European Union Aviation Safety Agency

Indirectly Controlled Document

IMPLEMENTATION CHECKLIST – AIRPORT OPERATORS – FOR NATIONAL AUTHORITIES	Doc #:	
	Date: 07.07.2020	Version: 01

EASA
European Union Aviation Safety Agency

IMPLEMENTATION CHECKLIST – AIRPORT OPERATORS – FOR NATIONAL AUTHORITIES

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IMPLEMENTATION CHECKLIST FOR NATIONAL AUTHORITIES - AIRPORT OPERATORS

ORGANISATION:	

National Authority Staff:	
Department/Function:	
Date of assessment:	

Instructions for use

The document is intended to serve as a checklist that evaluates the effectiveness of health safety measures adopted by airport operators conducting commercial and non-commercial passenger transport operations (hereafter: airport operators) to mitigate the risk of SARS-CoV-2 transmission in the airport and on board aircraft as much as practicable. Its scope is to facilitate the assessment of airport operator and address the adoption of the COVID-19 Aviation Health Safety Protocol 'Operational Guidelines for management of air passengers and aviation personnel in relation to the COVID-19 pandemic' (hereafter: Health Safety Protocol, Aviation Health Safety Protocol), Issue no: 02, Issue date: 26/06/2020, Issued by European Union Aviation Safety Agency (hereafter: EASA) and European Centre for Disease Prevention and Control (hereafter: ECDC).

The EASA and ECDC operational guidelines are aligned recommendations that serve as an aviation health safety protocol and provide a source of best practice for the airport operators, airplane operators conducting commercial and non-commercial passenger transport operations and national aviation authorities to ensure the health and safety of passengers, as well as the aviation personnel and crew who serve them, by maintaining safe and secure operations whilst minimising the risk of virus transmission.

Aviation Health Safety Protocol should complement the advice of public health authorities and help employers in their duties under the relevant legislation on protection of workers' health and safety[1], the guidelines **do not** override national law and practice.

Airport operators are encouraged to cooperate and coordinate with authorities, air operators and other relevant stakeholders to ensure standardised implementation of Aviation Health Safety Protocol. The aim of this activity is to achieve the same high standard of health safety at all stages of aviation operations. This collective approach will ensure mutual recognition of adopted health safety measures amongst different operators and other relevant stakeholders. Adoption of standardised common practices will assist the industry in easement of operational burdens caused by COVID-19 and recover passenger's confidence.

National Aviation Authorities (hereafter: NAAs) should monitor implementation of the recommended measures and provide assistance and advice where needed, especially in coordinating and harmonising implementation with other national organisations or agencies.

The outcome of this assessment will help to ensure harmonized implementation of Aviation Health Safety Protocol and mutual recognition of adopted measures amongst airport operators, air operators, as well as other relevant stakeholders.

The evaluation tool used in this checklist is based on Safety Management International Collaboration Group (SM ICG) SMS Evaluation Tool.[2] The base Evaluation tool was modified for the purpose of this activity.

An introductory paragraph is given for each element along with a cross reference to the Aviation Health Safety Protocol. For each of the elements there are a series of markers that are assessed for their **presence (P)**, **suitability (S)**, **operating (O)** and being **effective (E)** using the definitions below. The organisation should use the 'how it is achieved' box to describe how they have achieved the **PSO** or **E** level for the marker using multiple selection list, detailing any documentation references, evidence or examples to support their self-assessment. Once the individual markers are assessed by the organisation the NAA will then sample and verify each marker and assess the overall effectiveness of safety health measures adopted by the Operator.

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[1] https://oshwiki.eu/wiki/COVID-19:_Back_to_the_workplace_-_Adapting_workplaces_and_protecting_workers

[2] Safety Management International Collaboration Group (SM ICG) - SMS Evaluation Tool Guidance

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Notes to some indicators were introduced in Annex I (e.g. 'Note 1') to provide better understanding of the health safety measure, implementation methods or reasons for adoption. Consequently, for the same objective Annex II provides essential definitions and Annex III provides a summary matrix of measures per aviation stakeholder.

