ADVISORY INFORMATION *2/2021 REV1*

5 July 2021

COVID-19 GUIDELINES FOR THE AVIATION INDUSTRY

Introduction

Since its emergence, the COVID-19 pandemic has significantly impacted global air transport. Airports around the world have seen a year-on-year decline in passenger traffic volume throughout 2020 and continue towards 2021. Aircraft movements similarly have also reduced over the same period.

The Civil Aviation Authority of Malaysia (CAAM) has worked closely with Ministry of Transport (MOT) and Ministry of Health (MOH) in partnership with aviation industry to develop and implement health safety measures to safeguard public health and the well-being of passengers, air crew, airport visitors and staffs during this pandemic.

This information is applicable to the airport operator, air operators and other providers of airport services and facilities in Malaysia covering all phases of an air transport journey. The measures contained in this information incorporate existing requirements as well as guidance issued by CAAM. In addition, reference may also be made to the latest guidance (Take-off: Guidance for Air Travel Through the COVID-19 Public Health Crisis) published by the International Civil Aviation Organization (ICAO) for further aviation health safety measures to be implemented.

This information is regularly reviewed to consider emerging issues or new developments in the COVID-19 situation. It is not intended to prevail over any written law in Malaysia or any Directives, Directions or Circulars issued by CAAM in respect of any matter relating to health safety measures to mitigate risk of COVID-19 in aviation.

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for Civil Aviation Authority of Malaysia
5 July 2021

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1 OVERVIEW

1.1 This information provides a framework for addressing the impact of the current COVID-19 pandemic on the global aviation transportation system. The content to this information includes mitigation measures needed to reduce public health risk to air passengers and aviation workers while strengthening confidence among the travelling public, aviation workers, the global supply chain and governments.

1.2 This will assist in accelerating demand for essential and non-essential air travel impacted by COVID-19. This information also points to guidance material developed by international industry organisations which aims to assist in mitigating the impact of COVID-19.

1.3 With help and guidance from the civil aviation stakeholder community, ICAO recommends a phased approach to enable the safe return to high-volume domestic and international air travel for passengers and cargo. The approach introduces a core set of measures to form a baseline aviation health safety protocol to protect air passengers and aviation workers from COVID-19.

1.4 These measures will enable the growth of global aviation as it recovers from the current pandemic. It is, however, important to recognise that each stage of that recovery will need a recalibration of these measures in support of the common objectives, which are to safely enable air travel, incorporate new public health measures into the aviation system, as well as support economic recovery and growth. Our work must recognise the need to reduce public health risk while being sensitive to what is operationally feasible for airlines, airports and other aviation interests. This is essential to facilitate the recovery during each of the forthcoming stages.

1.5 The information consists of measures, guidance and support, as follows:

a) **Public Health Risk Mitigation Measures** - This section contains measures to be put in place by stakeholders in accordance with the Movement Control Order (MCO) and COVID-19 Management Guidelines in Malaysia No.5/2020 that are applicable to airport staff, air crew, passengers or airport visitors within the premises of the airport.

b) **Airport Guidance** - This section contains the safe management measures applicable to the airport operator to adopt and implement and to provide direction, in the form of rules, practices, requirements and instructions, to which airport operators and, regulatory authorities, persons or companies engaged in airport operations services, works, activities and managing facilities - on and in vicinity of airport particularly during the recovery period of the COVID-19 pandemic.

c) **General Aviation Guidance** - This section contains the guidance to assists General Aviation (GA) pilot operations following the easing of the Movement Control Order and related restrictions on recreational flying.

d) **Flight Operations Guidance** - This section contains the measures to protect air crew, which include crew reporting for duty, crew-to-crew interaction while on duty on board the aircraft, and layover procedures. This section applies to air operators.

e) **Airworthiness Guidance -** This section contains the measures to ensure that while operating in the midst of this crisis, it is essential to maintain safety at both personnel and aircraft level.

f) **Aviation Security Guidance** - This section contains the guidance to provide clarity of the measures to be undertaken to ensure the protection of safety screening personnel to discharge their duties safely and appropriately.

g) **Cargo Guidance** – This section contains guidance to operators on how to addresses aviation public health including physical distancing, personal sanitation, protective barriers point of transfer to the ramp and the loading and unloading, and other mitigation procedures.

h) **ATM Support** - This section contains the support developed by Air Traffic Management in order to provide its continuous attention and practices of high-level safety and health measures in ensuring that support for all operators continue to be delivered efficiently.

2 OBJECTIVES

2.1 In the aftermath of the COVID-19 outbreak, CAAM has developed this information, a set of measures aimed at reducing health risks to air travellers, aviation workers and the general public. These measures, applicable to stakeholders, airport operators, air operators and others in the air transport industry and designed to enable a consistent and predictable travel experience. The implementation of these measures will facilitate and strengthen the global recovery from the COVID-19 pandemic.

2.2 The Civil Aviation Authority of Malaysia (CAAM) has reviewed the guideline and subsequently prepared the national guideline to facilitate and support the operations of airport and air operators. It is hoped that as more countries adopt these standardised guideline, it would support for more economic activities and directly spur the growth of demand for aviation services. This information also provides guidance for related stakeholders involved to develop plans to mitigate the risk of COVID-19 in aviation to facilitate the recovery of air travel.

3 GUIDING CONSIDERATIONS

3.1 The measures contained in this information is guided by the following considerations:

a) Remain focused on fundamentals: safety, security, and efficiency;

b) Promote public health and confidence among passengers, aviation workers, and the general public; and

c) Recognise aviation as a driver of economic recovery.

3.2 Based on these guiding considerations, stakeholders involved should agree that these measures should be:

a) Implemented in a multi-layer approach commensurate to the risk level and shall not compromise aviation safety and security;

b) Able to capitalise on the sector's longstanding experience and apply the same principles used for safety and security risk management. This includes monitoring compliance, reviewing the effectiveness of measures at regular intervals, and adapting measures to changing needs as well as improved methods and technologies;

c) Able to minimise negative operational and efficiency impacts while strengthening and promoting public confidence and aviation public health;

d) Consistent and harmonised to the greatest extent appropriate, yet flexible enough to respond to regional or situational risk-assessment and risk-tolerance. The acceptance of equivalent measures based on shared principles and internationally recognised criteria will be a fundamental enabler to restore air services on a global level;

e) Supported by medical evidence and consistent with health best practices;

f) Non-discriminatory, evidence-based and transparent;

g) Cost effective, proportionate and not undermining to the equal opportunity to compete;

h) Highly visible and communicated effectively and clearly to the aviation community as well as the general public; and

i) Consistent with State obligations under the Chicago Convention and other international treaties and agreements, as well as with standards and recommended practices applicable to aviation and public health.

4 PUBLIC HEALTH RISK MITIGATION MEASURES

4.1 Objective

4.1.1 In line with the recent implementation of MCO by the government, related stakeholders operating at the airport is responsible for ensuring that the measures are adhered to by their staff, passengers, and other customers and airport visitors where applicable. This Section summarises the key measures that must be implemented in accordance with the MCO and MOH COVID-19 Management Guidelines No.5/2020 imposed by the government of Malaysia.

http://covid-19.moh.gov.my/garis-panduan/garis-panduan-kkm

4.2 Face Mask and Other Protection

4.2.1 Masks remain a vital part of the preventive and control measures that can limit the spread of certain respiratory viral diseases, including the recent COVID-19. Masks can be used either for protection of healthy persons or for source control (worn by the infected person to prevent onward transmission). The use of mask should be practiced along with frequent hand hygiene, social distancing and other Infection Prevention and Control (IPC) measures to prevent the spread of COVID-19.

