

**MINUTES OF MEETING**  
**Joint OPS TAG & SSCC meeting**  
**HEMS operations**  
**28 April 2015**  
**Cologne, Youth Hostel, Room 'Turin'**

Organised by Flight Standards Directorate, Air Operations Department, Air Operations Regulations Section

List of Participants

Attendees	<b>Members and appointed experts of TAG OPS&amp;FCL and SSCC</b>	
	<b>EASA:</b>	
	Claudio Trevisan, Chair	(CTR)
	Daniela Defossar	(DDE)
	Bas van der Weide	(BVW)
	Oyvind Friis-Ottessen	(OFO)
	Betty Lecouturier	(BLE)
	Adina Szonyi	(ASZ)

**AGENDA**

1.	Welcome and introduction .....	2
2.	Adoption of the agenda .....	2
3.	HEMS philosophy – background of the EASA present rules .....	2
4.	HEMS vs State activities .....	2
5.	Overview of RMT in the area of HEMS.....	4
6.	Overview of Article 14 cases .....	4
7.	HEMS in the Commission Regulation (EU) 965/2012 – a snapshot spring 2015 .....	5
8.	HEMS French specificity .....	6
9.	Presentation by EHA on “HEMS implementation in Europe” – detailed for Spain and Switzerland .....	6
10.	Air Zermatt on behalf of FOCA on the HEMS implementation in Switzerland .....	7
11.	HEMS in mountain area under Regulation (EU) 965/2012 .....	7
12.	Viewpoint of ECA on HEMS operations.....	8
13.	AOB.....	8
14.	Conclusions of the meeting and closing.....	8

**Related Links/Documents:**

Agenda and minutes to be published on the [EASA website](#).

<p><b>1. Welcome and introduction</b>  <i>Presented by: Claudio Trevisan (CTR)</i></p> <p>The meeting started at 9:30 a.m. and CTR welcomed the attendees.</p>
<p><b>2. Adoption of the agenda</b>  <i>Presented by: Claudio Trevisan (CTR)</i></p> <p>Agenda was adopted as presented.</p>
<p><b>3. HEMS philosophy – background of the EASA present rules</b>  <i>Presented by: Bas van der Weide (BVW)</i></p> <p>Presentation by EASA.</p> <p>There were no questions.</p>
<p><b>4. HEMS vs State activities</b>  <i>Presented by: Bas van der Weide (BVW)</i></p> <p>Presentation by EASA.</p> <p>The Legal Service of EASA, in coordination with the Legal Service of the Commission, is preparing a paper on the understanding of HEMS vs State activities. The paper is not yet finalised.</p> <p><b>Questions &amp; Answers</b></p> <p>One MS asked whether mountain rescue could be considered as ‘similar services’.</p> <p>EASA answered that such a specialised task as mountain rescue – long line / short line operations for rescue – are not considered HEMS or CAT (operation for remuneration). Such issues are part of the clarification being worked on by the Legal Services.</p> <p>One Member State (MS) explained that they had decided to put the HEMS operations under national regulations for a limited period, to gain more time to analyse the situation and find an appropriate solution for the mountain rescue operations – which would be an ideal combination between HEMS and rescue operations. All the HEMS operators of this MS are AOC holders with a specific approval for HEMS operations.</p> <p>One MS asked whether Search and Rescue (SAR) should be considered as ‘similar service’ and covered by national regulations. The Agency answered that SAR is specifically mentioned in Art. 1(2) of the BR as being excluded from the scope of EU competence. This means that MS need to have national legislation for these kind of operations which should as far as practicable follow the objectives of the BR.</p> <p>One participant mentioned as an example Spain, which developed rules for governmental activities. Mountain rescue is included within the SAR operations. However, the problem is the release to service of the same helicopters in compliance with Part-145 when they operate under the EU rules.</p> <p>One MS asked whether it was really good enough for a MS to declare HEMS operations as ‘similar services’ and take them outside the EU rules.</p> <p>The Agency answered that if a state chose to declare HEMS as ‘similar services’ and thus take them outside the Basic Regulation, then the aircraft and the pilot licensing should also be taken out of the Basic Regulation (BR). The consequences would reflect not only in the OPS domain, but also in airworthiness and aircrew licensing. The aircraft will not be maintained anymore under the airworthiness rules (Part-M and Part-145), but under the national rules. This might make it very difficult for an operator to bring it back into the system regulated by the EU rules.</p> <p>The revision to the BR includes a proposal for a voluntary opt-in: this means that a MS may decide to opt-in for these operations (so to include them into the BR) mainly for airworthiness and licensing, with the purpose of applying harmonised rules for these domains; OPS was excluded because of the possibly numerous</p>



