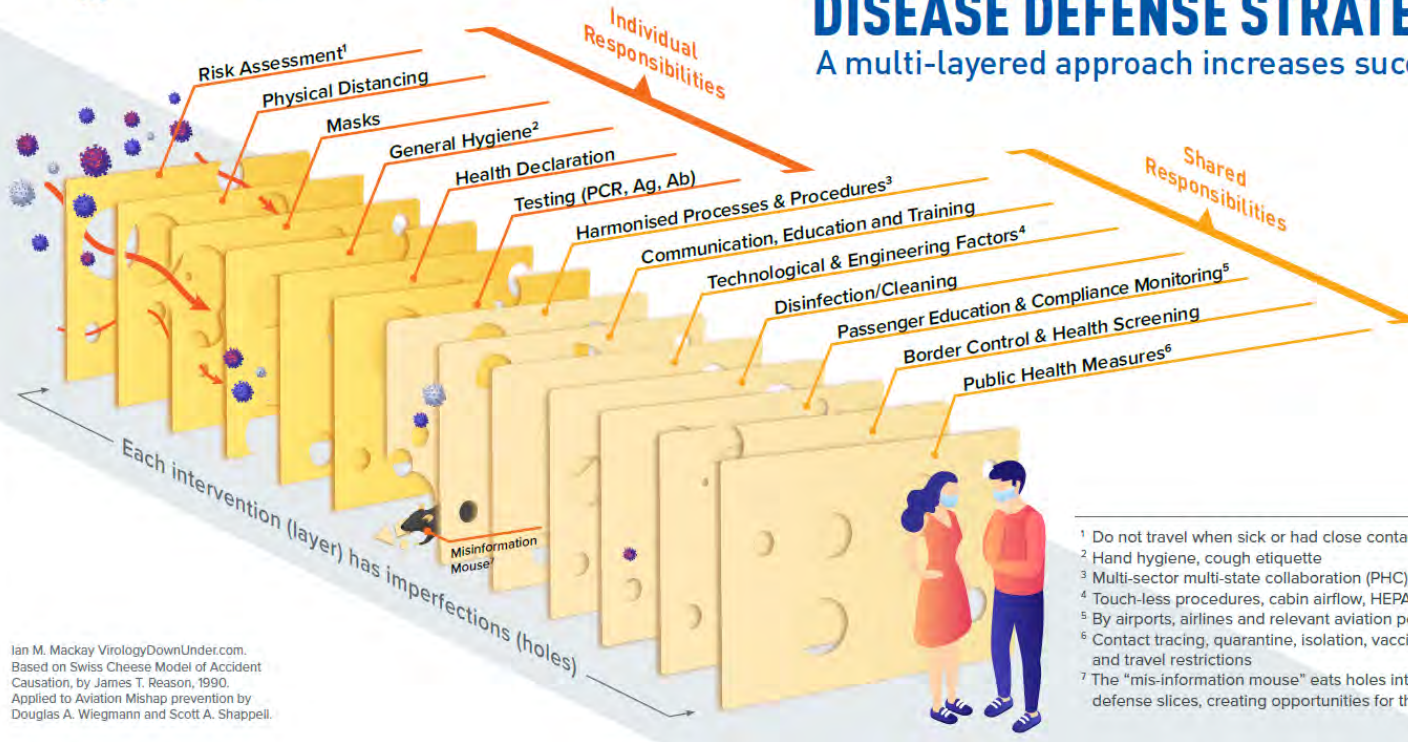
RECONNECTING THE WORLD



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AVIATION MULTI-LAYERED DISEASE DEFENSE STRATEGY

A multi-layered approach increases success



Ian M. Mackay VirologyDownUnder.com.
 Based on Swiss Cheese Model of Accident
 Causation, by James T. Reason, 1990.
 Applied to Aviation Mishap prevention by
 Douglas A. Wiegmann and Scott A. Shappell.

¹ Do not travel when sick or had close contact

² Hand hygiene, cough etiquette

³ Multi-sector multi-state collaboration (PHC)

⁴ Touch-less procedures, cabin airflow, HEPA filter

⁵ By airports, airlines and relevant aviation personnel

⁶ Contact tracing, quarantine, isolation, vaccinations, and travel restrictions

⁷ The "mis-information mouse" eats holes into the defense slices, creating opportunities for the virus



Goal

Restore international travel through the implementation of Public Health Corridors by supporting Civil Aviation Authorities (CAAs) in sharing information, applying mutually accepted public health measures and concluding bilateral or multilateral agreements.

Target Audience:

- Civil Aviation Authorities;
- Public Health Authorities;
- Other relevant national authorities e.g. Customs and Immigration;
- Aerodrome Operators; Aircraft Operators; and
- Other relevant service providers.

