

Non-pharmaceutical interventions recommended at airport level in Europe

EASA-ECDC COVID-19 Aviation Health Safety Protocol (AHSP)

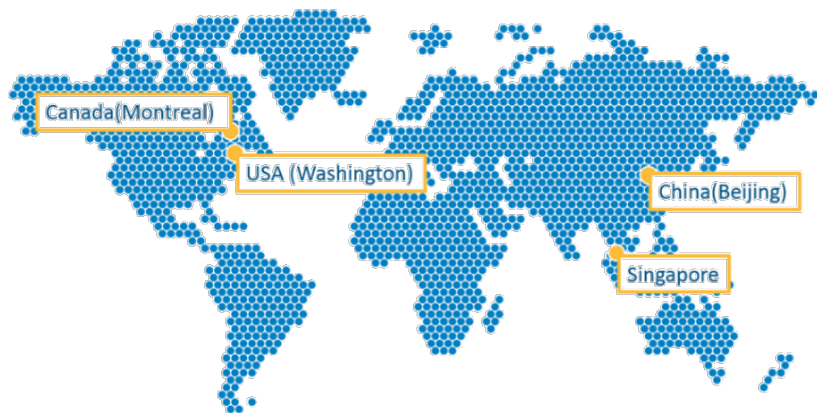
‘Flying in the Covid-19 Era’ Workshop, 04

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EASA Medical Expert

Your health safety is our mission

Facts and figures



Established
2002

19 years
in operation

800+

aviation experts
& administrators

Headquarters in
Cologne
Office in
Brussels

31 EASA member states
= 27 + 4
EU + Switzerland, Norway
Iceland, Liechtenstein

Guidelines development

Article 91 – “EASA shall, within its field of competence, contribute to a timely response to and mitigation of aviation crises, in coordination, with other appropriate stakeholders”

Participation in specialised bodies

- ICAO CAPSCA
- MEG

Crisis planning and management

- EACCC
- EC response to PHEs
- EU Healthy Gateways

Institutional relations

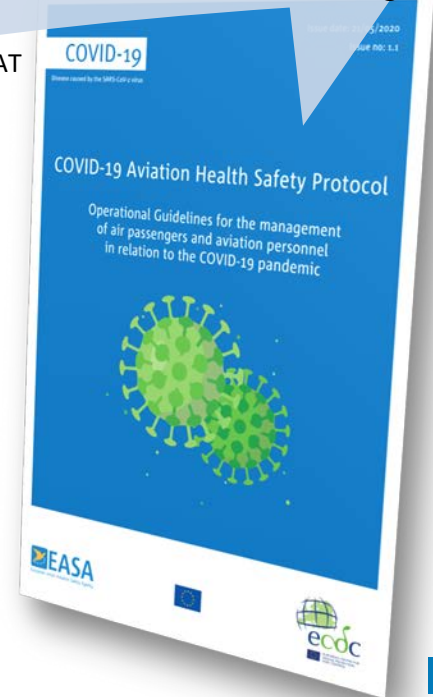
- EASA visit to DG SANTE
- DG SANTE visit to MAB
- Health Security Committee
- Integrated Political Crisis Response (IPCR)