The overall effectiveness for each element will be used by the NAA to determine the overall level of health safety and effectiveness of the measures.

PSOE definitions for individual markers (assessed and completed initially by organisation and verified by National Authority)

Present: There is evidence that the 'marker' is clearly visible and is documented within the organisation's documentation.

Suitable: The marker is suitable based on the size, nature, complexity and the inherent risk in the activity.

Operating: There is evidence that the marker is in use and an output is being produced.

Effective: There is evidence that the marker is effectively achieving the desired outcome and has a positive safety impact.

Completing the self-assessment: Airport operator should assess each marker to determine whether it is present, suitable, operating or effective by placing a tick in the appropriate PSOE column and then justifying that determination in the 'how is it achieved' column . The National Authority will complete the rest of the document.

Evidence

 'How is it achieved' should include summary statements and any references to documentation and records.

Observation

The Observation Column should be for the regulator to record any observations, conversations, records and documents sampled.

Summary comments

Once the regulator has assessed all indicators, a judgment can be made on whether the overall effectiveness of the safety health measures adopted has been achieved, this should be noted in the summary comments box.

Modifying the Tool

A regulator may adapt the terminology and tool to meet its own national requirements, however aligning with the Aviation Health Safety Protocol may allow mutual recognition. Moreover, regulator may adapt the tool by inserting additional items to reflect good practices from the industry.

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AT ALL TIMES

INDICATORS OF COMPLIANCE + EFFECTIVNESS	P	S	O	E	How is it achieved	Observation	Comments
2	*Management, Leadership and Staff Buy-In:* Operator delivered appropriate training to educate aviation personnel and contractors about the health protection measures for COVID-19. (Note 1)					- e-learning - test/assessment - virtual classroom - classroom training - training manual update - info to crew on updates		
2	*Wellbeing for Aviation personnel:* Operator implemented programs to support the wellbeing of aviation personnel.					- peer support - wellbeing promotion - counselling for aviation personnel - cooperative rostering		
2	*Management of Aviation personnel:* Operator ensured management of aviation personnel in accordance with latest revision of EASA SIB 2020-02[3].					- operators manual update - crew management procedure		
2	*Airport Coordinator:* Operator appointed a coordinator to ensure uniform application of health preventative measures by all actors providing services at the airport.					- communication/ coordination plan - designated aviation personnel to communicate/ coordinate		

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[3] https://ad.easa.europa.eu/sib-docs/page-1

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2	**Contact with Health Authorities:** Operator ensures that the Airport Coordinator is in direct contact with the Airport and Local/ National Public Health Authorities.					- direct communication - phone - e-mail		
2	**Airport Coordination:** Operator ensures Airport activities are coordinated with National and Local Health Authorities.					- coordination plan - direct communication - phone - e-mail		
2	**Airport Unruly Passenger Procedures:** Operator revised Airport Unruly Passenger procedures and identified potential problem areas that might make such situation worse.					- procedure update - info on website - info on social media - special procedure - additional crew training		
3.4	**Passenger Awareness from the Airport:** Operator educates passengers about the COVID-19 virus transmission - prevention measures that are in place, at all stages of their journey. (Note 2)					- pictograms - posters - info on social media - info on website - info ticket/boarding pass - direct pax communication - info at the counter		

3.1	**Passenger Non-Compliance at Airport:** Operator ensures refusal of access to/removal from the terminal for anyone not adhering to the preventative measures in place.					- uncompliant pax handling procedure - unruly pax procedure update - security training update - procedure update		
3.1, 3.3, Annex 1	**Wearing of medical face masks (hereafter: face masks) at Airport:** Operator developed procedure to recommend and monitor that medical face masks are worn by all passengers and persons within the airport from the moment they enter the terminal building until the moment they leave. (Note 3)					- pax bring own face masks - pax checked for face masks - quality of face masks checked - aviation personnel trained on face masks - pax provided with face masks		
3.3	**Face masks/PPE for Passengers at Airport:** Operator developed and implemented procedure to ensure provision of face masks and other PPE for passengers.					- pax bring own face masks/PPE - pax checked for face masks - quality of face masks checked - aviation personnel trained on face masks/PPE - pax provided with face masks - face mask/PPE vending machines - face masks available for purchase		

