AUTORITE AERONAUTIQUE



REPUBLIC OF CAMEROON

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CAMEROON CIVIL AVIATION AUTHORITY

The Director General

Le Directeur Général

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providing operational guidelines for the management of air passengers in the context of the COVID-19 pandemic

1. **PURPOSE**

The purpose of this circular is to provide operational guidelines to airport operators, aeroplane operators and other relevant stakeholders for the management of airline passengers in the context of the COVID-19 pandemic.

2. SCOPE

This circular covers each phase of the passenger journey and specifies the actions that need to be taken or measures put in place in six travel segments:

- a) before arrival at the airport;
- b) in the departure terminal,
- c) when boarding;
- d) in flight;
- in transit; and
- f) on arrival.

3. **APPLICABILITY**

This circular applies to:

- a) aeroplane operators;
- b) airport operators; and
- C) airport services providers.

4. REFERENCES

- Government measures of riposte facing the COVID-19 pandemic;
- Biosecurity for Air Transport, A Roadmap for Restarting Aviation v.2, IATA, May 2020;
- Operational guidelines for the management of airline passengers in relation to the COVID-19 pandemic, EASA/ECDC, May 2020;
- Aviation Operations During COVID-19, Business Restart and Recovery, ACI, May 2020;
- Take-off: Guidance for Air Travel through the COVID-19 Public Health Crisis, ICAO CART, May 2020.

5. CONTEXT

The COVID-19 pandemic has a significant impact on aviation industry due to the resulting travel restrictions as well as drop in demand among travelers. Millions of flights have been cancelled in the world and the passenger traffic collapses with unprecedented decline in history.

Facilitating the safe and gradual restoration of passenger transport, when the health situation allows it and governments decide to lift travel restrictions by air, is vital for the aviation community. In this regard, it is important for aviation stakeholders to prepare for restarting air transport services while protecting the health of transport workers and passengers as well as restoring public confidence in air travel.

The operational guidelines reflect the current status of knowledge of the COVID-19 pandemic and of effective preventive measures being used. These recommended measures will be regularly evaluated and updated in line with changes in knowledge of the risk of transmission as well as with development of other diagnostic or preventive measures and the evolution of the pandemic

Preventive measures are expected to be gradually reduced over time in line with a reduction of the risk level. Furthermore, as additional reliable mitigating measures become available, these should be considered as alternatives in order to alleviate the burden on passengers and staff, whilst maintaining the appropriate level of health safety in accordance with the level of risk.

6. GENERAL CONSIDERATIONS

 Airport operators should, according to their airport emergency plan, appoint a coordinator in order to ensure the uniform application of preventive measures by all actors providing services at the airport. This coordinator should be in direct contact with the airport and public health authorities.

- Access to airport terminals should be limited to passengers, crew members and staff to the extent possible (airport and other service providers that are required to enter the terminal in order to complete their tasks). Accompanying persons should only be provided access in special circumstances (e.g. accompanying or picking up a passenger requiring assistance – Persons with Reduced Mobility, unaccompanied minors, etc.).
- As a strategy, emphasis should be placed at the following issues:
 - Discouraging symptomatic passengers, crew members and staff from presenting themselves at the airport for departure. This can be achieved with the necessary risk communication and health promotion activities as described below.
 - Implementing physical distancing between individuals, enhanced hygiene measures for staff and passengers and enhanced facility cleaning.
- Health safety promotion materials should be widely available at the airport premises (entrances, information screens, gates, lounges etc.) (see Annex 3). Particular attention should be given to the areas expected to have a high concentration of passengers and to the format: pictograms are strongly encouraged. Materials should be available in English and French. Health safety promotion material should also be made available in the flight cabin according to the aeroplane operators' practices, preferably through video and audio promotional material, or, only when non-physical means are not possible, as leaflets in the pocket seats.

7. PASSENGER MANAGEMENT

For reasons of clarity, these guidelines on passenger management are presented in the following sequence: at all times, before arriving at the departure airport, at the airport, on board the aircraft and at the arrival.