Guidelines development

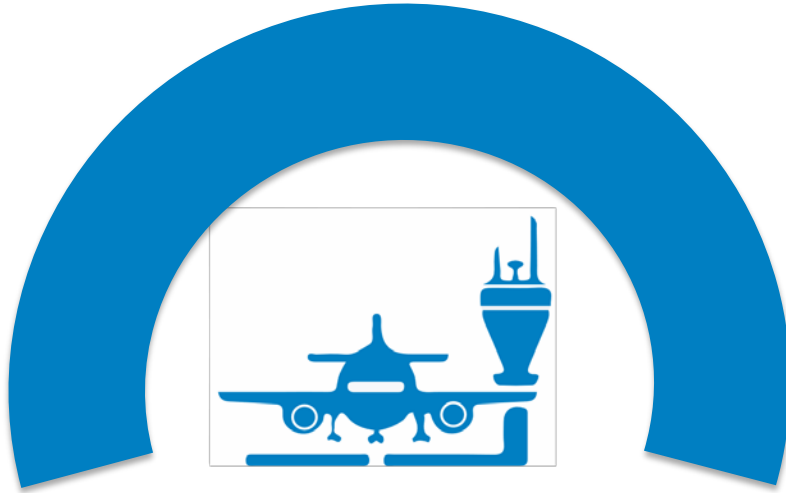
- ECDC
- ICAO EUR/NAT
- MAB & SAB
- MEG

Publication

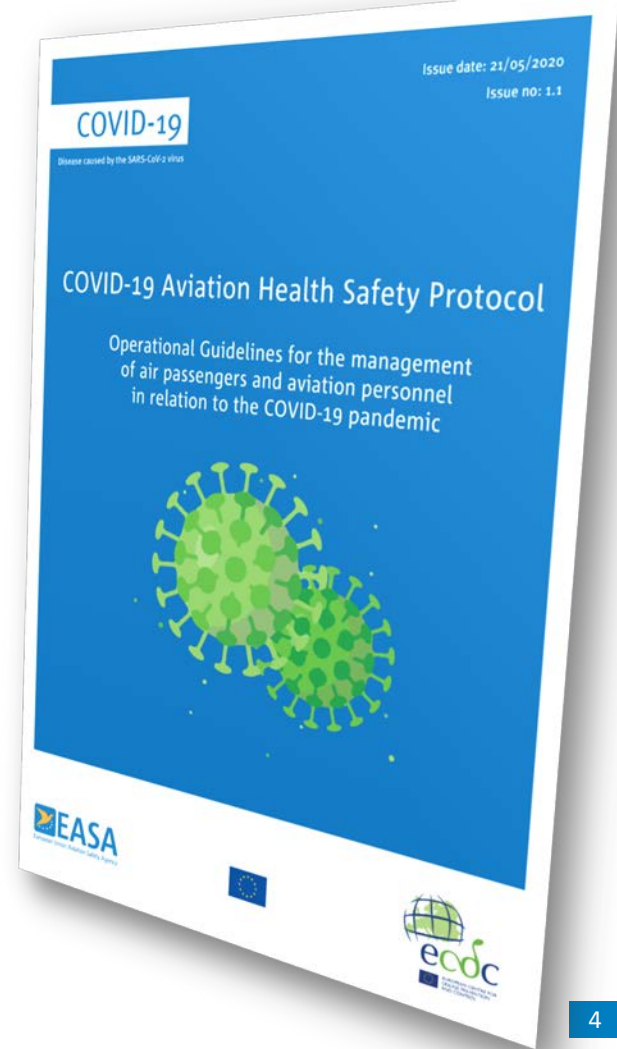
- Promotion
- Liaison
- Monitoring



Purpose



- ➔ Need to ensure **safe and secure operations** and **restore public confidence**
- ➔ Need to ensure a **harmonised EU-wide approach** to reduce complexity for operators and travellers
- ➔ **Coordination, communication** and **planning** essential



Structure



At all times

Before the
airport

At the
airport

On-board
the aircraft

Arriving and
transit

Measures presented (1/4)

At all times

Hand hygiene,
cough etiquette
and face masks

Cleaning and
disinfection

Protection and
screens

Distancing where
possible

Management of
unruly
passengers



Measures presented (2/4)

Before the airport

Complete a
statement of
health

Don't travel if
you have
symptoms

Ensure medical
face masks and
sanitary gel

Leave enough
time

Advance check-in
and ready
documents



Measures presented (3/4)

At the airport

Access only to
travellers

Minimise carry-
on luggage

Physical
distancing &
passenger flows

Enhanced
ventilation

Thermal
screening



Measures presented (4/4)

