



INTERNATIONAL CIVIL AVIATION ORGANIZATION

**COLLABORATIVE ARRANGEMENT FOR THE PREVENTION AND MANAGEMENT OF PUBLIC HEALTH
EVENTS IN CIVIL AVIATION
(CAPSCA)**

SUMMARY REPORT

**FIFTH MEETING OF THE CAPSCA-MIDDLE EAST
PROJECT (CAPSCA-MID/5) AND CAPSCA TRAINING WORKSHOP**

(Cairo, Egypt, 29 February to 3 March 2016)

The views expressed in this report should be taken as those of the Collaborative Arrangement For The Prevention And Management Of Public Health Events In Civil Aviation (CAPSCA) Project and not of the Organization. This Report will, however, be submitted to the ICAO Council and any formal action taken will be published in due course as a Supplement to the Report.

Approved by the Meeting
and published by authority of the Secretary General

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CAPSCA-MID/5
Summary Report of the Meeting

1. PLACE AND DURATION

1.1 The Fifth meeting of the Middle East Regional Collaborative Arrangement for the Prevention and Management of Public Health Events in Civil Aviation (CAPSCA-MID/05) and CAPSCA Workshop followed by Training for Technical Advisors were generously hosted by Egypt at the Conference Hall of the Egyptian Ministry of Civil Aviation in Cairo, Egypt, from 29 February to 3 March 2016.

2. OPENING

2.1 The meeting was opened by Dr. Salah Salah Eldin Atteya Eltounsi, Head of the Medical Department, Ministry of Civil Aviation, Egypt and Mr. Adel Ramlawi, CAPSCA Regional Coordinator, ICAO Middle East Regional Office who welcomed all the participants to the CAPSCA-MID/5 Meeting.

2.2 Mr. Ramlawi recalled that the CAPSCA Programme inception occurred after the outbreak of SARS in 2003 and Avian Flu in 2005. As the only ICAO programme that brings different sectors together in a formalized and routine manner, CAPSCA will help Aviation and Public Health partnership to develop and improve generic preparedness plans.

2.3 Dr. Anthony Evans, Aviation Medicine Expert/Consultant, ICAO Headquarters introduced Dr. Johanna (Ansa) Jordaan, the new Chief, Aviation Medicine Section, ICAO HQ and wished her success in the CAPSCA Programme management.

2.4 The meeting was chaired by Dr. Anthony Evans supported by Dr. Johanna Jordaan, Chief Aviation Medicine from ICAO HQ and Mr. Adel Ramlawi from ICAO Middle East (MID) Office and Dr. Jarnail Singh (Singapore), CAPSCA Technical Advisor.

3. ATTENDANCE

3.1 The meeting was attended by a total of forty two (42) participants from six (6) States (Egypt, Jordan, Kuwait, Qatar, Saudi Arabia and Sudan) one (1) International Organization (WHO). The list of participants is at **Attachment A** to this Summary Report.

3.2 Ms. Dalia Samhouri, Epidemiologist and IHR Expert delivered online presentations on behalf of the World Health Organization (WHO) Regional Office for Eastern Mediterranean (EMRO) and Dr. Ninglan Wang represented WHO HQ with active participation starting the second day of the event. Dr. Wang highlighted the importance of collaboration between WHO and ICAO and adoption of the International Health Regulations (2005) as a legal instrument for attaining global health security through timely containment and mitigation of public health events.

4. OFFICERS AND SECRETARIAT

4.1 Mr. Adel Ramlawi, Regional Officer, Aerodromes and Ground Aids and CAPSCA Regional Coordinator, ICAO Middle East (MID) Office was the Secretary of the Meeting.

5. LANGUAGE

5.1 Discussions were conducted in English and documentation was issued in English.

6. WORK PROGRAMME AND DOCUMENTATION

6.1 The Meeting Programme is attached as **Appendix A** to this Summary Report. All the meeting documentation and presentations related to the meeting are available on ICAO MID website: www.icao.int/MID/Pages/capsca-mid.aspx and the CAPSCA web site: www.capsca.org.

7. GENERAL SUMMARY

7.1 The meeting was apprised of the CAPSCA Global Symposium and the latest updates of CAPSCA-MID project.

7.2 The participants received training of CAPSCA activities and joined group exercises on Exit Screening at Airports and Management of communicable disease in Aviation.

