

# **OPERATIONAL GUIDELINES FOR MANAGING AIRLINE PASSENGERS AND AVIATION PERSONNEL IN RELATION TO THE COVID-19 PANDEMIC**

## REFERENCES

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### European Union References

- EASA ECDC COVID-19 Aviation Health Safety Protocol. Operational Guidelines for the management of air passengers and aviation personnel in relation to the COVID-19 pandemic. Issue no: 2. Issue date: 30/06/2020.

### National References

- Real Decreto-ley 26/2020, de 7 de julio, de medidas de reactivación económica para hacer frente al impacto del COVID-19 en los ámbitos de transportes y vivienda.
- Resolución de 9 de julio de 2020, de la Dirección de la Agencia Estatal de Seguridad Aérea, por la que se publican las Directrices operativas para la gestión de pasajeros aéreos y personal de aviación con relación a la pandemia COVID-19.
- Resolución de 20 de noviembre de 2020, de la Dirección de la Agencia Estatal de Seguridad Aérea, por la que se actualizan las Directrices operativas para la gestión de pasajeros aéreos y personal de aviación con relación a la pandemia COVID-19.
- Resolución de 17 de diciembre de 2020, de la Dirección de la Agencia Estatal de Seguridad Aérea, por la que se actualizan las Directrices operativas para la gestión de pasajeros aéreos y personal de aviación con relación a la pandemia COVID-19.

### Resolutions from General Directorate of Public Health:

- Resolución de 11 de noviembre de 2020, de la Dirección General de Salud Pública, relativa a los controles sanitarios a realizar en los puntos de entrada de España.
- Resolución de 9 de diciembre de 2020, de la Dirección General de Salud Pública, por la que se especifican las modalidades de Pruebas Diagnósticas de Infección Activa para SARS-CoV-2 en relación con los controles sanitarios a realizar en los puntos de entrada de España.

*\*Without prejudice to other requirements that may be required at national and regional level and by other Competent Bodies.*

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## BACKGROUND

Due to the evolving pandemic situation caused by the coronavirus (COVID-19), and on the recommendation of the Emergency Committee of the International Health Regulations (2005), on 30 January 2020, the Director General of the World Health Organization declared the outbreak of the new coronavirus COVID-19 to be a Public Health Emergency of International Concern (PHEIC), since its international spread poses a risk to public health in all countries and requires a coordinated international response.

As a consequence of the public health emergency situation caused by COVID-19, nationally and internationally, and under the provisions of Article 4, sections b) and d), of Organic Law 4/1981 of 1 June, on states of alarm, emergency and siege, Royal Decree 463/2020 of 14 March declared a state of alarm throughout Spain in response to the health crisis, which has been extended on several occasions under the terms expressed in said law.

On 9 June 2020, Royal Decree-Law 21/2020, on urgent prevention, containment and coordination measures to respond to the health crisis caused by COVID-19, was published, whereby people aged six years and up are required to wear medical face masks or others that provide superior protection.

The same Royal Decree-Law specifies that air transport operators with a pre-assigned seat number must store, and make available to public health authorities, contact information of passengers for a minimum of four weeks for contact-tracing purposes.

Finally, on 8 July 2020, Royal Decree-Law 26/2020 of the 7th of July, for economic reactivation measures to face the impact of COVID-19 on transport and housing scope, was published, whereby on the article 3, related to the operational Guidelines for managing airline passengers and aviation personnel concerning the COVID-19 pandemic which the Spanish Committee for Facilitation of the Air Transport, foresaw on the PRE/248/2003 Order, of 6th of February, will establish in Spanish the operational Guidelines for managing passengers and aviation personnel concerning the COVID-19 pandemic, applicable to air operations in Spanish airports, incorporating to the internal legal framework, the guidelines adopted by the European Aviation Safety Agency (EASA) and the European Centre for Disease Prevention and Control (ECDC), as well as successive modification, adapted to the Spanish specificity. The adapted EASA/ECDC Guidelines will be published on the Spanish official State Journal (BOE) by resolution of the Spanish Aviation Safety and Security Agency Director.

Furthermore, it is indicated that Guidelines are mandatory for airport operators of the open to civil aviation public interest airports located on Spanish territory, and for companies that develop auxiliary activities on them; airlines that perform air operations on the Spanish airports and the rest of users of the infrastructures.

Without limiting the foregoing, the Spanish Committee for Facilitation of the Air Transport may declare that other international recommendations for managing passengers and aviation personnel concerning the COVID-19 pandemic offer equivalent levels of effectiveness than the adapted EASA/ECDC Guidelines, in order to minimize the risk of SARS-Cov-2 infection in civil aviation.

In that case and subject to reciprocity, it will be understood that the compliance by the third country airlines of the international recommendations declared equivalent satisfies the foresaw in the cited section.

On the other hand, the section 3 of the article 7 provides that the supervision of the compliance of the adapted EASA/ECDC guidelines and the international recommendations subjected to reciprocity and declared equivalent correspond to the Spanish Aviation Safety and Security Agency (AESA)

The Agency after hearing the Spanish Committee for Facilitation of the Air Transport, may additionally adopt guidance material related to the application of the requirements and to the supervising procedures that conduct.

## GENERAL CONSIDERATIONS

The purpose of this document is to lay out the obligations, as well as to provide guidance to the Airport operator and aeroplane operators, as well as to other stakeholders, on how to ensure the safe and gradual resumption of passenger air transport.

Both the recommendations and the requirements will be constantly reviewed in order to adapt to the evolving epidemiological risk, to changes in air traffic volume, as well as to updated EASA/ECDC Guidelines.

## MANDATORY STANDARDS

### 1) OBLIGATIONS OF AIRPORT OPERATORS

Airport Operators of any airport open to civil traffic located in Spanish territory must:

#### ***a) In relation to access to terminal buildings:***

- i) In coordination with the law enforcement agencies, access to terminal buildings shall be limited to:
  - Passengers with a valid ticket or boarding pass, within the 6 hours prior to the scheduled departure, and in the case of minors, persons with reduced mobility or another duly justified cause, to anyone escorting these passengers as strictly necessary.
  - Duly accredited employees of the airport or companies that provide services in the facility, as well as to the crews and pilots of scheduled flights of airlines and other aeroplane operators, including general aviation pilots and their companions preparing to fly.
  - Law enforcement personnel as well as to those personnel that provide other airport services, including border health, customs, postal, border and internal security services.
  - Other duly authorised persons, including inspectors of the National Aviation Safety Agency (AESA) in the exercise of their inspection functions.
- ii) Make available to passengers prior to their arrival at the airport, through their communication channels, information on access restrictions to terminals and other information of interest for proper trip planning.
- iii) Establish the appropriate procedures to avoid crowding at terminal access points.
- iv) Properly signpost and provide information on the terminal access limitations.

