



Advice on managing the health risks from COVID-19 on international flights

What is Australia doing?

All travellers arriving at Australia's international airports will be provided with a 'COVID-19 information for international travellers' fact sheet.

Additional communication materials and announcements are available at the arrival halls of every Australian port. This material informs travellers of the symptoms of COVID-19 and encourages them to report to biosecurity officers if they are experiencing symptoms while in the port environment.

Entry restrictions apply to foreign travellers from all countries, excluding New Zealand citizens resident in Australia.

All travellers arriving in Australia must quarantine in designated accommodation for 14 days after entering Australia. Travellers may also be subject to health screening at the airport.

Ill travellers on aircraft will continue to be assessed using the 'Traveller with Illness Checklist', which includes questions to screen for COVID-19.

The Australian Government is also working closely with the airlines to support crew members travelling to and from international destinations. Crew have been advised to take particular care on layovers, to use dedicated private transport, avoid crowded public spaces, practise good hygiene, use personal protective equipment (PPE) where appropriate, monitor for symptoms, and not to fly if they have any symptoms of a respiratory illness.

How can we reduce the risk to passengers and crew?

The risk to passengers and crew will be influenced by the COVID-19 situation both in the departure country and countries where passengers have recently travelled. This will include the prevalence of cases, the presence of community transmission and geographical spread of cases.

Crew are advised to continue to follow their existing infection prevention work instructions when in contact with ill passengers, including the use of Personal Protective Equipment (PPE) (e.g. masks and gloves) when recommended.

The following measures are recommended to help reduce the risk of spread:

Hygiene

- Crew and passengers should be encouraged to practise good hand hygiene and good sneeze/cough hygiene including:
 - Washing hands often with soap and water, or using alcohol-based hand rub, particularly before and after eating, and after going to the toilet.
 - Covering nose and mouth when coughing and sneezing, disposing of tissues and immediately washing hands.
- Avoiding touching their mouth, eyes, and nose with unwashed or gloved hands.
- Hand and respiratory hygiene should be supported by signage, reminders and appropriate facilities or hand hygiene products and waste disposal bins.

Physical Distancing

- Physical distancing and measures to decrease touch and increase spacing should be maintained during check in, boarding and disembarkation.
 - This could include boarding by rows or in other smaller groups of passengers.
 - Passengers should be limited to one small piece of hand luggage.
- Contact between aircrew and passengers should be minimised, including through the provision of pre-packaged meals and minimal meal and drink services.
- Spacing of seats should be facilitated where possible, including seating of flight crew away from passengers for take-off and landing.
 - This could include leaving empty seats between passengers.
 - A maximum of 80% capacity of a flight should be utilised.
 - Assigned seats should not be changed.
 - Family or companion groups should be seated together while non-related groups should be seated apart.

Movement

- Movement of passengers and crew should be minimised. Passengers should remain in their allocated seat unless going to the toilet.
- Crew rest should be located in a separate area for use of crew only. Crew may use a designated bathroom.

PPE

- It is recommended that passengers wear masks for the duration of the flight, in accordance with manufacturer's instructions.
 - This is also recommended for staff during interactions with passengers to reduce the risk of transmission.
- PPE should be fitted and worn properly, with training provided to crew on appropriate use.
- Crew should wear gloves when handling passenger items or touching potentially contaminated items. Gloves should then be removed or washed and hands washed after these activities.
- Designate an area such as the galley, as a clean area, one-way traffic only – clean PPE enters galley and moves one way looping around in a horseshoe direction to remove PPE and dispose.
- No PPE to be worn in crew area unless freshly applied and clean.
- If a crew member is required to assist a passenger (and their close personal contacts) who is ill, the crew member should:
 - wear a surgical mask, disposable full-length gown, gloves and eye protection
 - remove any PPE carefully (without touching the front of mask, gown or outside of gloves) to avoid self-contamination, hygiene hand immediately after removing PPE.
 - dispose of used PPE carefully in biohazard bags and use alcohol-based hand sanitiser immediately after tying the bag tightly closed.
 - wear gloves to clean then disinfect surrounding surfaces with a broad spectrum disinfectant and use alcohol-based hand rub after removing gloves.

Aircraft setup

- Pre-loading sick bags into seats and ambient snacks into self-help bars.
- Removal of magazines from seat backs.
- Providing passengers with individual waste bags in each seat pocket including masks, hand sanitiser and border force paperwork.

Cleaning

- Airlines should ensure appropriate cleaning and disinfection activities are undertaken between and during each flight for high use areas, such as bathrooms.
- Aircrew should review guidelines and ensure enhanced infection control measures as part of normal in-flight practices.
- Additional training or inflight specialist support for infection control could be considered.
- Passenger waste should be collected during end of meal service and placed in waste bags and stored in waste carts.
- Contaminated surfaces including the surfaces in toilets should be cleaned and disinfected. The disinfectant should be a broad spectrum disinfectant with a claim for effectiveness against norovirus infection is recommended.
- When cleaning toilets or surfaces contaminated with body fluids or used by an ill passenger or crew member, crew should wear gloves, a disposable full-length gown, and a surgical mask.
- PPE should be removed carefully and in order (gown and gloves), followed by hand hygiene and removal of the mask without touching the front of mask to avoid self-contamination and hand hygiene should be performed again.
- Used PPE should be placed in a plastic bag and fastened and then put into standard waste containers to constitute double containment or in biohazard bags.

