



MINISTERIO
DE FOMENTO

A.E.S.A.
Registro Presencial
SALIDA
N de Registro: 2018063480
Fecha: 17/09/2018 15:05



O F I C I O

S/REF:
N/REF:
FECHA: September 2018
ASUNTO: Report: "Cabin crew injured during flight
as a result of turbulence"
DESTINATARIO: Dutch Safety Board
cc: CIAIAC

C.A.J.F. Verheij
Dutch Safety Board - Secretary Director
PO Box 95404
2509 CK The Hague
The Netherlands

Dear Sirs,

Regarding the final report "*Cabin crew injured during flight as a result of turbulence*" issued by Dutch Safety Board (DSB), dated on June 2018, and the recommendation to the Spanish CAA included in this report, please find below the following comments from AESA:

AESA needs to clarify some aspects concerning legal framework and differences between aeronautical and medical emergencies. An aeronautical emergency is that one that may affect safety, involving: aircraft, aerodrome or surrounding environment.

This consideration is based on:

- EASA Regulation (EU) 139/2014 and Guidance Material GM4 ADR.OPS.B.005 (a), specifying emergency typologies to be included in the aerodrome's emergency plan. Particular medical emergency is not considered as possible aeronautical emergency in this Guidance Material.
- ICAO Annex 14, in the same way, article 9.1.2 does not include particular injuries, when operational safety is not threat, in emergency casuistic. Article 9.1.3 specifies that the purpose of the aerodrome's emergency plan is to provide public health services (epidemics, contagious diseases, etc.), not considering particular pathologies or injuries. EASA confirms this aspect, including the public health emergencies in the aerodrome's emergency plan, but not the individual ones.

Spanish aerodromes are fully aligned with EASA and ICAO requirements, according to them, aerodrome's emergency plan considers flight crew incapacitation, as this would be an issue for the aircraft safety, excluding any other particular medical emergency.



Particular medical emergencies are regulated in Spain throughout the Royal Decree 2766/1967 (16th November 1967) laying down rules for the health provisions and medical services standards in the scope of the "*Seguridad Social*".

According to this Regulation, the Spanish aerodromes situation is as follows:

- Aerodromes, with a traffic of more than 8 million passengers per year, have a sanitary assistance and ambulance service, in line with the situation of most European aerodromes.
- Both large aerodromes with high traffic volume and small ones have the arrangement established in the Royal Decree 2766/1967 (16th November 1967) laying down rules for the health provisions and medical services standards in the scope of the "*Seguridad Social*".

In particular, the health provision is detailed in Annex I of Royal Decree 63/1995 (20th January 1995) laying down health provisions standards of the National Health System, at point 2-4^o (primary services) and point 4-2^o (supplementary provisions-sanitary transport).

- All aerodromes are equipped with Cardiac Rescue Devices (external semiautomatic defibrillators, to improve cardio-respiratory scenarios or myocardial infarctions), as well as trained personnel for using these devices, according to the current legislation.
- Aerodromes medical services are mainly focused on passengers, but also cover aerodrome staff demands (operators, handling, service providers, etc.).

As indicated, the resources of these services remain fitted to aerodrome size however, in the event of unforeseen events, when aerodrome resources are exceeded by the demand, the aerodrome procedures involve external services as well as the ambulances closest to the aerodrome. In both cases, medical services are provided as fast as possible.

AESA understands, in view of the previous, that:

1. Particular medical emergencies are out and must remain out of the aerodrome's emergency plan, according to Regulation (EU) 139/2014, where these type of events are not classified as aeronautical emergency because they do not threaten the aircraft safety. In the specific event studied in this report, the pilot of the aircraft acted in this same line and did not declare aeronautical emergency.



2. Regarding the recommendation, AESA considers that it is already fulfilled, and medical services at Spanish airports are being provided in the minimum possible time, according to the existing means, at the time of the event.

DIRECTOR OF SAFETY ANALYSIS AND QUALITY MANAGEMENT



Fdo.: Pablo Hernández-Coronado Quintero