#### ***b) In relation to the installation of protective, cleaning and hygiene devices and other measures in the infrastructure:***

- i) Ensure, in collaboration with law enforcement personnel, that all persons who enter the terminal building use, within the airport facilities, a medical face mask or another that provides superior protection, except in duly justified cases, and make it possible for those passengers who do not have them to acquire one.
- ii) Enhance the cleaning and disinfection processes of airport facilities taking into account flight schedules, especially those through which passengers transit, as well as of those devices or objects that are prone to being touched, such as protective screens, security control trays, etc. EASA cleaning guidelines shall be followed in this regard.
- iii) Promote the use of contactless electronic devices. To the extent possible, they will install devices that minimise contact with surfaces at the airport.
- iv) Install hand-cleaning virucidal sanitising gels or disinfectants in the terminal that are authorised and registered with the Ministry of Health, especially in locations with greater potential for contact, such as at the exit of security checkpoints.

- v) Install a sufficient number of litter bins to dispose of used masks and other used PPE material, and adopt procedures for their adequate cleanliness and treatment.
- vi) Provide the appropriate protective equipment, as well as training to workers on their proper use, within the scope of their occupational risk prevention programmes.
- vii) Enhance ventilation measures in terminal buildings by minimising air recirculation and avoiding horizontal air flows as much as possible. Likewise, take appropriate measures to maintain, clean and replace air filters at the appropriate frequency.
- viii) Collaborate with airlines, within the area of responsibility of the Airport operator, to avoid having passengers remain on board for more than 30 minutes if a parked aircraft does not have adequate ventilation in accordance with EASA/ECDC recommendations.
- ix) Provide, within the collaborative framework laid out with the Ministry of Health, the resources needed to carry out the required health processes.
- x) Collaborate with airlines or ground handling service providers in order to optimize the use of the available arrival baggage carousels to limit the gathering of passengers and, where possible, use dedicated baggage carousels for flights from high-risk areas (as assessed by the public health authorities at the arrival airport).

***c) In relation to the distancing between passengers and other personnel who provide services at Airport terminals:***

- i) Establish adequate protocols and mechanisms so that, to the extent possible, both passengers and staff remain 1.5 m apart in the terminal. Likewise, establish mechanisms to avoid queuing in high passenger concentration areas, including lounges, toilets, etc.

Specifically, they will collaborate with airlines to establish protocols to prevent crowding during the boarding and disembarking processes.

In keeping with this section, install signage and other appropriate means to ensure the aforementioned distancing between passengers in the terminal and in facilities under their responsibility, to avoid queuing in high passenger concentration areas and minimise contact between passengers and physical elements in the terminal.

In permanent customer service locations, install protective screens.

- ii) Establish adequate coordination mechanisms and information channels so that, in commercial establishments, such as shops, restaurants and other premises in the terminal buildings of the airports they manage, the capacity, distancing and other sanitary requirements are observed.
- iii) Collaborate with the competent customs and border authorities to establish adequate measures for distancing passengers, thus avoiding crowds.
- iv) Separate arriving and departing passenger flows whenever possible. If not, establish the necessary mitigation measures.

Likewise, establish separate flows to avoid contact between passengers and crews both at the entrance to terminal buildings and at access points to the restricted area of the airport, thus enhancing crew protection and limiting potential contagion risks.



v) In those cases in which, due to the design of the terminal, it is not possible to ensure a physical distance of 1.5 m, establish the appropriate risk mitigation procedures and communicate them to the passengers and other staff at the airport.

vi) Within their area of activity, collaborate with handling agents and/or airlines to dispatch a larger number of buses, thus promoting physical distancing between passengers en route to the aeroplane.

***d) In relation to the information provided to passengers and personnel who provide services at the Airports:***

i) Take the appropriate measures to ensure that their personnel avoid going to airport facilities if they exhibit symptoms compatible with COVID-19, and work with the companies with which they have signed a contract to prevent any staff member with symptoms from going to the airport.

ii) Inform passengers, through the appropriate communication channels, to have them avoid going to the airport if they exhibit symptoms compatible with COVID-19. This communication shall warn passengers that if any symptoms are detected once at the airport, this could result in appropriate actions being taken by the competent authorities.

iii) Report continuously, through informative material such as pictograms, screens and electronic means, on measures to promote health safety at airports, paying special attention to those areas with the highest concentration of passengers in the terminal. This information shall cover aspects such as physical distancing, minimising contact with surfaces, hygiene and protection, etc.

iv) Inform passengers of the need to adhere at all times to any preventive measures put in place and informing them of the consequences of not complying with this obligation.

v) Report on the mandatory use of surgical masks or higher protection for all persons aged six years and over, including passengers, as well as airport and airline staff in airport infrastructures and on-board aircraft, and on the appropriate use of these (type, placement, removal, disposal, etc.). Masks with an exhalation valve are not allowed, since this type of mask does not filter exhaled air.

The information specified in this section will be available in Spanish, in the other official languages of the regions in which the airport is located, and in English in those airports with a significant amount of international passenger traffic.

***e) In relation to the coordination and establishment of procedures with other agents:***

i) Coordinate the application of preventive measures, at the airports that they manage, by their staff and the companies they have contracted to provide services at those airports. To this end, they will appoint a coordinator at each airport.

ii) Inform subcontractors, especially private security companies whose security personnel carry out physical inspections, about their obligations in terms of PPE and its proper use, without exempting any company from its responsibility pursuant to its occupational risk prevention programme.

iii) Coordinate the appropriate protocols with law enforcement agencies for dealing with those passengers who do not observe the preventive measures in place at the airport.

- iv) Likewise, they will collaborate with health authorities to treat symptomatic passengers as per established procedures.
- v) Collaborate with health authorities and law enforcement to implement the health controls specified by the Ministry of Health in order to guarantee that they can be enforced. They may not store, access or process health data or any other related data obtained in the exercise of said collaboration.
- vi) Collaborate with the air operator and the health authority to locate and notify any companions who may still be at airport facilities, and to process the luggage, of those passengers who, as a consequence of the screening done upon arrival, are referred to a health centre.
- vii) Collaborate with the Ministry of Health in the implementation of the measures provided for in this resolution.