operational exemptions required. Some SAR operations are conducted by AOC holders, however this does not mean that in such a case they are performed under the BR. What always counts is the purpose of the flight. The SAR operation must always be performed outside the BR. If it is outside the BR scope, then it's not under the AOC. Another example is the Police performing HEMS operations: it would mean for the Police to hold an AOC and to comply with all EU requirements if the MS has not declared it a similar or police service.

The Commission representative expressed the EC view on declaring HEMS as 'similar services', mentioning another perspective: many operators already comply with the CAT rules. They have invested heavily in the airworthiness of the aircraft, pilot qualifications and training etc. in order to comply with the rules. Any other future arrangement that would exclude them from the BR would be in breach of the free trade / level playing field principles. This perspective should not be forgotten!

One participant said that there are different regions in Europe where the types of operation are mixed and cannot be divided as easily as on paper: mountain rescue, SAR, HEMS. It is difficult for a pilot to decide which rules to apply and to shift from mountain rescue rules to HEMS rules and then to SAR, etc. A pilot should not take such a decision during the mission.

EASA confirmed that the rules by which the entire mission is conducted should not change during the flight. A flight once started as SAR should stay as such until it is finished, and not change into HEMS during the flight. As an example of how this could be implemented, there could be a central dispatch service, which would decide from the very beginning whether one operation would be HEMS or SAR. Another solution would be a split service between rescue and HEMS where HEMS takes it over after the rescue extraction.

One MS stated that a solution is needed for the whole system, not only for HEMS or for OPS. There is the question of national rules versus EU rules when the same aircraft is used for SAR (which is not covered by the BR) and HEMS. Should we shift some of the operations and place them under the national rules? There has been a long debate on this for many years.

There are several issues that should be considered at a horizontal level and the BR should be amended accordingly:

- the licences aspect: there cannot be national licences for SAR operations, the EU licences should be accepted;
- the airworthiness aspect: there is a dual use of the aircraft - a mission starts as SAR, but the helicopter needs a release to service as the aircraft is under the EU system. The suggestion for the Agency is to try to coordinate the rulemaking tasks to have ONE way forward;
- The insurance aspect: who is responsible in case of an accident? Who covers this activity during which the accident takes place if the mission is so unclearly split into, e.g., 3 types of operation (mountain rescue, SAR and HEMS)?

In Spain the national rules for SAR will enter into force on 01.06.2015. The national regulation is made of a mixture of SPO rules and organisational requirements from CAT. Spain has tried to draw the line between HEMS and SAR taking into account HHO (helicopter hoist operations), landing sites, etc., but this is really difficult. Possibly not all questions and concerns have been addressed to a full satisfaction. There are problems on the performance side as well (not only with mountain rescue, but whenever performance is difficult to comply with).

One MS called for a practical approach: how could one split a flight into 2 types of operation? In mountain areas, any HEMS activity is preceded by the rescue phase of the flight. In this case it is very simple to say that rescue is part of the HEMS operation. One cannot stop the helicopter and change the type of operation. The definition of SAR in the BR should be limited to aircraft accidents. A pragmatic approach is needed: the BR definition of SAR should be limited to the very big events (earthquakes, major accidents) in line with ICAO Annex 12. That is clearly a State obligation, where the State can operate bypassing any rule as the quantity of people involved in the event is very high.

