



Public Health Emergencies

- An Aerodrome Regulatory Perspective



OVERVIEW

- Public health emergencies... What & Who?
- Aerodrome regulations... Why?
- Aerodrome operations... How?



Public Health Emergencies... What is?

“are increased risk of travelers or cargo spreading a serious communicable disease internationally through air transport and severe outbreak of a communicable disease potentially affecting a large proportion of aerodrome staff.”

ICAO Annex 14



Regulations... Why?

UAE Civil Aviation Regulation Part XI – Aerodrome Emergency Services, Facilities and Equipment

Paragraph 20.1

The objective of AEP is to anticipate the effects an emergency might have on life, property and aerodrome operations, and to prepare a course, or course of action to minimize those effects, particularly in respect of saving lives.

Paragraph 20.3.3

...the AEP shall provide for the coordination of actions and observe human factors principles to ensure optimum response by all existing agencies participating in emergency operations

Regulations... Why?

Paragraph 20.5.2

...the Aerodrome Emergency Orders / Instructions shall include procedures for: Medical Emergencies

GCAA Notice to Aerodrome Certificate Holders (NOTAC)

NOTAC 03 / 2009 – Airport Emergency Plans (Public Health Emergencies)

GCAA Information Bulletin

IB 17 / 2009 - Communicable Diseases Alert Procedures



Regulations... Why?

Further Supporting Information:

UAE Ministry of Health Directives

UAE National Crisis Emergency Management Authority Directives

EASA Safety Information Bulletin 2014-28 Ebola Virus Disease

World Health Organisation Alerts

European Centre Disease Prevention Centre for Disease Control



Aerodrome Operations... How?

GCAA NOTAC 03/2009 issued 19th July 2009 reinforced the requirements for the AEP to include procedures for the coordinating response to Public Health Emergencies.

1.3 states "in a medical emergency the degree, type of illness or injury and the number of persons involved will determine the extent to which the AEP is utilized".

At the time of writing the Swine Flu scare was apparent as was the need to formulate procedures.

Guidance within the NOTAC is to include procedures to include infectious diseases / epidemic handling procedures.



Aerodrome Operations... How?

**GCAA Information Bulletin IB 17 / 2009 - Communicable Diseases
Alert Procedures outlined the responsibilities and notification
process:**

Pilot in Command
Air Traffic Service Unit
Aerodrome Operator



Aerodrome Operations... How?

Pilot in Command (PIC) Responsibility

Shall immediately report to ATS Unit as soon as he/she becomes aware or suspects there is a traveler on board suffering from a communicable disease.

The message should include: aircraft's aerodrome departure, destination, ETA, number of travelers suspected as being affected, POBs and use the word "communicable disease" in the message to ATS unit.



Aerodrome Operations... How?

Air Traffic Service Unit (ATS) Responsibility

ATS Unit shall immediately forward details to ATS Control Tower as soon as being notified by PIC of a communicable disease.

ATS Control Tower shall immediately forward relevant details to an Aerodrome Safety Representative responsible for the implementation of the aerodrome communicable disease action plan.



Aerodrome Operations... How?

Aerodrome Operator Responsibility

Establish a clear point of contact for development of policy and procedures for handling a communicable disease event

Establish a position with responsibility for the implementation of the airport Communicable Disease Event preparedness plan, having reasonable autonomy/flexibility for rapid policy and decision-making

Establish communication links: local public health authority, airport medical services, airlines, handling agents, ATS management, local hospitals, emergency medical services, police, customs, immigration, security, airport retailers, internal/external stakeholders

Health Medical Emergency Checklist

NOTIFICATION	ACTION & CONTROL MEASURES	LOCATED	OPERATING	EFFECTIVE
NOTIFICATION PROCEDURE	Pilot in Command of Aircraft			
	Forwarded to Destination Control Tower			
	<ol style="list-style-type: none"> ETA Number of Suspected / Affected Persons on Board Communicable Disease Alert Advise &/or Confirmation 			
SOP	<ol style="list-style-type: none"> ATS AEP 			



Health Medical Emergency Checklist

RADIO CONFIDENTIALITY TO BE IMPLEMENTED

NOTIFICATION PROCEDURE	<ol style="list-style-type: none"> 1. National Level 2. Aerodrome Level 3. AEP Level 			
AERODROME SAFETY REPRESENTATIVE RESPONSIBLE	<ol style="list-style-type: none"> 1. Communicable Disease Coordinator 2. Identification of Health Emergency (AEP) 3. Isolation & Quarantine areas AIRCRAFT 4. Isolation & Quarantine areas TRAVELLERS 5. Coordination of Response to all existing agencies <ol style="list-style-type: none"> i. SOP flowchart ii. Emergency Contact details / numbers 24hrs response 1. Coordination Internal Response 2. Coordination External Responders 3. Communications with NCEMA 4. Discretion (Media) as appropriate 			
IMPLEMENT CONTROL MEASURES	<ol style="list-style-type: none"> 1. SOP 2. Implementation of AEP / Control Measures (Convene Emergency Planning Committee focus group for emergency) 3. Specialist Medical Personnel &/or PPE 4. Scanning Equipment 5. Scanning Procedures 6. Transportation 			



Health Medical Emergency Checklist

NOTIFICATION	ACTION & CONTROL MEASURES	LOCATED	OPERATING	EFFECTIVE
IMPLEMENT CONTROL MEASURES	<ol style="list-style-type: none"> 1. Medical Assistance 2. Public Health Authority 3. Records 			
CONTROL MEASURES	<ol style="list-style-type: none"> 1. Scanning appropriate to Risk 2. Cleared 3. Suspected / at Risk Patient <ol style="list-style-type: none"> i. Appearing obviously unwell ii. Persistent coughing iii. Impaired breathing iv. Persistent diarrhea v. Persistent vomiting vi. Skin Rash vii. Bruising or bleeding without previous injury viii. Confusion of recent onset 1. Suspected / at Risk Patient Area) 2. Confirmed Patient 3. Confirmed Patient Area 4. Isolation 5. Transportation to Medical Centres / Hospitals 6. Morgue Facilities 7. Decontamination 8. Return to Normal Operations 			



THANK YOU.