### ***f) Regarding the application of alternative means of compliance***

- i) Conduct a risk assessment prior to the implementation of potential alternative means of compliance, depending on the type and volume of traffic at an airport.

## **2) OBLIGATIONS FOR AIRLINES AND OTHER AIRCRAFT OPERATORS**

Airlines and other aircraft operators that operate at any airport open to civilian traffic located in Spanish territory must:

### ***a) In relation to the installation of protective, cleaning and hygiene devices and other measures on board:***

- i) Adopt the cleaning and disinfection measures recommended by EASA/ECDC for the contact surfaces that are the responsibility of the aircraft operator, as well as on board the aircraft, during all the processes for which they are responsible.
- ii) Establish adequate mechanisms so that both the staff that provide services under the responsibility of the airline at the airport, and their crews, comply at all times with preventive measures (hand hygiene, use of mask, limited direct contact, etc.).
- iii) Provide the necessary personal protective equipment to their workers, as well as adequate training on its use.
- iv) Provide procedures for disposing of sanitary waste material on board (gloves, masks, etc.), as well as for its subsequent processing in accordance with the applicable international guidance.
- v) Establish protocols to minimise contact between crews and passengers, taking into account measures such as the exclusive use of toilets when possible, adequate cleaning and disinfection, etc.
- vi) Report on the mandatory use of surgical or higher protection masks on board aircraft. Masks with exhalation valves are not allowed.
- vii) Stock a sufficient number of medical face masks or other that provides superior protection on board and make them available for purchase by passengers who do not have a replacement, especially on long-distance flights.

- viii) Establish protocols to sanitise and treat those crew members who have been in contact with symptomatic passengers.
- ix) Carry out the appropriate actions to clean and disinfect the aircraft if symptomatic passengers are identified on board, in accordance with EASA/ECDC guidelines.
- x) Reduce the on-board service to the extent possible, depending on the duration of the flight, so as to limit contact between passengers and crew.
- xi) Establish adequate protocols for on-board ventilation, in accordance with EASA recommendations, by optimising cabin ventilation.
- xii) Coordinate the protocols with the airport operator to avoid having passengers on board without adequate ventilation for more than 30 minutes.
- xiii) Have on board one or more Universal Precaution Kits (UPKs). Such kits shall be used by crew members who are assisting possible COVID-19 case and in cleaning up and correctly discarding any potentially infectious contents
- xiv) Collaborate with the Ministry of Health in implementing the measures provided for in this resolution.

***b) In relation to processing passengers:***

- i) In coordination with the airport operator and, where appropriate, with the handling agent, adopt appropriate measures to maintain a 1.5-m distance and avoid queues in areas of high passenger traffic during the processes they oversee in the terminal (e.g. boarding, disembarking, etc.), and implement the necessary mitigation measures. These measures will take into account the different boarding methods (on foot, jet bridge, etc.).
- ii) Adopt the necessary procedures to avoid crowding on board, in the aisles of aircraft and areas near the lavatories, in all of the processes for which aircraft operators are responsible.
- iii) Prevent passengers who are not wearing a medical facemask or other that provides superior protection from accessing the aircraft.
- iv) Limit, to the extent possible, the mobility of passengers in the cabin, thus minimising potential contact with others.
- v) To the extent possible, and depending on the occupancy rate of the flight, seek the greatest possible physical distance between passengers on board the aircraft, and in any case, allow members of the same family, individuals as part of the same household, or companions of persons with reduced mobility to occupy adjoining seats.

***c) In relation to the information given to passengers and to the personnel providing service on board:***

- i) Provide information, through their communication channels and prior to the arrival of passengers in the terminal buildings, on the restrictions for accessing the terminal buildings, as well as other useful trip planning information, such as the need for longer boarding times, for example.
- ii) Take the appropriate measures to ensure that their personnel avoid going to an airport facility if they are showing any symptoms potentially compatible with COVID-19.

- iii) Inform passengers not to go to the airport if they are showing any symptoms that are potentially compatible with COVID-19.
- iv) Regularly inform passengers of the preventive measures on board the aircraft involving the proper use of masks (type, donning, disposal, frequency and availability, etc.), as well as the need to use them during the flight, save for exceptional cases, as well as the hygienic measures and the need for constant compliance with good health practices.
- v) Provide information to departing passengers, before a boarding pass is issued, on the medical reasons that should keep a passenger from going to the airport, as well as on the consequences associated with identifying symptoms compatible with COVID-19 during the health screening.
- vi) Obtain, before the flight and preferably prior to the arrival at the airport, a statement from each passenger as per the COVID-19 declaration form provided for this purpose (form included as an annex 2 to this document).
- vii) Inform passengers about the consequences of making a false statement and the fact that they may be turned away if symptoms are detected during their trip.
- viii) Inform passengers on international flights inbound to Spanish airports of the obligation to access the application *SPAIN TRAVEL HEALTH-SPTH* developed by health authorities (or via the website [www.spth.gob.es](http://www.spth.gob.es)) to collect the passenger's health and contact information, as well as of the consequences of failing to comply.
- ix) Check prior to boarding that passengers travelling to Spain have the QR code generated through the website <https://www.spth.gob.es/>, or the Spain Travel Health-SpTH application. Passengers who, exceptionally, have not completed the Health Control Form electronically may present it in the paper format before boarding, and must always be accompanied by the document proving that the diagnostic test for active infection (PDIA, for its Spanish acronym) has been carried out if they come from a country or area classified as at risk. In this case, the action taken by the companies is limited to verifying that the passenger presents the aforementioned documents and under no circumstances will the information contained therein be accessed.
- x) Travel agencies, tour operators, carriers and any other agent selling tickets individually or as part of a package holiday must notify passengers, at the start of the process of selling tickets to Spain, as well as at the time of issuing the boarding card, of the obligation to present the Health Control Form at the airport or port of destination. Likewise, if the country or area of origin of the trip is classified as a risk area, they must inform of the obligation to have a PDIA for SARS-CoV-2 with a negative result, carried out in the seventy-two hours prior to arrival.
- xi) Include in their safety demonstrations the conditions for using the masks in emergency situations.
- xii) Disinfect thoroughly oxygen-dispensing equipment in case these have been used during the flight.

#### ***d) In relation to coordination and procedures:***

- i) Take into account the provisions of the latest version of EASA's operating recommendations in relation to COVID-19.
- ii) Coordinate protocols with public authorities for dealing with those passengers who do not adhere to preventive measures during the flight.

