SAFETY DECISION 2020-20
Issue 01
Date of Issue: June 25, 2020

SUBJECT:
REOPENING OF UAE AIRPORTS

REFERENCE PUBLICATIONS:
N/A

APPLICABILITY:
This Safety Decision applies to:
   a) All UAE Airports; and
   b) All aircraft operators conducting flights from/to the UAE Airports.

INTRODUCTION:
Since the 3rd February 2020, the UAE has been regularly adapting its flight restrictions policy to stop the COVID-19 spread and to gradually allow return to normal international air navigation.

Following successful and robust infection controls including surveillance, detection, contact tracing, isolation and treatment of cases, and quarantine, the UAE is pleased to announce that all flight restrictions previously mandated by SAFETY DECISION 2020-01 are void.

Consequently, this SAFETY DECISION:
   a) repeals SAFETY DECISION 2020-01; and
   b) announces the resumption of international flights to and from UAE airports provided compliance with relevant public health precautionary measures is assured.

The UAE Government will closely keep monitoring the situation and adjust its strategy in case of development of a public health risk.

REQUIREMENTS:

With immediate effects, flights from/to UAE Airports are allowed provided that the following requirements are complied with:
   a) When conducted from/to a UAE airport other than OMDB and OMDW: Aircraft Operations and Airport Operations shall be in compliance with:
      i) relevant measures of public health protocol contained in Attachment 1;
      ii) COVID-19 Quarantine and test requirements for crew contained in Attachment 2 (applicable to UAE Air Carriers only);
      iii) Procedures for the opening of the airport terminal facilities, duty free and restaurants contained in Attachment 3; and
      iv) The COVID-19 protocol for traveller endorsed by NCEMA.
b) When conducted from/to OMDB and OMDW: Aircraft Operations and Airport Operations shall be in compliance with:

i) relevant measures of public health protocol contained in Attachment 1;
ii) COVID-19 Quarantine and test requirements for crew contained in Attachment 2 (applicable to UAE Air Carriers only);
iii) Procedures for the opening of the airport terminal facilities, duty free and restaurants contained in Attachment 3; and
iv) COVID-19 Quarantine and test requirements for travellers required by Dubai’s Supreme Committee of Crisis and Disaster Management.

c) Flights shall be as per UAE airports’ official flight schedules and shall not commence unless departure and destination airports are operational.

d) Aircraft Operators and Airport Operators shall:

i) include in their system a compliance monitoring function to verify compliance with this SAFETY DECISION; and
ii) grant unlimited access to the GCAA for continuous surveillance activities.

e) Foreign operators operating passenger carrying aircraft may only operate under the provision of this SAFETY DECISION if it is authorised by the GCAA (i.e. the GCAA verifies compliance with the above mentioned conditions).

CONTACT:
Further instructions or guidance may be obtained through:
a) UAE operators: their principal flight operations inspectors; and
b) Foreign operators: Foreign Operators Affairs: foa@gcaa.gov.ae
ATTACHMENT 1: PROTOCOL FOR OPERATING FROM / TO UAE AIRPORTS DURING COVID-19 CONTEXT

1. **Objective:**

   Objective of the document is to explain end-to-end process for transit and transfer operations that includes operations, passengers, crew, and airport requirements to ensure safety of passengers transport whilst minimizing the risk of exposure during COVID-19 pandemic.

2. **Operational considerations:**

   a) Whenever possible, all transit passengers should be transported via same aircraft with crew change and clean disinfection process should match the operation.

   b) Whenever possible “tail-to-tail” transfer should be considered to avoid passenger entering the terminal and bus transfer to departing aircraft should be considered.

   c) Planning transfer passenger operations should be based on detailed risk assessment with due consideration for the number of passengers per each transfer to avoid crowd formation and surcharge of the designated area for transfer passenger operations.

   d) Transfer passenger operations should be restricted to one specific designated area within the airport.

   e) Transfer passenger operations should aim at ensuring the time between arriving flight and departing flight does not exceed 4 hours.

   f) All arriving gates should be close to departing gates.

   g) Designated waiting area should be disinfected as per airport’s guidelines after every flight.

   h) Thermal screening of all passengers and crew is recommended before boarding the flight and declaration forms should be completed and handed over to the ground crew at boarding gate.