Arriving and transit

Disembarking

Personal hygiene

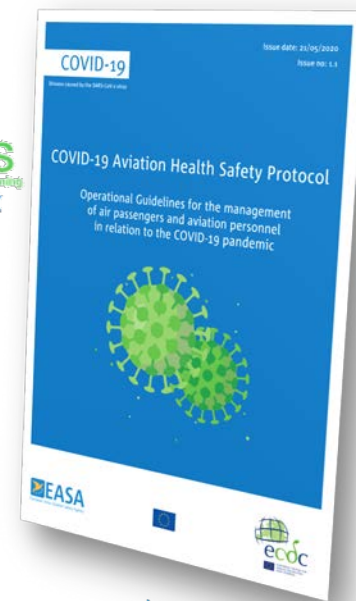
Thermal
screening

Baggage claim

Exit and onward
travel



We started here...



EASA Program to Monitor the Protocol Implementation

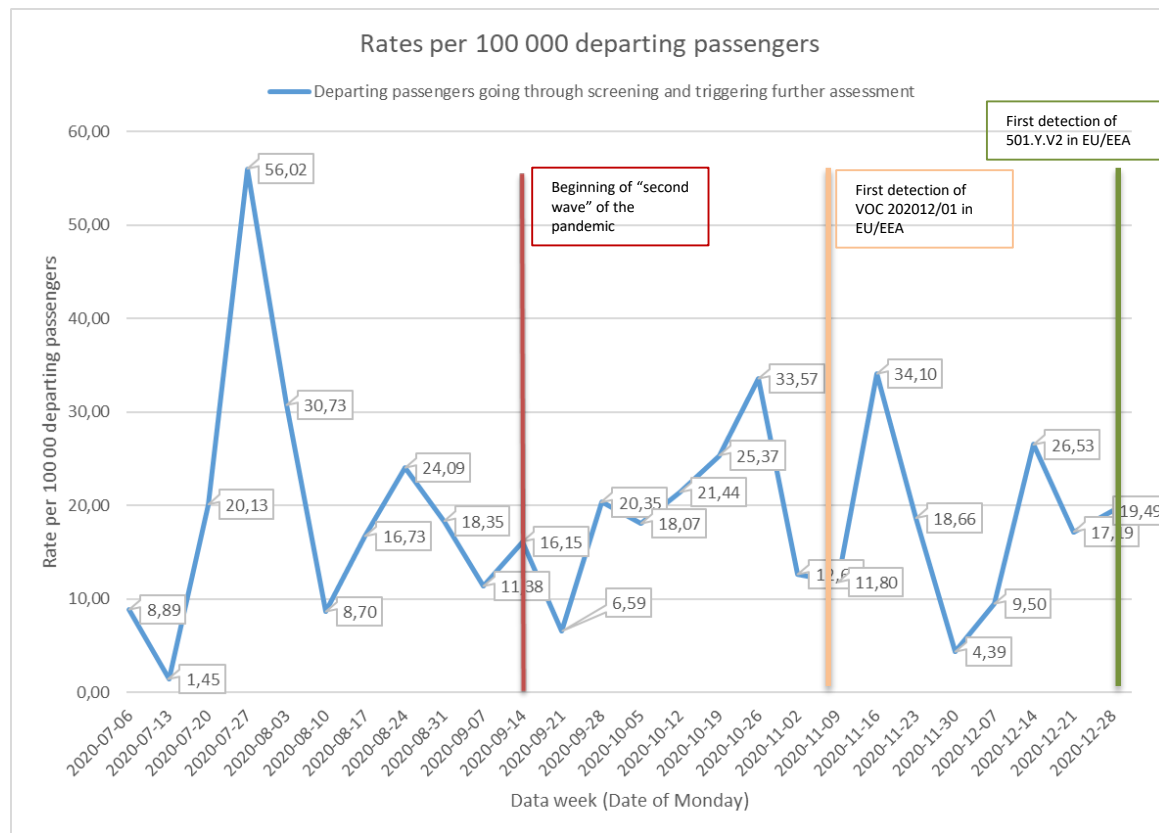
- ✈ 53 airport operators (123 reporting airports) and 55 airlines have signed the Aviation Industry Charter, covering almost 50% of European air traffic
- ✈ On average, ca 90% of Charter signatories submit data every week
- ✈ Weekly traffic analysed: In the peak weeks in 2020, 7 million passengers were served by participating airports and 3 million passengers were carried by participating airlines
- ➔ A monthly survey monitors the implementation of the protocol measures, looking at the passenger journey in terms of the COVID-19 transmission risk.