- iii) Provide incentives to prevent symptomatic passengers from going to the terminal building.
- iv) Implement procedures to immediately remove crews from flight duty when they show symptoms compatible with COVID-19.
- v) As part of their health monitoring programmes, promote the distribution of information related to COVID-19, and report any potential cases detected among their employees.
- vi) In coordination with the Airport operator, help passengers to use the self-check-in procedures, whenever possible, and encourage the checking of bags to keep them from being transported in the cabin. Take steps to ensure that there are no lithium batteries inside checked bags.
- vii) Instruct crews on the emergency procedures compatible with the use of masks.
- viii) Establish procedures and preventive measures for dealing with situations on board involving of unruly or disruptive passengers .
- ix) Establish procedures for dealing with symptomatic passengers on board, as well as the protocols for dealing with those passengers seated in the vicinity of potentially symptomatic passengers.
- x) Establish procedures for protecting and, where appropriate, isolating and quarantining crews that have been in contact during the flight with individuals potentially infected with COVID-19.
- xi) Establish procedures to inform the airport and local health authorities in the event that a case is detected on board before take-off.
- xii) Gather contact information for all the passengers and store the lists for a minimum of four weeks after the flight. Likewise, provide these lists to public health authorities when required for contact tracing.
- xiii) Duly cooperate with health authorities to implement the established health screenings. They may not store, access or process health data or any other related data obtained in the exercise of said collaboration.

## ANNEX 1: GUIDANCE MATERIAL

The purpose of this guide is to encourage Airport operators and Aeroplane operators to implement the operational guidelines. When a protocol is established, this implies that it will be applied and that it is useful for the intended purpose: if it is not useful, it must be modified.

Therefore, a declaration form will be implemented for Airport operator and aeroplane operators to declare the status of their compliance with the measures specified in this document.

To carry out these measures, the Airport operator, Aeroplane operators and, where appropriate, other service providers shall consider the recommended measures included in the latest EASA revision and implement them to the extent possible. They will also allow their staff members to take training programmes and use the EASA guidelines or any other relevant guidelines.

The diversity of the airport network, the type of airport and its traffic volume will be taken into account when implementing certain measures.

Aeroplane operators, the Airport operator, other service providers and stakeholders must coordinate their actions through the Spanish Air Transport Facilitation Committee so as to reduce risks and ensure proper compliance with regulations.

These measures could give rise to disruptive situations if they are not handled properly. To address this, operators are urged to consider the increased likelihood of said situations within their procedures and training.

### GENERAL PRINCIPLES

- Limit access to airport terminals to passengers, crew members, and airport staff. Companions may be allowed access in special circumstances (PRM, unaccompanied minors.)
- Implement measures to provide information on risks and promote health in order to discourage symptomatic passengers from travelling.
- Implement physical distancing (1.5 metres between individuals) whenever possible.
- Avoid queuing in high passenger concentration areas (marks on the floor spaced 1.5 metres apart can help passengers maintain physical distance).
- The use of masks depending on the level of risk and the availability of masks, taking into account the possible risks and disadvantages.
- Hygiene measures for staff and passengers.
- Cleaning and disinfection of the terminal infrastructure and all equipment on a regular basis, with the frequency increased as necessary depending on traffic.
- Encourage the use of alternative electronic processes (for example, mobile check-in).
- Make water available when it is not possible to obtain it due to airport facilities and services being closed (e.g. through water fountains and/or vending machines).

- Availability of materials to promote health safety at airport facilities and in the passenger cabin. Particular attention should be paid to areas of high passenger traffic and to the format of the materials (in every national language and in English.)
- Cleaning and disinfection of all areas with the potential for human contact and transmission, as specified by public health authorities.
- The HVAC system should be running in the most favourable mode.

(These principles should be in place, to the extent possible, in general aviation terminals.)

## 1) MANAGING OF PASSENGERS

For reasons of clarity, and in accordance with the summary of the EASA guide, this guide on managing passengers is presented in the following sequence: at all times, before arriving at the departure airport, at the airport, on board the aircraft and at arrival airport.

The measures proposed will be periodically evaluated and updated as our knowledge of the transmission risk evolves and as other diagnostic and preventive measures are developed.

### AT ALL TIMES

#### *Objectives:*

To ensure that passengers arriving at the airport are aware of and comply with the preventive measures implemented to guarantee a safe environment.

To this end, passengers will be informed that a physical distance between individuals of 1.5 metres shall be maintained at the airport whenever possible.

In addition, individuals shall be informed of the requirement for all passengers and persons inside the airport and the aircraft to use medical face masks or other that provides superior protection, from the time they enter the terminal building until they leave the terminal at the destination airport.

The use of masks will not be required for people who have any type of illness or respiratory distress that may be aggravated by the use of the mask or who, due to their disability or dependency, do not have the autonomy to remove the mask, or who exhibit behavioural changes that make their use unfeasible.

Inform passengers that, unless otherwise specified by the mask manufacturer, surgical masks should generally be replaced after four hours of use, or when they become wet or soiled, and that they must have a sufficient supply of masks for the entire duration of their trip.

Availability of waste bins at airport facilities and single-use trash bags on board and upon landing to dispose of used face masks.

In their health safety promotional material, the Airport operator and Aeroplane operators will provide information on the proper use and removal of masks and the correct way to dispose of them.

The Airport operator will consider the possibility of implementing systems for purchasing medical face masks or other that provides superior protection (for example, through vending machines).

The use of masks is a complementary measure and not a replacement for established prevention measures, such as physical distancing, respiratory etiquette, hand washing and avoiding touching one's face, nose, eyes and mouth, but it is an alternative measure if physical distancing cannot be observed.

In addition, passengers will observe the following measures, unless airport personnel or aircrew members indicate otherwise:

- Hand hygiene: wash with soap and water or, when not available, use an alcohol-based hand sanitiser solution.
- Respiratory etiquette: covering the mouth and nose with a paper towel cover or a flexed elbow when sneezing or coughing, even when wearing a mask.
- Limiting the direct contact (touch) of airport and aircraft surfaces to only when necessary.

The necessary protective equipment (PPE) will be provided and the necessary training for using said PPE will be given to the staff of the Airport operator, Aeroplane operators and service providers.

In addition, personnel who interface directly with passengers will be issued a mask, gloves and uniforms. The uniforms should be changed daily; if this is not possible, a protective suit will be used as an alternative.