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3.1	**_Face masks/PPE for Aviation personnel:_** Operator ensured provision of face masks and other PPE for aviation personnel.				- aviation personnel bring own face masks and other PPE - aviation personnel checked for face masks - quality of face masks checked - aviation personnel trained on face masks - aviation personnel provided with face masks		
3.1	**_Aviation personnel Uniforms and Protection:_** Operator ensured aviation personnel change their uniforms daily or are provided with over coverings.				- coverings for aviation personnel - uniform handling guidelines - provided laundry services - staff change uniform on arrival to/from work		
3.1	**_Aviation personnel Training in face masks/PPE:_** Operator delivered to the relevant aviation personnel training in use of face masks/PPE.				- e-learning - virtual classroom - classroom training		
3.1	**_Replacing face masks at Airport:_** Operator developed means to promote replacement of face masks every 4 hours or earlier if deemed necessary, by passengers and aviation personnel.				- pamphlets/leaflets - posters - passenger announcement - aviation personnel training - mask replacement log book/signed sheet		

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3.1	***Disposal of waste, face mask and other PPE:*** Airport operators included in their health safety promotion material information regarding the proper use and removal of face masks and the appropriate way to dispose of waste, face masks and other PPE.					- info in promotional materials - touch less bins - biohazard bins - one time use waste bags - safe-disposal procedure		
2, Annex 3	***Airport PRM/ Minor Process:*** Operator has processes for the handling of Passengers of Reduced Mobility (PRMs) and Unaccompanied Minors (UMs) with regards to the health prevention measures. (Note 4)					- updates to applicable procedures - exemptions for PRMs, UMs assistants		

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BEFORE THE FLIGHT

	INDICATORS OF COMPLIANCE + PERFORMANCE	P	S	O	E	How is it achieved	Observation	Comments
3.2	***Airport Promotion to Discourage Passengers:*** Operator adopted procedure to discourage symptomatic passengers from coming to the airport through health promotion activities.					- direct pax communication - info possible refusal of travel - info on possible travel restriction - social media heath safety promotion; - special refund/ rebooking policy		
3.2	***Airport Promotion to Encourage Aviation personnel/Contractors:*** Operator developed and implemented procedure to encourage symptomatic aviation personnel and contractors to self-report and refrain from coming to work through health promotion activities.					- aviation personnel direct communication - no disciplinary measures for absence - info on corporate platform - promotional material at the counter		
3.2	***Aviation Personnel Statement:*** Operator provided information to aviation personnel on COVID-19 symptoms and received acknowledgment through electronically authenticated health statement - defined/implemented collection method.					- online submission - internal procedure - via e-mail		

3.2	**_Passenger Awareness of Access Limitations:_** Operator developed and implemented procedure to ensure that only people travelling and those giving direct assistance will be allowed into the airport and checked compliance.					- training on pax acceptance - promotional materials - information on web - direct pax communication		
2, 3.2, 3.3.	**_Limit Passenger Access_**: Operator ensured that the areas for limited access are clearly signed at the airport and that access to them is managed.					- floor markings - stickers/signs - roll-ups - announcements - marked on airport map		
3.3	**_Passenger Access - Aviation personnel Training:_** Operator provided training for aviation personnel on new rules regarding access to the airport.					- e-learning - virtual classroom - classroom training		