Passengers at departure airports

→ The rate of passengers who after health screening at the departure aerodrome are **subject to further assessment** has been **fluctuating at a low level**.

- VOC 202012/01 is the mutation of SARS-CoV-2 that was first detected in the United Kingdom.
- 501.Y.V2 is the mutation of SARS-CoV-2 that was first detected in South Africa (Source: ECDC)

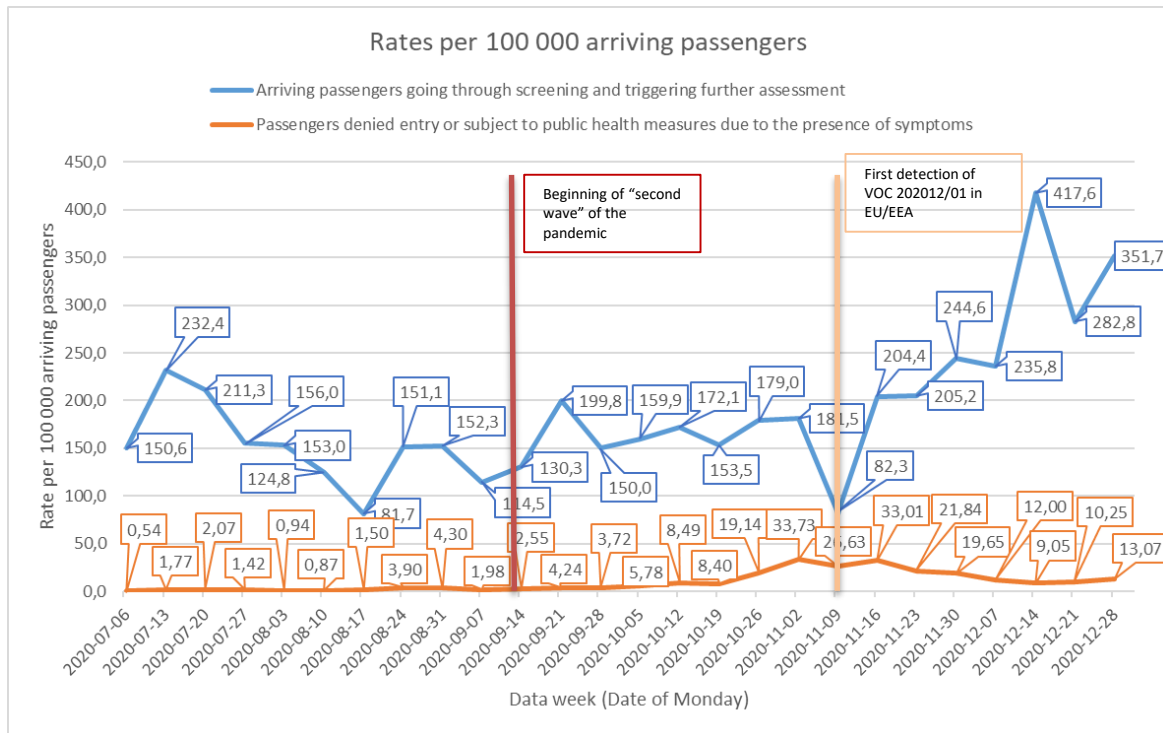


Passengers at arrival airports

→ The rate of **passengers** who after health screening at the arrival aerodrome **are subject to further assessment** has **increased during the second wave of the pandemic**. It should be noted that there are a number of airports who perform health screening for arriving passengers, but not for departing passengers.

