



## General

- The Norwegian Directorate of Health has banned foreign travel for health personnel who are working with patient care (this includes EMS pilots, HEMS crew members and technical personnel that may have contact with patients). The travel ban covers both business trips and private travel for operational personnel.
- Everyone who comes to Norway from trips outside the Nordic countries must self-quarantine for 14 days. This applies to all journeys where arriving to Norway after February 27. This applies regardless if symptoms are present or not. This does NOT apply to operational personnel, however. The Directorate of Health has decided allowing NLA to make exceptions for its key personnel when this is strictly necessary to maintain proper operation **Note:** This means that our pilots, HEMS technical crew members and technicians living outside Norway, but only in the Nordic countries, can travel to and from Norway. The personnel have a letter of authorisation so that they are not hindered at the border or at airports. This also means that our pilots, HEMS technical crew members and technicians shall self-quarantine when they are not at work. If the personnel show any symptoms, this authorisation is of course not valid, and quarantine applies.

## Crew schedule

- 7 days on and 21 days off (normal scheduling) for pilots and HEMS technical crew members.

## At the HEMS operating bases

- Physical access to the operating bases is limited to personnel needed for the operation.
- Guest students, meetings and other visits to the operating bases are postponed until further notice.
- Extra hygiene/cleaning procedures are in place.
- Personnel on duty who develop symptoms or have had close contact with a verified or highly suspected coronary-infected patient without the use of proper infection control equipment shall be quarantined and kept separate from the remaining crew. At the same time, it must be considered whether the other

crew members should also be quarantined. The operating base will not be operational until results from tests have cleared the personnel or replacement personnel is in place and hygiene measures has been completed.

### **Technical**

- Personnel who work on the technical base and line are separated.
- Technical department/base is isolated to only technical personnel who have permanent workplace there.
- Other operational personnel that perform test or positioning flights as well as cleaning and canteen personnel are allowed. Other employees should not visit the base in any case.
- Extra hygiene/cleaning procedures are in place at all facilities.
- Similar procedures as for “At the HEMS operating bases” above are in use when personnel on duty develop symptoms.

### **Administration / Head office**

- Home office is the general rule until further. All employees must together with their respective immediate superior assesses the degree to which they can perform their duties from home office. Work that cannot be solved from a home office can only justified if this is necessary to maintain operation. Everything that can be done from a home office, shall be done from home.
- All external meetings that cannot be conducted by Skype / Teams / telephone must be cancelled.
- No guests should be invited to the main office or other facilities co-located with air ambulance bases or health institutions.
- The request to facilitate visits to air ambulance bases must be rejected.
- If physical meetings are needed, the largest possible meeting room should be used.
- All meeting participants should be separated by at least one meter. The meeting room should be well ventilated and cleaned before and after use.
- The cantina at the main office is closed.

### **“Unnecessary” activity**

- Travel by public communication shall be limited to what is absolutely necessary.
- All meetings between and with operational personnel are conducted via Skype / Teams / telephone.
- Any deviations from this must be cleared with the supervisor.
- All training and checking activities are cancelled or delayed (Part-FCL, Part-MED, Part-ORO, Part-66) in cooperation with and in accordance to CAA-Norway decisions/exemptions based on current EASA recommendations (i.e. up 4 month delays with mitigating measures etc., etc.).

### **Limitation of the use of EMS helicopters**

Transport needs for COVID-19 patients are expected to increase during the spring, especially for the sickest ones who need to be transported to larger hospitals. In parallel, the capacity of the HEMS (and AEMS) fleet is expected to be reduced (quarantine of personnel, disinfection of aircraft, failure of logistics and other services, etc.) to such an extent that readiness for "ordinary missions" is also threatened.

In order to limit the risk for/exposure to contamination and to reduce the flight hours to dampen the burden on the technical department, it is necessary to limit the use of the EMS helicopters to what is absolutely necessary. The HEMS resources should, as far as possible, be reserved for patients with obvious medical needs and where transport distance makes use of a car or boat not an acceptable alternative. In the case of primary helicopter missions, the HEMS dispatcher, possibly in collaboration with the on-duty HEMS physician, should await feedback from a road ambulance or emergency room if the waiting time is not too long. Dispatching several EMS helicopters simultaneously to the same event is limited. In the case of SAR missions, suspected need for imminent operations or other rescue technical measures, the mission should be considered to be transferred to JRCC and a dedicated rescue helicopter provided this does not entail an unacceptable time delay. Exercises should be postponed.