4.2.2 Non-medical masks are recommended for those without symptoms in areas where COVID-19 is widespread and distancing cannot be managed among workers such as social workers, cashiers, waiters etc. and in public settings such as public transport, workplaces, grocery stores and crowded environment. For non-medical masks, it is recommended to use 3 layers' cloth masks which comprise of:

a) An innermost layer of a hydrophilic material (e.g. cotton or cotton blends);

b) An outermost layer made of hydrophobic material (e.g. polypropylene, polyester, or their blends) which may limit external contamination from penetration through to the wearer's nose and mouth;

c) A middle hydrophobic layer of synthetic non-woven material such as polypropylene or a cotton layer which may enhance filtration or retain droplets.

4.2.3 Face coverings and medical masks should be worn consistent with the applicable public health guidelines, including whom to exempt (e.g. young children or passengers that cannot tolerate a face covering or medical mask such as individuals with physical disabilities, respiratory or other conditions). Always follow best practice about when and how to wear, remove, replace, and dispose of face coverings and medical masks in addition to proper hand hygiene following removal. Face coverings should be two or more layers and fully cover the nose and mouth. The face covering or medical mask should be worn during all phases of flight except while eating.

4.2.4 Refer to Annex 8a: Guidance On the Use of Masks with Regards to Covid-19 Pandemic, MOH COVID-19 Management Guidelines No. 5/2020.

http://covid-19.moh.gov.my/garis-panduan/garis-panduan-kkm/Annex_8a_RECOMENDATIONS_ON_FACE_MASK.pdf

4.3 Social Distancing

4.3.1 To the extent feasible, people should be able to maintain social distancing consistent with World Health Organization (WHO) or applicable MOH guidelines. Where this distancing is not feasible (for example in aircraft cabins), adequate risk-based measures should be used including allowing limited baggage in the cabin, orderly boarding processes, disembarkation announcements and procedures, and limiting unnecessary movement of passengers and cabin crew on board. Related stakeholders must ensure and maintain safe distancing among individuals within its premises in the airport.

4.3.2 *Refer to Annex 26: Covid-19 Guidelines for Physical Distancing at the Workplace, Home and for Individuals*, *MOH COVID-19 Management Guidelines No. 5/2020.*

http://covid-19.moh.gov.my/garis-panduan/garis-panduan-kkm/ANNEX_26_COVID-19_GUIDELINES_FOR_PHYSICAL_DISTANCING_AT_THE_WORKPLACE_HOME_AND_FOR_INDIVIDUALS.pdf

4.4 Sanitisation and Disinfection

4.4.1 High touch surfaces should be cleaned and disinfected as prescribed by public health authorities with frequency based on operational risk assessment.

4.4.2 Refer to Annex 36, Garis Panduan Pembersihan dan Disinfeksi di Tempat Awam. MOH COVID-19 Management Guidelines No. 5/2020.

http://covid-19.moh.gov.my/garis-panduan/garis-panduan-kkm/Annex_36_GARIS_PANDUAN_PEMBERSIHAN_DAN_DISINFEKSI_DI_TEMPAT_AWAM_03.04.2020.pdf

4.5 Health Screening

4.5.1 States should ensure that health screening, at exit or entry, is conducted in accordance with the protocols of the relevant health authorities. Screening could consist of pre-flight and post-flight health declarations, non-invasive temperature measurement and/or visual observation conducted by employees trained to recognise signs suggestive of COVID-19 and in the use of these measures. Such screenings could identify ill persons that may require additional examination prior to working or flying.

4.5.2 The availability of such information and insights can be leveraged in a risk-based approach, which will further contribute to reassure the travelling public. This

screening may be conducted upon entry and/or exit. Temperature and other symptom-based screening could be a part of a multi-layered approach but should not be relied on as a stand-alone mitigation measure as it has limited effectiveness, in detecting COVID-19 cases. The virus can be associated with mild symptoms or asymptomatic infections and is transmitted from both pre-symptomatic or asymptomatic individuals.

4.5.3 If a person shows signs and symptoms suggestive of COVID-19, or their declaration form shows a history of respiratory infection or/and exposure to high-risk contacts, appropriate follow up would be necessary, including a focused health assessment performed by healthcare personnel either in a dedicated interview space at an airport, or in an offsite pre-identified health care facility.

4.5.4 Refer to Annex 9, Management of Covid-19 at Point of Entry. MOH COVID-19 Management Guidelines No. 5/2020.

http://covid-19.moh.gov.my/garis-panduan/garis-panduan-kkm/ANNEX_9-MANAGEMENT_OF_COVID-19_AT_POINT_OF_ENTRY_17062021.pdf

4.6 Health Monitoring and Contact Tracing

4.6.1 Methods for the collection of passenger and employee contact information valid for the destination should be in place, including through web applications. Such information is critical for health observation of incoming travellers and would also be used to support MOH in contact tracing should this be warranted following the identification of a COVID-19 case. Updated contact information should be requested as part of the above mentioned declaration. Public Health Passenger Locator Form (PLF) should be distributed during flight and collected afterwards and handed over to relevant health authorities.

4.6.2 Malaysia is taking all the necessary precautionary measures against the spread of COVID-19 infection into the country. If people who have travelled or stayed in affected countries over the past fourteen (14) days, they are kindly requested to declare their health status on the overleaf of this card as required under Section 15 of the Prevention and Control of Infectious Diseases Act 1988 [Act 342]. Any person who refuses to furnish any information under this Act or gives false information, commits an offence and if found guilty shall be punished with imprisonment or fine or with both.

4.6.3 Refer to Annex 9 Management of Covid-19 at Point of Entry and 12 Management of Closed Contacts of Confirmed Case, MOH COVID-19 Management Guidelines No. 5/2020.

http://covid-19.moh.gov.my/garis-panduan/garis-panduan-kkm/Annex_12_Management_of_Close_Contacts_of_Confirmed_Case.pdf

4.7 Health Declarations

4.7.1 Where feasible and justified, health declaration forms or health attestations for COVID-19 should be used for all passengers, in line with the recommendations of relevant health authorities. Self-declarations in electronic format prior to airport arrival should also be encouraged to avoid crowding at airports.

4.7.2 People who travel to Malaysia need to register in MySejahtera application (https://mysejahtera.malaysia.gov.my/). Essential information such as travel information (date and time, flight information, a port of embarkation) as well as health declaration needs to be registered in the MySejahtera application at least one (1) day from the date of departure.

4.7.3 Refer to Annex 9, Appendix 1 Health Declaration Form for Passengers on Board COVID-19, MOH Management Guidelines No. 5/2020.

http://covid-19.moh.gov.my/garis-panduan/garis-panduan-kkm/Appendix_1_Health_Declaration_Form_COVID-19_17062021.pdf

5 AIRPORT GUIDANCE

5.1 General

5.1.1 The Airport Guidance contains specific guidance addressing elements for airport terminal building, cleaning, disinfecting, hygiene, physical distancing, staff protection, access, check-in area, security screening, airside areas, gate installations, passenger transfer, disembarking, baggage claim and arrivals areas.

5.1.2 The Airport Guidance will ensure the operations of airport in Malaysia provides a sense of confidence to all consumers in our recovery period of the COVID-19 pandemic. The Airport Guidance is intended to provide direction, in the form of rules, practices, requirements and instructions, to which airport operators and, regulatory authorities, persons or companies engaged in airport operations services, works, activities and managing facilities - on and in vicinity of airport particularly during the recovery period of the COVID-19 pandemic.

5.2 Departure Flow

5.2.1 Objectives

5.2.1.1 To provide clarity on measures to manage departing passengers, including access to Terminal, the upkeep of cleanliness and disinfection procedures within Terminal, as well as health measures, and to limit queues and avoid crowds.