7.1. At all times

The objective of this section is to ensure that passengers arriving at the airport and boarding flights are aware of, and adhere to, the preventive measures put in place in order to ensure, at all times, a safe and healthy environment for travelers, crew members and staff.

1) Passengers should be reminded that physical distancing between individuals of at least one (1) meter must be maintained as much as is possible in the airport, especially at locations where queues build such as at check-in, security screening lanes, border control, immigration, escalators and retail outlets.

- 2) Passengers must wear masks or other face coverings (hereinafter "face masks") in accordance with applicable health guidelines. The wearing of medical face masks should be recommended for all passengers and persons within the airport and aircraft, from the moment they enter the terminal building at the departure airport until they exit the terminal building at the destination airport. Exemption to the obligation to wear face masks can be made for instances where otherwise specified, such as during security checks or border control. Children below 6 years old and people having a medical reason for not wearing face masks can also be exempted.
- 3) Passengers should be reminded that typically, medical face masks should be replaced after being worn for 4 hours, if not advised otherwise by the mask manufacturer, or when becoming wet or soiled, and that they should ensure a sufficient supply of masks adequate for the entire duration of their journey.
- 4) Passengers should be also instructed on the procedures for safe disposal of used face masks; no-touch bins should be available at the airport and single-use waste bags should be available on board and upon disembarking to dispose of used masks. Airport operators and aeroplane operators should include information regarding the proper use and removal of masks and the proper way to dispose of used masks in their health safety promotion material. Additionally, airport operators should also consider making possible acquisition of masks should be made possible at airports in case passengers have no access to face masks beforehand.
- 5) Passengers should be required to observe the following measures at all times unless otherwise advised by airport staff or air crew members:
 - Hand hygiene by washing with water and soap or, where this is not available, using alcohol-based hand sanitizing solution.
 - Respiratory etiquette covering the mouth and nose with a paper towel cover or a flexed elbow when sneezing or coughing, even when wearing a mask.
 - Limiting the direct contact (touch) of any surfaces in the airport and on the aircraft to only when necessary.
- 6) Airport operators, aeroplane operators and service providers should provide the necessary personal protective equipment (PPE) to their staff members and ensure that they are trained in the appropriate use of this PPE:
 - Staff members who interact with passengers directly (e.g. airports security agents, assistants for passengers with reduced mobility, cleaning staff, etc.) should wear a face mask, gloves and their uniforms; uniforms

- should be changed daily, and where uniforms cannot be changed daily, a protection suit should be used as an alternative.
- Staff members who interact with passengers from behind a protection screen do not have to wear personal protective equipment at all times. In addition, if the screens need to have openings for handling documents, passengers should stand away from the counter unless handing in documents and luggage. This may be facilitated with specific floor marking(s), which should be extended to the queue in order to maintain physical distancing.
- Notwithstanding the use of PPE, hand hygiene should be reinforced at all times. When gloves are used they should be regularly changed. Not all types of gloves can be disinfected with alcohol-based solution. Some can deteriorate significantly and contribute to contamination. The disinfection of gloves is therefore not recommended. When gloves are worn by staff, operators should remind them that wearing gloves does not protect against the spread of the virus and alert them to the possible false sense of security they may create if parallel measures are not scrupulously followed.
- 7) Passengers should be regularly instructed via visual and audio messaging, as well as other appropriate means, to adhere to the preventive measures in place at various levels in the airport and on-board the aircraft and give proper consideration to the full suite of preventive measures. They should also be advised of the consequences of not adhering to such measures
- 8) Passengers who do not adhere to the preventive measures in place should:
 - Be refused access to the airport terminal building, to the aircraft cabin, or disembarked, if the events take place before aircraft doors are shut and removed from airport premises by the competent services.
 - If the events take place in flight, the procedures relating to handling cases of unruly passengers should be applied.

