Dr. Thuthukile Mashaba Mogoru AVMED South African Civil Aviation Authority Aviation Pandemic Preparedness Plan



Presentation Outline

- Role of Cabin Crew
- Role of the Airlines
- Roles of the Airports
- Roles of Baggage Handlers
- Roles of the Immigration
- Roles of Customs
- Others

Role of the Civil Aviation Authority

Annex 9

Identification of symptoms & signs

Fever (38°C/100°F or greater) plus one or more of the following signs or symptoms:

- Appearing obviously unwell
- Persistent coughing
- Impaired breathing
- Persistent diarrhea
- Persistent vomiting
- Skin rash & Bruising
- Bruising or bleeding without previous injury
- Confusion of recent onset

Aircraft Declaration



- Signs and symptoms identical-ICAO Aircraft General Declaration & WHO.
- If food poisoning from in-flight catering is suspected, proceed as per company-established protocol.
- * If temperature of the affected person is normal but several travelers have similar symptoms, consider other public health issues such as chemical exposure.

If medical support from the ground is available, contact that ground support immediately.

- And/or page for medical assistance on board (as per company policy).
- * If medical ground support and/or on board health professional is available, crew should follow their medical advice accordingly.

If no medical support is available:

- * Relocate the ill traveler to a more isolated area but only if two rows can be cleared immediately in front of a solid bulkhead.
- * If the ill traveler is relocated, do not reuse the vacated seat and make sure that the cleaning crew at destination is advised to clean and disinfect both locations.

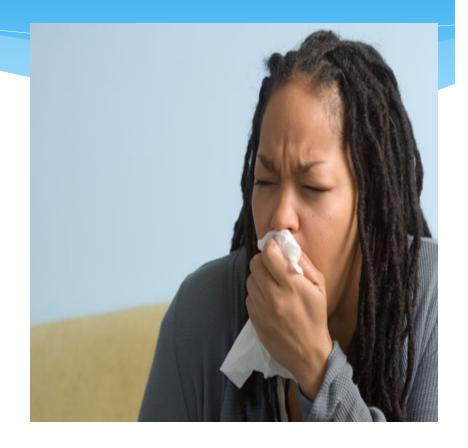
If the ill traveler is coughing, ask him/her to

follow respiratory etiquette:

Provide tissues and the advice
 to use the tissues to cover the
 mouth and nose when speaking,
 sneezing or coughing.

- ii. Advise the ill traveler to practice proper hand hygiene, if the hands become visibly soiled, they must be washed with soap and water.
- iii. Provide an airsickness bag to be

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Gloves are not intended to replace proper hand hygiene.

- * Gloves should be carefully removed as per training syllabus and discarded and hands should be washed with soap and water.
- * An alcohol-based hand rub can be used if the hands are not visibly soiled.
- * Store soiled items (used tissues, face masks, oxygen mask and tubing, linen, pillows, blankets, seat pocket items, etc.) in a biohazard bag if one is available.
- * If not, use a sealed plastic bag and label it "biohazard".
- Ask accompanying traveler(s) (spouse, children, friends, etc.) if they have any similar symptoms.



- Ensure hand carried cabin baggage follows the ill traveler and comply with public health authority requests.
- * As soon as possible, advise the captain of the situation to report the suspected case(s) to air traffic control.
- * Unless stated otherwise by ground medical support or public health officials.
- * Ask all travelers seated in the same row, 2 rows in front and 2 rows behind the sick traveler to complete a passenger locator form.

PUBLIC HEALTH PASSENGER LOCATOR CARD

Public Health Passenger Locator Card to be completed when recommended by the World Health Organization or when public health authorities suspect the presence of a communicable disease. The information you provide will assist the public health authorities to manage the public health event by enabling them to trace passengers who may have been exposed to communicable disease. The information collected will be held by the public health authorities in accordance with applicable law and will be used only for public health purposes.

Flight Information		
1. Airline and Flight Number	2. Date of arrival	Seat Number where you actually sat on the aircraft
Airline Flight Number	DD MM YYYY	
Personal Information		
4. Name		
Family Name	Given N	ame(s)
Your Current Home Address (including country)		
Street Name and Number	City	State/Province
Steet valle and valle	City	States Figure 1
Country	ZIP/Postal Code	
Your Contact Phone Number (Residential or Bu	isiness or Mobile)	
Country code Area Code Phone Number	er E-mail address	
Passport or Travel Document Number	Issuing Country/Organization	
•	issuing Country/Organization	
Contact Information	be contacted during your stay or, if visiting many places,	war on Nationa and in Niel address
S. Address and priorie number where you can be	se contacted during your stay or, it visiting many places,	your cen priorie and initial address
Street Name and Number	City	State/Province
Country	ZIP/Postal Code To	elephone Number (including country code) or mobile phone number
6 Control information for the names who will be	hand become whom you are for the good 21 days in case o	f emergency or to provide critical health information to you.
Please provide the name of a close personal conta	act or a work contact. This must NOT be you.	i energency or to provide chical realtrianonnation to you.
a. Name		
Family Name	Given N	ame(s)
b. Telephone Number		
c. Address Country code Area Code Phone Number c. Address	er E-mail address	
Street Name and Number	City	State/Province
Country	ZiP/Postal Code	
7. Are you traveling with anyone else?	YES/NO Circle appropriate response If so, who? (ne	arne of Individual(s) or Group)