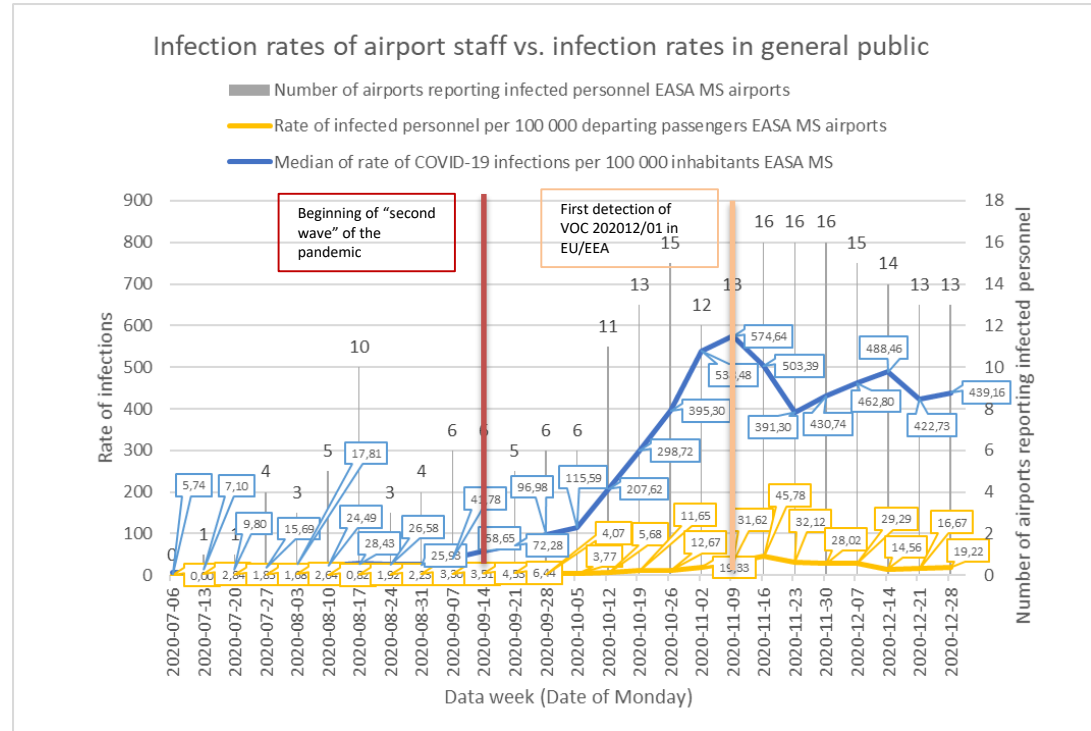
→ The rate of **passengers who are denied entry** or subject to public health measures due to the presence of symptoms have also **increased**, but are **at a low level**.

→ VOC 20212/01 is the mutation of SARS-CoV-2 that was first detected in the United Kingdom (Source: ECDC)



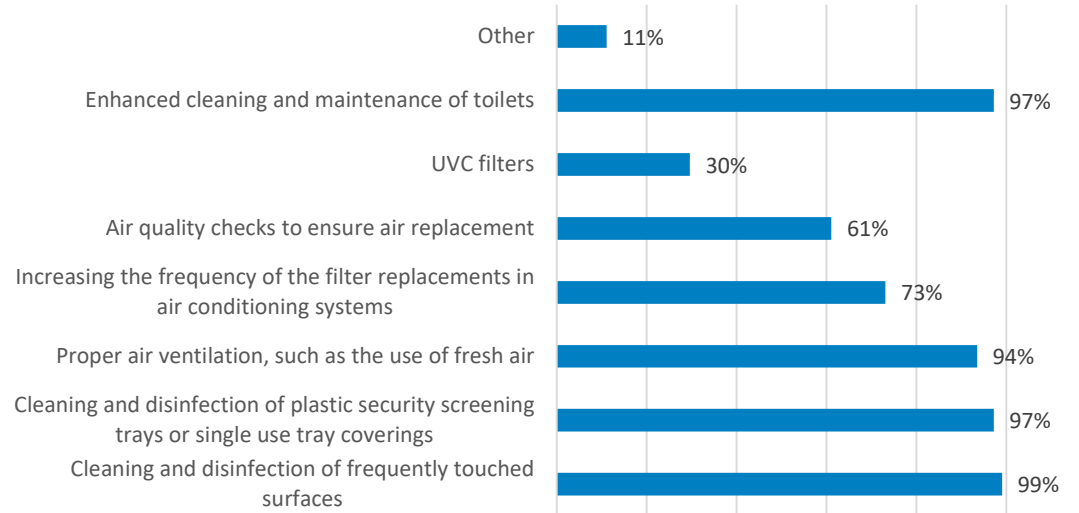
Infected airport staff (EASA MS)