Should we conduct pre-flight screening?

Passengers who have tested positive for COVID-19, if possible, should not fly until released from isolation by the local public health authority.

Pre-flight screening for international flights is recommended. Recommended questions and actions are outlined in Appendix 1.

Normal processes for the assessment of health risks related to flights should also be undertaken.

What should I do if a passenger or crew member becomes ill while on a flight?

If possible, ill passengers (and their close personal contacts including family members) or crew experiencing cough, fever, sore throat, sweats or chills should:

- be separated from other travellers as a precaution, with at least one spare seat on either side or a window seat with a spare seat next to them. Ideally, the row should be kept empty
- be given a surgical mask to wear
- be allocated a specific toilet for use by affected passengers/crew only.

Crew members should:

- wear gloves when handling and receiving items from affected passengers
- ensure removal of gloves before touching other persons or any surfaces
- use alcohol-based hand sanitiser following removal of gloves and contact with any persons or surfaces
- use appropriate PPE if close contact with an ill passenger or their bodily fluids is required
- ensure ground officials are notified.

For layovers at any international destination

It is recommended that crew follow the below measures while in transit:

- Wearing a surgical mask and maintaining safe distance (at least 1.5 metres) from people when transiting through airport terminals and other crowded places,
- Proceeding directly to the crew hotel on exiting the terminal.
- Avoiding crowded or public places, stay at the crew hotel, including for meals.
- Practising good hand hygiene and good sneeze/cough hygiene as outlined above.
- Avoiding touching mouth, eyes, and nose with unwashed hands.
- Interactions with other crew and hotel staff should be limited, including avoidance of all unnecessary interaction with others.
- Practising social distancing and avoiding physical contact with others (hand-shaking, hugging etc.).

What are aircraft required to report?

All aircraft entering Australian territory are legally required to report ill passengers and crew on the pre-arrival report. A biosecurity officer will then meet the aircraft to screen for COVID-19 and other listed human diseases. Biosecurity officers do this by administering the 'Traveller with Illness Checklist' to the ill passenger or crew member. A biosecurity officer or human biosecurity officer may then issue directions for the management of a suspected case of COVID-19, which are legally required to be followed.

Who is exempt from the mandatory 14 day quarantine requirements?

There are some exemptions for specific industry groups provided they adhere to the advice in this fact sheet. Exemptions for specific groups are granted because of the industry infection prevention requirements and training these groups have undergone. They support the vital air bridge between Australia and the rest of the world and ensure supply of critical services during this difficult time.

The following industry groups are exempt from the mandatory 14 day quarantine requirements:

- Airline, medevac and air ambulance crew, including off-shift crew who are travelling as passengers on an aircraft to reposition at another location
 - Airline crew who have been on international flights must self-isolate in their crew accommodation or home for 14 days after arrival, or until their next flight, whichever is shorter.
 - Essential flight-related duties from a regulatory or safety perspective may be undertaken during this time (eg flight simulation training, safety and security training).

- Medevac and air ambulance crew may request an exemption from self-isolation requirements to return to duties beyond the essential flight-related duties already exempt. A request for exemption must be made to the relevant [state or territory](#), and will be assessed on a case-by-case basis.

All aircrew are advised to take particular care on lay overs, to use dedicated private transport and to avoid crowded public spaces. Airline crew should monitor for symptoms and not fly if they are ill.

Other information

The Department of Health is providing additional communication material for travellers (including passengers and crew) on-board all aircraft into Australia and at all Australian international airports and seaports. This material informs travellers about COVID-19 and what to do if they have come from a risk area and are ill, or become ill. The information sheets are updated as significant developments take place and are available at www.health.gov.au/covid19-resources

Where can I get more information?

For the latest advice, information and resources, go to www.health.gov.au.

Call the National Coronavirus Health Helpline on 1800 020 080. The line operates 24 hours a day, seven days a week. If you require translating or interpreting services, call 131 450.

The phone number of your state or territory public health agency is available at www.health.gov.au/state-territory-contacts.

If you have concerns about your health, speak to your doctor.

Appendix 1

COVID -19 screening questionnaire

This generic tool is to support facilities to implement screening for COVID-19 where an infectious case detected would be detrimental. It is designed to be adapted for local use according to risk.

Questions

1. Do you feel unwell with any cold or flu like symptoms such as runny nose, shortness of breath, cough or sore throat?
2. Do you/have you felt feverish or had a temperature in the last 14 days?
3. Have you been on a cruise ship or in close contacts with a cruise ship passenger in the last 14 days?
4. Have you been in contact with someone that is a suspected (being tested) or confirmed a COVID-19 case in the last 14 days?

Temperature

An airline may consider taking a person's temperature as part of screening requirements if the passenger answers YES to any of the above questions.

If anyone answers YES to question 1-5, and/or the temperature recording is >37.5 °C they may require further assessment.

Identify an appropriate referral pathway.