7.3 States are to consider that:

- a) the “implementation” of the IHR is ongoing. States should maintain core capacities and be able to use them effectively, when and where needed. (e.g. Ebola PHEIC);
- b) States, service providers and other stakeholders should cooperate to build capacities;
- c) WHO will continue its leading role in public health including facilitation of improved information sharing and collaboration in order to strengthen health security;
- d) the efforts to control public health threats require all stakeholders to adapt to new challenges and to continuously improve the way they coordinate and collaborate; and
- e) the CAPSCA Programme should be promoted more intensively with broadening of networks in order to raise it to a higher priority level at all levels. Success stories and positive impact of the CAPSCA Programme should be emphasized.

7.4 In relation to the Middle East Respiratory Syndrome Coronavirus (MERS – CoV), the meeting noted that:

- a) overall, the epidemiology of MERS-CoV remains unchanged and risk of transmission during air travel remains low; and
- b) there remains no evidence of sustained human-to-human transmission in the community nor is there evidence of airborne transmission during air travel.

7.5 In relation to the Zika Virus Disease Outbreak, the meeting was apprised about the disease and noted that:

- a) mode of transmission is primarily by mosquitos;
- b) WHO does not currently recommend any travel or trade restrictions be applied to affected countries;
- c) precautions to avoid mosquito bites are particularly needed by pregnant women; and
- d) travellers should seek out health related information, keep it readily available and be aware of action to take in the unlikely event that they develop relevant symptoms. The information for travellers visiting Zika affected countries can be found at: <http://www.who.int/csr/disease/zika/information-for-travelers/en/> .

7.6 The participants received with appreciation presentations from Egypt (on Zika virus), Qatar (on Aerodrome Emergency Plan at HIA) and Kuwait (on Aircraft Disinsection).

7.7 States are encouraged to:

- a) join CAPSCA, if not yet members;
- b) request Assistance Visits to State and Airport, if not yet received;
- c) provide officers to be trained as Technical Advisors, if desired;
- d) consider offering to host a regional meeting;
- e) delegate specialists from civil aviation and health sectors to participate in CAPSCA meetings and activities; and
- f) consider contributing voluntary funds to CAPSCA.

7.8 CAPSCA meetings and assistance visits are undertaken with joint WHO and ICAO planning and coordination. The meeting requests WHO and ICAO Regional Offices to allocate resources to ensure successful events.

7.9 As agreed in the CAPSCA Global meeting in Cairo, 2014, it is suggested that ICAO is invited by WHO to WHO Regional Committee meetings in each Region to present the objectives and results of CAPSCA, and to regional IHR Implementation meetings and training and core capacity assessment activities.

7.10 Technical Advisor training was provided for those interested in participating in CAPSCA Assistance Visits. A global standardized training model for CAPSCA is currently under review and updated information will be provided in due course.

7.11 ICAO, WHO and the participants thanked Egypt for hosting the successful meeting and invited other States to host future CAPSCA meeting since all previous meetings were held in Cairo, Egypt.

7.12 The next (6th) CAPSCA Middle East Meeting is tentatively planned to be held in first quarter of 2017. Sudan expressed interest to host the meeting and Jordan expressed interest to host 2018 meeting. This will be confirmed in coordination with ICAO and WHO.

8. KEY DISCUSSION POINTS

Assessment and Monitoring of IHR Implementation by States in the MID Region

8.1 A process for establishment of an independent assessment of IHR implementation by States is under development by WHO in the MID Region. It will involve external review of State progress in IHR implementation and is in addition to the annual country self-assessment of IHR implementation. ICAO will be invited to nominate a member of the country external evaluation team.

IHR Annex 5 and Aircraft Disinsection

8.2 WHO is developing a list of areas where disinsection or other vector control measures are recommended for conveyances arriving from these areas as prescribed in IHR Annex 5(1)*. This is expected to guide States as to whether aircraft disinsection is recommended for departing flights.

8.3 Until such time as guidance is produced and as a precautionary measure, standard WHO recommendations regarding disinsection of aircraft and airports can be implemented in order to attempt to control the vector that spreads the Zika virus (*Aedes species* mosquito). It should be noted that the decision to implement WHO disinsection recommendations is dependent on individual country risk assessment for vector control. For countries and other entities which, after risk assessment for vector

control choose to implement aircraft and/or airport disinsection, it should be done in accordance with standard WHO recommendations (http://www.who.int/ihr/ports_airports/zika-aircraft-disinsection/en/).

8.4 WHO shall publish, on a regular basis, a list of areas where disinsection or other vector control measures are recommended for conveyances arriving from these areas”.