3. **Passenger evaluation and assessments:**

   a) Pre-flight assessment

      1. Declaration should be submitted prior to travel. Declaration form should contain: personal and demographic information, flight and seat number (important for tracing if needed) with following general questions: do you have symptoms; have you been in close contact with a positive case; have you been diagnosed with COVID 19? Declaration should be dated.

      2. Thermal screening should be conducted at check-in or entrance of the departing airport.

      3. COVID-19 symptom check should be conducted during check in.

      4. Thermal screening check should be conducted during pre-boarding.

      5. Any passenger showing symptoms or abnormal temperature should be evaluated and denied travel.

   b) During the boarding and the flight, passengers should be regularly monitored for active symptoms.
c) Passengers should wear a mask at all times during their travel inside airport’s premises including airport transport facilities and during the entire flight.

4. **Social distancing while travel:**
   
a) Airport facility:
   
   1. Check-in counters should be equipped with barriers whenever possible, alternatively full Personal Protective Equipment (PPE) should be worn including but not limited to face mask, eye or face shield, and gloves. Gloves may be replaced by appropriate hand sanitation measures.
   2. Stickers and signs encouraging social distancing should be installed at check-in and immigration counters.
   3. Hand sanitization stations should be installed within the airport’s facility.
   4. Signs to refrain from “crowding” should be installed/displayed within the airport’s facility.
   5. Barriers and roping of areas should be installed wherever required to avoid cross contamination.

b) Smoking area should only be used by a maximum of 1 or 2 person(s) depending on the size of the smoking booth.

c) Airport and airline lounges should be closed at time of transit or transfer, unless approved as per Attachment 3.

d) Unless approved as per Attachment 3, airport restaurants and other entertainment facility:
   
   1. Should be closed at all times.
   2. All other stores should be closed.
   3. Pharmacy can remain operational.
   4. Pre-packaged meals and drinks should be provided by airlines if passengers remain in the terminal for more than 2 hours.

e) Airport toilet facility:
   
   1. Should be equipped with signs on how to clean before use.
   2. Hand sanitizers and Hand hygiene poster should be installed at appropriate location.
   3. Seat covers or disinfection wipes should be available in toilets.
   4. Passenger toilets should be separated from airport staff and 3rd party’s staff.
   5. They should be cleaned every one hour and whenever needed. Domestic staff should wear adequate PPE, including but not limited to face mask, and gloves.

f) Airport medical facility:
   
   1. Airports should establish clear processes for providing medical help.
   2. Medical help desk station should be, whenever possible, made available near transfer passengers.
   3. Paramedic stations should be, whenever possible, made available near transfer passengers.
5. **On the Aircraft:**
   a) Airline should provide face mask for passengers who are not wearing the mask.
   b) Boarding should be process by rows and in a manner that avoids crowd formation while boarding.
   c) Carry-on bag should be limited for essentials use only.
   d) Social distancing measure on aircraft should be applied whenever possible.
   e) An isolation area shall be assigned at the back of the aircraft for suspected cases (should be 3 rows in the back).
   f) Cabin crew shall be trained and equipped to deal with suspected cases.

6. **In-flight service delivery:**
   a) Passengers should wear face mask at all times.
   b) On-board bar and common areas should be closed to avoid social gathering.
   c) Change of seat should be limited as much as possible.
   d) Providing children with toys should be avoided.
   e) All waste on board the flight should be handled and disposed as medical waste.
   f) Service should be limited to essential service only.
   g) Meals should be pre-packed.
   h) Food should be supplied covered.
   i) Extra water or juices should be supplied packed.
   j) On demand catering should be avoided.
   k) Crew in the galley should be limited to galley service and should be segregated from crew providing servicing to passengers.

