INTERNATIONAL FEDERATION OF AIR TRAFFIC CONTROLLERS' ASSOCIAT

COVID-19 (CORONAVIRUS)

Guidance principles to prevent the spread of
COVID-19 in Air Navigation Facilities

Version 1.1 - March 2020

GUIDANCE MATERIAL

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Cover illustration:

COVID-19 and Air Navigation Services

INTRODUCTION

The world is once again facing a global crisis that is not sparing the aviation industry. This crisis will impact each and every one of us in a number of ways. It is inevitable that every Member Association will be asked to contribute to the effort of their ANSP to manage the crisis.

This Guidance Material has been developed to help IFATCA Member Associations respond to the COVID-19 crisis surrounding the responses of their employers and the aviation industry in general. This Guidance Material aims to support the IFATCA Member Associations to assist where possible their employers (Governments, National Agencies, Air Navigation Services Providers).

The current crisis has hit the global civil aviation industry and recovery will take some time. On March 11th 2020, the World Health Organisation has declared a global pandemic. The order of magnitude is unprecedented and will affect all activities of our society. Mathematical models on exponential growth can assist to better understand how the COVID-19 will evolve:

https://www.youtube.com/embed/Kas0tIxDvrg

BACKGROUND INFORMATION [1,2]

Coronaviruses are a large family of viruses which may cause illness in animals or humans. In humans, several coronaviruses are known to cause respiratory infections ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). The most recently discovered coronavirus causes coronavirus disease COVID-19.

The most common symptoms of COVID-19 are fever, tiredness, and dry cough. Some patients may have aches and pains, nasal congestion, runny nose, sore throat, or diarrhea. These symptoms are usually mild and begin gradually. Some people become infected but don't develop any symptoms and don't feel unwell.

Illness due to COVID-19 infection is generally mild, with most people (about 80%) recover from the disease without needing special treatment. Around 1 out of every 6 people who gets COVID-19 becomes seriously ill and develops difficulty breathing. Older people, and those with underlying medical problems like high blood pressure, heart problems or diabetes, are more likely to develop serious illness. People with fever, cough and difficulty breathing should seek medical attention.

It is important that measures taken to combat the spread of the virus are based on solid health care principles and are not disproportionate to the risk.

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[1] https://www.who.int/news-room/q-a-detail/q-a-coronaviruses (accessed 9 March 2020)

[2] https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html

How COVID-19 spreads [3,4]

When someone who has COVID-19 coughs or exhales they release droplets of infected fluid. Most of these droplets fall on nearby surfaces and objects - such as desks, tables or telephones. People could catch COVID-19 by touching contaminated surfaces or objects – and then touching their eyes, nose or mouth. If they are standing within one meter of a person with COVID-19 they can catch it by breathing in droplets coughed out or exhaled by them. In other words, COVID-19 spreads in a similar way to flu.
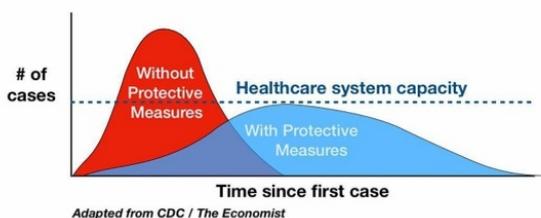
It is not certain how long the virus that causes COVID-19 survives on surfaces, but it seems to behave like other coronaviruses. Studies suggest that coronaviruses (including preliminary information on the COVID-19 virus) may persist on surfaces for a few hours or up to several days. This may vary under different conditions (e.g. type of surface, temperature or humidity of the environment). [5]

WHAT IS HAPPENING

The COVID-19 originated in the beginning of December 2019 in the province of Hubei with the epicentre being located in the city of Wuhan. It has since spread nearly all over the planet. Where curtailing the spread of the virus was not possible, the affected governments are trying to delay or reduce the spread of the disease to the level where the solicitation of the hospitals and the emergency services can be managed. This can only be achieved by imposing drastic measures, such as reducing travel to the essential and vital minimum. According to the available data the population most at risk are elderly persons and persons with reduced immunity. The aim of most measures is shown in the figure below.

Flattening the Coronavirus Curve

This chart explains why slowing the spread of the infection is nearly as important as stopping it.

Some regions of the world have been put under confinement and governments have imposed drastic measures with regard to flights being allowed into their territory. This has resulted in airlines downgrading their offers and grounding of their fleets.