Security guards should wear face shields or suitable alternatives in addition to masks to mitigate the risk of inhaling micro-drops due to contact with passengers during body searches. Furthermore, they should change their gloves after each passenger.

Staff members who interact with passengers from behind a protective screen are not required to wear personal protective equipment at all times.

Also, if the screens need to have openings to exchange documents, passengers should stay away from the counter unless they are providing documents or luggage. This can be facilitated by using markings on the ground that can be extended as far as needed to maintain physical distancing.

Even with the use of PPE, hand hygiene must be reinforced at all times. When gloves are worn, they should be changed regularly. Not all types of gloves can be disinfected with an alcohol-based solution. Some can deteriorate significantly and contribute to contamination. Therefore, the disinfection of gloves is not recommended. When personnel wear gloves, operators will issue reminders that wearing gloves does not protect against the spread of the virus and will alert to the possible false sense of security that can be created if parallel measures are not rigorously observed.

Passengers will be regularly notified by visual and audio messages of the preventive measures taken. They must also be informed of the consequences of not complying with said measures.

Passengers who do not comply with the measures specified will be denied to access to the airport terminal building, to the aircraft cabin, or will be disembarked if the events occur before the aircraft doors are closed. They may also be sanctioned if they fail to comply with the measures adopted by the State.

If the event takes place in flight, the procedure for disruptive passengers will be applied, and they may also be sanctioned under aviation safety and general public health laws.



Maintenance and repair work in public areas should be prioritised as much as possible, and their schedule adjusted or possibly postponed if it is non-essential.

## BEFORE ARRIVING AT THE AIRPORT

### *Objectives:*

To reduce the chances that any passenger exhibiting symptoms compatible with COVID-19 goes to the airport, and to ensure that passengers arriving at the airport are aware of the preventive measures in place.

Before they arrive at the departure airport, prospective passengers will be informed of the travel restrictions for any passenger who may have symptoms compatible with COVID-19.

Information will be provided on the relevant symptoms. The promotional material will incentivise symptomatic passengers not to go to the airport for the flight.

Passengers will be informed that anyone who is found to be symptomatic at the airport may not be allowed to continue their journey.

Aeroplane operators should offer incentives, such as free rebooking or refund, if a medical certificate is presented confirming the presence of COVID-19 symptoms.

Passengers will be informed of the requirement to use a medical mask or other that provides superior protection at the airport and on board the aircraft, unless otherwise specified, as well as of the planned duration of the preventive measures in force, so they can plan to arrive at the airport at the appropriate time. However, every effort will be made to minimise the time they spend at the airport.

Passengers will be informed before arriving at the airport that access to the terminal is limited to passengers who are going to fly, so as to reduce the number of people in the terminal and, consequently, facilitate physical distancing.

In addition, the Airport operator will clearly indicate the point beyond which access to individuals accompanying passengers is prohibited.

Likewise, the formation of crowds and queues should be avoided, as this would increase transmission risks and create a potential safety threat.

If any crew member is unsure of whether they have symptoms or any health-related problems, the airline must immediately remove said crew member from flight duties.

Passengers should be encouraged to check all their luggage, except for small, carry-on bags that fit under the seat.

## CONSIDERATIONS FOR MANAGING PASSENGERS AT THE AIRPORT

### *Objectives:*

To reduce the risk of virus transmission from asymptomatic and potentially contagious passengers.

Passengers with a valid ticket or boarding pass, within the 6 hours prior to the scheduled departure, and companions of minors, persons with reduced mobility or any passengers who require a companion for a duly justified reason, will be allowed to access the terminal buildings of airports located on Spanish territory.

Duly accredited employees of the airport or companies that provide services in the facility, as well as the crews and pilots of airlines and other aircraft operators, will also be allowed to enter the airport facilities, as will law enforcement personnel and other duly authorised individuals, such as AESA inspectors in the exercise of their inspection functions.

### CLEANING AND DISINFECTION

Both the extent and frequency of cleaning activities will be increased.

The procedure for ensuring that cleaning and disinfection activities are carried out will be as follows:

- Regular cleaning and disinfection of surfaces should be done using standard detergents, with special emphasis on surfaces that are frequently touched (such as door handles, railings, buttons, wash rooms, buses, etc.).
- Increase the cleaning of trays and place hand sanitiser at the entrance and exit to security checkpoints to promote hand hygiene. Alternatively, single use tray covers can be used.
- Guarantee adequate air ventilation by minimising the percentage of air that is recirculated and allowing for the use of fresh air whenever possible.
- Cleaning and maintenance should also include toilets, all frequently touched surfaces and the HVAC system, and include the use of air filters and increasing the filter replacement frequency.
- Aeroplane operators must clean and disinfect their aircraft in accordance with EASA's aircraft cleaning and disinfection guide.

### PROTECTIVE SCREENS

Whenever airport personnel interact with passengers from a fixed location, protective screens must be installed in such a way as to allow for the exchange of required documents, while providing protection to the staff member from the passenger's respiratory drops, and vice versa.

Technologies or processes that help disinfect the screens will be implemented to the extent possible.

## CHECK-IN AND BOARDING

Measures should be taken to help and incentivise passengers to use the self-check-in process, provided that the air operator provides this option as part of its check-in procedures, and to minimise the amount of carry-on luggage in the cabin.

Accordingly, passengers should be encouraged to complete check-in before arriving at the airport. Online check-in, mobile boarding passes, off-airport baggage tagging and other initiatives will help to reduce the amount of contact with airport staff and facilities.

At traditional check-in counters, the use of signs in the waiting area should be considered to encourage social distancing, and thought should be given to installing protective screens in front of personnel at the counters.

Whenever possible, the airport should use non-contact processes and technology, including non-contact biometrics, such as facial or iris recognition. These digital identification processes should be implemented in baggage check-in, border control, boarding gates, etc., and contactless technology in retail and duty-free points of sale, etc.

This will eliminate or greatly reduce the need for staff and passengers to handle travel documents. It can also speed up various processes, resulting in better health protection, reduced queuing, and other process efficiencies.

Steps should be taken to encourage passengers to check their luggage.

Aeroplane operators and the Airport operator must cooperate to ensure that physical distance is observed, especially during check-in, security checks, pre-boarding and boarding.

When the recommended physical distance of 1.5 metres is not possible due to infrastructure limitations, Aeroplane operators and the Airport operator must implement additional risk mitigation measures.

Opposite flows must be separated. This could be accomplished by using marks on the floor, instruction signs, ropes, etc.