7.2. Before arriving at the airport

The objective of this section is:

- to reduce the chances that any passenger with COVID-19 compatible symptoms arrives at the airport;
- to ensure that passengers arriving at the airport are aware of and adhere to the preventive measures put in place.
- 1) Aeroplane operators, in coordination with airport operators, should inform future passengers via promotional measures of the travel restrictions for any passenger that may have COVID-19 compatible symptoms before arriving at the departure airport. This should include the symptoms to be considered.

- Promotional material should encourage symptomatic passengers not to present themselves at the airport for flight.
- 2) Aeroplane operators should inform their passengers that symptomatic passengers identified in the airport by the public health authorities may be refused continuing their travel.
- 3) Aeroplane operators, in coordination with airport operators, should inform passengers that wearing a face mask is mandatory in the airport and on board the aircraft, except where otherwise specified, such as for security checks. Furthermore, they should inform passengers about the expected duration of the preventive measures in place in order to schedule their arrival in the airport in due time. Whilst passengers should be informed of the time needed to complete formalities, care should be taken to keep the time they spend at the airport to a minimum.
- 4) In order to reduce the number of people in the terminal, and consequently facilitate physical distancing, airport operators, in coordination with aeroplane operators, should inform passengers prior to arrival at the airport that access to the terminal is restricted to passengers only. Furthermore, aeroplane operators should inform the passengers that the only authorized accompanying person will be the car driver who provides transportation service to the airport and airport operators should clearly signal the point beyond which the accompanying person are not allowed to cross.
- 5) Aeroplane operators should provide their Passengers with information about COVID-19 symptoms and the risk of possible contact with COVID-19 cases, as well as request them to acknowledge reading this information and sign or electronically authenticate a health statement form that a template can be found in Annex 2. This should be achieved preferably prior to arrival at the airport, for example during the online check in process or via an SMS link, but no longer than 24 hours in advance of the flight. Aeroplane operators should make the passengers aware of the consequences of making a false statement and the fact that symptomatic passengers detected at the airport may not be allowed to continue their travel.
- 6) Whenever possible, passengers should be encouraged to complete checkin processes prior to 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 infrastructure.

7.3. Considerations for the management of passengers in the terminal at departure

The objective of this section is:

 to reduce the residual risk of transmission of the virus from potential asymptomatic contagious passenger; and • to reduce the residual risk of any infected passenger boarding an aircraft.

1) Cleaning and Disinfection - General

- A written plan for enhanced cleaning and disinfection should be agreed upon by the airport operators, service providers and public health authorities, according to the standard operating procedures outlined in the WHO Guide to Hygiene and Sanitation in Aviation. The plan needs to be updated in terms of process, schedule and products, when new information becomes available.
- Cleaning and disinfection of terminal infrastructure and all equipment should be done on a regular basis, in accordance with the aforementioned plan, and its frequency should be increased as needed based on traffic.
- The airport operators and service providers should increase the availability of cleaning and disinfecting products approved by the applicable authorities.
- All cleaning and disinfection staff should be made aware of the cleaning and disinfection plan. It is necessary to ensure staff are utilizing products effectively, including the concentration, method and contact time of disinfectants, and addressing areas that are frequently touched and most likely to be contaminated, such as:
 - Airport information desks, passengers with reduced mobility (PRM) desks, check-in areas, immigration/customs areas, security screening areas, boarding areas, etc;
 - Escalators and lifts, handrails;
 - o Washrooms, toilets and baby changing areas.
 - Luggage trolleys and collection points: cleaned with dispensable wet wipes or disinfectants, ensuring that disposal bins are made available.
 - o Seats prior to security screening and in boarding/check-in areas.
 - o passenger interview booths (see 7.3 2)) should be performed after each use of the booth.
- The use of air conditioning and effective filtration systems should be increased to keep air clean, reduce re-circulation and increase the fresh-air ratio. Horizontal airflows should be limited.