In Italy, mountain rescue is considered to be part of the HEMS operation. In the JAA definition, SAR was part



of aerial work. Now it can no longer be tolerated what was accepted in the JAA system as a “technical phase of the flight” to be left outside the CAT rules. Nowadays there are risk assessment tools that can be used and deal with such situations.

## **5. Overview of RMT in the area of HEMS**

*Presented by: Betty Lecouturier (EASA), Darko Vučić (B&H CAA)*

- a. Betty Lecouturier (EASA) presented the status of the RMT.0346/0492, ‘FTL for (H)EMS’.

This rulemaking task (RMT) has been postponed. NPA is to be published in the first quarter of 2016.

- b. Darko Vučić (ex-EASA, now B&H TAG) presented the status of the RMT on HEMS performance, PIS and HEMS flight at night. The task is presently on hold.

One MS asked EASA to provide some explanations because this MS considered that HEMS is not a similar activity but a CAT activity. However, in this country there is a strong opposition to that.

A similar question is asked in another MS, regarding coastguard helicopter operations vs commercial operators performing HEMS. Coastguard flights including medical flights are regulated at national level. Some commercial operators complain about unfair competition as the Government performs HEMS operations in particular on the coast areas without complying with the HEMS rules for CAT operators. Another topic is HEMS VFR at night: there is a huge difference in the operating conditions between the north and the south of the country since in the north there is almost no daylight for a long period.

One participant asked what would happen to this RMT. EASA answered that it is in the process of employing a seconded national expert who would resume the task.

## **6. Overview of Article 14 cases**

*Presented by: Oyvind Friis-Ottessen (EASA)*

EASA presented the 14 derogations and exemptions received so far in OPS and related to HEMS (BR, Art. 6 and Art. 14).

The cases concern an Art 14(1) on HEMS flights at night where EASA has been tasked by the EASA Committee to conduct an impact assessment and propose a compromise solution that could be acceptable to all MS. The solution should allow for a level playing field and leave sufficient flexibility for MS to implement safety measures once the need for such measures has been identified.

Some other Art. 14 cases address operational needs of a limited duration or long term derogations from the rules. In the latter case, if acceptable and a general case, EASA will also propose a rule change. EASA advises MS to double check the justification for an exemption/derogation before putting it forward, and, possibly, to contact the Agency to discuss any issue beforehand. Art. 14 is not to be used to exempt from the rules for “inconvenience” reasons or to preserve national deviations.

For the Agency, receiving many article 14 cases could be an indication that the rules are too prescriptive. The political decision is to have harmonised EU HEMS rules. Consequently, everybody should try to make a move towards these harmonised rules, while EASA can work on specific topics where there is a need to change the rule.

Article 14 cases are published on a dedicated page on EASA website for 14(6) recommendations and 14(6) adopted measures. Once the EC recommendation on an Article 14(6) is positive, it may be applied by other MS if wanted. Art. 14(4) are more individual cases, not of general interest. The Agency should publish the Art. 14(1) cases as well.

One MS asked what happens if EASA gives a negative recommendation on an Article 14 case. EASA answered that the Agency assesses the case, then sends the recommendation to the Commission and a letter to the MS, inviting that MS to revoke it. Legally, it is the EC that takes the negative decision.



One participant complained that the goal of such operations – saving the patient’s life – is often forgotten. An operator cannot explain to the families of the patients they try to rescue that the rules are too stringent and are difficult to implement. The operators do not understand why the rules existing before, which were safe enough, are not sufficient anymore. EASA asked for higher level of safety which the industry achieved, so it is not clear where this request for higher level of safety is heading further.

EASA replied that the HEMS rules are based on certain criteria, risk mitigations and assumptions. Operators also apply a certain risk assessment before the flight and one cannot have total flexibility to leave the decision to the pilot. If rules are too restrictive, the Agency is here to listen to the problems. The political decision to regulate HEMS under the European community had been taken a long time ago. When rules are too prescriptive and hinder operations, the Agency asks the stakeholders to come forward with proposals on how to change the rules. The Agency also noted that with the new performance based approach to regulations, we are moving away from harmonised rules towards more customised and individual solutions, which is not bad – this is another political decision agreed upon –, but is at the expense of a level playing field.