Next of kin are not allowed to follow a patient unless the patient is a child under the age of 18.



### **Specific measures to limit contamination during Primary HEMS, Secondary HEMS and SAR**

The procedures vary somewhat between HEMS operating base profile/region/location and are written in Norwegian. As they are frequently updated and are lengthy, they are not practical to list here.

#### **Contact**

Should you have any questions, please contact: [andreas.hjert@norskluftambulanse.no](mailto:andreas.hjert@norskluftambulanse.no)

The full Technical Notification Bulletin is available [here](#).

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#### **Information received from Lufttransport, Norway:**

The company has experienced lately:

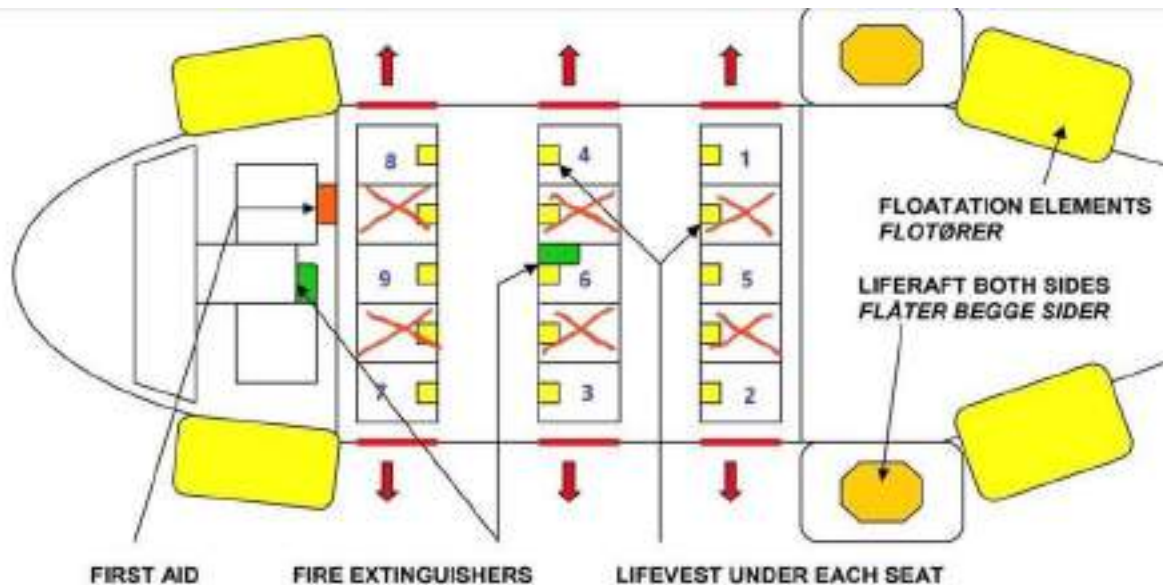
- Super Puma – utilising EPIGuard transporting Corona patients.
  - EPIGuard fitted to the AAT Medical interior
  - Crew plus medical team of 3 and the patient in the EPIGuard
  - they have Oxygen and utilise the Battery on the EPIGuard (6hours) so only oxygen connected in flight



They have split areas for post flight:



Their AW139 which is still in operation (due to critical transport) has been limited from 15 seats to 6, and they are looking at solutions for separating the cockpit from the cabin:



**Preventative daily Aircraft cleaning** is an issue due to the full procedures for contamination, but daily routines are an area they need to train more and ensure quality of clean whilst also protecting the personnel.

They adopt following procedures in line with EASA and OEM guidance:

*Cabin/Cockpit Preventive Disinfection of contact areas shall be performed daily. Full disinfection should be performed after each flight when operating from a high-risk area or after transporting a COVID-19 suspect passenger. The Preventive Disinfection should include surface disinfection of contact areas (but not limited to):*

- o Door handles*
- o Handrails*
- o Seat armrests (if applicable)*
- o Headset (if applicable)*
- o Seatbelt latches*
- o Seatbacks (the plastic and/or metal part)*
- o Light and air control (if applicable)*
- o Walls and windows adjacent to seats*
- o Cockpit*



- *Flight controls*
- *Headsets*

**For Contamination cleaning the company uses LifeClean, Perasafe, and Dismozon Pur**

*Use of LifeClean*

- Use of gloves and protective glasses (additional protection iaw LifeClean data sheet)
- Use of pre-mixed LifeClean solution
- Wait for 2 minutes and wipe off with soap water
- Used mix can be spilled in the normal drain
- Used substances can be poured into the normal drain
- Note: Open LifeClean bottle has a shelf life of 4 weeks