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AT THE AIRPORT

INDICATORS OF COMPLIANCE + PERFORMANCE		P	S	O	E	How is it achieved	Observation	Additional information
2, 3.1, 3.3	**Enhanced Hygiene:** Airport operator enhanced hygiene measures in both amplitude and frequency - has procedures to ensure effective cleaning and disinfection.					- cleaning procedure - additional cleaning supplies - designated aviation personnel to coordinate cleaning - cleaning log book/signed sheet - sanitation products available for pax		
3.3	**Security Screening Trays:** Operator ensured intensified cleaning of plastic security screening trays and placed hand-disinfectant at the exit of the security locations to encourage hand hygiene. Alternatively, single use tray coverings are used.					- cleaning procedure - additional cleaning supplies - designated aviation personnel to coordinate cleaning - cleaning log book/signed sheet - increased number of trays - sanitation products available for pax		

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3.3	**Security Agents Performing Body Searches:** Operator ensured that security check agents performing body checks change their gloves after each passenger.					- supply of gloves in place - staff is monitored - signed sheet/log book		
3.3	**Preventing Aerosolsation:** Operator ensured that cleaning and disinfection activities are performed in such a way as not to aerosolise the particles that have already set on the various surfaces.					- avoiding air blowing procedures, - no use of vacuum cleaners - steam cleaning - specialized cleaning company		
3.3	**Ventilation:** Operator ensured proper air ventilation at the airport, minimising the percentage of air recirculation and favoring when possible the use of fresh air in accordance with international guidance for ventilation of indoor public spaces. (Note 5)					- procedure change - air ventilation enhanced - opened windows - filtered ventilation - air recirculation setting not use		
3.3	**Cleaning of Airport Surfaces:** Operator ensured regular cleaning and disinfection of surfaces is performed using standard detergents with particular care paid to frequently touched surfaces (e.g. door handles, bannister rails, buttons, etc.).					- cleaning procedure - additional cleaning supplies - designated aviation personnel to coordinate cleaning - cleaning log book/signed sheet		

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3.3	**Cleaning of Facilities:** Operator ensured that enhanced cleaning and maintenance also include toilets, all frequently touched surfaces and the air conditioning system, including the employment of air filters and increasing the frequency of the filter replacement.				- cleaning procedure - additional cleaning supplies - designated aviation personnel to coordinate cleaning - cleaning log book/signed sheet		
3.3	**Cleaning of Interview Booths:** Operator ensured cleaning and disinfection of passenger interview booths after each use of the booth.				- cleaning procedure - additional cleaning supplies - designated aviation personnel to coordinate cleaning - cleaning log book/signed sheet		
3.3	**Disinfection of Common Use Equipment:** Operator ensured that equipment of common use used by aviation personnel such as computers, tablets, radio stations, headsets, etc. is disinfected before being used by another staff member.				- cleaning procedure - additional cleaning supplies - designated aviation personnel to coordinate cleaning - cleaning log book/signed sheet		

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3.3	**Handovers for Shift Workers:** Operator ensured that for staff working shifts, handovers are conducted in a contact-free manner, or as a minimum through physical distancing.					- special duty handover procedure - digital handover - digital communication - telephone - videoconference - electric logs		
3.3	**Airport Conditioning Systems:** Operator ensured heating, ventilation and air conditioning (HVAC) systems are optimised in order to ensure a high rate of air change					- change of a/c setting - open windows - additional equipment		
3.3	**Screening Protocol:** Airport operator in coordination with national public health authorities developed the protocol for screening and identified the required aviation personnel and resources to operate it. (Note 6)					- designated aviation personnel to operate - developed protocol - coordinated with authorities		
3.3	**Location of Screening:** Airport operator identified and assigned the best location for the temperature control, ideally where passengers enter the terminal before check-in and baggage drop-off.					- temp. location well selected - temp. check effective layout		