2) Temperature screening at departure

During passengers' temperature screening at departure, the following points should be considered:

- Staff performing manual checks, for example as part of a verification procedure, should wear appropriate protective equipment.
- It is recommended to subject departing passengers entering the terminal to temperature checks immediately after entering the airport premises.
- Airport operators should identify the best location for the temperature control, ideally before check-in and baggage drop-off.
- The temperature check should aim to identify passengers with skin temperature of 38°C or higher. For passengers with skin temperature 38°C or higher temperature checks should be repeated at least once for confirmation purposes. Passengers with elevated skin temperature should the procedures established by the public health authorities.
- Airport operators, in coordination the public health authorities, should ensure separate interview booths for the event of doubtful or probable cases requiring further assessment. These booths should ensure confidentiality and prevent viral transmission to individuals in the neighboring booths. The booths should be disinfected after each use to prevent viral transmission to the next occupants.
- Due to the intensive use, equipment (e.g. ear or other type of thermometers or cameras) should be regularly recalibrated in accordance with the manufacturer's instructions or at even shorter intervals.

3) COVID-19 statement

In line with applicable data protection rules, passengers should provide
a statement regarding their COVID-19 status before being issued a
boarding pass as mentioned in Section 7.2, preferably as part of the
check-in process.

4) Protective screens

 Wherever staff members interact with passengers from a fixed location such as, but not limited to, check-in, ticketing, passport control and information counters, protective screens should be installed in such a way as to allow the handover of the required documents but provide protection to the staff member from the respiratory droplets of passengers, and vice versa. The protection screens should be cleaned and disinfected regularly.

5) Check-in area

 Passengers should be advised/reminded by airport operators, in coordination with aeroplane operators, to adhere to the applicable preventive measures described in point 7.1. Airports should provide

- signage, floor markings and announcements via public address (PA) systems to encourage physical distancing.
- Airports operators should implement measures that reduce congestion within these areas through advanced-planning and monitoring of passenger flows.
- Aeroplane operators, in coordination with the airport operators, should put in place measures to assist passengers using self-check-in procedures, if available, and minimize the amount of hand luggage taken into the cabin in order to expedite the boarding and disembarking procedure and to reduce the movements and potential contamination in the cabin.
- At the traditional check-in counters, aeroplane operators and airport operators should cooperate to use of retractable stanchions and floor signage in the queuing area to encourage physical distancing.
- Self-sanitizing technology may also be considered for integration kiosks with touch screens, to allow for the disinfection of the screens between each use.

6) Security Screening

- Airport Security Units should apply the following checkpoint access procedures:
 - Appropriate procedures should be implemented in coordination with the public health authorities in order to respond to any passengers showing signs of illness.
 - Hand sanitizers and disinfection products should be provided prior to passengers and staff screening access points where possible.
 - Screeners and passengers should maintain physical distancing to the extent possible.
 - 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.
 - Markings should be established on the ground within the queueing area to indicate the proper recommended distancing.
 - 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 minimizes 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. Appropriate signage should be deployed that clearly informs about subsequent steps of the process.

- Airport security 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 minimize the use of manual searches).
- o 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.
- Airport Security Units should apply the following passenger screening procedures:
 - Alcohol-based hand sanitizer should be distributed to staff for the cleaning and disinfection of their hands.
 - Screeners should wear gloves and change them after each manual search.
 - Employees should be advised to wash their hands after removing gloves.
 - 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.
 - 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.
 - 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.
 - o For WTMD alarm resolution, prioritize the use of hand-held metal detectors to identify the cause of alarm, followed by a targeted manual search where the alarm is.

- The use of explosive trace detection (ETD) equipment or explosives detection dogs (EDDs) should not be limited to alarm resolution.
 Random use of such explosive detection should be encouraged and leveraged where possible.
- In order to resolve any alarms or concerns identified by screeners, the use of ETD or EDD should be considered in lieu of manual searches, where appropriate, and subject to the nature of the screener's concerns.
- o 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.
- Personnel performing body checks should wear face shields in addition to their face masks to further mitigate the risk of droplet inhalation caused by their very close contact with passengers during body-checks.