One comment was that the same conditions which are perfectly fit for UK cannot be applied to all Europe. Countries cannot have the same rules in the whole Europe because the conditions are different.

Another comment was that many countries do not have access to the HEMS system.

According to some comments, instrument rating and night vision have been a requirement for many years not only in the UK, while others stated that IR did not help them in night operations.

One participant said that when considering hoist operations at certain altitudes, a twin engine is more dangerous than a single-engine helicopter. More generally: Europe is large, there are different areas, we always talk about harmonisation but we need to give access to HEMS, today 60 million people don’t have it; if we continue like that, it will get worse.

One participant suggested to regulate according to the different types of operating areas, rather than apply the rules at national level, because the operating conditions depend on the geographical areas.

EASA reminded that the aviation risk should be proportionate to the task. Aviation risk compared to the patient risk is difficult to address in the rule, keeping in mind that ‘aviation risks’ address in the first place a third party risk, and only secondly those of the persons in the helicopter.

EASA stated again that the rules are not supposed to change during the mission.

## **7. HEMS in the Commission Regulation (EU) 965/2012 – a snapshot spring 2015**

*Presented by: Reinhard Kraxner, EHAC*

EHAC is in favour of common rules, but flexibility is needed.

Issues emphasized: HEMS operations are not “similar activities or services”. Other inconsistencies highlighted:

- Age of 60. The rule should reflect the natural development of aging, pilots should be allowed to fly according to their fitness level.
- HEMS operating minima SPA.HEMS.120.
- Incomplete regulations: HEC operations are not included in SPA.HEMS but in Part-SPO. This allows for national rules to apply.

EHAC operates more on a performance based approach and supports the movement from compliance checking to safety checking.

### **Q&A**

One participant commented that the interface of human and aircraft had to be better considered.

EASA answered that this is being considered, for example with the training requirements.

One participant commented that IMC training is done every 6 months or for 30 minutes, but the most



important parts are actually done after training. Training in IMC for UK makes sense, but not for all MS.

## **8. HEMS French specificity**

*Presented by: Gilbert Guicheney, DGAC France*

The French Ministry of Health is involved in HEMS operations. HEMS operators are CAT operators.

Difficulties encountered:

- The medical personnel cannot be employed as HEMS technical crew members (TCM).
- The economic impact of the additional person on board: increased load, decreased range.
- Additional issues brought about by crew qualifications if the HEMS TCM is a pilot. National constraints where the HEMS TCM is not a pilot.
- It would be very helpful if there were common qualification criteria in Europe to ensure consistency, training for TCM. This would enable finding the appropriate labour code for the TCM.
- There are diverging opinions among the HEMS operators. Consequently, they apply for exemptions and derogations (Art. 14.4).
- A long term solution in France still needs to be established.

### **Q&A**

One participant asked, if HEMS rules apply, how DGAC managed the implementation of the EU rules.

DGAC answered that several stakeholders have diverging views. Either a consensus is reached on implementing the SPA.HEMS by all operators or the alternative considered is to declare these operations as “similar services” under a national framework – but the discussions of today conclude that the second alternative is not favoured by EASA or the Commission.

One MS asked whether the French Gendarmerie had a commercial AOC. The answer was no, so the next question was how private operators dealt with the “state competition”. DGAC answered that although the state services have no AOC, the requirements they comply with are at a similar level of safety, e.g. they have 2 pilots. It is the Ministry of Health, not the DGAC, to decide which operator would be deployed on a certain mission (AOC holder or the State services); the general rule is that it is the CAT operator which performs the mission and the State operates as the exception, only when it would not be feasible (financially speaking) to contract a CAT operator (for example, when a hospital could not cover the costs).