5.2.2 Airport Curb Side

5.2.2.1 Landside vehicle access to Terminal should be reorganised to facilitate and ease flow, avoiding congestion and crowd. Passengers, and accompanying persons in situations such as for passengers with disabilities, reduced mobility or unaccompanied minors, shall be able to alight safely without hindrance and provided with short direct route to the terminal.

5.2.2.2 Passenger, and any persons intending to enter terminal, shall be registered prior to entry into terminal to collect more detailed information which can be used for health information and contact tracing purposes.

5.2.3 Entry to Terminal

5.2.3.1 Terminal access shall be restricted to passengers and accompanying persons, and workers, to avoid crowds and queues which would then enhance risks of transmission as well as create potential security vulnerability.

5.2.3.2 Passengers shall wear masks or other face coverings before entering the terminal in accordance with applicable health guidelines.

5.2.3.3 Temperature screening are mandated and should be conducted using thermal scanner at designated entry points to Terminal to scan the temperature of multiple passengers rapidly and unobtrusively so as to minimise the impact on operations.

5.2.3.4 The screening needs to be carried out by trained personnel who are able to decide if a passenger and accompanying persons are allowed to enter Terminal based on body temperature limit. The screening staff should have all other required equipment at their disposal.

5.2.3.5 Appropriate procedures should be implemented to coordinate with relevant authorities in order to respond to any passengers showing signs of illness.

5.2.4 Cleaning and Disinfection

5.2.4.1 Cleaning and disinfection shall be conducted according to the standard operating procedures outlined by the Ministry of Health. Equipment and facilities in the Terminal should be cleaned and disinfected on regular basis. The frequency of the sanitising should be established, communicated, and appropriate resources need to be put in place to enforce it. Cleaning and disinfection should be more frequent with the increased in number of passenger in the Terminal.

5.2.4.2 Cleaning and disinfection should be done effectively, including the concentration of product, method and contact time of disinfectants, and addressing areas that are frequently touched and most likely be contaminated – information desks, check-in areas, self-service kiosks, immigration areas customs areas, security screening areas and boarding areas including seats provided prior to these areas, escalators and lifts and handrails, washrooms, toilets and baby changing areas. Luggage trolleys, carts, wheelchairs, trays and collection points should be cleaned with dispensable wet wipes or disinfectants and disposal bins should be made available.

5.2.5 Physical Distancing

5.2.5.1 Physical distancing is an effective measure to limit transmission and should be applied to the maximum extent possible throughout the airport. Accordingly, passenger flow through the Terminal - check-in, immigration, security, departure lounge and boarding – needs to be modified to ensure physical distancing.

5.2.5.2 The physical distancing applied shall be at least 1 – 2 meters between all individuals. Passengers shall wear masks at all times whilst in the Terminal.

5.2.6 Staff Protection

5.2.6.1 Sufficient protection for staff members should be made available including personal protective equipment (PPE), health screening programme for staff,

scheduling staff roster in teams and shifts, hand sanitiser access, and physical distancing plan for workstation. PPE may also include gloves, medical masks, goggles, and face shield based on the risk of exposure.

5.2.6.2 For staff and teams working shifts, conduct contact-free handovers, i.e. via telephone, videoconference, electronic logs, or at a minimum through physical distancing. Online training and virtual classrooms should be conducted for staff.

5.2.6.3 The use of physical separators, i.e. sneeze guard protector between staff and passengers are recommended in areas of repeat exchanges and transactions

5.2.7 Check in Areas

5.2.7.1 To minimise the time spent at an airport, passengers should be encouraged to complete as much of the check-in process as possible before arriving at the airport. Online check-in, mobile boarding pass, off-airport baggage tagging and other initiatives will contribute to the reduction in the amount of contact with airport staff and enabling such types of off-airport processes

5.2.7.2 Physical distancing should be implemented both at counters and self-service kiosks. Implement measures that can reduce congestion within check in areas through the planning and monitoring of passenger flows. Signage, floor markings and announcements via public address will encourage physical distancing.

5.2.7.3 Avoid high level of physical contact that will increase probability of contamination. Face-to-face interaction should be at minimum with careful attention to the management of passenger flow.

5.2.7.4 Where self-service kiosks and baggage self-service devices are in use, airlines should proactively guide passengers to self-service drop options to minimise the interactions between passengers and check-in agents. Hand sanitiser shall be made available within kiosks touch screens and self-bag drops.

5.2.8 Security Screening

5.2.8.1 Physical distancing measures are to be maintained at the security screening checkpoints, including during the screening process. Access to security screening checkpoint shall be controlled to avoid congestion and long queue while maintaining the desirable throughput.

5.2.8.2 Hands sanitisers and disinfection products should be provided to passengers and screeners at security screening checkpoint. Passengers and screeners should maintain physical distancing to the extent possible. Screeners shall wear the appropriate PPE to mitigate the risk of exposure.

5.2.8.3 Markings should be established on the ground within the queueing area to indicate the proper distancing.

5.2.8.4 Security screening personnel should be exempted from carrying health and safety related screening to ensure they remain focused on security screening and related process.

5.2.9 Terminal Airside Areas

5.2.9.1 Where the post-security terminal airside area, including boarding gates and lounges, is an area of high passenger movement, physical distancing shall be practised while also allowing passengers with access to the retail, duty-free concessions and food and offerings.

5.2.9.2 Physical installations, floor markings and adapted wayfinding need to be provided. Self-serving options, where passengers have limited contact with retail, food and beverages staff, should be encouraged. Enhanced cleaning and hygiene measures should be scheduled and deployed to contribute to the limiting of the virus spread.

5.2.9.3 Sitting areas at gates, lounges and restaurants shall be opened at limited capacity to accommodate the need for physical distancing.

5.2.9.4 An orderly boarding process will be necessary to reduce physical contact between passengers, especially once load-factors start increasing. Close cooperation with airline is necessary.

5.2.9.5 Hand sanitiser stations should be made available throughout the airport with adequate signage for passengers

5.2.9.6 Procedures involving passengers presenting boarding passes and other travel documents to security personnel should be done, to the extent possible, while avoiding physical contact and in a way that minimises face-to-face interaction. Should there be a need to identify a person wearing a mask against a government-issued photo identification, the mask could be removed if physical distancing measures are met.

5.3 Arrival Flow

5.3.1 Objectives

5.3.1.1 To provide clarity on measures to facilitate the clearance of arriving passengers, reducing queues and minimising contacts, including expediting border control processes, and health assessment and control initiatives.

5.3.2 Border Control

5.3.2.1 Border control processes should be reviewed to increase physical distancing. Where equipment is available, the use of automated border control equipment and digital passenger identification, enabling contactless processes and

facilitating the clearance of arrival, with the objective of reducing queueing and to minimise contacts between border control officials and passengers.

5.3.2.2 Operators should enable contactless process (QR codes) where declarations are required on arrival.

5.3.2.3 Thermal scanners shall be placed at appropriate location to screen arriving passengers but individual passenger health assessments should be avoided to lessen impact resulting in long queue. Health declaration is mandatory.

5.3.2.4 For flights arriving from higher-risk area where they are categorised as cluster or communication transmission, a particular section of the arrivals terminal could be utilised to increase physical distancing, and/or smart thermal cameras could be placed at appropriate location to screen arriving passengers, in consultation with the public authorities.

5.3.3 Baggage Reclaim Area

5.3.3.1 Baggage reclaim process shall be made more efficient to ensure the passengers are not made to wait for excessive amounts of time in the baggage claim area. Available baggage carousels should be maximised to limit the gathering of passengers.