7) Terminal Airside Area

- Aeroplane operators and airport operators should cooperate to ensure physical distancing is respected wherever feasible, especially during preboarding and boarding.
- Aeroplane operators in coordination with airport operators and relevant service providers should ensure efficient boarding processes limiting boarding time and contact risk. Depending on the terminal facilities and apron layout, boarding the aircraft should be carried out by walking in a spaced manner from the gate to the parked aircraft on the apron, or via buses to the parked aircraft, and then via stairs or air bridges directly onto the aircraft. Where buses are used in the boarding process, an increased quantity should be considered in order to accommodate for physical distancing inside them. Where boarding is performed using a boarding bridge, boarding by rows starting with the furthest row from the aircraft doors used in the embarkation process or, alternatively, all window seats, then middle seats, followed by aisle seats should be considered.
- Airport operators should increase use of all other opportunities of selfscanning of documents when identification is needed.
- Airport operators should make available multiple alcohol-based hand sanitizer stations throughout the airport with adequate signage for passengers. Airport operators in coordination with the aeroplane operator and service providers may consider placing on the final part of the stair platform (or bridge) an automated disinfection dispenser where the passengers can disinfect their hands before boarding as well as a



disinfection tray where the passengers have to step on a disinfectant soaked carpet.

- Installation of touch-free equipment in toilet facilities such as the following should be considered:
 - automated door systems;
 - o automatic toilet flushing system;
 - o taps and soap/hand sanitizer dispensers; and
 - o automated hand towel dispensers.
- All facilities, particularly frequently touched surfaces used in the boarding process should be subject to enhanced cleaning principles described in 7.3 1).

7.4. Management of passengers on-board the aircraft

The objective of this section is to reduce the residual risk of transmission of COVID-19 in an aircraft, in the event an asymptomatic passenger is on board.

- 1) Aeroplane operators and airport operators should collaborate to ensure that passengers are not kept on board of an aircraft without proper ventilation for longer than 30 minutes.
- 2) Aeroplane operators should provide guidance material to passengers regarding application of the preventive measures on board, including:
 - Hand hygiene, particularly before eating or drinking and after use of the toilet;
 - Appropriate use of face masks;
 - Respiratory etiquette;
 - Limiting contact with cabin surfaces;
 - Minimized on-board service.
 - Reducing the use of individual air supply nozzles to the maximum extent possible, unless otherwise recommended by the aircraft manufacturer
- 3) Aeroplane operators should include in their safety demonstrations that, in case of emergency, passengers should remove their face masks before using the aircraft oxygen masks. Furthermore, aeroplane operators should instruct their crew members to remove their protective face masks in case of emergency in order to facilitate the communication of instructions to passengers.
- 4) Aeroplane operators should put measures into place to avoid passengers queuing in the aisle or the galleys for the use of the lavatories. Furthermore, subject to sufficient lavatories on board, the aeroplane operators should

- reserve a lavatory, preferably the closest one to the flight deck, for crew use only.
- 5) In addition to the other health and hygiene measures that must be observed at all times, where allowed by the passenger load, cabin configuration and mass and balance requirements, aeroplane operators should ensure, to the extent possible, physical distancing among passengers. Family members and individuals travelling together as part of the same household can be seated next to each other. The seat allocation process should be modified accordingly.
- 6) If physical distancing cannot be guaranteed because of the passenger load, seat configuration or other operational constraints, passengers and crew members on board an aircraft should adhere at all times to all the other preventive measures including strict hand hygiene and respiratory etiquette and should wear a face mask.
- 7) Aeroplane operators should reduce on-board service to the minimum necessary to ensure comfort and wellbeing standards for passengers and limit the contact between crew members and passengers giving proper consideration to the duration of the flight. Among these measures the following should be considered:
 - No duty free on board;
 - Reduced food and drink service:
 - Preference for pre-packaged and sealed food and drink products, such as canned drinks;

Passengers should be reminded to remain seated with their seatbelt on as much as possible.