## **9. Presentation by EHA on “HEMS implementation in Europe” – detailed for Spain and Switzerland**

*Presented by: Jaime Arque; Patrick Fauchere*

EHA in Spain – issues in implementation: 1. Local conditions make it impossible to fly PC1 operation in summer (above 30°C and above 3000 ft altitude). 2. It is difficult to find the 2<sup>nd</sup> pilot with ATPL (H) when 2-mancrew is required (e.g. night flights) – 2 CPL pilots with MCC qualification should be enough. 3. HEMS operation with rescue hoist equipment – it is difficult to define the proper type of operation if landing is not possible and medical crew has to pick up the patient then be disembarked by hoist: this would be considered a SAR operation, not HEMS operation, therefore it is covered by national rules.

EHA in Switzerland: There are some large HEMS operators (REGA and 4 other AOC holders approved to fly SPA.HEMS). The problem after Oct. 2014 is with the condition to operate HEMS only with twin engines according to the Air Ops rules. FOCA Art 1(2) allows Swiss operators to continue to fly single engine to cope with the Swiss particularities (the conditions on site).

Cross-border missions do not allow single engine operation. Operators need flexibility. The actual HEMS standard would be difficult to implement and maintain without the solution provided by Swiss FOCA.

### **Comments**

One MS said they had invested to be compliant with the rules for the past 10 years. 95% of missions are



performed over cities and populated areas.

One participant said the compliance with the HEMS rules is costly for commercial operators and there is no return on investment. Insurances today are not willing to pay any more. Operators are facing increased commercial pressure and cannot survive if conditioned to operate only with twin engine helicopters.

#### **10. Air Zermatt on behalf of FOCA on the HEMS implementation in Switzerland**

*Presented by: Alexander Burger, Air Zermatt*

The presentation included the following issues:

- During peak seasons HEMS operations with single engine helicopters are essential. Performance and size of a multi-engine helicopter are not always relevant.
- Due to HEMS missions on various altitudes, heavy equipment and safety reasons, the use of supplemental oxygen should be regulated by SPO.OP.195 instead of CAT requirements.

##### **Q&A**

One participant asked why the operator used twin-engine if they considered single engine helicopters to be more efficient. The answer was because this is a requirement of the Air Ops regulation. They do not use single engine helicopters for all missions, only for some.

Another question was whether the operator differentiated in their SOPs when it was a HEMS operation and when it was a rescue mission (which was regulated by national rules). The answer was yes.

Another participant asked how many missions the operator had above 10.000 ft. The answer was 64% above 8000 ft, 30% above 10,000 ft.

One participant asked what were the criteria based on which the operator decided whether a mission would be operated by the Air OPS rules (as HEMS) or by the national rules (as a rescue mission). The answer was that in Switzerland all missions are considered rescue missions. HEMS are only the planned air ambulance flights from A to B. Cross-border missions are performed with twin-engine helicopters and in compliance with the HEMS rules (as single engine helicopters are not allowed to fly in the north of Italy). So basically the type of operation was decided by the area.

Air Zermatt was asked to clarify how they decided, upon receiving a phone call from the rescue centre, whether that would be a HEMS or a rescue mission. The answer was that any mission started as a rescue mission (under national rules) and they deployed any helicopter which was at hand. Therefore, since national regulation applied anyway, there was no need to decide whether it was a SAR or a HEMS mission.

However, if the phone call is made from Italy, then it is considered a HEMS mission from the start.

#### **11. HEMS in mountain area under Regulation (EU) 965/2012**

*Presented by: Marco Silanos, ENAC Italy*

ENAC Italy considered that switching/separating between rescue phase and HEMS phase is too confusing, especially in the mountain areas, as HEMS and air rescue are phases of the same mission. So they decided to consider the entire mountain rescue mission as commercial operation and apply the HEMS provisions to the rescue phase of flight as well. All helicopters used for HEMS in Italy are twin-engined. There are 51 bases, of which 9 are H24.

Art. 1.2(a) of the Basic Regulation refers to SAR as per ICAO Annex 12 and other "similar" events. The state takes control of these operations.