- The **rate of infections amongst airport personnel** at EASA MS airports is **low**.
- The **airport staff infection rate is considerably lower than the median infection rate of the general public** in the EASA MS, and the increase in infection rates observed in the general public is not present amongst EASA MS airport personnel.
- VOC 20212/01 is the mutation of SARS-CoV-2 that was first detected in the United Kingdom (Source: ECDC)



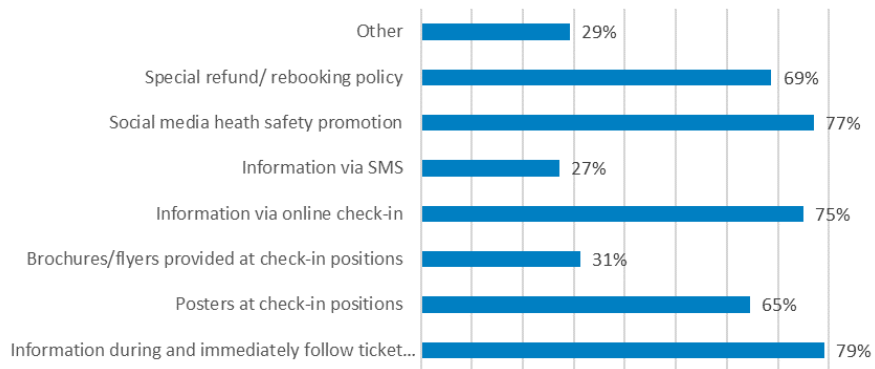