- 8) Although passengers should have been reminded to have a sufficient supply of masks for the duration of their journey, aeroplane operators should carry a sufficient amount of face masks on board to provide to passengers, especially for long haul flights where the need to change masks may be advised by the public health authorities. A safe mask disposal process should be put in place.
- 9) Aeroplane operators, individually or via their representative bodies, should provide health promotional materials in advance as well as on board aircraft explaining all the risk mitigation measures put in place, such as the wearing of face masks, hygiene measures, reduced service, air filtration, ventilation and exchange, to reassure passengers and increase their adherence to the implemented measures. In this context, aeroplane operators should consider the operational recommendations and guidance published the CCAA and other CAAs / aviation organizations.

10) Extra attention needs to be devoted to the prevention and treatment of unruly passengers in the context of the pressures imposed by the pandemic. This should consider multi-layered actions starting with passenger information and preparation about the measures in place and giving attention to the procedures and crew actions necessary mitigate this risk.

7.5. Management of passengers on board with COVID-19 compatible symptoms

The objective of this Section is to reduce the risk of transmission from a symptomatic passenger on board inflight.

- 1) In the event that, after take-off, a passenger shows symptoms compatible with COVID-19 such as fever, persistent cough, vomiting, diarrhoea, difficulty breathing or other flu-like symptoms, the following measures should be considered:
 - The crew should make sure that the passenger is wearing their face mask properly and has additional masks available to replace it in case it becomes wet after coughing or sneezing. If a face mask cannot be tolerated, the sick person should cover their mouth and nose with tissues when coughing or sneezing. In the event the passenger is having difficulty breathing, medical assistance should be sought and oxygen supplementation offered.
 - The passenger should be isolated on-board. Depending on the configuration of the aircraft the actual occupancy and distribution of passengers, the position of the symptomatic case, and to the extent that is practicable:
 - o an isolation area should be defined, leaving, if possible, two (2) rows of seats cleared in each direction around the suspected passenger.
 - o the suspected passenger should be seated in the last row window seat, preferably on the side of the aircraft where the Outflow Valve is.
 - where possible the lavatory closest to the suspected passenger should be specifically designated for him and not be used by the rest of the passengers or the crew.
 - o according to the composition of the cabin crew, the Senior Cabin Crew member should designate specific crew member(s) to provide the necessary in-flight service to the isolation area(s). This cabin crew member should be one that had prior contact with the suspected passenger. The designated crew member should make use of the PPE in the aircraft's Universal Precaution Kit. The designated crew member should minimize close contact with

other crew members and avoid other unnecessary contact with other passengers.

- Where possible, the individual air supply nozzle for the symptomatic passenger should be turned off in order to limit the potential spread of droplets.
- If the suspected passenger is travelling accompanied, the passenger's companions should be also confined in the isolation area even if they do not exhibit any symptoms.
- The flight crew should inform destination airport via the air traffic control system, follow their instructions and complete the health part of the aircraft general declaration to register the health information on-board and submit it to the Point of Entry health authorities when required by a State's representative.
- After the flight has landed, the COVID-19 suspected passengers, the other passengers and the crew members should be dealt with in accordance with the instructions of the public health authorities in terms of testing, transport and quarantine.
- For an inbound flight, after removal of the COVID-19 suspected case, cleaning and disinfection of the aircraft should be performed in accordance with the State guidance on aircraft cleaning and disinfection. Used PPE, such as aprons, face masks, face shields should be disposed in a separate tightly closed waste bag which can be disposed as regular waste.
- 2) If a suspected passenger is identified on board before take-off, the public health authorities should be informed and their instructions followed. At this point, if no specific direct contact has taken place between the symptomatic passenger and crew members, no additional measures need be taken in regard to the management of the crew members, unless as otherwise advised by the public health authorities.

7.6. Management of arriving and transit passengers

The objective of this Section is to reduce the residual risk that, should an infected person have been on a flight or at the airport, they would infect other passengers at the arrival airport and/or in the destination region.

1) Disembarking

 Passengers should be reminded by airport operators, in coordination with aeroplane operators, to adhere to the applicable preventive measures described in section 7.1 and to the relevant principles set in the check-in and boarding set forth in section 7.3.