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3.3	**Screening Process:** Operator ensured that the temperature check aim to identify passengers with skin temperature of 38°C or higher. For passengers with skin temperature 38°C or higher temperature checks are repeated at least once for confirmation purposes. Passengers with elevated skin temperature are referred to secondary assessment by a health professional or follow the agreed protocol of screening.				- adequate equipment - designated aviation personnel to coordinate/ control - doctors available		
3.3	**Screening Interview Booths:** Airport operators ensured separate interview booths for the event of doubtful or probable cases requiring further assessment. (Note 7)				- separate room - provisional booth - cleaning controlled - maintenance personnel		
3.3	**Screening Equipment Calibration:** Airport operator ensures regular recalibration of equipment due to the intensive use. Equipment (e.g. ear or other type of thermometers or cameras) is regularly recalibrated in accordance with the manufacturer's instructions or at even shorter intervals.				- maintenance personnel - specialized services - maintained log book - auto calibration		

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3.3	**Airport Maintenance and Repair Work:** Operator ensured that maintenance and repair work in public areas is prioritized, adjusted schedule, postponed if non-essential.				- N/A - adjusted schedule - postponed		
2, 3.3	**Airport Physical Distancing:** Airport operator in coordination with air operators ensured physical distancing of at least 1.5m between individuals is respected wherever feasible, especially during check-in, security check, pre-boarding and boarding. (Note 8)				- floor marking - direction signs - alternate seats - aviation personnel to control		
2, 3.3	**Airport Other Distancing Options:** When the recommended physical distancing of 1.5 meters is not possible, due to infrastructure or operational constraints, airport operator implemented the additional risk mitigation measures.				- protection screens - medical face masks mandatory - aviation personnel to control		
3.3	**Screens at Airport Interaction Points:** Operator provided physical screens at locations where passengers interact with aviation personnel in the airport. (Note 9)				- check-in counters, - ticketing, - passport control, - information desks - easy document handover - staff protected from droplets - customs/ goods to declare		

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3.3	**Standing Away from Counter:** Operator ensured that passengers stand away from the counter unless handing in documents and luggage.					- floor marking - direction signs - aviation personnel to control		
3.2	**Airport Check-In Areas:** Operator implemented contactless processes as far as possible for check-in, boarding and baggage services.					- online - self checking - self boarding - contactless scan - luggage drop off		
3.3	**Automated Disinfection Dispenser:** Airport operator ensures that automated hand-disinfectant are placed at the entry and exit of the security locations to encourage hand hygiene.					- auto dispensers - alcohol based solution - check-in - security - boarding gates - toilettes		

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| 3.3 | ***Airport Modified Boarding/Disembarking:*** Airport operator coordinates with airlines to ensure efficient boarding and disembarking processes limiting boarding time and contact risk. (Note 10) | | | | | - direct communication
- joint procedures
- floor markings;
- opposite flows;
- boarding by zones;
- walking in spaced manner;
- use of self-boarding technology;
- use of contactless processes and technology;
- increased quantity of buses (when used) to accommodate physical distancing inside them;
- limited time on the bus
- limited boarding time
- special boarding procedure; | | |
| 3.6 | ***Baggage Claim:*** Airport operator in coordination with any stakeholder involved in the delivery of baggage handling service such as GHSPs, airlines or relevant service providers ensures maximised use of the available arrival baggage carousels and, where possible, use dedicated baggage carousels for flights from high-risk areas (as assessed by the local public health authorities at arrival airport). | | | | | - modified procedure
- additional ways of baggage delivery
- additional handling staff
- baggage delivery services available
- lost baggage form on-line | | |

3.6	***Exit on Arrival:*** Airport operator encourages pax to leave the terminal as soon as possible after their arrival. (Note 11)				- floor markings - signs/stickers - pictograms - announcements - social media promotion - enforcement staff		
3.3	***Modified Security Process:*** Operator modified security – arrival/transit - limit access (exceptions for valid accompanying persons) (Note 12)				- special procedure - allowing essential company		
3.3	***Minimising Security Queues:*** Where possible, operator ensured the time it takes to process passengers through check-in and security is minimised to reduce the total amount of time spent at the airport.				- floor markings - signs/stickers - limited procedures - pax walkways change		
3.3	***Security Aviation personnel PPE:*** Operator ensured security check agents performing body checks wear face shields or suitable alternatives in addition to their masks to further mitigate the risk of droplet inhalation caused by their very close contact with passengers during body-checks.				- overall coverings - face shield - gloves - protective suits		