297 mm (or 11 3/4 inches)

Role of the Civil Aviation Authority-Annex 9

APPENDIX 1. GENERAL DECLARATION

		GENE	RAL DECLARAT	ION	
			(Dutward/Inward)		
Operator					
орачия					
Marks of Nationality and Re	gistration		Flight No		Date
Departure from			Arrival at		
	(Place)				(Place)
		FI	LIGHTROUTING		
	("Place" Cohr		list origin, every en-ro		tination)
PLACE	N	AMES OF C	'DEUD!	и	UMBER OF PASSENGERS
PLACE	19	AMES OF C	.RE W		ON THIS STAGE**
				_ Departure Pi	lace:
				_ Throughons	ame flight
				- Arrival Place	?:
				Disembarkin	 g
				Throughons	ame flight
Declaration of Health Name and seat number				A	For official use only
airsickness or the effec					
disease (a fever — temp	erature 38°C/100°I	For greater –	— associated with one o	or macore of	
the following signs or s					
impaired breathing; per bleeding without previous					
that the person is suffer					
disembarked	during	a	previous	stop	
Details of each disinsect	ting or sanitary trea	tment (place	- date - time - method) d	nring the	
flight. If no disinsecting					
disinsecting					
Signed, if required, wi	ith time and date				
bagues, a requares, m			rewmember concerned		
T 411 11			in the Comment Dealer		1
	al Declaration, are				y supplementary forms required to be ge and that all through passengers will
	_				
			SIGNA TURE		

Authorised Agentor Pilot-in-command

Role of the Civil Aviation Authority-Annex 11 Pans ATM



 Declaration of Health (signs/symptoms) (ICAO Annex 9, Appendix 1 & IHR (2005) Annex 9)

Voice or data link

- **Airport Operator**
- **Public Health Authority**
- Other agency(ies)

- Aircraft Callsign (ID)
- Dep. Aerodrome
- Dest. Aerodrome
- Est. Time Arrival
- Number of persons on board
- Number of suspect cases
- Nature of public health risk
 - **Airport Operator**
 - **Public Health Authority**
 - Other agency(ies)

Via local procedure (Aerodrome Emergency Plan)

> **Aerodrome Air Traffic Services**

Air Traffic Controller

Aircraft Operator (or handling agency) at destination aerodrome incl. ground-based medical services provider (if available)

Voice or data link e.g. AFTN*

Destination Aerodrome Air Traffic Services

Via local procedure (Aerodrome **Emergency Plan**)