7. **Aircraft amenities and products:**
   a) All magazines and newspapers should be off-loaded.
   b) Headsets should be disposable.
   c) Blankets and pillow should be disposable.
   d) Menu and safety cards should be disposable or electronic and unnecessary prints like food menu should be avoided.
   e) Biohazard bag or vomit bag should be placed in the seat back pocket for disposing passenger’s masks.
   f) Distribution of unnecessary gifts, like kids toys, should be avoided.
   g) On-board duty free should not accept cash and no samples or testers should be offered.

8. **Lavatories on aircraft:**
   a) Cleaning of lavatories every 1-2 hours and whenever required.
b) Cabin crew cleaning lavatories should have complete PPE (gown, face shield). Mask should be changed after cleaning.

c) Cleaning instruction should be made available for passenger to clean before use.

d) Hand hygiene instruction should be made available in toilets for hand sanitization.

e) Toilet covers or disinfection wipes should be available in toilets.

f) A toilet should be assigned for crew usage only.

g) Items that can be shared (perfume bottles) should be removed.

9. **Infection control measure for crew in-flight:**

a) PPE requirements for cabin crew: face shield or googles, mask, gloves during service, disposable gowns as minimum requirements. Mask should be changed every 6 hours (according to the latest WHO guideline a face mask can be used multiple times and for longer periods).

b) Crew should maintain regular hand hygiene in particular before and after each service.

c) Crew should not handle personal items from passengers.

d) Crew should avoid handling masks and gloves from passengers and crew should ensure passengers use dedicated bag (vomit bag or biohazard bag).

e) Cabin crew should be trained in donning and doffing PPEs.

f) An area should be designated for cabin crew donning and doffing PPE.

g) Pilots are required to wear mask when leaving cockpit and in the cockpit unless flight safety can be compromised.

h) No cabin crew is allowed inside the cockpit.

i) Pilot’s food and beverage should be left on the doorstep of the cockpit to limit interaction with pilots.

j) Cabin crew should clean galley surfaces regularly.

k) Cabin crew should be limited to certain cabin area and should not mix between cabin during the flights (unless for an emergency).

10. **On board aircraft practices:**

a) Education of passengers on practices related to new services should be assured.

b) Aircrew briefing on COVID-19 and upwards before each flight.

c) Passenger behaviour COVID-19 related safety measures video or electronic should be developed and displayed that includes the following measures:

1. Avoid passenger movements in the aircraft.

2. No change of seat after allocated seating.

3. Don’t wait in queue for toilet and always look at occupancy signs.
4. Maintain social distancing while speaking to anyone in the flight.
5. Do not cross the galley.
7. Importance of wearing mask.

d) All individuals entering aircraft should wear mask. Gloves are not necessary especially if hand sanitizer is used.
e) There should be no document exchange except for immigration documentation or declaration forms.
f) All unnecessary signatures and sharing pen or documentation should be avoided.
g) Social distancing should be maintained at all times between crew external individual and pilots.

11. Handling of inflight emergency and suspected cases:
   a) If there is a person showing fever, difficulty in breathing, cough, or fatigue, the suspected person should be taken to isolation area allocated in last 3 rows. Only one dedicated crew should attend sick person.
   b) If possible one toilet should only be dedicated for sick person.
   c) Crew should inform the ground airport services in advance.
   d) First aid and other medical intervention should be provided as required by medical guidance training manual.
   e) Emergency situation should be handled as per airline guidelines.