*Use of Perasafe*

- Use of gloves and protective glasses (additional protection iaw Perasafe data sheet)
- Use Perasafe solution
- Mix 1 bag of Perasafe (16,2 gram) with 1 litre water in a bottle (ref data sheet)
- Mix by turning bottle upside-down a couple of times
- Apply and wait 10 minutes and wipe off with soap water
- Used substances can be poured into the normal drain
- Note: Shelf life for Perasafe mix is 24 hours

*Use of Dismozon Pur*

- Use of gloves and protective glasses (additional protection iaw Perasafe data sheet)
- Use in accordance with substance data sheet information



Risk assessments are being updated daily and CAMO statements and SBs are sent daily as well.

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**Information received from Luxembourg Air Rescue, Luxembourg:**

The validity period of the following training and checking in accordance with Annex I II (Part-ORO) to Regulation (EU) No 965/2012 is extended by 4 months provided that the regular validity period of training and checking, as set out in the applicable training and checking requirements of Part-ORO, expires before 31 July 2020:

- operator proficiency checks (OPC) in accordance with points ORO.FC.230(b) and ORO.FC.330 of Part-ORO;
- line-oriented evaluation in accordance with point ORO.FC.A.245(d), if applicable;
- operator emergency and safety equipment training and checking in accordance with point ORO.FC.230(d) of Part-ORO;
- operator ground and flight training in accordance with point ORO.FC.230(f) of Part-ORO;
- operator cabin crew recurrent training and checking in accordance with point ORO.CC.140 of Part-ORO;
  - operator technical crew recurrent training in accordance with point ORO.TC.135 of Part-ORO.

In addition, the validity period of the following training not directly regulated by Regulation (EU) No 965/2012 is extended by 4 months provided that the regular validity period of training expires before 31 July 2020:

- Dangerous Goods training for all categories according the ICAO technical instructions; • Dispatchers training;

- Loadmaster training;
- Ground personnel training;
- Any other training covered by the Operations Manual

As mitigation measures, operators shall comply with the following:

- a) in the case of operator proficiency checks (OPC) in accordance with point ORO.FC.230(b) as well as lineoriented evaluation in accordance with point ORO.FC.A.245(d), if applicable, you shall ensure that flight crew benefitting from this exemption shall comply with the following and any additional Part-SPA related exercises, as applicable: i. they shall hold a valid class or type rating; ii. they shall operate under the management system of an organization for which Part-ORO is applicable; iii. they shall have received refresher training, followed by the completion of an assessment by means established by the operator to determine that the required level of knowledge to operate the applicable class or type are maintained. That assessment shall include class- or type — specific abnormal and emergency procedures.
- b) In case of operator emergency and safety equipment training and checking in accordance with ORO.FC.230(d), ground and flight training in accordance with point ORO.FC.230(f), OPC for commercial spo and CAT **ORO.FC.005(B)(1)** and (2) in accordance with point ORO.FC.330, cabin crew recurrent training and checking in accordance with point ORO.CC.140, technical crew recurrent training in accordance with point ORO.TC.135, you shall ensure flight crew members complete additional training through any means.

**For ratings / certificates expiring before 31st July 2020 the validity period is extended as follows:**

- (1) by 4 months, in the case of:
- (i) class ratings, type ratings and instrument ratings endorsed in Part-FCL commercial pilot licences (CPL, MPL, ATPL) for operating aircraft representing those classes and types within an organisation for which Annex III (PartORO) to Regulation (EU) No 965/2012 is applicable;
  - (ii) Part-MED Class 1 medical certificates of holders of the ratings and certificates specified in point (i) above;
- (2) until the end of the application of this Exemption, in the case of:
- (i) Part-FCL instructor and examiner certificates the holders of which are involved in training and checking of holders of the class and type ratings specified in point 1(i) above;
  - (ii) language proficiency endorsements as per point FCL.055 of Part-FCL;

(iii) privileges of Part-MED aeromedical examiner certificates related to Class 1 medical certificates; (iv) medical reports of cabin crew as per point MED.C.030 of Part-MED.

If, towards the end of the 4-month period specified above, DAC considers that the reasons for granting this Exemption still apply, the validity period of the rating or certificate may be further extended for a period of up to 4 months or the end of the application of this Exemption, whichever comes first.