loice or data link e.g. **Departure**

7. Are you traveling with anyone else?	YES/NO Circle appropriate response 1/ so, who?	(name of Individual(s) or Group)
Country	Z P/Posta Code	
Street Name and Number	City	State/Province
Country code Area Code Phone Number c. Address	E-mai address	
b. Telephone Number		
Family Name	GIM	an Nume(s)
a. Name		
Please provide the name of a close personal contact	est know where you are for the next 31 days, in ca ct or a work contact. This must NOT be you.	se of emergency or to provide critical health information to you.
County	ZiP/Postal Code	Telephone Number (including ecunity code) or mobile phone number
Street Name and Number	City	State/Province
5. Address and phone number where you can be	a contacted during your stay or, if visiting many pla	ces, your cell phone and inibial address
Contact Information		
Passport or Travel Document Number	ssuing Country/Organizati	ou .
Passport or Travel Document Number	ssuing Country/Organizati	ou :
Country code Area Code Phone Number Passport or Trave Document Number		ou :
Country code Area Code Phone Number	E-mail address	ou :
Your Contect Phone Number (Residential or Bus Country code Area Code Phone Numbe	niness or Mobile) E-mail address	
Country code Area Code Phone Number	E-mail address	
Country Your Contact Phone Number (Residential or Bus Country code Area Code Phone Numbe	ZIP/Postai Code uiness or Mobila) E-mail address	
Your Contect Phone Number (Residential or Bus Country code Area Code Phone Numbe	niness or Mobile) E-mail address	State/Province
Country Your Contact Phone Number (Residential or Bus Country code Area Code Phone Numbe	ZIP/Postai Code uiness or Mobila) E-mail address	
Street Name and Number Country Your Contect Phone Number (Residential or But Country code Area Code Phone Number	ZIP/Postal Code uineas or Mobile) E-mail address	
Family Name Your Current Home Address (including country) Street Name and Number Country Your Contect Phone Number (Residential or But Country code Area Code Phone Number	ZIP/Postal Code uineas or Mobile) E-mail address	State/Province
Your Current Home Address (including country) Street Name and Number Country Your Contect Phone Number (Residential or But Country code Area Code Phone Number	ZIP/Postal Code uineas or Mobile) E-mail address	State/Province
4. Name Family Name Your Current Home Address (including country) Sheet Name and Number Country Your Contect Phone Number (Residential or But Country code Area Code Phone Number	City ZIP/Postal Code ziness or Mobile) E-mail address	State/Province
4. Name Family Name Your Current Home Address (including country) Street Name and Number Country Your Contect Phone Number (Residential or But Country Country Contect Phone Number (Residential or But	City ZIP/Postal Code ziness or Mobile) E-mail address	State/Province
1. Arline and Flight Number Arline Flight Number Personal Information 4. Name Your Current Home Address (including country) Seet Name and Number Country Your Contect Phone Number (Residential or But Your Contect Phone Number (Residential or But Country Country code Area Code Phone Number	City ZIP/Postal Code ziness or Mobile) E-mail address	State/Province
Airline Flight Number 4. Name Family Name Your Current Home Address (including country) Street Name and Number Country Country Tour Contect Phone Number (Residential or But Tour Contect Phone Number (Residential or But	CHy Z.P/Posts Code E-mail address	an Name(a) State/Province
applicable law and will be used only for public h T. Arfine and Flight Number Arline Flight Number Personal Information 4. Name Family Name Your Current Home Address (including county) Street Name and Number Country Country Country Country Country code Area Code Phone Number	2. Date of arrival DD MM YYYY City ZIP/Postal Code Zimess or Mobile) E-mail address	3. Seat Number where you actually sat on the aircraft an Mame(s) State/Province
presence of a communicable disease. The infortor trace passengers who may have been expensed to trace passengers who may have been expensed to trace passengers who may have been expensed to the property of	oalth purposes. 2. Date of arrival DD MM YYYY City ZIP/Postal Code E-mail address	blorities to manage the public health event by enabling them ected will be held by the public health authorities in accordance with 3. Seat Mumber where you actually sat on the aircraft an Name(s) State/Province
presence of a communicable disease. The infortor trace passengers who may have been expensed to trace passengers who may have been expensed to trace passengers who may have been expensed to the property of	oalth purposes. 2. Date of arrival DD MM YYYY City ZIP/Postal Code E-mail address	3. Seat Number where you actually set on the aircraft an Name(a) State/Province

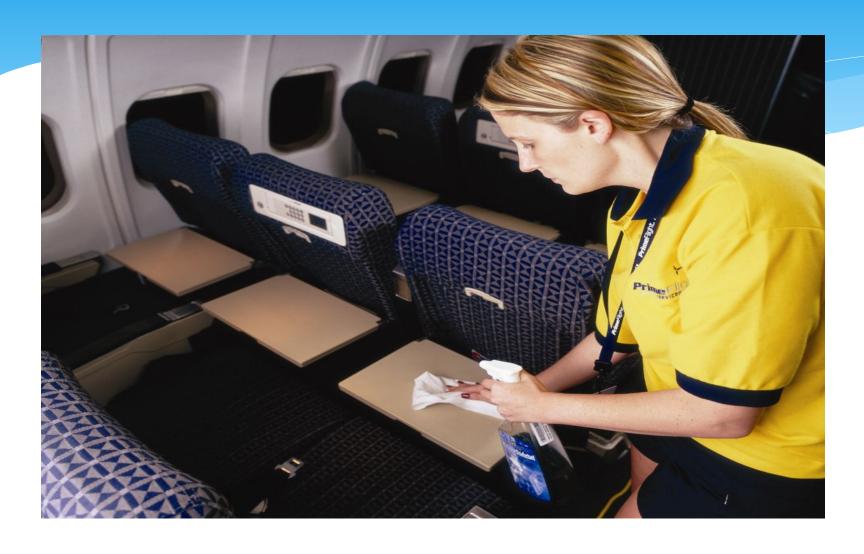
ICAO Passenger Locator Form

Annex 6-Universal Precaution Kits

Contents of the Universal Precaution Kits:

- Dry powder that can convert small liquid spill into a sterile granulated gel.
- Germicidal disinfectant for surface cleaning.
- Skin wipes
- Face /eye mask(separate or combined)
- Gloves
- Non-Mercury Thermometer