Access to airport toilets must observe the principles of physical distancing.

Before boarding, passengers should be reminded that they need to have enough medical face masks or others that provide superior protection for the entire duration of their journey. However, Aeroplane operators and the Airport operator should also consider allowing passengers to purchase medical face masks or other that provides superior protection in the event that they are unable to provide their own.

The use of masks will not be required for people who have any type of illness or respiratory distress that may be aggravated by the use of the mask or who, due to their disability or dependency, do not have the autonomy to remove the mask, or who exhibit behavioural changes that make their use unfeasible.

The air operator must encourage the use of check-in counters in self-service mode (self bag drop) to minimise contact between people.

## MANAGING PASSENGERS ON BOARD THE AIRCRAFT

### *Objectives:*

To reduce the residual transmission risk of COVID-19 on an aircraft, in the event that an asymptomatic passenger is on board.

Guidance material should be provided to passengers on the safety measures on board, including:

- Hand hygiene, particularly before eating or drinking and after using the bathroom.
- Proper use of masks
- Respiratory etiquette
- Limiting contact with cabin surfaces.
- Reduced in-flight service
- Reducing the use of individual air supply nozzles as much as possible, unless the aircraft manufacturer recommends otherwise.

Safety demonstrations on board the aircraft must instruct passengers, in the event of an emergency, to remove their face masks before donning the aircraft's oxygen masks.

Similarly, crew members should be instructed to remove their own protective masks in an emergency so as to make it easier to issue instructions to passengers.

Measures should be taken to keep passengers from queuing in the aisle or to use the bathrooms. In addition, a bathroom, preferably the one closest to the flight deck, will be reserved for the exclusive use of the crew.

Aeroplane operators that recirculate cabin air should install and use HEPA filters, in accordance with the manufacturer's specifications, or avoid using recirculated cabin air entirely, as long as this practice is confirmed not to compromise any critical safety features.

Aeroplane operators should consider revising their procedures on using recirculating fans in air conditioning systems based on the information provided by the aircraft manufacturer or, if not available, they should seek advice from the manufacturer to achieve the objectives stated above.

On the ground, the external air conditioning supplied by the air bridge will be used, unless the level required for the aircraft is not reached.

If the aircraft has an option for high flow operation, the original equipment manufacturer (OEM) should be contacted for setting recommendations. If the aircraft in-flight operating procedure calls for packs to be off for take-off, the packs should be switched back on as soon as thrust performance allows

In order to enhance the cabin air quality, it is recommended to use all packs and the Auxiliary Power Unit (APU) Bleed or Ground Air Conditioning Unit, depending on aircraft configuration and only in accordance with applicable procedures such as APU restrictions.

Proper consideration should be given to the fact that external Pre-Conditioned Air (PCA) is treated the same way in the aircraft as aircraft APU air. External air sources are identically processed through a HEPA filter if the aircraft is equipped with such a system.

Aeroplane operators and the Airport operator must collaborate to ensure that passengers are not on board the aircraft without adequate ventilation for more than 30 minutes.

Furthermore, Aeroplane operators must ensure, to the extent possible, physical distancing between passengers. To this end, they should modify as far as possible the process of seat allocation, ensuring the maximum distance between passengers, with the exception of family members and persons travelling together as part of the same household who may sit side by side.

If physical distancing cannot be ensured due to the occupancy rate, seat configuration, or other operating restrictions, passengers and crew members on board an aircraft must comply at all times with all other preventive measures, including strict hand hygiene and respiratory etiquette, and must wear a medical face masks or others that provide superior protection.

The in-flight service should be reduced to the minimum necessary to ensure standards of comfort and well-being for passengers and limit contact between crew members and passengers, in due consideration of the flight duration. These measures should include the following:

- No sale of duty-free products or other non-essential products on board.
- Reduced food and drink service.
- Preference for pre-packaged and sealed foods and beverages, such as canned drinks.
- Whenever possible, payment procedures involving contact, such as cash payments, should be avoided.
- Passengers should be reminded to remain seated with their seat belt fastened.

A sufficient number of medical face masks or others that provide superior protection must be carried on board and be made available to passengers, especially in long-haul flights where the need to change masks may arise. A safe process for discarding masks must be implemented.

Aircraft operators should regularly inform their passengers that they should wear face masks during the entire flight and until they exit the destination airport, and that they should not remove their face masks if unnecessary. The face mask should be close to the face, covering the nose and mouth completely. When the face mask is on or being removed by touching only the holding straps or rubbers to avoid hand contamination. Furthermore, aircraft operators should inform passengers that face masks should be properly disposed (not be thrown on the cabin floor or placed in the seat covers).

In light of the pressures imposed by the pandemic, particular attention should be paid to prevention and to dealing with disruptive and unruly passengers. This should consider multi-layered actions that start with passenger information and preparation on the measures implemented, and that heed the procedures and crew actions necessary to mitigate this risk.

## MANAGING PASSENGERS ON BOARD WITH SYMPTOMS COMPATIBLE WITH COVID-19

### **Objectives:**

To reduce the risk of transmission by a symptomatic passenger on board during the flight.

If a passenger exhibits symptoms compatible with COVID-19, such as fever, persistent cough, vomiting, diarrhoea, shortness of breath, or other flu-like symptoms after take-off, the following measures are to be considered:

- The crew must ensure that the passenger is correctly wearing a mask and has additional masks available to replace it in case it gets wet after coughing or sneezing. If the individual cannot wear a mask, they must cover their mouth and nose with disposable tissues when coughing or sneezing. If the passenger has difficulty breathing, medical assistance should be sought out and supplemental oxygen offered.
- The passenger must be isolated on board. Depending on the configuration of the aircraft, the occupancy rate and the distribution of passengers, the following considerations apply to the location of the symptomatic passenger, to the extent possible:
  - An isolation area should be laid out, leaving, if possible, two (2) rows of cleared seats in either direction around the symptomatic passenger. If contact tracing discovers more case(s) around the index case, then contact tracing of all the aircraft's passengers should be considered.
  - Taking all factors into account, whenever possible, the symptomatic passenger should be seated in the last row window seat, preferably on the side of the aircraft where the outlet valve is located.
  - When possible, the bathroom closest to the symptomatic passenger should be specifically designated for him/her and must not be used by the other passengers or crew.
  - Depending on the cabin crew complement, the purser will designate specific crew members to provide the necessary in-flight service to the isolated areas. This cabin crew member will be chosen from those who had previous contact with the symptomatic passenger. The designated crew member must wear the PPE in the aircraft's Universal Precaution Kit. The designated crew member must minimise close contact with other crew members and avoid other unnecessary contact with other passengers.
- Whenever possible, the individual nozzle supplying air to the symptomatic passenger should be closed to limit the potential spread of droplets.
- If the symptomatic passenger is travelling accompanied, the passenger's companions must also be confined to the isolation area, even if they do not exhibit any symptoms.
- The crew must inform the destination airport through air traffic control, follow their instructions and fill in the Health Part of the Aircraft General Declaration, specifying the health situation on board, and send it to authorities at the destination airport if required.