5.3.3.2 Dedicated baggage carousels should be used for flights from high risks areas and floor markings shall be provided to encourage physical distancing at the baggage carousel.

5.3.3.3 Cleaning schedule should be aligned based on flight schedule to ensure a more frequent, in-depth disinfections of baggage carts, trolleys, washroom, elevator buttons and rails.

5.3.4 Customs

5.3.4.1 Custom clearance process should be as efficient as possible to minimise queue while appropriate measures are effectively taken in case of physical baggage inspection.

5.3.4.2 Where possible green/red lanes for self-declarations are recommended.

5.3.4.3 Appropriate sanitary measures shall be taken at screening points to protect passengers and staff.

5.3.5 Exit to Landside

5.3.5.1 Precautious shall be in place for arriving passengers who are exiting to the landside area. Perimeter should be established around the greeter's area.

5.3.5.2 Hand washing stations or hand sanitisers should be provided at the Terminal exit.

5.3.5.3 Cleaning should be increased based on flight schedules to ensure a more frequent, in-depth disinfection of landside public areas, including seating areas, food and beverages and retail handrails, washrooms, automated moving system and busses.

6 GENERAL AVIATION GUIDANCE

6.1 General

6.1.1 The purpose of this guidance is to assists General Aviation (GA) pilots to return safely to normal operations following the easing of the Movement Control Order (MCO) and related restrictions on recreational flying, which has resulted in an extended period of minimal or no GA flying.

6.2 All General Aviation Pilots

6.2.1 As GA pilots prepare to resume flying, CAAM recommends a few precautions to consider before doing so. At the same time, GA pilots are advised to operate within the guidance around recreational flying activities as advised by the Government.

6.2.2 It is vital to remember that all pilots will experience some degradation of skill irrespective of their level of flying experience. CAAM encourages the use of appropriate refresher training or check flights before flying. Pilots that have not flown regularly may consider waiting until social distancing restrictions are lifted so they can conduct refresher training or a check flight before resuming recreational flying activities. Pilots who own and operate their own aircraft outside of a training environment are encouraged to visit their local Flying Club or Flying School for this.

6.2.3 CAAM would recommend that initial flights should focus on circuits and local area general handling. This means you can get back up to speed in a controlled way in an environment you are familiar with. Also consider if you are comfortable with the wind and weather conditions. This especially applies to low hours' pilots, low hours on new aircraft type/class or those with a new flying qualification. Best practice does not encourage having one short check out flight with an Instructor (once these flights are permitted), and then setting-off on a long cross-country flight to a new destination in marginal weather.

6.2.4 CAAM reminds pilots to comply to the current flight safety requirements and information such as:

a) Meteorological information.

b) NOTAMs airspace and frequency changes.

c) Flight plans, if applicable.

d) Updated VFR Chart.

e) Aerodrome availability and suitability. Pilots shall liaise with the aerodrome operator as it is important for safe and smooth operations.

6.2.5 It is also worth considering having your completed flight planning and performance calculations cross-checked by a Flight Instructor or another competent pilot.

6.3 General Health, Wellbeing and Personal Protective Equipment (PPE)

6.3.1 All GA pilots are encouraged to remain fit and well as the cockpit of a GA aircraft is a very close environment. If you choose to wear any PPE, you must ensure that they do not create a flight safety hazard or inhibit safe operation of the aircraft in any way.

6.3.2 Be mindful of any heath guidance issued by Public Health Authorities concerning disinfecting and cleansing areas, washing hands, sharing of equipment. Consider whether it is necessary to take steps to disinfect surfaces inside the cockpit between flights, especially in operating environments with different pilots at the flying controls, e.g. flying schools.

6.3.3 Some people may consider installing some form of protection screen in the cabin to separate pilots for use when flights with others are permitted. This could have a significant, adverse effect on flight safety and the airworthiness of the aircraft. A modification or design change will need to be approved by CAAM or an approved design organisation before any installation is undertaken.

6.3.4 If you fly as a member of a Flying Club or Flying School, the Head of Training and Accountable Manager need to carefully consider their instructors', club members' and students' well-being and safety. People may have a concern about operating in a confined space like an aircraft cabin, when social distancing restrictions are lifted. Communication at a local level will be key to helping ensure everyone understands what local measures are in place and any new procedures to be followed.

6.4 Medical Fitness

6.4.1 Any pilot who has had a decrease in their medical fitness that might impair the safe operation of an aircraft must contact their Medical Examiner (ME) for advice before flying.

6.4.2 There may be challenges in obtaining Medical Certificate appointments with MEs in the coming months due to prioritisation of appointments to support commercial operations and essential services.

6.5 Aircraft

6.5.1 The first consideration before resuming flying operations should be to review any manufacturers' guidance on servicing requirements when the aircraft has not flown for an extended period.

6.5.2 Pre-flight

6.5.2.1 When checking the aircraft after the extended period of minimal or no flying be more diligent with the Check A. Pay attention to lubrication of flying controls, fuel drains, operation of equipment and binding of brakes, and check the

general condition of the aircraft (especially control surfaces) for signs of any damage (by person or wildlife). This is especially important if the aircraft has not been hangered. If you do have any concerns seek advice from your Maintenance Organisation before flying.

6.5.3 Is the fuel in the aircraft tanks still usable?

a) As part of the Check A, a comprehensive check of the fuel in the aircraft fuel tanks will be important. Has any water contamination occurred while the aircraft has been on the ground?

b) AVGAS octane rating dissipates when exposed to sunlight, moisture and oxygen. As a guide, AVGAS stored in a bowser or above ground tank has a shelf life of approximately 3 months. Fuel stored in an aircraft fuel tanks may have degraded significantly. If you have any concerns seek advice from your Maintenance Organisation before flying.

6.5.4 Are all the aircraft documents and equipment still valid and in date?

a) Document that need to be confirmed valid are as follows:

1) Certificate of Registration & Certificate of Airworthiness;
2) Insurance;
3) Radio installation licence;
4) Fire extinguishers and first aid kit.
5) GPS database.

b) Ensure that all defects are entered in the Aircraft Defect Log and if defects are deferrable ensure that they are documented correctly.

7 FLIGHT OPERATIONS GUIDANCE

7.1 General

7.1.1 The Flight Operations Guidelines (FOG) for air crew is to ensure that safety of all air crew is maintained at the highest level possible while operating in the midst of this crisis, in order to maintain safety of both personnel and aircraft. This FOG draws on the information and guidelines from the work of ICAO Council Aviation Recovery Task Force (CART).

7.1.2 In order to promote safe and sustainable international air travel, a closely coordinated international approach to the treatment of air crew, consistent with recognised public health standards, will be essential to alleviate burdens on critical transportation workers. Currently it includes screening, quarantine requirements, and immigration restrictions that apply to other travellers. The crew module contains specific guidance addressing the contact of a crew member with a suspected or positive COVID-19 case, reporting for duty, dedicated end to end crew layover best practices, crew members experiencing COVID-19 symptoms during layover, and positioning of crew.

7.1.3 The elements of this module are listed below:

a) Crew Members

b) Flight Crew

c) Cabin Crew

d) Layover

7.1.4 This guidance is applicable to all certificate and license holders issued and validated by CAAM.

7.2 All Crew Members

7.2.1 Objective

7.2.1.1 This module is to provide harmonised health protection and sanitation considerations which applicable to crew members.

7.2.2 Facilitation

7.2.2.1 Subject to local public health regulations and policies, crew members who are involved in flights with a stopover and are required to layover due to Flight Time Limitation (FTL) rest requirements, need not be medically quarantined while on layover or after returning, unless they were exposed to a known symptomatic passenger or crew member on board or during the stopover.