PROCEDURE FOR AIRCRAFT CLEANING CREW



Procedure for Aircraft Cleaning Crew

- Wear impermeable disposable gloves.
- * Remove and discard gloves if they become soiled or damaged, and after cleaning.
- * Use only cleaning agents and disinfectants that have been approved by aircraft manufacturers at recommended concentrations and contact times.
- * Begin the cleaning at the top (light and air controls) and proceed downward progressively working from clean to dirty areas

Procedure for Passenger Agents





General Guidelines for Suspected Communicable Disease

A communicable disease is suspected when a traveler (passenger or a crewmember) has a fever (temperature 38°C/100°F or greater) associated with one or more of the following signs or symptoms:

- -Appearing obviously unwell
- Persistent coughing
- Impaired breathing
- Persistent diarrhea
- Persistent vomiting
- Skin rash
- Bruising or bleeding without previous injury
- Confusion of recent onset



Procedure for Passenger Agents

- * Serious in-flight medical emergencies are infrequent but can be difficult to manage and even life threatening for the individual, as well as causing significant disruption and expense to the airline and other passengers.
- * Some of these incidents occur in people who were unwell at the time of boarding and, therefore,.-may be preventable.
- * Even though passenger agents have no medical expertise and are not expected to make medical diagnosis, they can help to prevent in-flight medical emergencies by simply looking, listening and asking simple questions.

Procedure for Cargo and Baggage Handlers





Procedure for Cargo and Baggage Handlers

- "There is no evidence that avian influenza is spread through contact with baggage, packages, or other objects, including items arriving from areas where influenza cases have been reported.
- * Special handling of cargo arriving from areas where avian influenza cases have been reported is, therefore, not necessary."
- * The above recommendation also applied to hand carried cabin baggage of a passenger suspected of carrying a communicable disease.

Procedure for Bird Strike



Procedure for Bird Strike



Wear disposable gloves

- If body contact is unavoidable while cleaning the engine, wear disposable coverall, a facemask and eye protection.
- * Do not use air or water under pressure to clean the part of the aircraft that was hit by the bird (it can create aerosols).
- Remove the bird remains and put them in a plastic bag.
- Do not touch face, eyes, nose, etc. with your gloves



Procedure for Bird Strike {cont}

- * Remove the gloves, the disposables coverall and mask (if used) and put them in the same bag as the remains and seal the bag.
- * Dispose the bag as for normal garbage.
- * Wash hands thoroughly with soap and water.

International Transport of Human Remains

Should a body fluid leakage occur while transporting dead bodies, the usual accepted guidelines endorsed by WHO for dealing with spilled body fluids should be followed, as stated below:

- * Wear disposable gloves and, if available, a plastic apron.
- * If the spillage has occurred on an aircraft, only use cleaning materials suitable for aircraft use.
- Do not try to clean the body fluids by hosing with water or air
- * Use the material that will absorb the body fluids and scrape the material into a biohazard bag.

International Transport of Human Remains {cont}

- Wash the area with water/disinfectant after removal of the adsorbent material.
- * Dispose of gloves and apron in a biohazard bag.
- * Wash hands thoroughly with soap and water afterwards.

If you have any questions, contact you airline Medical Department or your national public health agency.

Summary-Auditing of the Operator

CAA

- Regulations & Technical Standards
- MOU between Health & Transport-Roles of DOH
- * Oversight of Airlines/Airports/ATC/Baggage Handlers
- * Home Affairs
- * Customs, ect

Summary-Auditing of the Operator

- Training of Cabin Crew Communicable Disease(ICAO Annex 9)
- Communication between pilot-command & ATC
- Aircraft Declaration Form & Passenger Locator Form (Annex9)
- Universal Precaution Kits & Thermometer on Board(Annex 6)
- Procedure for Maintenance Crew (Changing of HEPA Filters)
- Procedure for Passenger Agents
- Procedure for Cargo and Baggage Handlers
- Procedure for Aircraft Cleaning Crew
- Procedure for Bird Strike
- International Transport of Human Remains & Death on Board
- Doctors Bags & First Aid Kits

Summary-Auditing of the Other Agencies

Home Affairs

- SOP for the management of Passengers entering South Africa without a visas who require emergency medical treatment.
- The procedure shall form part of each airport pandemic preparedness planning and shall contain the contact details of the relevant individuals to be contacted.

Cargo and Security

 Procedure needs is in place for obtaining baggage, customs and security clearance of a sick traveller

Other issues of Consideration

Waste Management at Airports

- Waste Managements from Airlines
- Water & Food Supply to the Airlines
- Water & Food Supply to the Airports
- Non-chemical disinsection
- Vector control-(Yellow-Fever)
- Extension granted to States for the Implementation of International Health Regulations



For your attention