- Once the aircraft has landed and the other passengers have disembarked, the isolated passenger and, where applicable, crew members, must be transferred in accordance with the instructions provided.
- Passengers seated within two rows in any direction of the symptomatic passenger can be considered close contacts and will have to be interviewed, if the suspected case is confirmed. If contact tracing discovers more cases, then contact tracing of all the aircraft's passengers should be considered.
- The crew member designated to provide on-board services to the symptomatic passenger, and other crew members who may have been in direct contact with the symptomatic passenger, must be transported to facilities where they can be cleaned and disinfected before coming into physical contact with other people. Alternatively, as a last resort, after carefully discarding the used PPE, washing and disinfecting their hands, the respective cabin crew members may be isolated on board, in a quarantine area, before returning to their base or a stopover destination.
- Aeroplane operators should strive to receive information on the test results of the suspected case as soon as possible. The crew members who provided in-flight services to the passenger with COVID-19-compatible symptoms should be considered a close contact and asked to self-isolate after returning to their home base. The respective crew members may be considered safe for the remainder of their duty period but no longer than 48 hours after the first contact with the symptomatic passenger and after thorough personal hygiene and a change of uniform or the single use protective suit, if such a suit was used.
- If the suspected case is confirmed positive, the affected crew members should be quarantined for 14 days from the last contact with the confirmed positive passenger. If the passenger's test is negative, they may resume flying duties. Every reasonable step should be taken to identify which crew members had close contact with the affected passenger.
- After removing the suspected case of COVID-19, aircraft cleaning and disinfection should be performed in accordance with the EASA's Interim Guidance on Aircraft Cleaning and Disinfection. Any used PPE, such as aprons, face masks, face shields and any other disposable products such as partially consumed meals or beverages, used paper towels, tissues, etc., should be placed in a separate, tightly closed waste bag, which cannot then be disposed of as normal waste, in accordance with the applicable international guidance.

If a symptomatic passenger is identified on board before take-off, the airport must be informed and the instructions provided by the authority must be followed. At this point, if there has been no specific direct contact between the symptomatic passenger and the crew members, no further action is necessary with respect to the crew members, unless otherwise indicated.

## MANAGING ARRIVING AND TRANSITING PASSENGERS

### ***Objectives:***

To reduce any residual risk that an infected person who had been on a flight or at the airport might infect other passengers at the arrival airport and/or in the destination region.

## DISEMBARKING

Passengers are to be reminded to adhere to the safety measures provided.

Aeroplane operators will ensure, in collaboration with the Airport operator, that physical distancing is practiced as much as possible during the disembarkation process. Any used medical face masks or others that provide superior protection will be deposited in the bins that are located throughout the airport facilities. These bins should be easily accessible (for example, by installing "no-touch bins") to deposit the masks, and not allow the waste material to be retrieved.

Depending on the terminal facilities and the layout of the apron, deplaning can be done via buses from the parked aircraft, by walking from the aircraft parked on the apron to the gate while observing distancing requirements, and finally by using the stairs or jet bridges directly to the terminal.

When buses are used in the deplaning process, a larger number of buses should be used so that passengers can observe physical distancing guidelines when inside. The deplaning is to be carried out by rows, beginning with those closest to the exits in use, with aisle-seat passengers disembarking first, then those located in the middle seats and lastly those in the window seats. An alternative procedure may be used that ensures physical distancing as much as possible and avoids queues. When defining the boarding and disembarking processes, the possible adverse effect on the aircraft balance should be considered in order to avoid aircraft safety risks (e.g. tail tipping). Likewise, prevention specialists employed by handling agents may specify appropriate procedures in accordance with the applicable regulations.

Passengers on flights originating at any airport located outside Spanish territory must, upon arriving in Spain, hand in a properly completed Public Health Form, in accordance with the format that is specified by the Ministry of Health. When the Ministry of Health allows this form to be completed by electronic means, the passenger may replace the delivery of this form with the verification method provided by said means.

All the facilities used in the deplaning process must be subject to cleaning and ventilation.

All passengers departing from any airport or harbour outside Spain must fill in a public health form called "Public Health Control Form" before departure, through the website <https://www.spth.gob.es/> , or the Spain Travel Health-SpTH application. The model is attached as Annex III to this resolution.

Please note that all passengers arriving in Spain by air will be subject to a prior health check. These controls may include taking temperature, a documentary check and a visual check on the passenger's condition will be carried out at the first Spanish port or airport where the passenger arrives.

What is indicated in the previous paragraph will not apply to those international passengers in transit at a Spanish port or airport with a final destination in another country.

Passengers coming from a country or risk area defined by the Ministry of Health (these will be reviewed every fifteen days and their update will be published on the Ministry of Health website: <https://www.mscbs.gob.es/> and on the website: <https://www.spth.gob.es/> ) who do not adequately accredit the performance of an active infection diagnostic test (hereinafter PDIA for its Spanish acronym) for SARS-CoV-2 with a negative result within seventy-two hours prior to arrival, must undergo the performance of the PDIA established by the foreign health services.

As part of the documentary control carried out at the entry points, the passenger may be asked at any time to prove the result of the PDIA. It is established that the document accrediting the active infection diagnostic test referred to in section four of the Resolution of 11 November 2020, of the Directorate General



of Public Health, must be written in Spanish, English, French or German. In the event that it is not possible to obtain it in these languages, the supporting document must be accompanied by a Spanish translation, carried out by an official body, and may be presented in paper or electronic format. The document will contain at least the following data: name of the traveller, number of passport or national identity card or letter (which must coincide with that used in the Health Control Form), date of the test, identification and contact details of the centre carrying out the analysis, technique used and negative result of the test.