IMPACT ON AIR TRAFFIC CONTROL SERVICES

Air Traffic Control is a critical infrastructure. In some countries, it is designated an essential service and thus particular measures have and will be put in place which will affect air traffic controllers. Although it is too early to be able to assess the full impact of the global crisis on Air Traffic Services, two distinct threads can be observed. They can be grouped into two distinct categories:

- Control Healthy
- Continue to control air traffic

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[3] https://www.who.int/docs/default-source/coronaviruse/getting-workplace-ready-for-covid-19.pdf?sfvrsn=359a81e7_6

[4] https://www.cdc.gov/coronavirus/2019-ncov/about/transmission.html

[5] https://www.who.int/news-room/q-a-detail/q-a-coronaviruses 'How long does the virus survive on surfaces?' (accessed 8 March 2020)

CONTROL HEALTHY

Like any other citizen, the aim is that an air traffic controller does not contract the virus. Different measures have been put in place and are guided in most of the nations by the rules and regulations imposed by the public health authorities. ATCOs shall pay particular attention to these recommendations and follow them strictly:

- WASH YOUR HANDS
- RESPECT SOCIAL DISTANCE
- COUGH AND SNEEZE INTO YOUR ELBOWS
- IF YOU HAVE FLUE-LIKE SYMPTOMS OR ANY OTHER HEALTH ISSUE – STAY AT HOME

Should your government or employer impose certain restrictions (e.g. quarantine, or shadow teams), follow them strictly. The health of your work colleague, your family and your neighbours depend on it.

As air traffic control is part of the critical infrastructure, it has to be the aim of any professional in ATC to remain fit and reduce exposure to the widest extend possible. There is however real risk that ATCOs and ATM professionals will contract the virus, thus leading to isolation and possible quarantine measures. This puts unprecedented challenges on Air Navigation Service Providers and staff. Critical infrastructure is the body of systems, networks and assets that are so essential that their continued operation is required to ensure the security of a given nation, its economy, and the public's health and/or safety.[6]

CONTINUE TO CONTROL AIR TRAFFIC

Travel bans, cancellation of flights and grounding of fleets will result in a dramatic fall in air traffic in all regions of the world. As has happened before, this drop may lead to the perception that there is overstaffing of ATCOs and other ATM Professionals. Experience with past crises (2001, 2003 and 2008) has taught IFATCA that adapting to a situation with low traffic brings many challenges. This guidance material should help Member Associations, as well as individual ATCOs, to be prepared to assist their employers, thus striking a balance between the necessary crisis measures and the worker's rights and duties.

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[6] Definition from whatis.techtarget.com, accessed on 12.3.2020

CHALLENGING TIMES AHEAD – TIME TO ACT

What is needed now is to focus on making sure that we do not need to close down towers or centres and to get through the situation as smoothly as possible, without upsetting the crisis measures that we have taken in order to ensure that the ANS will retain a strong foundation. As part of the Critical Infrastructure ANS will have to provide continuous operations to any possible users of the system (in particular emergency, search and rescue, government and special flights).

IFATCA advises you, as a Member Association, to help your ANSP as much as possible in the current situation. This includes being flexible with shifts, helping each other with measures that will reduce the spreading of the virus, listening to the advice from health authorities, etc. Apply Critical Incident Stress Management where available. It is essential that IFATCA and its members can provide the necessary infrastructure and service where and when needed during times of distress and need.

Air Navigation Services that need long-term planning and is part of the essential infrastructure. It is not a business that will recover in six months, especially if training is stopped or operational staff dismissed. It is a governmental task that needs to be part of national responsibilities and funding in line with firefighting and roads.

What we are experiencing now will take some time to pass, but after the crisis we will have to deliver 'normal service' again.

This means help your decision makers to continue training programs and not to take measures that would curtail core ANSP activities. If required, stop involvement in non-essential projects. Remain focussed on your core work.

So, what can professional associations do in this current situation? The following possible actions are suggested as ways that our Member Associations can contribute to, or even lead, the discussions in their countries. Of course, any measures taken need to be adapted to your local requirements and conditions.

- Initiate the discussion and do not wait for actions or decisions by your ANSP. Ask your management what measures they are considering taking at a local and national level.
- Request that your association be included as a partner in these discussions and decisions. Point out that no matter what decisions are taken, it is your members who have to implement them and make them work.
- Work with your ANSP to develop containment measures that will not compromise the safety of operations, now or in the future.
- If it is acceptable to your members, negotiate changes to working conditions that can help the situation, while respecting local agreements and conditions.
- As always, safety is paramount. Analyse any proposed changes and the impact they might have on operations from both a technical and professional aspect, both in the short and long term.
- Any measures which are proposed which change the working procedures or technical environment should be supported by a safety case or assessment.
- Be aware that employers that force people to take (unpaid) leave may inadvertently be encouraging employees to come to work when they are not feeling well or even sick. Such a policy may therefore be more costly in the medium term, since more people could get infected.
- Encourage ANSPs to plan for the recovery. Use the traffic downturn as an opportunity to utilise ATCO staff to accomplish the desperately needed "long lead time" ab initio training to help reduce the shortage of ATCOs and plan for the future.