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3.3	**Use of Airport Services in line with National Guidelines:** Operator informed passengers that all airport services and facilities should be used in line with national provisions for similar services outside of the airport.					- direct pax communication - info on restricted access to facilities - social media promotion; - posters - pictograms		
2, 3.3	**Supply of Water:** Where no outlets are open, operator ensured a supply of water for pax.					- water bottles, - water source		
3.3	**Use of Some Airport Facilities:** Operator ensured that some airport services are not used, including smoking areas and playgrounds.					- smoking areas closed - playgrounds blocked/closed		

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ANNEX I - NOTES

NOTE 1

The general situation regarding the COVID-19 pandemic, including the implemented containment measures, the potential risk of being exposed to infected individual(s) and the need to deal with unfamiliar situations in the workplace are likely to have a negative impact on the mental well-being of aviation personnel and passengers. In this context, airport operators and aeroplane operators, and, where applicable, other service providers should promote aviation personnel's access to counselling and/or support programmers (where available), and make use of the WHO guidance and any other relevant guidance. In addition to these operational guidelines, aeroplane and airport operators should consider the recommended measures included in the latest revision of EASA SIB 2020-02. Aircraft operators involved in commercial charter and corporate aviation should implement these as far as is practicable.

NOTE 2

Information provided in EASA posters and other guidelines could be made available on websites, entrances, information screens, gates, lounges and other areas with high passenger concentration.

NOTE 3

This requirement can be exempt for children below 6 years old and people with a medical reason for not wearing a mask. Also exemption as needed during security and border control

NOTE 4

Accompanying persons should be allowed to access the airport terminals only in special circumstances (e.g., when accompanying or picking up a passenger that requires assistance, such as persons with reduced mobility (PRM), unaccompanied minors, etc.).

NOTE 5

In older facilities, subject to airport/terminal construction and meteorological conditions, windows can be kept open for additional supply of fresh air, subject to the absence of horizontal airflows.

NOTE 6

Aviation personnel performing manual checks, for example as part of a verification procedure, should wear appropriate protective equipment.

NOTE 7

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.

NOTE 8

Could include hand hygiene, respiratory etiquette, additional transport, etc. Airport operators should also, as far as practicable, put in place separate opposite flows (through floor markings or direction signs), access to airport lavatories should respect the principles of physical distancing.

NOTE 9

Where airport/airline staff interact with passengers from a fixed location, such as but not limited to check-in counters, ticketing, passport control, and information desks, protective screens should be installed in such a way as to allow the handover of the required documents but protect staff from the respiratory droplets of the passengers and vice versa.

NOTE 10

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.

NOTE 11

For customs formalities, and where possible, green and red lanes for self-declarations are recommended. Where transfer security screening is required, it should follow appropriate sanitary requirements as described for the departure process. "One-stop" health screening arrangements should be developed using existing one-stop security arrangements as a model. In this model, passengers and property are not rescreened at transfer locations based on the mutual recognition of security measures between the States in the travel itinerary. A similar arrangement for health screening procedures may prevent unnecessary queuing points at passenger transfer locations.

NOTE 12

Airport operators should also inform and advise arriving passengers to leave the arrivals terminal as soon as possible, and after they have collected their baggage and finalised all arrival formalities, in order to minimise the possibility of transmission.

Airport operators should inform the meet-and-greet individuals that access to the terminal is limited to passengers, aircrew members and airport staff. Where meet-and-greet cannot be avoided (e.g. persons requiring assistance), a meet-and-greet area should be set up away from the exits from the restricted area and away from the main passenger flow to reduce the risk of the arriving passengers crossing paths with other individuals.