7.2.2.2 Crew members should not be subjected to additional screening or restrictions applicable to other travellers. If required, health screening methods should be as non-invasive as possible

a) If a positive COVID-19 case is found on board, the crew members on duty should be subject to the health protocols of the respective Ministry of Health.

b) Crew members should:

1) Meet all relevant customs, immigration, and health requirements;

2) Complete the appropriate forms in manual or digital format (including Health Declaration Form) on arrival and departure; and

3) Use the correct customs and immigration channels at the airports.

Note. – Crew members operating passenger aircraft with cargo only, for example, should ensure that the correct notification has been sent to all agencies, to ensure that there is no confusion, or that crew members carried on board such as loadmasters, engineers, and cabin crew are correctly recognised and designated on the crew manifest.

7.2.3 Health Monitoring

7.2.3.1 Crew members should monitor themselves for fever (feeling feverish or a measured temperature of 37.5^0C or higher), cough, shortness of breath, or other symptoms of COVID-19; however, crew members should also be aware of and adhere to the different temperature thresholds in different jurisdictions .

7.2.3.2 Crew members should take their temperature at least twice per day during duty periods and at any time they feel unwell.

7.2.3.3 Crew members should stay at home or in their hotel room, notify their employers, and not report for work if they develop a fever (feeling feverish or a measured temperature of 37.5^0C or higher), shortness of breath, other symptoms of COVID-19, or has had close contact in the last 14 days with any person who has been infected or is suspected to be infected with COVID-19, and should not return to work until cleared to do so by their employers and public health officials.

7.2.3.4 Crew members should also not report for work if they:

a) Are within a mandated quarantine period related to previous travel and/or duty;

b) Have tested positive for COVID-19 regardless of symptoms evident unless assessed by the public health authority to have recovered and no longer infectious;

c) Know that they have been exposed to a person showing symptoms of COVID-19 in the last 14 days;

d) Are experiencing any symptoms of COVID-19.

7.2.4 Management of unwell person during flight:

7.2.4.1 Air operators should designate a section of the cabin, that is separated by at least two (2) rows from other seated passengers or crew members, as an emergency isolation area for unwell crew and passengers.

7.2.4.1.1 If a passenger or crew member develops symptoms during flight, they should be isolated in the emergency isolation area and put on a face mask. They should use only the lavatory closest to the emergency isolation area which, where practicable, should be reserved for his or her exclusive use. The unwell person should maintain the recommended physical distance from others when possible to do so and disembark only after all passengers have disembarked unless urgent medical attention is required.

7.2.4.1.2 Additionally, if a crew member develops symptoms during flight, the said crew member should stop working as soon as practicable, , notify the pilot in charge, and maintain the recommended physical distance from others, when possible to do so. Upon landing, individuals should follow up with airline medical and public health officials.

7.2.5 Health Protection

7.2.5.1 To protect the health of crew and health of others, including co-workers, crew members should:

a) Maintain recommended physical distance from others where possible, when working on the aircraft e.g., while seated on the jump seat(s) during take-off or landing, during ground transportation and while in public places;

b) As far as practicable, remain within the assigned designated section of the aircraft during the course of his or her duty, except if needed to respond to an emergency on board;

c) Minimise the amount of interaction with other crew members and passengers;

d) Wash hands regularly. If hands are not visibly dirty, the preferred method is using an alcohol-based hand rub for 20−30 seconds using the appropriate technique. When hands are visibly dirty, they should be washed with soap and water for a longer duration using the appropriate technique;

e) In addition to frequent hand washing/sanitisation, crew members should be reminded of the need to avoid touching their face wherever possible, including while wearing gloves;

f) Wear a face mask at all times during the flight, and in addition, wear a face shield or safety glasses or safety goggles or equivalent when interacting

with passengers in the cabin, except in circumstances where the use of such equipment impedes his or her ability to discharge safety responsibilities.. It should be noted that these should not replace the use of surgical masks or other PPE provided in the Universal Precaution Kit (UPK) when interacting with a sick traveller on board an aircraft;

g) Avoid contact with people with a cough, fever, or shortness of breath or otherwise suspected of having COVID-19;

h) Before each flight, inspect and verify contents of the UPKs. Follow existing air operator policy and procedures regarding the use of PPE in the UPKs, if needed to provide care to a sick traveller on board; and

i) Follow the guidance and precautions of the state and relevant health authorities related to COVID-19.

7.2.6 Additionally (air operators should)

7.2.6.1 Provide sufficient quantities of cleaning and disinfectant products (e.g. disinfectant wipes) that are effective against COVID-19 for use during flight; and

7.2.6.2 Consider providing face covering to crew members for routine use when on duty, if these do not interfere with required PPE, job tasks and when it is difficult to maintain the recommended physical distance from co-workers or passengers at all times.

7.2.7 Use of Lavatories

7.2.7.1 Where practicable, one or more lavatories should be reserved for crew use, in order to limit the potential for infection from passengers (It is noted that this may not be practicable for smaller aircraft).

7.2.8 Crew Rest Compartments

7.2.8.1 To minimise any possibility of cross infection, where pillows, cushions, sheets, blankets or duvets are provided, these should not be used by multiple persons unless coverings are laundered or changed;

7.2.8.2 Crew members who are issued with their own provisions by airlines, the cabin crew members should be responsible for ensuring that they are removed and bagged after use; and

7.2.8.3 Where airlines provide bulk loading for crew rest area bedding items, crew members should install their own bedding items before their rest period and remove them hygienically afterwards.

7.2.9 Training Devices

7.2.9.1 Increase the frequency of routine cleaning of flight simulators and training devices and other training aids, or equipment used during training. Cleaning products used should be compatible with COVID-19 disinfectants.

7.3 Flight Crew

7.3.1 Objective

7.3.1.1 To provide harmonised health protection and sanitation considerations specifically applicable to flight crew.

7.3.2 Consideration

7.3.2.1 Limit, to the greatest extent possible access to the flight deck;

7.3.2.2 Flight crew members should only leave the flight deck for short physiological breaks;

7.3.2.3 In the case of flight crew at controls displaying symptoms, the operator should consider whether removal from the flight deck is an appropriate mitigation within their risk assessment;

7.3.2.4 Air operators should ensure that when face masks are worn by flight crew or other crew members etc., that oxygen masks can be still rapidly placed on the face, properly secured, sealed, supplying oxygen on demand and flight crew are provided with the correct guidance on how to do so;

7.3.2.5 When leaving flight deck, make sure all items are stowed, personal items removed, and flight-deck is ready for cleaning and disinfection;

7.3.2.6 Prior to each cockpit crew change, ensure that the flight-deck has been fully sanitised;

7.3.2.7 Reduce in person interactions with the cabin crew to a minimum;

7.3.2.8 If possible, designate one person only to be able to enter cockpit if necessary; and

7.3.2.9 Only one member of the flight crew or technical crew should be allowed to disembark the aircraft to complete the external inspection, refuelling, etc., in such case direct contact with the ground crew should be avoided.

7.4 Cabin Crew

7.4.1 Objective

7.4.1.1 To provide harmonised health protection and sanitation considerations specifically applicable to cabin crew.

7.4.2 Consideration

7.4.2.1 Cabin crew who are in contact with a passenger suspected to be infected should not visit the flight deck unless operationally necessary;

7.4.2.2 While limiting the number and frequency of physical flight crew checks, an alternative method of checking on flight crew welfare such as regular interphone calls should be implemented;

7.4.2.3 The use of PPE should not impact the ability to carry out normal, abnormal and emergency safety procedures, such as the donning of oxygen masks, carrying out firefighting procedures etc.; and

7.4.2.4 Safety demonstration equipment should not be shared to the extent feasible to reduce the likelihood of virus transmission. If they must be shared, alternate means of demonstration without the equipment should be considered or the equipment should be thoroughly sanitised between uses.

