



Sultanate of Oman  
Ministry of Health

## **Preparedness and Response Plan for COVID-19**

# **Air Carriers Guidelines**

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**Directorate General for Diseases Surveillances and Control**

## **Air Carriers Guidance for COVID-19**

This document has been developed as part of the national preparedness and response plan for COVID-19 outbreak to assist local air carriers with this public health event management as directed by the IHR in a process that are commensurate to the risks while avoiding unnecessary interference with international traffic and trade. Employer's occupational health program may choose to exceed these recommendations based on their own policy.

### **A. Guidance for crews of air carriers operating flights from/to areas affected with COVID-19 outbreak:**

- The crew team to travel as a group in private transport provided by the air carrier when traveling between the airport and hotel
- Minimize contact with ground personnel and time in public areas while moving between the aircraft and the private transport.
- Do not use public transportation, including when traveling between the airport and hotel.
- Stay in your hotel to the maximum extent feasible.
- Minimize going out into the general population, and use social distancing (maintain a distance of approximately 6 feet, if possible) whenever out in public.
- Avoid crowds, stores, sporting or mass entertainment events, and other situations likely to attract large numbers of people.
- Wash your hands often with soap and water for at least 20 seconds or use at least a 60% alcohol based hand sanitizer.
- Avoid touching your face if your hands not clean.
- Report any potential exposure to your employers
- Self-monitor your health condition, following the guidance provided by your employer's occupational health program.
- Take your temperature with a thermometer twice a day and watch for cough or difficulty breathing.
- Fever means feeling feverish or having a measured temperature of 100.4 degrees F (38 degrees C) or higher.
- Immediately report any fever, cough, or difficulty breathing to your employer's occupational health program.
- Seek occupational health clearance before working your next flight segment.
- Your employer's occupational health program also is recommended to check in with you periodically to make sure you are well.

### **B. Guidance for air carriers housing flight and cabin crews while in areas affected with COVID-19 outbreak:**

- Arrange to move flight crews as a group between the airport and the hotel aboard private ground transport that has been sanitized in advance.
- Advise your crews to avoid public transport unless it is an emergency.
- Arrange to house flight crews in hotels that are in close proximity to the airport.

- Ensure that the hotel rooms are sanitized in advance of the crews' arrival.
- Provide crew with at least a 60% alcohol-based hand sanitizer.
- Crews must minimize going out into the general population, and use social distancing (maintain a distance of approximately 6 feet, if possible) whenever out in public.
- Encourage crews to avoid crowds, stores, sporting or mass entertainment events, and other situations likely to attract large numbers of people.

**C. Guidance for air carriers supervising self-monitoring of flight and cabin crews who have had layovers in COVID-19 endemic area:**

- Crewmembers may commute to their residence.
- Crewmembers may continue to work subsequent flight segments, as long as they remain asymptomatic.
- Supervise crew self-monitoring of their health condition through the carrier's occupational health program.
- Direct crewmembers to take their temperature twice daily.
- Remind crewmembers to immediately report a fever, cough, or any difficulty breathing.
- Check in with crewmembers periodically to make sure they continue to self-monitor and are not symptomatic.
- Crewmembers who are symptomatic with fever, cough or difficulty breathing should not work subsequent flight segments until they have been cleared by occupational health and public health officials.
- Immediately report to the local health department any crewmember who has traveled to endemic area within the last 14 days and has a fever, cough, difficulty breathing, or other flu-like symptoms
- Provide information to crewmembers regarding medical facilities in the vicinity of cities in which crew members remain overnight.
- Develop a plan in the event a crewmember becomes symptomatic while in the crewmember's domicile or personal residence.
- Advise crewmembers to report any fever, cough, or difficulty breathing to their local health department where they are located when they become symptomatic, in addition to the employer's occupational health program.