ANNEX II – DEFINITIONS

MEDICAL FACE MASK

A medical face mask (also known as a surgical or procedure mask) is a medical device covering the mouth, nose and chin ensuring a barrier that limits the transition of an infective agent between the hospital aviation personnel and the patient. They are used to prevent large respiratory droplets and splashes from reaching the mouth and the nose of the wearer and help reduce and/or control at the source the spread of large respiratory droplets from the person wearing the face mask. Medical masks comply with requirements defined in European Standard EN 14683:2014. Non-medical face masks (or 'community' masks) include various forms of self-made or commercial masks or face covers made of cloth, other textiles or other materials such as paper. They are not standardised and are not intended for use in healthcare settings or by healthcare

professionals. Non-medical face masks are in use and recommended in some EU/EEA countries and the UK. However, evidence about their efficacy in preventing transmission of COVID-19 is lacking.

ACKNOWLEDGMENT OF COVID-19 POLICY

An acknowledgment of COVID-19 policy prior to the arrival at the airport may be obtained during the online check-in process or via a text message (SMS) link or other means acceptable to the national authorities. An example of such document is available in Annex 2 to Aviation Health Safety Protocol.

PHYSICAL DISTANCING

Current scientific studies and articles confirm that, in general, the distance that large respiratory droplets can travel in the air is 1.5 meters for normal speech and up to 2 meters when coughing. Further evidence indicates that the physical distancing should be of at least 1.5 meters and ideally 2 meters. For this reason, aeroplane aircraft operators, airport operators and service providers/suppliers should ensure that 1.5-metre physical distancing of 1.5 meters is maintained wherever this is operationally feasible. In case physical distancing cannot be guaranteed because of operational constraints, the airport operator should implement risk mitigation-mitigating measures, such as providing face masks for the passengers.

ANNEX III – SUMMARY

MATRIX OF MEASURES PER AVIATION STAKEHOLDER

Type of measure	Airport operators	Aircraft operators	Airport staff	Service providers/ suppliers	Aircrew 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

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Type of measure	Airport operators	Aircraft operators	Airport staff	Service providers/ suppliers	Aircrew members	Passengers
Face masks	Yes	Yes	Yes	Yes	Yes[4]	Yes
Health safety promotion material	Yes, in coordination (see Annex 3)		Yes, should adhere to the recommendations and disseminate the material/ information where required under their tasks	Yes, should adhere to the recommendations and disseminate the material/ information where required under their tasks	Yes, should adhere to the recommendations and disseminate the material/ information where required under their tasks	Yes, should read and adhere to the recommendations
Cleaning and disinfection	Yes, see Section 3.3	Yes[5]	n/a	Yes	n/a	n/a
Acknowledgement of COVID-19 policy	Yes, in electronic format Coordinate the format and assessment	n/a	n/a	n/a		Yes, should acknowledge reading and understanding before the flight
Thermal screening (skin temperature check)	Yes, where required by the national authorities	n/a	Possible, if the airport operator has not implemented a staff health monitoring programme	Possible, if the employer has not implemented a staff health monitoring programme	Possible, if the A/C operator has not implemented a crew health monitoring programme	Yes, may be thermal screened if required by the national authorities
Reduced aircrew–passenger interaction	n/a	Yes Essential in-flight services only;	n/a	n/a	Yes	Yes, should adhere to the recommendations of limiting their requests to

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4   Face masks should not be worn by the flight crew in the flight crew compartment after boarding and while operating due to safety reasons.

5   https://www.easa.europa.eu/document-library/general-publications/interim-guidance-aircraft-cleaning-and-disinfection

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Type of measure	Airport operators	Aircraft operators	Airport staff	Service providers/ suppliers	Aircrew members	Passengers
		Avoid lavatory queuing; Designate lavatory for aircrew use only				the cabin crew members to the essential.
Special disembarking procedure	Yes, in coordination with the local public health authorities		Yes, where applicable, enforce the national public health authority instructions/ measures	Yes, where applicable, enforce the national public health authority instructions/ measures	Yes, enforce the national public health authority instructions/ measures	Yes, follow the aircrew and ground staff instructions