7.4.2.5 Crew members should instruct passengers that face masks should be removed before donning emergency oxygen masks, should they be needed.

7.5 Layover

7.5.1 Objective

7.5.1.1 To ensure that all crew that are required to layover or transit at an outstation are aware of the measures necessary to reduce the risk of transmission of COVID-19.

7.5.2 Consideration

7.5.2.1 If crew are required to layover or transit at an outstation, the air operator is to coordinate with the State public health authorities at airports and implement the following:

7.5.2.1.1 Commute arrangements (between airport and hotel, if required): The air operator should arrange for the commute between the aircraft and the crew's individual hotel rooms ensuring hygiene measures are applied and the recommended physical distancing, including within the vehicle, to the extent possible.

a) At accommodation:

1) At all times, crew must comply with relevant public health regulations and policies;

2) One crew member to one room, which is sanitised prior to occupancy; and

3) Crew, taking account of the above, and insofar as is practicable, should:

   i) Avoid contact with the public and fellow crew members, and remain in the hotel room except to seek medical attention, or for essential activities including exercise, while respecting physical distancing requirements;

   ii) Not use the common facilities in the hotel;

   iii) Dine in-room, get take-outs or dine seated alone in a restaurant within the hotel, only if room service is not available;

   iv) Regularly monitor for symptoms including fever; and

   v) Observe good hand hygiene, respiratory hygiene and physical distancing measures when required to leave the hotel room only for the reasons specified in i, iii or emergency situations.

4) Crew members experiencing symptoms suggestive of COVID-19 during layover or transit should:

   i) Report it to the aircraft Pilot in Command, operator and seek assistance from a medical doctor for assessment of possible COVID-19;

   ii) Cooperate with the assessment and possible further monitoring for COVID-19 in accordance with the evaluation procedure implemented by the State (e.g. assessment in the hotel room, or an isolation room within the hotel, or alternative location).

5) If a crew member has been evaluated and COVID-19 is not suspected in accordance with the above procedures implemented by the State, the air operator may arrange for the crew member to repatriate to base; and

6) If a crew member is suspected or confirmed as a COVID-19 case by the State and isolation is not required by the State, such crew member could be medically repatriated by appropriate modes; if there is agreement to repatriate the crew member to home base.

8 AIRWORTHINESS GUIDANCE

8.1 General

8.1.1 The Airworthiness Guidelines (AG) on aircraft cleaning and disinfection is to ensure that while operating in the midst of this crisis, it is essential to maintain safety at both personnel and aircraft level. This AG draws on the information and guidelines from the work of ICAO Council Aviation Recovery Task Force (CART), and applicable to all holders of CAAM airworthiness approvals.

8.1.2 In order to ensure that the aircraft is best fit for operation, it is important for the cleaning, disinfection and maintenance of the aircraft is completed with focus on safety measures especially if the aircraft is coming out from its long-term parking or storage. This AG recommends measures to minimise the risk of contamination and ensure a safe, secure and sustainable restart and recovery of operations.

8.2 Common Cleaning, Disinfection and Safety Measures

8.2.1 Objective

8.2.1.1 To provide harmonised cleaning, disinfection and safety measures to be undertaken in flight decks, passenger cabin and cargo compartments

8.2.2 Measures

8.2.2.1 Cleaning and disinfection process should be done in accordance with the established operator's procedures.

8.2.2.2 Operator may implement different cleaning and disinfection frequency based on a risk assessment which, considers the operational circumstances and the duration of the disinfecting effects of the substance used.

8.2.2.3 Cleaning and disinfection agents used should be aviation approved. Refer to the original equipment manufacturer (OEM) instructions to ensure that the proper application, ventilation, and personal protection equipment is used. For more detailed recommendations or additional disinfecting chemicals, please contact the specific airframe manufacturer.

8.2.2.4 Clean surfaces of dirt and debris before disinfecting to maximise effectiveness.

8.2.2.5 Do not spray cleaning or disinfection solution in the flight deck, passenger cabin and cargo compartment. Apply with pre-moistened wipes or single use wetted cloth.

8.2.2.6 Cleaning and disinfection solutions are flammable, so precautions should be taken around potential sources of ignition.

8.2.2.7 Currently, there is no data on the long-term effects associated with frequent application of the disinfection solution. Thus, the operator should periodically inspect the equipment to ensure that there are no long-term effects or damage over time. If damage is observed, contact the OEM for guidance on alternate disinfectants. Specific care should be taken for application on leather and other soft goods.

8.2.2.8 Cleaning personnel should be adequately trained so they understand and respect the procedures that will ensure effectiveness of the cleaning and disinfecting agents, use the proper personal protective equipment, prevent contamination of other areas and minimise occupational health and safety risks to personnel, including ensuring adequate ventilation in confined areas such as lavatories.

8.3 Specific Disinfection Measures – Flight Decks

8.3.1 Objective

8.3.1.1 To provide harmonised cleaning, disinfection and safety measures to be undertaken in flight decks.

8.3.2 Measures

8.3.2.1 Given the increased likelihood that switch positions may be inadvertently changed during the cleaning or disinfection process, operators and flight crew should reinforce procedures to verify that all flight deck switches and controls are in the correct position prior to operation of the aircraft.

8.3.2.2 Some equipment on the flight deck may have additional disinfectant requirements based on usage (e.g. oxygen masks) and procedures should be put in place accordingly.

8.4 Specific Disinfection Measures – Maintenance

8.4.1 Objective

8.4.1.1 To provide harmonised cleaning, disinfection and safety measures to be undertaken in overall maintenance.

8.4.2 Measures

8.4.2.1 Airlines/operators should be mindful of regular maintenance to both air systems and water systems to ensure they continue to protect the passenger and crew from viruses. Refer to the airframe OEM for specific maintenance actions and intervals.

8.4.2.2 It is recommended that airlines/operators include access panels and other maintenance areas in their disinfection procedures to ensure a safe environment for the maintenance personnel.

8.4.2.3 Airlines/operators may wish to review their operating procedures to minimise the number of personnel who need to contact high-touch surfaces such as access panels, door handles, switches, etc.

8.4.2.4 It is recommended that airlines/operators establish maintenance procedures applied after disinfection procedures to check Flight Deck, Passenger Cabin and Cargo Compartments for correct positioning of control handles, circuit breakers and control panels switches and knobs. Access panels and doors closure also should be checked.

8.4.2.5 In regard to aircraft filter maintenance, follow normal maintenance procedures as specified by the OEM. Please take note of special protection and handling of filters when changing them. Contact OEM or refer to OEM published documents to check if an additional sanitisation procedure and/or personnel health protection is required to avoid microbiological contamination in the filter replacement area.

9 AVIATION SECURITY GUIDANCE

9.1 General

9.1.1 The Aviation Security Guidance contains the measures to ensure the protection of the security screening process while operating in the current challenging environment in our recovery period of the COVID-19 pandemic.

9.2 Checkpoint Access Procedures for Passengers and Staff

9.2.1 Objective

9.2.1.1 To provide clarity on measures to be undertaken at the checkpoint access to ensure safety of the personnel, crowd management and confidence building.

9.2.2 Measures

9.2.2.1 Appropriate procedures should be implemented in coordination with relevant government departments in order to respond to any passengers showing signs of illness.

9.2.2.2 Hand sanitisers and disinfection products should be provided prior to passengers and staff screening access points where possible.