- Aeroplane operators and airport operators should cooperate to ensure physical distancing is practiced as much as possible during the disembarkation procedure. Used face masks should be discarded safely in a separate tightly closed waste bag, which can be disposed as regular waste.
- Depending on the terminal facilities and apron layout, disembarkation can be done via buses from the parked aircraft or using air bridges directly into the terminal. Where buses are used in the disembarkation process, the use of an increased quantity of buses should be considered to accommodate for the physical distancing inside them. Disembarkation should be performed by rows starting with the closest rows to the exits in use, in the order aisle, middle and window seats, or an alternative procedure that would ensure physical distancing to the maximum extent possible and avoid queuing.
- All facilities used in the disembarkation process should be subject to enhanced cleaning and ventilation as described section 7.3.

2) Passenger locator card (PLC)

 Aeroplane operators should provide the passenger locator card to the public health authorities upon request, for contact tracing purposes, without undue delay and without prejudice to applicable data protection rules.

3) Temperature screening at arrival

- During passengers temperature screening at arrival, the points made in Section 7.3 2) should be considered.
- Passengers having fever which, following the assessment, are considered COVID-19 suspect should be dealt with in accordance with the instructions of the public health authorities in terms of testing, transport and quarantine. Without prejudice to the previous, the symptomatic passenger should not, under any circumstance, be repatriated on a regular passenger flight.

4) Transfer

• Where transfer security screening is needed, it should follow appropriate sanitary requirements as previously described in the departure process.

5) Baggage claim and exit from airport

 Passengers should be advised by the airport operators to give proper consideration to the preventive measures as described in section 7.1 at all times and to the relevant principles set in the check-in and boarding section of point 7.3, including the use of airport facilities.

- Airport operators should make all efforts needed to provide a speedy baggage claim process and ensure that passengers are not made to wait for excessive amounts of time in the baggage claim area.
- Airport operators should align cleaning schedules based on flight schedules to ensure a more frequent, in-depth disinfection of luggage carts, washrooms, elevator buttons, rails, etc.
- Self-service kiosks or online options for passengers needing to report lost or damaged luggage should be made available.
- The use of retractable stanchions and floor markings should be considered as a temporary measure to encourage physical distancing at the baggage carousel.
- Airline agents at lost luggage counters should be provided with a protective screen when possible.
- Baggage tracking information should be shared with passengers so that they are able to make a baggage claim, in case of baggage mishandling, without waiting in the reclaim area.
- Airports operators, in coordination with the public health authorities, should establish Protocols for cleaning and disinfection of the area.
- Airport operators should inform arriving passengers that after collecting their baggage they are advised to leave arrival terminal as soon as possible to minimize the possibility of transmission.
- Airport operators should inform the meet and greet individuals that access to the terminal is limited to passengers, crew members and staff.



ANNEX 1 – MATRIX OF MEASURES PER STAKEHOLDER

Measure	Airport operators	Aeroplane operators	Airport staff	Service providers	Crew members	Passengers
Physical distancing	Wherever possible	Wherever possible	Wherever possible	Wherever possible	Wherever possible	Wherever possible
Hand hygiene, respiratory etiquette	Yes	Yes	Yes	Yes	Yes	Yes
Face masks	Yes	Yes	Yes	Yes	Yes	Yes
Health safety promotion material	Yes, in coordination, See annex 3		Yes, adhere to the recommen dations and disseminate the materials/information where required under their tasks	Yes, adhere to the recommen dations and disseminate the materials/in formation where required under their tasks	Yes, adhere to the recommen dations and disseminate the materials/information where required under their tasks	Yes, read and adhere to the recommend ations
Cleaning and Disinfection	Yes, See point 7.3	Yes	N/A	Yes	N/A	N/A
Health statement	Yes, in electronic format. Coordinate the format and assessment.		N/A	N/A	N/A	Yes, fill the provided statement within the 24 h before the flight
Temperatur e screening	Yes, required by national authorities	Yes, required by national authorities	Yes, required by national authorities	Yes, required by national authorities	Yes, required by national authorities	Yes, required by national authorities
Passenger assessment booths	Yes	N/A	N/A	N/A	N/A	Yes, doubtful cases should be further assessed.
Reduced crew – passenger interaction	N/A	Yes. Essential services only. Avoid lavatory queuing.	N/A	N/A	Yes	Yes, adhere to the recommend ations