Lesson:
**Previous CAPSCA
Capacity building**



Overview of the PHC iPack Components

COMPONENTS:



Expert assistance

Dedicated CAPSCA Subject Matter Expert (15 work days).



Training

- Public Health Corridor: Online Course;
- Conducting a Technical Assistance Visit to CAPSCA Member States and Airports: Online Course.



Workshops

Public Health Corridor: customized workshop

Introductory/familiarization webinars;

Panel discussions and customized hands-on exercises.



Tools

- Checklists;
- Framework;
- Decisions aids;
- Templates;
- Accreditation procedures;
- Forms and posters;
- Online reporting systems; and
- PHC Application.



Guidance Material

- ICAO Testing and Cross-Border Risk Management Measures Manual;
- CAPSCA partner guidance material;
- Other associated guidance material; and
- Relevant ICAO Annexes.

Implementation Challenges

- Internal communication and coordination within the State (CAA and other key stakeholders)
- Lack of understanding about the importance of building capacity in preparedness and response to manage PHE in aviation
- Lack of understanding about the importance of establishing public health corridors
- False sense the pandemic is over, i.e. “no need of this pack”

iPack Overall Feedback

- Discuss between the CAA, PHA and other stakeholders:
 - applicability of measures
 - challenges
 - lessons learned
 - way forward
- Improved coordination and communication
- Action plans and recommendations for States based on gap analysis
- Framework and mechanisms to mitigate the risk
- Can be used for all means of transport, not just aviation
- Could also be applied in other environments e.g. schools, indoor areas

iPack Lessons learned

- Engagement of high-level management from the States is required to ensure that all the relevant resources available
- High rotation of officers may require constant capacity building in preparedness and response plans/actions/activities
- The need to include the Civil Aviation Authority in the decision-making process, on matters related to public health was identified
- Information sharing mechanisms and principles used for state risk assessment need to be improved
- Harmonization of methodologies is critical through the application of the same principles

Lessons learned

- Communication, collaboration and cooperation between the different stakeholders at national and international levels
- Shared understanding of the outcomes to be achieved e.g. no quarantine, vaccination certificates, testing
- Once the outcome is agreed, agree on criteria to be used to achieve the outcome
- Agree criteria to pause or suspend the arrangements

Lessons learned

- Patience and open discussions are needed to resolve differences
- Be prepared to share reliable and updated information
- Working closely with the industry stakeholders is critical in the planning stage to understand operational feasibility
- Management of transit passengers
- Clear public messaging



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SAFETY

CAPSCA
Collaborative Arrangement for the Prevention and
Management of Public Health Events in Civil Aviation



**NO COUNTRY
LEFT BEHIND**



CAPSCA and Aviation Medicine Global

Symposium

- 3 days event
- 28 March to 1 April 2022

Week of 28 March - 1 April 2022. Montréal, Canada.



Conclusions – High level

- The need for leadership in managing public health events in aviation – early engagement of political leadership at national and sub-national levels involving policy makers in decision making
- Although precautionary principle could apply when data is limited, it should be reviewed and guidance amended as data becomes available; specifically in view of the fact that border closures can harm pandemic response
- The different mandates and perspectives of the different sectors need to be taken into account and working methods adjusted to achieve a practical balance
- Need for analysis of measures implemented during this pandemic, and developing capacities and investments in pandemic preparedness as well as response accordingly.

Conclusions – High level

- Establish a robust system of communication, recognizing that communication from both a scientific and public perception perspective is essential, and implementing it in a way to maximize visibility
- More standardization of health measures between states, realizing that it might not be possible to reach international consensus
- The importance of multi sectoral collaboration, including aviation, public health, humanitarian operations, tourism and others.
- All stakeholders at all levels to continue to build relationships ahead of time, collaborate and share information to meet public health challenges

Risks and evidence based approach

- States to set the boundaries in terms of risk acceptance/ risk tolerance – harmonize to the greatest extent possible
- Define the measurable indicators to evaluate at different phases to inform the need to increase or alleviate the mitigation measures
- Indicators should be supported by medical evidence and consistent with public health best practices

Key concepts and relationships

Crisis Response policy and Disaster Risk Reduction Strategy (all types of risk)

Sendai framework (HADRA, other risks)

PHE (CART – MPSG - CAPSCA)

Standards and Regulations
(SARPs and IHR)

Implementation
(Aviation Health
Management Plan)

Implementation
(PANS – Health and digitized
platform)

- Consolidated repository of health related material
- Include references to relevant Annexes

- Exchange information
- Update aviation procedures
- Aligned to relevant specialist medical disciplines
- Public health is one module



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