12. Operations layover requirements:
   a) All layover should be avoided as most countries still at high risk.
   b) Extra Long haul flights assessments should be conducted.
   c) A risk matrix will be established and will be assessed weekly to determine layover possibility. Risk matrix is approved MOH, DOH and DHA.
   d) Whenever layover is approved the following should be considered:
      1. Layover should be minimal (not exceeding 24 hours).
      2. Hotel should only be inside the airport or safe hotel nearby the airport.
      3. Transportation should be through a contracted provider known to the airline and public transport or taxis should be avoided.
      4. Crew are not allowed to leave hotel and airline should accordingly establish a monitoring process.
      5. Food should be delivered in the room and access to buffet, bar and restaurant should not be allowed.
      6. No visiting or visitors should be allowed.
      7. Leaving premises should not be allowed unless medical emergency.

13. Transport of crew or passenger:
   a) Pilots should be segregated from cabin crew.
   b) Pilots should be seated on last 2 rows and there should be two rows separating them from the cabin crew.
c) Pilots should leave the bus last.
d) All occupants should be wearing masks.
e) There should be a separation between driver and crew.
f) Social distancing should be maintained during transport.
g) No public transport should be used.

14. Quarantine measures post-flight:
   a) should be as per the flow chart for national air carrier crew members post-flight (Attachment 2 to this guideline)
   b) Other operators shall comply with quarantine measures applied in the emirate

15. Cleaning and disinfection procedure:
   a) Cleaning and disinfection procedure should be as per approved airline guidelines for COVID-19.
ATTACHMENT 2: COVID-19 QUARANTINE AND TEST REQUIREMENTS FOR UAE AIR CARRIERS’ CREW

Declaration form, Temperature check prior to each flight
Mandated community precautionary measures
Layover mandatory precautionary requirement
No PCR testing after each flight unless symptomatic
No Quarantine after each flight / refer to the flow chart

Symptomatic: Contact your clinic for testing
*Note: Do not roster any flight until result is out

Positive
Follow DOH process
Initiate contact tracing

Negative
Return to work providing no symptoms for 3 consecutive days.

Contact Tracing
Suspected case on board
Or contact with a positive case

Quarantine for 7/14 days from date of contact. PCR testing if symptomatic
Compete declaration form before return to work

Note1: Airline should be responsible about full compliance with the requirement.
Frequent monitoring of number of positive case
Note2: This flowchart will be reviewed every 3 weeks or when indicated.
ATTACHMENT 3: PROCEDURES FOR THE OPENING OF THE AIRPORT TERMINAL FACILITIES, DUTY FREE AND RESTAURANTS

Objective:

To insure resumption of Duty free based on the overall pandemic level in the country  Insure safety of staff and consumers Mitigate the risk of transmission of COVID-19

Pandemic level for COVID-19 and operation of duty free

Pandemic level in the country will be defined by criteria set by DOH and Ministry of Health and Prevention:

- Level 1 COVID-19  total control life back to normal
- Level 2 COVID-19 moderator concerns medium precautionary measures
- Level 3 COVID-19 high concerns high precautionary measures
- Level 4 COVID-19 Alert level extreme measures should be considered

Resumption plan should be consider based on the level:

As we manage COVID 19 situation it’s important to review the country pandemic level to plan operations, once the country reaches level 1 is normal phase operation continues with standard precautions, and level 2, 3 & 4 require further precautionary measures to be put in place resumption plan should be done in phases to insure adopt action of individual SOP and policies; all staff wellbeing should be monitored in this phases including number of positive cases incident report and staff compliance level this indicators should always be used to increase precaution or decrease precautionary measures

Resumption plan should to be consider the following:

- Operational plan
- Modification shop requirements
- Staff protection measures
- Third party operation control measures
- Cleaning and disinfection producers
Operational requirements:

- Includes staffing level
- Staff selection and shift pattern
- Selection of operations
- Types of outlets

COVID 19 level consider the following:

- All staff need to conclude training awareness on COVID-19 (hand hygiene, precaution measures)
- Staffing level should be at normal capacity
- Staff follow normal rostering procedure
- Staff follow normal sickness procedure
- Resumption of all normal operational activity at 100% capacity (this includes all food and beverage, consumer services, banks, exchange, pharmacy, other shopping outlets)

Level 2 & 3 (should be divided in 2 phases):