**D. Managing an exposure event for symptomatic passenger/crew member :**

An important element of public health investigation is the follow up and investigation of individuals who may have been exposed and may therefore be at risk of developing a disease. Rational decision-making about which individuals should be included in contact investigation and the use of passenger locator forms should be promoted by both the aviation and public health sectors.

## 1. Managing crew member contacts

- Airlines should contact crew members who may have been exposed to a traveler/crew member with confirmed COVID-19 and assess them for symptoms (fever, cough, bodyache).
- For the involved flight the contact investigations includes all crew on board, including pilots.
  - Exposed crew members who **do not** have symptoms can resume work **but** should be monitored for their health with the airline's oversight for 14 days after the last possible of exposure.
    - Crewmembers may commute to their residence after the flight segment.
    - Crewmembers may continue to work subsequent flight segments, as long as they remain asymptomatic.
    - For 14 days post exposure, self-monitor health condition with airline's oversight.
    - Exclusion is recommended once they report symptoms within 14 days period from exposure
  - **Exposed** cabin crewmembers **with symptoms** should **Be excluded** from work and get examined by a health team as a suspected case and managed accordingly.
- Crew members who **develop signs and symptoms** of COVID-19 should
  - Limit contact with others as much as possible.
  - Notify airline supervisor of the illness.
  - Notify the local health department of the crewmember's symptoms.
  - Contact a local health facility for medical evaluation and management.
  - Before visiting a healthcare facility, sick crewmembers should inform staff at the facility about their illness and recent exposure to COVID-19 case, so the facility can take necessary precautions to prevent transmission to others.
- Crew members diagnosed with COVID-19 should
  - Notify airline supervisor of the COVID-19 diagnosis.
  - Remain isolated until no longer infectious—for 2 days after end of symptoms.
  - Crewmembers can return to work on Day 3 after recovery from illness.

## 2. Management of passengers exposure within a flight :

- Criteria and algorithms, which facilitate the decision-making process in contact tracing, are available and should be consulted; decisions on contact tracing should also consider the risk assessment of the specific event<sup>1</sup>. This include if index case was a passenger or crewmember and nature of exposure.
- The contact tracing and assessment of further management steps should be undertaken in coordination with border port clinic.
- The nature of air travel creates additional challenges for passengers contact tracing . Passengers who are tourists will disperse at their destinations, possibly travelling to inaccessible sites or other regions/countries, particularly those travellers who are not part of a formal tour group.

- The value of using health resources to conduct extensive contact investigations must be balanced with consideration of other public health measures, including travel health notices.
- Contact tracing to be facilitated if airlines and/or other agencies cooperate in the provision of timely passenger information, although this must be balanced against passengers' privacy considerations. WHO, ICAO and IATA<sup>2</sup> advocate the use of PLF to assist in contact tracing if the event is detected on board the flight.
- Currently, the best way to obtain contact tracing information is for the public health authority to ask the airline(s) involved for the specific information they would like to have (mobile phone number, email address, etc.). During a case, outbreak investigation or outbreak, where contacts are in transit internationally, port health or the competent authority should communicate with the next country based on the risk assessment.

### References:

1. Communicable Diseases Network Australia. Follow-up of communicable diseases reported among travellers on aeroplanes. *Commun Dis Intell.* 2007;28:270-2.
2. Emergency response plan - a template for air carriers; public health emergency. Montreal—Geneva: International Air Transport Association; 2009 ([http://www.iata.org/ whatwedo/safety/health/Documents/airlines-erp-checklist.pdf](http://www.iata.org/whatwedo/safety/health/Documents/airlines-erp-checklist.pdf), accessed 25 October 2015).
3. SAFO 20001; 2019 Novel Coronavirus: Interim Health Guidance for Air Carrier and Crews
4. Handbook for the management of public health events in air transport: updated with information on Ebola virus disease and Middle East respiratory syndrome coronavirus. ISBN 978 92 4 151016 5
5. CDC Updated Interim Guidance for Airlines and Airline Crew: Coronavirus Disease 2019 (COVID-19). Updated March 04, 2020