The same also applies to Aircraft maintenance licences issued in accordance with Annex III (Part-66) to Regulation (EU) No 1321/2014.

**The following mitigating measures shall be taken:**

- (1) Part-FCL licence holders benefiting from this exemption shall comply with all of the following:
  - (a) they shall hold a valid class or type rating;
  - (b) they shall operate under the management system of an organisation for which Part-ORO is applicable; (c) they shall have received refresher training, followed by the completion of an assessment by means established by the operator to determine that the required level of knowledge to operate the applicable class or type are maintained. That assessment shall include class- or type – specific abnormal and emergency procedures. Upon successful completion of the refresher training and the assessment as per point (c), a type rating examiner (TRE) nominated by the operator shall endorse the licence, as appropriate, with the new expiry date.
- (2) Part-FCL instructors and examiners certificate holders benefiting from this exemption shall hold a valid instructor and, if applicable, a valid examiner certificate. A (senior) TRE nominated by the operator shall endorse the certificate, as appropriate, with the new expiry date.
- (3) Part-MED Class 1 medical certificate holders shall hold a valid Class 1 or Class 3 medical certificate without restrictions, except visual ones.
- (4) Part-MED cabin crew medical report holders benefiting from this exemption shall hold a valid cabin crew medical report without limitations, except visual ones.
- (5) Part-MED aero-medical examiner certificate holders benefiting from this exemption shall hold a valid aeromedical examiner certificate. This exemption is applicable until the end of the COVID-19 epidemic outbreak or 12 months after the expiry date of their current AME certificates whichever date is earlier.

They are currently working on a solution for General Aviation pilots (including national parachutist and ULM licences) and will keep us updated on this.



**Information received from Union Française de l'Hélicoptère, France:**

The transport of patients with suspected or confirmed coronavirus infection should be done by road. If this is not possible, e.g. in the event of a life-threatening emergency for the patient, inter-hospital transport must be carried out as a priority by a heliSMUR. In the absence of this type of aircraft or in the event of it being unavailable, transport may be carried out by a civil security helicopter.

On a mission, the SAMU regulator has to specify the patient's state of health. Indeed, depending on this, the crew can adapt the protective measures. If this information is not given, the mission cannot be carried out. The infectious patient (suspected, probable, confirmed coronavirus case) transported must wear a surgical mask provided by the medical teams. Otherwise, transportation will be refused.

In the case of a transition to phase 3 of the epidemic and in order to protect the crew, any patient transported, even asymptomatic, has systematically to be equipped with a surgical mask provided by the medical teams, otherwise transport will be refused. During the duration of the flight he will only wear the FFP2 mask. The Helicopter base manager must constantly ensure that there is a minimum masks stock available.

The full document in French language is available [here](#).





## Information received from British Helicopter Association, UK:

The BHA Management has been in touch with Parliamentarians and Government to emphasise that the industry has a crucial role to play in national support to the Infrastructure and resilience. As other means of transport close down and the military become overstretched it will be the civilian operators who may be called upon to provide short notice passenger and freight transport. This may take the form of 'Ships taken up from Trade' planning which takes place during major conflicts. This means that the helicopter companies could need financial and material support to do this important task. Already the BHA has two companies who have indicated they are willing to take part.

BHA have also been working closely with the UK CAA who have been very forward leaning by getting exemptions in place to routine training and checking. They are introducing a dedicated drop-down field on their [website](#) giving access to advice and publications relating to COVID 19, where they will seek to prioritise the important ones.

Further information come from the UK CAA ([link to the Safety Notice](#) and the [Official Record Series 4](#) ) and

the OGUK ([link to the Helicopter Transfer Flowchart](#)).





Coronavirus barriers generally approved by the UKCAA. Here below are some pictures of the AS355:













**Information received from Heli Austria, Austria:**

[Mini SOP on Covid-19 – HEMS operations](#)

**GUIDELINES FROM OTHER INTERNATIONAL ORGANISATIONS/COMPANIES:**

+ [TAPA Toolbox](#)



HAI Combat



checklist

+ [Sikorsky Information letter](#)

+ [Up & Away company \(pdf presentation is enclosed\)](#) and the use of [Bacoban](#) to disinfect airline interiors ([pdf presentation is enclosed](#))

+ [Hytech UV disinfection technology \(used with the Irish Air Corps\)](#)

+ [ICAO webpage on Covid-19](#)

+ [Flight Safety Foundation - FSF Enhances Roadmap of COVID-19 Aviation Safety Considerations](#)