Maintaining Clean Air and Surfaces

Airport Surfaces

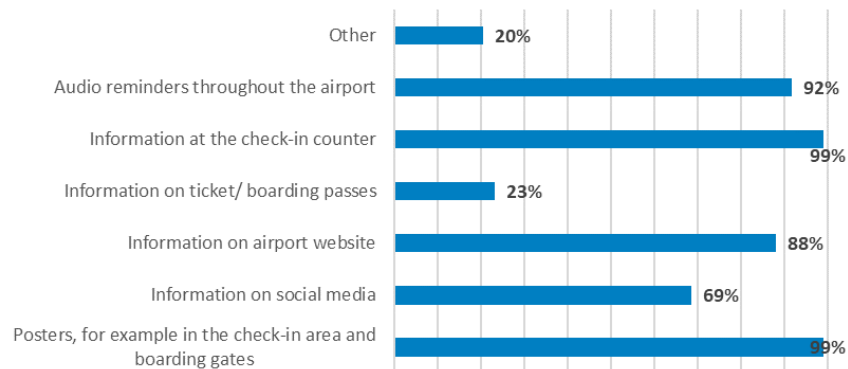


Discouraging Symptomatic Travellers

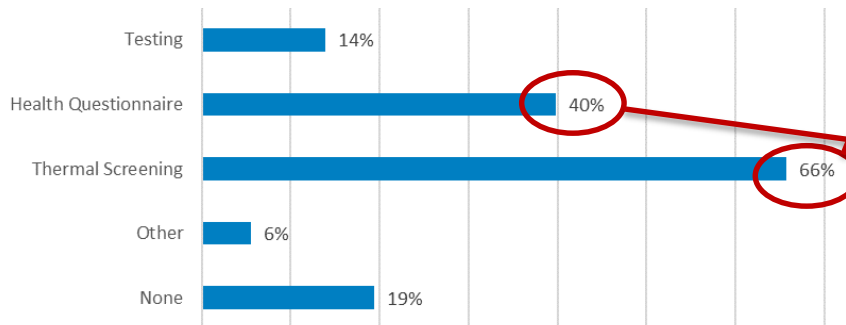
Airline COVID-19 Policy Information to Passengers



Airport COVID-19 Policy Information to Passengers



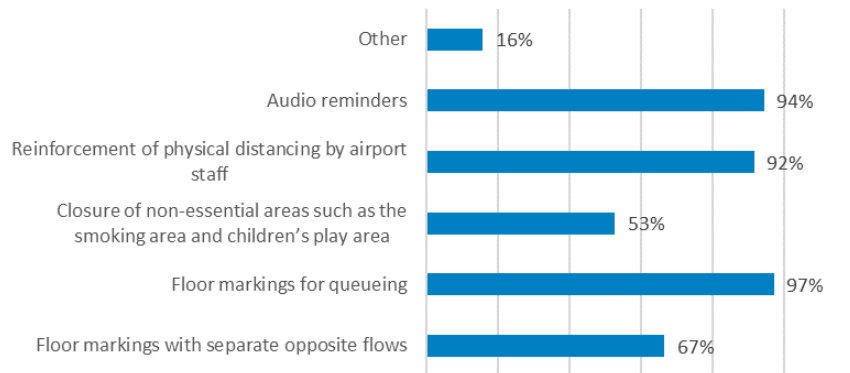
Airport Passenger Screening



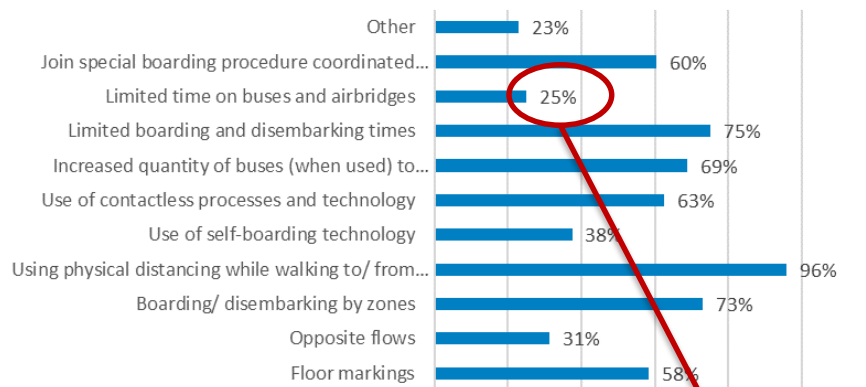
Higher level of implementation of thermal screening than health questionnaires.