HEC operation is performed when HHO is not possible/effective. Therefore, ENAC recommended that SPO.SPEC.HEC should be extended to SPA. ENAC is developing an AltMOC in this direction.

##### **Q&A**

One participant asked how Italy dealt with the performance issues. The answer was that the operators did not



report any performance issues, so for the time being there is no problem.

Another question was whether Italy had a list of P.I.S. The answer was yes, there is a list available and ENAC had control over all HEMS operating bases.

One participant asked how were HEMS operations financed in Italy, as in Switzerland the cost would not be sustainable, especially for the high performance helicopters, as it was carried by the operators. ENAC answered that for this reason it was important to have a level playing field: Italian operators have invested a lot of money in ensuring compliance with the OPS rules and the system is financed by public money (health department). Italy has over 20 years of operations like that, so to reduce the level now would be an issue for them.

One participant asked whether ENAC was aware of a single engine rescue that had taken place on the Ortler mountain recently. The answer was that if the operator organises itself according to the requirement, there may be a request for another operator to help. For this, it may obtain a concession in its Ops Manual. What matters is that the operator should organise itself to cover the majority of situations. Only for exceptional situations should it apply for a specific derogation (flexibility provision).

## **12. Viewpoint of ECA on HEMS operations**

*Presented by: Hans Ivar Kubberød, ECA*

The 'ALARP' ('as low as reasonably practicable') principle is the point of view of ECA. "The best safety device in any aircraft is a well-trained crew." So the opinion of ECA is that the crew requirements needed to be raised and that they supported the proposal for NVIS and IR for HEMS. ECA emphasized that it was especially important to follow up on the requirements of Subparts ORO.GEN and SPA.HEMS with regards to the operator's responsibility: the personnel flying HEMS, including the HEMS technical crewmember, to be employed by the operator. Due to the competition for winning the contracts and the costs involved, training is more often kept at minimum levels.

One participant said that the requirements supported by ECA might work for Norway, but they would not be effective in other areas, therefore they supported the idea to have flexibility in the rules and adapted requirements to the different conditions of operating areas. Training and experience should prevail. We should return to the times when the operator can take responsibility; there is always the possibility to circumvent certain rules.

## **13. AOB**

The following issues were raised by ADAC Germany:

Harmonisation and safety do not always mean the same and EASA should not care about fair competition, but only about safety. Rules should be based on facts. On the age of 60: ADAC has made an analysis, data showed there had been tens of thousands of missions performed by pilots of over 60 years of age and no incident, no incapacitation was recorded. The 'age 60' rule is not lowering safety, therefore it should be allowed. The goal of age 60 is right but the way forward is assessing fitness rather than hard time age limit. ADAC believes the right way forward is the approach which is used for FTL, allowing for individual solutions/schemes.

Different countries have different demands so there are different operating models: in Germany only 40% of flights have patients on board, whereas in other countries it's almost 100%.

The rule should be flexible enough to allow ensuring safety for all kinds of conditions.

Comment on the level playing field: HEMS is mostly at national field and represents a small part of the SAR system. Bilateral agreements can function for cross-border services.

## **14. Conclusions of the meeting and closing**

*Presented by: Claudio Trevisan*





CTR summarised the discussions: it will not be easy to propose practical ways forward for all the issues discussed in this meeting, as it is evident that for some issues there is a spectrum of positions, from extreme to extreme. There are pros and cons for each of them, and clearly one size does not fit all.

The Agency will try to find balanced solutions; probably they will not make everybody happy, but we will strive to address the issues raised while ensuring a safe level playing field.

A proposal will be sent back to the TAG OPS and SSCC after being drafted and discussed with the European Commission.

The presentations and the minutes of the meeting would be circulated.

CTR thanked the participants for attending the meeting and contributing to the discussion. The meeting closed at 16:35 on 28 April 2015.

<b>Minutes of Meeting (MoM) Distribution:</b>
TAG OPS&FCL, SSCC members, experts and observers

MoM prepared by	Adina SZONYI	19.05.2015
MoM reviewed by	Claudio Trevisan	22.05.2015

