



ICAO

UNITING AVIATION

CAPSCA

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



Eighth Africa Regional Meeting of CAPSCA

8 – 10 February 2022

Review of the last CAPSCA Africa meeting conclusions

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Review of the last CAPSCA Africa meeting conclusions

CONCLUSION

1. States to report to ICAO and WHO the status of the implementation of the conclusions of the CAPSCA Africa meetings.
2. Coordination and collaboration continue to be an issue brought up by participants. Progress seems to be better with CAPSCA member States especially those that have had an assistance visit.
3. States shared their challenges in the implementation of IHR and ICAO SARPs. ICAO and WHO are prepared to assist where possible but the initiative must come from the States

STATUS

1. States are yet to report on Status
2. Coordination and collaboration still being an issue in several States
3. Few States are regularly providing information. Two States have expressed their interest for assistance.



Review of the last CAPSCA Africa meeting conclusions

CONCLUSION

4. No State in Africa has achieved full implementation of IHR routine and emergency core capacities. States are encouraged to make this a priority as recommended in the WHO regional strategy for health security 2016-2020.
5. The meeting was informed that during the Ebola and Zika outbreaks, a number of countries implemented measures beyond WHO recommendations, necessitating ICAO/WHO intervention. States are encouraged to follow WHO recommendations

STATUS

4. States to provide updates during the meeting
5. Same observations during the COVID-19 pandemic



Review of the last CAPSCA Africa meeting conclusions

CONCLUSION

6. State letters from ICAO pertaining to the setting up of a vector control register, aviation decision aid model and CAPSCA survey, all had poor responses. States are encouraged to respond to States letters promptly.
7. Civil Aviation Authorities are requested to appoint a CAPSCA Focal Point as per the sent State letter. Once nominated, the aviation CAPSCA Focal Point should maintain close contact with the National IHR Focal Point for any questions or concerns related to public health events involving the aviation sector. The ICAO and WHO Regional Offices should also be informed.
8. States still seem to have problems in the implementation of IHR and ICAO health related SARPs into their national legislation. States with challenges are encouraged to approach ICAO and WHO for assistance where required

STATUS

6. States responses to State letters still low in the AFI region.
7. Many States are yet to appoint CAPSCA Focal points.
8. Few States requested assistance.



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CONCLUSION

9. The United Nations Ebola Response Multi-Partner Trust Fund is no more available. A special fund, the ICAO SAFE fund has been established to receive grants from member States that will help keep CAPSCA operational. States are encouraged to donate to this fund. States to consider building business case for high-level stakeholders.
10. It was recognized that a voluntary CAPSCA Assistance Visit is an effective and beneficial activity to improve communication, cooperation, coordination and collaboration between health and aviation sectors in States at a national and operational level. States are encouraged to request Assistance visits, implement the subsequent related action plans and report to ICAO and WHO.
11. Participants suggested to have an electronic application form for the CAPSCA membership, along with CAPSCA objectives and benefits

STATUS

9. States are yet to contribute to the SAFE Fund.
10. Most States are yet to request for the voluntary CAPSCA Assistance visit. States are still encouraged to request for the assistance on need basis.
11. Application form on the CAPSCA Website



Review of the last CAPSCA Africa meeting conclusions

CONCLUSION

12. States shared their experiences during simulation exercises for public health events. It underscored the importance of doing exercises and States that have not done so are invited to test and validate their public health emergency plans. States to follow up for sharing of best practices.
13. Participants were informed of the Computer Based Training package being developed by ICAO and WHO in collaboration with JAA (an ICAO approved Training Organisation). This will be for the training of Technical Advisors for conducting Assistance Visits. The meeting requested ICAO and WHO to inform the States the requirements and conditions to qualify for such training as soon as the training material would be ready

STATUS

12. States are still encouraged to carry out exercises to test their public health emergency plans
13. The computer based training has been developed and the requirements to undertake the course are on the CAPSCA Website.



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CONCLUSION

14. The issue of requirements relating to air ambulances was raised at the ICAO Assembly in 2016. It is one of the work items that will be taken up by the ICAO Aviation Medicine Section. Updates will be made available through the CAPSCA network
15. Waste management including biohazardous waste from an aircraft and airport should be part of the public health emergency preparedness plans. The responsible agencies shall be identified and the SOPs established.
16. Human, animal and environmental health are closely related. In this context, the relevant States are urged to collaborate on measures that can be put in place for prevention of all hazards under One-Health Approach.

STATUS

14. Updates related to requirements relating to air ambulances are available on the CAPSCA Website
15. Updates to be done by States in the meeting.
16. Updates to be done by States in the meeting.



Review of the last CAPSCA Africa meeting conclusions

CONCLUSION

17. States that have had recent experience of planning for EVD in the aviation sector are encouraged to record their experiences and challenges and send them by e-mail to the ICAO Regional Offices for posting on the CAPSCA website
18. The preparation of the PH emergency component of the Aerodrome Emergency Plan and organization of the EOC for a PH emergency are based on ICAO Annex 14 requirements. Since WHO documents also require an emergency plan to be developed for Points of Entry, close collaboration between the PH authority and aviation stakeholders is essential to avoid duplication of effort and potential confusion. SOPs for managing the emergency need to be documented and shared.

STATUS

17. No record received so far
18. States to report to this meeting on any progress made.



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CONCLUSION

19. States are encouraged to join CAPSCA if not yet members, request Assistance Visits to State and Airport if not yet received, provide officers to be trained as Technical Advisors if desired, Consider offering to host a regional meeting and consider contributing voluntary funds
20. States are encouraged to Establish a public health/aviation sector working group to facilitate the development of a National Aviation Plan for Public Health Events if not already in place. Such work may be undertaken within the mandate of the airport and/or national Facilitation Programmes
21. States are encouraged to develop a standard operating procedure (SOP) for managing the arrival of an affected aircraft, establish personal contact with their counterpart in other sectors e.g. Civil Aviation Authority and Public Health Authority/IHR National Focal Point, and undertake exercises to test their preparedness plans/SOPs

STATUS

19. 6 States joined CAPSCA since 2017 and few requested Assistance visits. New technical advisers were trained. With regard to CAPSCA Africa meeting hosting, no candidate recorded since 2017. Finally no voluntary contribution was so far received.
20. States to report on the status to the meeting.
21. States to report on the status to the meeting



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THANK YOU