Promotion of CAPSCA

8.5 Promotion of CAPSCA at higher levels of management is essential for the successful continuation and implementation of CAPSCA. The meeting considered that inclusion of CAPSCA in the ICAO business plan and a letter of agreement between ICAO and WHO were both essential, and that reference to CAPSCA in the Global Air Safety Programme and the Global Air Navigation Plan was highly desirable.

8.6 Inclusion of CAPSCA in Air Service Agreements between States was also considered to be desirable.

8.7 States were encouraged to identify possible partners to promote the CAPSCA Programme and to enter into formal agreements with these partners. States requested guidance material from ICAO and were encouraged to contact ICAO and WHO for assistance, when needed.

8.8 States also indicated that the development of a CAPSCA manual and supporting documentation would be beneficial and add value to its CAPSCA activities.

Airport compliance with the IHR

8.9 Preparations are in progress for WHO to issue certificates of compliance of an airport/port in accordance with the IHR (2005) core capacity at PoE (Annex 1B), it is currently expected to be ready for introduction by the end of this year. Application for such WHO certification is through the IHR National Focal Point. After commencement, WHO will post on its website a list of certified airports. Aviation personnel will be included in the WHO Airport Certification Team.

8.10 ICAO and national CAAs currently monitor airport activities by means of: Airport Certification for airports compliance with State aviation requirements (which include some public health requirements); CAA safety oversight; Universal Safety Oversight Audit Programme activities and CAPSCA Assistance Visit(s).

8.11 Continuing close collaboration of ICAO and WHO during development of WHO certification procedures is essential to avoid confusion between the two certification procedures and between other ICAO assessment processes and WHO Airport Certification procedures.

8.12 It is important to note that WHO IHR Airport Certification (which is voluntary) and the ICAO Aerodrome Certification by CAA (which is mandatory) are two separate processes and certification by one entity does not provide default recognition by the other. However, the public health elements in both certification processes will be harmonized and made clear to stakeholders.

IHR National Focal Point (NFP)

8.13 The IHR National Focal Point (which is not an individual, rather it is a State entity) is the primary means of communication with WHO by stakeholders in a State (see IHR Annex 4, 6 and 9). Stakeholders are encouraged to seek the contact details for the National IHR FP and establish a suitable communication channel. If there is any difficulty, the WHO Regional Office can be contacted through the ICAO Regional Office.

9. CLOSING OF THE MEETING

9.1 Dr. Anthony Evans thanked all participants for their active participation, cooperation and contribution that made the meeting productive and successful.

9.2 Mr. Adel Ramlawi thanked the Egyptian Ministry of Civil Aviation for hosting the event and appreciated the active contribution from ICAO HQ and WHO HQ as well as the Regional Office for Eastern Mediterranean (EMRO).

9.3 All representatives from States participating in the meeting have shown keen interest to support of CAPSCA project in the MID Region.

PROGRAMME

Day One: Monday–29 Feb 2016		
CAPSCA Management Meeting		
08:00 - 09:00	Registration	
Opening ceremony		
09:00 - 10:00	Opening remarks	President ECAA ICAO -Mr Ramlawi
	Introductions of participants and programme agenda	
	Group photo	
10:00 -10:30	Tea/coffee break	
Session I: Update of global and regional CAPSCA project implementation		
10:30 -10:45	Objectives	ICAO – Dr Tony Evans
	Summary of CAPSCA Global Symposium	
10:45 - 11:00	CAPSCA MID project update	ICAO – Mr Adel Ramlawi
11:00 – 11:15	Q&A	ICAO – Mr Adel Ramlawi
Session II: Challenges of public health emergency preparedness and response in aviation		
11:15 – 11:30	Summary of WHO/EMRO Ebola preparedness assessment mission and lessons learnt	WHO/EMRO – Ms Dalia Samhuri
11:30 – 11:45	IHR implementation in WHO/EMRO and the establishment of regional IHR Regional assessment commission	WHO/EMRO - Ms Dalia Samhuri
11:45 – 12:15	Key considerations for travel health and points of entry in the context of Zika virus infection	WHO/EMRO - Ms Dalia Samhuri
12:15 - 12:30	Q&A	ICAO – Mr Adel Ramlawi
12:30 - 13:00	Tea/coffee break	
13:30 - 14:30	Preparedness and response for Zika virus outbreak (PHEC) and collaborative arrangement	Egypt MOH – Dr Ayman Imam Egypt Air – Dr Naglaa Rawy
	Zika virus Alert	
14:30 - 15:00	Challenges in CAPSCA implementation and future plans	ICAO – Dr Ansa Jordaan
15:00	End of Day 1	
16:00	Lunch at Le Meridien Airport Hotel – hosted by Egyptian Holding Company	