9.2.2.3 Screeners and passengers should maintain physical distancing to the extent possible or wear the appropriate PPE to mitigate the risk of exposure.

9.2.2.4 Rearranging of security checkpoint accesses and layouts should be considered with the objective of reducing crowds and queues to the extent possible while maintaining desirable throughput. This should include both divestment areas and those areas where passengers retrieve their screened cabin baggage.

9.2.2.5 Markings should be established on the ground within the queueing area to indicate the proper distancing recommended by the appropriate authorities. Physical distancing should remain in place until informed by relevant health authorities that it is safe to relax them.

9.2.2.6 Procedures involving passengers presenting boarding passes and other travel documents to security personnel should be done, to the extent possible, while avoiding physical contact and in a way that minimises face-to-face interaction. Should there be a need to identify a person wearing a mask against a government-issued photo identification, the mask could be removed if physical distancing measures are met.

9.2.2.7 Appropriate signage should be deployed that clearly inform about subsequent steps of the process. Possible solutions include:

a) Using mobile boarding pass scanners operated by the security staff.

b) Conducting a visual inspection of the boarding pass and relevant identification documentation, as needed by standard operating procedures.

9.2.2.8 Automated gates and mobile scanners' reader surface should be disinfected with the same frequency as for any other high-touch surface.

9.2.2.9 Passenger preparation officers should be deployed to ensure passengers are prepared for the divestment needs. Screeners should reinforce processes with passengers accessing divesting areas, such that they properly divest and are less likely to cause a false alarm (to minimise the use of manual searches).

9.2.2.10 Routine enhanced cleaning and disinfecting should be conducted, if needed, of frequently touched/exposed surfaces and security screening equipment, including trays at the security checkpoint and baggage areas.

9.3 Passenger Security Screening

9.3.1 Objective

9.3.1.1 To provide clarity on measures to be undertaken during passenger security screening to ensure safety of the personnel, crowd management and confidence building.

9.3.2 Measures

9.3.2.1 Alcohol-based hand sanitiser should be distributed to screeners for the cleaning and disinfection of their hands.

9.3.2.2 Screeners should wear gloves and change them after each manual search.

9.3.2.3 Screeners should be advised to wash or sanitise their hands after removing gloves.

9.3.2.4 Appropriate signage and information to passengers should be clearly displayed regarding newly implemented health requirements, as well as modified screening processes. Signage should highlight the need for passenger cooperation throughout the screening process.

9.3.2.5 Whenever screening checkpoints are processing a high number of passengers, staff and crew screening should be performed in dedicated checkpoints and separately from passengers (as an additional preventive health measure), where possible.

9.3.2.6 Where possible, alarm resolution should be conducted in a dedicated area separated from the flow of passengers. This methodology mitigates the risk of queue build up and maintains passenger throughput but may need the positioning of additional personnel.

9.3.2.7 For WTMD alarm resolution, prioritise the use of hand-held metal detectors to identify the cause of alarm followed by a targeted manual search where the alarm is.

9.3.2.8 The use of explosive trace detection equipment (ETD) should not be limited to alarm resolution. Random use of such explosive detection should be encouraged and leveraged where possible.

9.3.2.9 In order to resolve any alarms or concerns identified by screeners, the use of ETD should be considered in lieu of manual searches, where appropriate and subject to the nature of the screener's concerns.

9.3.2.10 If the standard procedure allows for the reuse of ETD swabs, consideration should be given to discontinuing this practice to limit the possibility of spreading COVID-19.

9.3.2.11 If there is a need to conduct a manual search, screeners should adapt their methodology, if possible, to avoid being face-to-face with passengers or other persons being screened.

9.3.2.12 Staff needed to interact with passengers in close proximity should use a face mask.

9.3.2.13 For health-related liquids, aerosols and gels (LAGs) less than 100 ml should be accepted as prescribed by applicable security regulations.

9.3.2.14 Work with relevant health authorities to ensure cleanliness and disinfection protocols are developed and implemented for items with a high likelihood of cross contamination (e.g. trays and divestment area).

9.3.2.15 Use the Airport COVID-19 Cleaning / Disinfection Control Sheet (PHC Form 3) or a similar one where appropriate.

9.4 Identification Check at Departure Hall

9.4.1 Objective

9.4.1.1 To provide clarity on measures to be undertaken during passenger security screening to ensure safety of the personnel, crowd management and confidence building.

9.4.2 Measures

9.4.2.1 Procedures involving passengers presenting boarding passes and other travel documents to security personnel should be done, to the extent possible, while avoiding physical contact and in a way that minimises face-to-face interaction. Should there be a need to identify a person wearing a mask against a

government-issued photo identification, the mask could be removed if physical distancing measures are met.

10 CARGO GUIDANCE

10.1 General

10.1.1 Cargo flight crews should apply the same health and safety considerations as passenger flight crews and are collectively included in the crew section of this document. Whilst air cargo consignments do not come into contact with the travelling public, the cargo acceptance and hand over process does include interaction with non-airport employees. The Cargo Guidance addresses aviation public health including physical distancing, personal sanitation, protective barriers point of transfer to the ramp and the loading and unloading, and other mitigation procedures.

10.1.2 The elements of this guidance are listed below:

a) Cargo Guidance - Aircraft Loading – Unloading

b) Within Cargo facility - Origin - Destination – Transit

c) Cargo facility to ramp - Origin - Transit – Destination

d) Aircraft Loading – Unloading

10.2 Road Feeder to Freight Reception and Freight Pick Up

10.2.1 Objective

10.2.1.1 Protect cargo handling staff and truckers during the handover points for physical freight (in warehouse) and documentation (often office).

10.2.2 Consideration

a) Onsite biosafety principles:

1) Proximity for document handover should be minimised, floor markings should be indicated and / or appropriate PPE should be worn.
2) Wherever possible, hand washing stations or alcohol-based hand sanitiser should be placed on entry.
3) Surfaces (e.g. handles, kiosks) should be regularly cleaned and disinfected
4) Alcohol-based hand sanitiser should be made available for users of kiosks, etc.
5) Area(s) for donning and doffing of appropriate PPE as needed should be identified.

b) Physical handover of goods (truck offload):

1) Drivers should stay in vehicle cabin until instructed (as per relevant procedures).
2) Physical distance should be kept between driver and facility staff where possible.

3) Close contact of personnel should be limited; appropriate PPE should be worn where appropriate.

c) Documentation handover (office):

1) Digital document systems and data exchange should be implemented wherever possible.
2) Physical distancing of at least 1 metre should be kept between all parties where possible, floor markings indicated or the appropriate PPE worn.
3) Where physical documents need to be signed, each signatory should do so with their own pen.
4) Physical barriers (transparent) should be installed at counters and reception.
5) Alcohol-based hand sanitiser should be made available when entering or exiting common areas.

d) Material handling equipment (MHE) usage (e.g., forklifts, hand carts):

1) To avoid cross contamination, MHE should be cleaned and disinfected after use.
2) Employees should be educated and should practice personal hygiene principles.
3) Appropriate PPE should be worn where necessary.

10.2.3 Means for uniform implementation

10.2.3.1 Wall posters, and handouts, downloadable from carrier and GHA web sites.

10.3 Within Cargo facility - Origin - Destination – Transit

10.3.1 Objective

10.3.1.1 Protect Cargo facility (warehouse) staff during business operations such as build-up, breakdown, repositioning and documentation handling.

10.3.2 Considerations

a) Onsite biosafety principles:

1) Physical distance should be kept at all times when operational safety is not compromised.
2) Close proximity for handover minimised (e.g. drop zones) or appropriate PPE should be worn.
3) Ground personnel rotations should take into account the need to avoid cross-infection.
4) Alcohol-based hand sanitiser should be placed on entry into common areas.
5) Regular cleaning and disinfection of surfaces (e.g. handles, mobile devices, kiosks) should be established.