In many cases, the actions that can be taken now might have significant effect on the ATC service. IFATCA warns against rushed decisions that can lead to long-term problems. Overreaction and drastic cost reductions will only INCREASE future costs and add to the already critical shortage of ATCOs that currently exists.

SHARE YOUR EXPERIENCE!

The situation is a unique one, IFATCA has therefore decided to set up a discussion forum on Google Groups to enable you to share your experiences in dealing with this crisis with your colleagues at a global level. We hope that employers and governments will use this opportunity to learn from each other. Under the following link you will find the possibility to share your experience along the following categories.

a) What kind of health measures have been put in place for your ATC unit?
b) Has your association/union been associated to the COVID-19 Taskforces if they exist?
c) If government or employers have introduced quarantine measures, how do they affect the operations/staff?
d) What is the trend of traffic figures?

https://groups.google.com/d/forum/ats-covid

Do not hesitate to contact your respective Regional Executive Vice-president for any further assistance you might need.

EXAMPLE 1
INITIAL MEASURES WITHIN AN ANSP AND HOW TO RESPOND TO THE CURRENT SITUATION

To reduce the risk to operations, all line managers are requested to **critically scrutinise missions with regard to urgency and/or need**, especially when the mission would include the use of public transport and/or the destination involves a large group of people. Using video- and telephone conferencing is encouraged as an alternative.

1. **All non-essential visits to operational environments are suspended**, including private, professional, individual or group visits. Exceptions may only be granted by the head of unit. Visitors should comply with the same entry conditions as staff members and follow the same hygiene etiquette as staff.

2. Staff members and their family members are **encouraged to avoid going to known risk areas.** Staff members who, in the 14 days prior, have been in the currently known risk areas and/or have been in contact with others travelling back/from those areas, shall contact their line managers by phone and stay home for 14 days unless otherwise instructed. For non-operational tasks, teleworking might be a possibility.

3. **All staff are requested to apply increased hygiene measures to reduce exposure and transmission:**
   - Controllers, system controllers and any other staff who share work equipment (keyboards, mouse, touch screens, etc.) must clean their workplace after handover with the available antiseptic cleaning material placed at each workstation and inform if a refill is needed;
   - Clean equipment regularly with the antiseptic cleaning material made available around the building. Staff should clean communal equipment (e.g. in break rooms or sport facilities) before and after using them with the available cleaning material;
   - Door handles, keypads, sports and leisure equipment need to be cleaned more frequently by cleaning staff.
   - Avoid any direct contact (e.g. shaking hands);
   - Avoid touching your eyes, nose or mouth with your hands;
   - Wash your hands frequently for at least 20 seconds with soap;
   - When coughing or sneezing, cover your mouth or nose with disposable paper tissues and throw them away immediately, wash your hands immediately or disinfect using alcohol tissues or cleanser;
   - Avoid close contact with anyone who has cold or flu-like symptoms (fever and sneezing/coughing);
   - Take care of your own health by making sure you sleep enough and eat healthily so that your immune system is strong enough to fight the virus if you get in contact with it.

4. The procedures and advice above are recommended to also be applied responsibly by all staff outside of the workplace e.g. avoid large crowds wherever possible. Staff is advised to follow the advice of the national health authorities regarding travel arrangements.

5. Anyone who shows symptoms of the coronavirus disease and feels ill shall go home immediately and they should contact their line-manager/supervisor by phone or email. Symptoms include fever, excessive sneezing, muscle pain, coughing, difficulty breathing etc.

EXAMPLE 2

Measures to take

ANSPs should ensure workplaces are clean and hygienic, implement general preventative measures, and provide personnel with education on self-measures to limit the spread of the virus.

Personal initiatives may include: [7]

a) Avoid physical contact, avoid hugging or kissing others, and avoid shaking hands - just wave.

b) Avoid close contact with people and public assemblies.

c) Regularly wash hands with soap and water.

d) When sneezing, cover the nose and mouth with the inside of the elbow or using a tissue instead of the hand.

e) Self-check body temperature twice per day. Seek medical advice if the temperature is above 37.3°C or 99°F.