<u>Day Two: Tuesday – 01 March 2016</u>		
ICAO-WHO CAPSCA Training Workshop		
09:00 - 09:05	Welcome to Day 2	
Session I: Early detection, assessment, investigation, adoption of health measures against public health emergency in aviation		
09:05 - 9:30	Key partnerships in managing Public Health Emergencies in aviation	ICAO - Dr Ansa Jordaan
09:30 – 10:00	ICAO regulatory framework and Universal Safety Oversight Audit	ICAO – Dr Tony Evans
10:00 -10:30	Tea/coffee break	
10:30-11:00	National preparedness plan for public health emergencies Aerodrome emergency plan	ICAO - Mr Adel Ramlawi
11:00- 11:30	Communication procedures for notification of suspect case on board aircraft	ICAO – Dr Jarnail Singh
11:30 – 12:00	Aircraft operator role in Public Health Emergencies	ICAO – Dr Jarnail Singh
12:00 – 12:30	Aircraft disinsection	Kuwait DGCA - Dr Mubarak Al Doub
12:30 - 13:00	Tea/coffee break	
13:00 – 13:15	Update of the IHR review committee and related matters PHEIC and emergency committees (Ebola, Polio, MERS, Zika)	WHO – Dr Ninglan Wang
13:15- 13:30	Recap of the IHR requirements and resources to assist in implementation	WHO – Dr Ninglan Wang
13:30 – 13:45	The IHR Core capacity assessment and airport certification under the IHR framework	WHO - Dr Ninglan Wang
13:45 – 14:45	Update of Outbreaks and Emergencies <ul style="list-style-type: none"> ■ MERS ■ Ebola 	CDC
14:45-15:00	Q&A	WHO - Dr Ninglan Wang
18:00	Dinner on the Nile – hosted by Egyptair	

Day Three: Wednesday – 02 March 2016

ICAO-WHO CAPSCA Training Workshop

Session II: Case study

09:00-09:15	WHO Ebola PoE related learning materials <ul style="list-style-type: none">■ WHO EVD event management■ Exit and Entry Screening	WHO/EMRO - Dr Ninglan Wang
09:15-09:30	Introduction to case study 1 (exit screening) and arrangement of group break-down	WHO - Dr Ninglan Wang
09.30-10:00	Group work	WHO - Dr Ninglan Wang
10:00 -10:30	Tea/coffee break	
10:30 – 11:30	Group work	WHO - Dr Ninglan Wang
11:30 -12:00	Plenary (group feedback)	WHO - Dr Ninglan Wang
12:00-12:10	Introduction to case study 2 (management on-board case, flight diversion, death inflight)	ICAO – Dr Jarnail Singh
12:10- 14:30	Group work including a coffee break between 12:30- 13:00	ICAO- Dr Jarnail Singh
14:30 – 15:00	Plenary (group feedback)	ICAO- Dr Jarnail Singh
15:00	End of Day 3	

Day Four: Thursday –03 March 2016		
Current issues & Technical Advisor Training		
Session III : Current issues		
09:00-10:00	Country perspective: Challenges and lessons learnt for public health emergency preparedness and response in aviation – open discussion	
10:00 -10:30	Tea/coffee break	
10:30-11:30	Emerging public health challenge: vector and vector born-disease - WHO guidance of vector surveillance and control at PoE - The IHR requirement on vector issues - The current PHEIC- Zika and its related matters	WHO - Dr Ninglan Wang
11:30 – 12:00	Tea/coffee break	
12:00 – 12:15	Key Points arising from discussions	ICAO – Dr Tony Evans
Session IV CAPSCA Technical Advisor Training		
12.15-14:00	CAPSCA in context ICAO Public Health related Standards and Recommended Practices CAPSCA references and website IHR (2005) items related to airports and airlines CAPSCA Assistance Visit methodology Lessons learned from Assistance Visits	ICAO – Dr Tony Evans ICAO – Dr Tony Evans ICAO – Dr Tony Evans ICAO – Dr Tony Evans ICAO – Dr Jarnail Singh ICAO – Dr Jarnail Singh
14:00 – 14:30	The future of CAPSCA training	ICAO – Dr Ansa Jordaan
14:30 -14:45	Closing remarks	Dr Tony Evans
14:45	End of conference	

LIST OF PARTICIPANTS

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- END -