Physical Distancing Measures

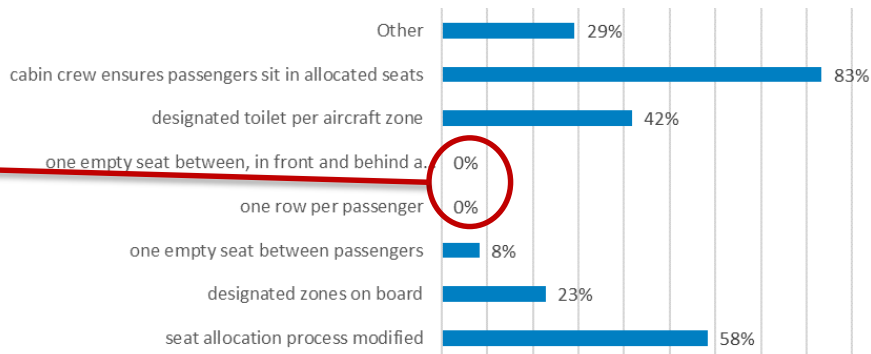
Airport Distancing Measures



Airline Distancing Measures



Physical Distancing Measures In-flight



Airlines are apparently not implementing measures to separate passengers

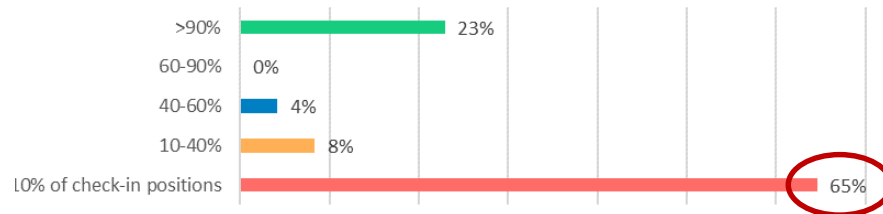
Airlines and airports need to consider the flow of passengers from one part of the journey to another

Clean Air: Masks and Ventilation

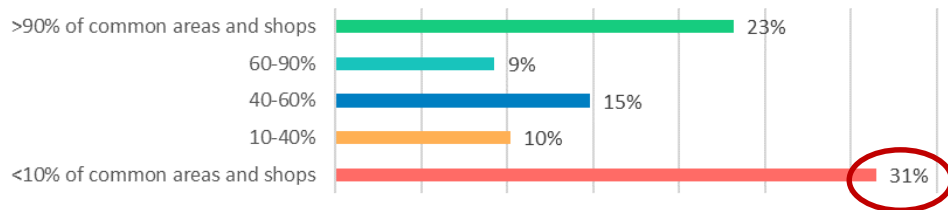
Staff at Entry Doors Checking for Face Masks



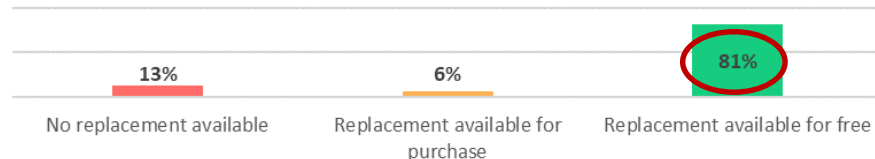
Medical Face Masks Available at Check-in Positions



Staff in Common Areas and Shops Checking for Face Masks



Availability of Masks on Flights >4 Hours Duration



Good to see that masks are available on-board, but they need to be used and available throughout the airport.

AHSP Implementation

✈ Main issues reported:

- ❑ Physical distancing at airports
- ❑ Wearing surgical/medical face masks on-board aircraft

✈ Room for improvement:

- ❑ Processing time at boarding and baggage claim
- ❑ Availability of medical face masks once in the airport and the availability of hand sanitising gels at check-in positions
- ❑ Seat allocation / keeping seats unoccupied between, in front and behind passengers (where possible)

Summary – Protocol implementation

- The measures proposed in the Protocol are working and, where they are fully implemented, the aviation environment can be considered safer as regards transmission risks compared to the general society
- Slowdown in traffic recovery, high levels of new COVID-19 cases and new virus strains with increased transmissibility circulating in Europe:
 - increasing the probability of having positive asymptomatic passengers on board
 - proper implementation of the Protocol on the ground and in the air must remain a priority
- Areas that require focus of the competent authorities:
 - availability of medical face masks at airports and their use on board aircraft
 - maintaining physical distancing throughout the passenger journey

Next steps

- Update of the Protocol and its Addendum
 - discussions ongoing with ECDC on the content and the timeframe for the next update
 - the Addendum to be tackled first to reflect [the EU Council's updated recommendation on measures affecting free movement](#)
- Monitoring Programme as well as [the training modules and implementation checklists for the NAAs](#) to be adapted accordingly

Thank you for your attention



Questions

Your safety is our mission.

easa.europa.eu/connect



Your health is also our mission.