Measure	Airport operators	Aeroplane operators	Airport staff	Service providers	Crew members	Passengers
		Designate crew lavatory				
Special disembarki ng procedure	Yes, in coordi public health	ination with the authorities.	Yes, where applicable should enforce the instructions received from the public health authorities	Yes, where applicable enforce the instructions received from the public health authorities	Yes, enforce the instructions received from the public health authorities	Yes, follow the instructions of the crew and ground personnel



ANNEX 2 - NOTIFICATION OF HEALTH STATUS PRIOR TO ISSUING BOARDING PASS

An example of a notification of the health status, to be completed prior to issuing a boarding pass, is presented below. It should be made clear that this applies for each individual passenger in a booking for more than one person.

Date	Date					
Nom o	comple	et	Signature			
If any of the above statements apply to your situation and in order to avoid potential spread of the virus, you shall not to present yourself at the airport or leave immediately the airport if you have not disclosed the information to [Name of the airline] before your arrival.						
Yes	No	I am required by national regulations to be in quarantine for reasons related to COVID-19 for a period that includes the date of the fight,				
Yes	No	I have been in close contact (e.g. less than 2 meters for more than 15 minutes) with a person who has COVID-19 in the 14 days prior to my flight.				
Yes	No	I have had any of the COVID-19 relevant symptoms (fever; newly developed cough; loss of taste or smell; shortness of breath) at any time during the 8 days prior to my flight.				
Yes	No	I have been diagnosed with COVID-19 at any time during the 14 days prior to my flight.				
I understand that I must advise [name of the airline], as soon as possible before boarding, if any of the following statements apply: (This form should be completed no later than 24 hours in advance of the flight)						
Lunc	derstan	d that I must advise [name of the cirling] as				

This declaration should be updated in line with latest developments on microbiological testing for COVID-19.

ANNEX 3 – HEALTH SAFETY PROMOTION

General messages:

- Wear medical face masks, ensure their correct use and disposal, and replace every 4 hours (unless instructions say otherwise).
- Observe physical distancing (at least 1 meter).
- Wash hands regularly for at least 20 secs with soap and water or, where not available, use alcohol-based hand sanitizing solutions.
- Cover the mouth and nose with a tissue or flexed elbow when sneezing or coughing. Throw away the tissue directly after usage, in one of the bins fitted out for this purpose in the terminal.
- Limit direct contact with surfaces and people.
- Be kind to each other it's the only way we will get through this.

Before leaving for the airport:

- Complete the Health Monitoring Questionnaire from your airline.
- Don't travel to the airport if you have answered yes to any of the questions in the questionnaire.
- Be aware that only travelers should enter the airport terminal at arrival and departure. (The only other people who should enter the terminal are people accompanying or picking up a passenger requiring assistance – Persons with Reduced Mobility or unaccompanied minors).
- Read the health safety promotion material from your airline.
- Check if you have sufficient medical face masks and sanitizing gel for your journey.
- Ensure to leave enough time for your journey including checks at the airport.

At the airport:

- Ask a member of staff in case you have any questions / doubts or feel uneasy (they are there to help you in this new situation).
- Be prepared for temperature screening at the airport.
- Have your Health Monitoring Questionnaire ready (if not electronic).
- Make use of physical barriers.
- Check-in your bag whenever possible.
- Minimize your use of airport facilities.
- Expect to be denied boarding if you do not wear a mask.



On board the aircraft:

- Ask the cabin crew if you have any questions / doubts or feel uneasy (they are there to help you in this new situation) and be nice to them.
- Watch the cabin safety demonstration so you know what is happening on your flight.
- Reduce the use of individual air supply nozzles to the maximum extent possible.