6) Sanitiser should be made available for users of kiosks, shared mobile devices, and other shared devices.

b) Physical handling goods:

1) Physical distance should be kept when operational safety is not compromised; When not possible (e.g. 2-person lift needed for heavy cargo) appropriate PPE should be worn.
2) Appropriate PPE should be worn where necessary.

c) Material handling equipment (MHE) / ground support equipment (GSE) usage:

1) To avoid cross contamination MHE and GSE should be cleaned and disinfected between uses.
2) All employees should be educated and should practice personal hygiene principles.
3) Appropriate PPE should be worn where necessary.

10.3.3 Means for uniform implementation

10.3.3.1 Posters displayed through cargo facility and staff rest areas.

10.4 Cargo facility to ramp - Origin - Transit - Destination

10.4.1 Objective

10.4.1.1 Protect staff during the Cargo facility handover to/from ramp crews in preparation for aircraft loading and unloading.

10.4.2 Considerations

a) Onsite biosafety principles

1) Physical distance should be kept at all times when operational safety is not compromised or appropriate PPE should be worn.
2) Regular cleaning and disinfection of surfaces (e.g. handles, kiosks) should be established.
3) Alcohol-based hand sanitiser should be made available for users of kiosks, shared mobile devices, etc.
4) Close proximity for handover should be minimised (e.g. drop zones) or appropriate PPE should be worn.
5) Ground personnel rotations should take into account the need to avoid cross team infection.

b) Physical handover of goods

1) Physical distance should be maintained, and cargo drop zones used where possible.
2) Close contact of personnel should be limited, and appropriate PPE should be worn where necessary.

c) Ground Support Equipment (GSE) usage

1) To avoid cross contamination, GSE should be cleaned and disinfected between users.
2) All employees should be educated and should practice personal hygiene principles.
3) Appropriate PPE should be worn where necessary

10.4.3 Means for uniform implementation

10.4.3.1 Posters displayed in staff rest areas

10.5 Aircraft Loading – Unloading

10.5.1 Objective

10.5.1.1 Protect ramp handling staff during the loading and unloading of the aircraft, which is usually performed by multiple crews of 3 to 4 persons depending on the operation. Ensure enhanced public health safety when the number of close contact personnel rises during manual loading of the passenger cabin.

10.5.2 Considerations

a) Onsite biosafety principles

1) Physical distance should be kept at all times when operational safety is not compromised or appropriate PPE should be worn.
2) Alcohol-based hand sanitiser should be placed on entry into common areas.
3) Regular cleaning and disinfection of surfaces (e.g. handles, mobile devices, kiosks) should be established.
4) Alcohol-based hand sanitiser should be made available for users of kiosks, shared mobile devices, etc.
5) Close proximity of staff for loading should be minimised or appropriate PPE should be used particularly for passenger cabin loading.
6) Ground personnel rotations should take into account the need to avoid cross team infection.

b) Physical Loading of goods

1) Physical distance should be kept when operational safety is not compromised (encourage single person operations).
2) Close contact of personnel should be limited, and appropriate PPE should be worn where necessary.
3) For "human chain" loading, appropriate PPE should be used (non-medical or medical masks and disposable gloves) and hygiene principles should be applied between operations.

c) Material handling equipment (MHE) / ground support equipment (GSE) usage

1) To avoid cross contamination, MHE/GSE should be cleaned and disinfected between users.
2) All employees should be educated and should practice personal hygiene principles.
3) Appropriate PPE should be worn where necessary.

10.5.3 Means for uniform implementation

10.5.3.1 Posters in staff rest areas. Use the Airport COVID-19 Cleaning / Disinfection Control Sheet (PHC Form 3) or a similar one where appropriate.

11 AIR TRAFFIC MANAGEMENT (ATM) SUPPORT

11.1 General

11.1.1 The Air Traffic Management (ATM) continues to play a major role on the road to recovery from this global crisis and remains committed in assisting the aviation industry in any eventuality despite the MCO/CMCO being imposed by the Malaysian Government, compounded with the tremendous reduction in air traffic, Air Traffic Control (ATC) facilities (Air Traffic Control Centres and Control Towers), continued to operate 24/7 (where applicable) and provide the required services for the industry.

11.1.2 During the MCO/CMCO, ATM's Contingency Procedures (Back-up / Failure Mode) and Business Continuity Plan (BCP) based on ICAO's Annex 11 (Air Traffic Services) had been thoroughly simulated and tested to prepare air traffic controllers for any eventuality, even the possibility of having to work from their designated remote sites. Safety Risk Assessments were conducted together with Safety Officers nationwide via Video Conferencing to assess changes to the ATM environment. Recommendations and mitigating measures were put in place, in compliance with *ICAO's Annex 19* (Safety Management) and *Doc 9859* (Safety Management Manual), controllers were also reminded to be alert and vigilant constantly.

11.1.3 The Air Traffic Management shares its continuous attention and practices of high-level safety and health measures in ensuring that support for all operators continue to be delivered efficiently.

11.2 ATC's Initiatives in Support of Airlines and Airport Operators

11.2.1 Objective

11.2.1.1 To provide safe, orderly, economic and expeditious flow of air traffic management.

11.2.2 Measures

11.2.2.1 Providing direct tracks and track shortening to aircraft in the air, non-standard taxiing routes on ground, optimum cruising levels to aircraft, thereby minimising fuel burn, hence providing fuel savings to airlines and reduced carbon emission into the environment;

11.2.2.2 Coordinating with airport operators and ground support teams to:

a) Reduce turnaround time (in preparation for COVID-19 testing at airports);

b) Ensure a smooth gradual transition from non-peak to peak operating hours;

11.2.2.3 Pending or planned rehabilitation and maintenance works at airports being carried out in minimised time with minimal or no disruptions to flight schedules;

11.2.2.4 Reduced airport operating hours or single runway operations at KLIA resulting in reduced overall cost;

11.2.2.5 Enhanced vigilance/surveillance by ATC in monitoring read-backs/hear-backs of pilots' transmission in recognising any potential Human Factors lapses;

11.2.2.6 Collaboration with National Slot Coordination Malaysia (NSCM) to improve predictability of traffic demand during this period of uncertainty, especially during the restart of aviation activities in Malaysia.

12 CONCLUSION

12.1 The aviation industry is an important linkage to support the economy not limiting to passengers but also cargo. Processes across all operating functions requires highest regard of safety measures. Using a standardise and globally accepted set of Guideline such as the CART Report helps all countries to ensure that national practices are aligned. This will be helpful not only to the operators but also to the consumers and public at large that their safety is our due concern.

12.2 CAAM will continue to closely monitor developments related to the COVID-19 pandemic to ensure the currency of safety measures and guidelines are proportionate with the latest developments and recommendations from both international and national public health authorities.

13 REFERENCES

a) ICAO Council Aviation Recovery Task Force (CART) Report

b) CART - Take-off: Guidance for Air Travel through the COVID-19 Public Health Crisis

c) ICAO Doc. 10144 - Handbook for CAAs on the Management of Aviation Safety Risks related to COVID-19

d) CAA UK, CAP 1925 COVID 19 – Preparing to Return to Normal Flying Operations for General Aviation Private Pilots

e) Malaysia Ministry of Health (MOH) COVID-19 Management Guidelines No. 5/2020

f) Phase III of the ICAO Council Aviation Recovery Task Force (CART) High-Level Cover Document and Second Edition of Take-off: Guidance for Air Travel through the COVID-19 Public Health Crisis