- All staff need to conclude training awareness on COVID-19 (hand hygiene, precaution measures, wearing of appropriate PPE dealing with suspected cases and return to work post COVID-19)
- Staff level should be 30% capacity phase 1 and phase 2 can reach up to 50%
- Limited number of staff per shift
- Operation should include opening outlet to specific zone avoid multiple zone opening at the same time in phase 1 and phase 2 can open more zone moving from phase 1&2 will depend on compliance number of positive cases among the staff
- Food outlet can open with takeaway option, seating per capacity cap and standards set by DOH on restaurant setting guide
- Cash exchange should be following precautionary measures
- Lounges will need to have 30% capacity phase 1 phase 2 50% capacity and precautionary measure should be taken no open buffet service and all food items should be packet, social distancing and other precautionary measures set by government standards must apply
- Spa services should be avoided in phase 1 of operation and can be included in phase 2
- Restaurants and café 30% capacity standard government precautions phase 2 can be 50%

Level 4:

- All staff need to conclude training awareness on COVID-19 (hand hygiene, precaution measures, wearing of appropriate PPE dealing with suspected cases and return to work post COVID-19)
- Staff level limited
- Limited number of staff per shift
- Operation to include (only critical services pharmacy)
- Encourage online shopping
- No food outlets
- No cash exchange outlets
- No lounges
- No spa services
- No restaurant opening
Staff protection measures:

Level 1:
- No requirement of screening program
- Staff to follow normal sickness procedure
- Social distancing measures
- Hand hygiene measures to continue
- No mask or gloves required
- Cash handling can be expectable with proper hand hygiene

Level 2 & 3 & 4:
- Staff should be assigned in one area and avoid interaction with other areas
- Social distancing should be maintain with any other individual (consumer, passenger, third party) 2 m
- Limit interaction with third party staff, other airport staff
- All staff insure that they tested before resumption of work
- Staff should be working in pattern cluster, blocks
- Staff should be encouraged to safe travel and accommodation
- Staff should have in place screening program that insure testing every 2 weeks
- Segregation of resting and eating area with full risk assessment
- Duty free Staff toilets should segregated from rest (passenger toilets)
- Face mask to maintain at all times
- Frequent Hand hygiene practice
- Gloves to be used and changed after handling passport or document
- Encourage card payments only

Shop modification / customer protection:

Level 1:
- Maintain social distancing
- No further precaution required

Level 2 & 3:
- Identifying entrance and exist points to shops
- One way floor plan
- Cap per number of customers in store based on outlet size
- Entrance should be manned by security or staff
- Shoppers need to insure they hand sanitize before entering the outlet
- Mask should be worn before entering the outlet
- All signage should be maintained (social distancing, precaution signs)
- Sneeze shield to be kept on counter
- Hand sanitization counter should be placed around the outlet
• Trolley and carts should be disinfected regularly preferred after every use
• No testers to be used
• No trial of jewelry or clothing items
• Encourage no cash payments

Third party operation control measures:

Level 1:
• Standard precaution measures
• Maintain same protocol

Level 2, 3 & 4:
• Insure risk assessment conduct by all 3rd party on operation (entire journey 2 and from work to accommodation screening programs )
• Insure staff in shift and working pattern that clean staffing
• Screening program to insure staff safety
• Insure PPE use and training for all staff
• Insure resting area and eating area segregated
• Insure social distancing measures
• Insure regular hand hygiene

Cleaning and disinfection standards:

Level 1:
• Standard clean disinfection procedures

Level 2, 3 & 4:
• Regular disinfection of surfaces (outlets and retail)
• Regular cleaning or spraying of products
• Frequent cleaning of common areas
• Frequently cleaning common use teams chairs, tables, handles, surfaces, carts
• Deep cleaning scheduled program minimum twice weekly
• Cleaning of toilets after every use
• Appropriate PPE wear when cleaning toilets and common area
• Waste management separate bins for mask and gloves