Workplace initiatives may include: [8]

a) At work, employees take temperature before shift, middle of the shift and after the shift.

b) Increase cleaning of door handles, handrails, and lift buttons.

c) Surfaces (e.g. desks and tables) and objects (e.g. telephones, keyboards) need to be wiped with disinfectant regularly.

d) For operational positions, provide sanitising wipes. Personnel take a wipe and perform a general wiping of the keyboards, mouse and touchscreen (protected with a layer to prevent any chemical damage to equipment) when handing over/taking over positions.

e) Create one-way entrance and exit to minimize chances of cross infection.

f) If multiple groups of personnel work in the same building, segregate the lounge, resting area, cafeteria etc.

g) Promote regular and thorough hand-washing by employees, contractors and customers

h) Put sanitizing hand rub dispensers in prominent places around the workplace. Make sure these dispensers are regularly refilled

i) Display posters promoting hand-washing – ask your local public health authority for these or look on www.WHO.int

j) Ensure that face masks and/or paper tissues are available at your workplaces, for those who develop a runny nose or cough at work, along with closed bins for hygienically disposing of them. Remind personnel that masks are necessary for health care professionals and sick persons, healthy persons should not use masks as it limits the availability to those that need them.[9]

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[7] https://doh.gov.ae/en/health-information/Coronavirus---COVID--19

[8] https://www.who.int/docs/default-source/coronaviruse/getting-workplace-ready-for-covid-19.pdf?sfvrsn=359a81e7_6

[9] https://www.dha.gov.ae/Covid19/Pages/home.aspx, https://www.who.int/news-room/detail/03-03-2020-shortage-of-personal-protective-equipment-endangering-health-workers-worldwide

k) Brief employees, contractors and customers that if COVID-19 starts spreading in your community anyone with even a mild cough or low-grade fever (37.3 C or more) needs to stay at home. They should also stay home (or work from home) if they have to take simple medications, such as paracetamol/acetaminophen, ibuprofen or aspirin, which may mask symptoms of infection. Make clear to employees that they will be able to count this time off as sick leave.

l) Advise employees and contractors to consult national travel advice before going on trips.

ACTION PLANS

ANSPs should have a plan of what to do if someone becomes ill with suspected COVID-19 at one of the workplace. Consider the following:

a) The plan should cover placing the ill person in a room or area where they are isolated from others in the workplace, limiting the number of people who have contact with the sick person and contacting the local health authorities.

b) In case any staff develop symptoms or there is a confirmed case, the workplace should go through deep cleansing by professionals. This process should be pre-planned for efficient implementation if needed.

c) Consider how to identify persons who may be at risk, and support them, without inviting stigma and discrimination into your workplace. This could include persons who have recently travelled to an area reporting cases, or other personnel who have conditions that put them at higher risk of serious illness (e.g. diabetes, heart and lung disease, older age).

d) Consult with the local public health authority to assist in developing the plan and seek their input.

TRAVELLING

Unless suggested by the health authorities, mandatory quarantine of operational personnel that have travelled but do not display any symptoms may be excessively disruptive to the operation.

Employees who have returned from an area where COVID-19 is spreading should monitor themselves for symptoms for 14 days and take their temperature twice a day.

If they develop even a mild cough or low-grade fever (i.e. a temperature of 37.3°C / 99°F or more) they should stay at home and self-isolate. This means avoiding close contact (one meter or nearer) with other people, including family members. They should also telephone their healthcare provider or the local public health department, giving them details of their recent travel and symptoms.

Caution against additional health verifications or certificates that may place unnecessary burden on the health care system.

CONTINUITY PLANNING

ANSP's should have a plan for an outbreak in the local communities to help prepare the organization for the possibility of an outbreak of COVID-19 in its workplace. It may also be valid for other health emergencies in the future.

Consider:

a) Review the following provisions and guidance:

   i. ICAO Annex 11 Attachment C - MATERIAL RELATING TO CONTINGENCY PLANNING (Annex 11 Chapter 2, 2.32 refers).

   ii. Reference Guide to EUROCONTROL Guidelines for Contingency Planning of Air Navigation Services (including Service Continuity) Edition 2.

b) promote regular teleworking across the organization for non-operational personnel. Teleworking will help the services keep operating while employees stay safe, and the reduction of on-site personnel will minimise the risk of introduction of the virus into the facility. Consider only requiring the physical presence of essential personnel.

c) The plan should address how to keep the services running even if a significant number of employees, contractors and suppliers cannot come to your place of business – either due to local restrictions on travel or because they are ill. Remain within fatigue management and rostering principles.

d) Communicate to employees and contractors about the plan and make sure they are aware of what they need to do – or not do – under the plan. Emphasize key points such as the importance of staying away from work even if they have only mild symptoms or have had to take simple medications (e.g. paracetamol, ibuprofen) which may mask the symptoms.

e) Addresses the mental health and social consequences of a case of COVID-19 in the workplace or in the community and offer information and support.

f) For small and medium-sized organisations without in-house staff health and welfare support, develop partnerships and plans with your local health and social service providers in advance of any emergency.

g) The local or national public health authority may be able to offer support and guidance in developing a plan.

h) ANSPs should ensure rostering practices (such as shift teams) are adapted to minimise potential contact between personnel should someone become ill. Ensure to consult with Employee Associations.