The accepted PDIAs for SARS-CoV-2 are PCR (COVID-19 RT-PCR), TMA (Transcription Mediated Amplification) and other tests based on equivalent molecular techniques, such as RT-LAMP (Reverse Transcriptase Loop-Mediated Isothermal Amplification). Until their harmonised use is accepted in the European Union, other diagnostic tests such as rapid antibody tests, rapid antigen detection tests or high throughput serology (ELISA, CLIA, ECLIA) will not be accepted.

Alternatively, passengers may be required to undergo a COVID-19 RT-PCR, TMA (MTA) or another test based on equivalent molecular techniques, such as RT-LAMP within 48 hours of arrival, the result of which must be communicated to the Foreign Health Service by the means indicated for this purpose.

Persons under six years of age will not be required to provide proof of a negative result from any of the above-mentioned SARS-CoV-2 PDIA.

The Foreign Health Services will be assisted in carrying out the PDIA for those passengers who, after carrying out the planned controls, are found to be suspected of suffering from COVID-19.

## **TRANSFER PASSENGERS**

Where transfer security screening is required, it should follow appropriate sanitary requirements as described for the departure process.

## **PASSENGER CONTACT INFORMATION**

Air transport operators with a pre-assigned seat number must store, and make available to public health authorities, the contact information of passengers for a minimum of four weeks for contact-tracing purposes.

## **BODY TEMPERATURE CHECKS AT THE ARRIVAL AIRPORT**

Mechanisms for taking body temperature, preferably using thermal imaging cameras, may be implemented for passengers arriving in Spain. Passengers with a fever will undergo a medical assessment in accordance with established preventive procedures.

## **BAGGAGE CLAIM AND LEAVING THE ARRIVAL AIRPORT**

Passengers arriving in Spain by air will have to undergo a temperature check, which will be carried out routinely in order to identify travellers with a fever. A temperature of 37.5°C or higher is established as the detection limit.

The temperature must be taken using non-contact thermometers or thermographic cameras. No personal data or images captured by the thermographic cameras will be stored, and the passenger's privacy must be guaranteed at all times.

Passengers with a temperature of over 37.5 °C and those who are found to have a suspicion of suffering from COVID-19 or another transmissible pathology after the visual check or after analysing the information contained in the Public Health Check Form, in the event that the latter indicates the presence of symptoms or close contact with COVID-19, must undergo a health assessment, which will include an evaluation of their clinical and epidemiological condition.

If the health assessment confirms the suspicion that the passenger suffers from a pathology that could pose a risk to public health, if there is close contact with COVID-19 or if a positive result is obtained after a PDIA for SARS-CoV-2, the health alert protocols established in coordination with the health authorities of the Autonomous Communities will be activated. To this end, the health authority may request the collaboration of other administrative bodies, civil servants or other institutions.

## 2) MANAGING OF AVIATION PERSONNEL

### **Objectives:**

To reduce the residual risk of infection of aviation personnel from passengers or vice versa and avoid duplication of procedures.

Crew members, airport staff members and the staff of service providers are exempt from the airport's COVID-19 screening procedures, provided that the airline or Airport operator, as appropriate, has implemented an equivalent procedure to monitor the health status of its personnel.

Furthermore, the Airport operator, to the extent possible, must set up separate flows for crews in order to ensure that physical distancing with passengers is guaranteed at all times.

Equipment of common use used by aviation personnel such as computers, tablets, radio stations, headsets, etc. should be disinfected before being used by another staff member.

For staff working shifts, handovers should be conducted in a contact-free manner, i.e. via telephone, videoconference, electronic logs, or as a minimum through physical distancing.

Staff training should maximise the use of online training and virtual classrooms.

Crew members travelling as passengers in the course of their work are exempt from arrival health checks and therefore from the submission of PDIA and Health Control Form. To do so, they must present a document certifying that they are within the scope of their work activity issued by their company and accompany it with their flight licence.

However, those crew members who travel as passengers in another area other than work, the rules of this document would apply to them, including arrival health controls.

## ANNEX 2: COVID-19 DECLARATION FORM

MESSAGE TO BE SHOWN AT THE BEGINNING OF THE BOARDING CARD PROCESS

Please read the content of the following instruction carefully before continuing.

**YOU MUST NOT GO TO THE AIRPORT IF ANY OF THE FOLLOWING CRITERIA APPLY TO YOU:**

- You have been diagnosed with COVID-19 in the 14 days prior to your flight.
- You have any symptoms consistent with COVID-19: fever, cough and/or shortness of breath
- You have been in close contact (less than 2 metres for more than 15 minutes without adequate protection) with a person diagnosed with COVID-19 in the 14 days prior to your flight.
- You are required by local or national authorities to be in quarantine for reasons related to COVID-19.

- ☐ I declare that the above conditions **do not apply to me** and that **I will not go to the Airport if my clinical situation changes before my travel** in relation to said conditions. Otherwise, I understand that **my trip may be interrupted** at any point.

## ANNEX 3: PUBLIC HEALTH FORM FOR LOCATING PASSENGERS

SPANISH FCS

Formulario INDIVIDUAL obligatorio para TODOS los pasajeros que entren en España. Escribir en MAYÚSCULAS. Dejar casillas en blanco para los espacios entre palabras

### INFORMACIÓN DEL VUELO DE LLEGADA A ESPAÑA:

1. Línea aérea

2. Núm. de vuelo

3. Núm. de asiento

4. Fecha de llegada (aaaa/mm/dd)

### INFORMACIÓN PERSONAL:

5. Apellido

6. Nombre de pila

7. Sexo

☐ Masculino ☐ Femenino

8. Número Pasaporte/DNI/NIE

NÚMERO(S) DE TELÉFONO donde se le puede encontrar, de ser necesario. Incluir el código del país y de la ciudad.

9. Móvil

10. Otro

11. Correo electrónico

### DIRECCIÓN PERMANENTE:

12. Número y calle (Separar con una casilla vacía, los números y el nombre de la calle)

13. Núm. de apto/piso

14. Ciudad

15. Estado/Provincia

16. País

17. Código postal

DIRECCIÓN ESTANCIA EN ESPAÑA: por favor, escriba sólo el lugar que visitará primero.

18. Nombre del hotel (si es el caso)

19. Número y nombre de la calle (separar con una casilla vacía, los números y el nombre de la calle)

20. Núm. de apto/piso

21. Ciudad

22. Código Postal

23. Provincia

24. Comunidad Autónoma

### CUESTIONARIO SANITARIO OBLIGATORIO PARA ENTRAR EN ESPAÑA

EN RELACIÓN CON LA EMERGENCIA SANITARIA DECLARADA POR EL COVID-19, es obligatorio que responda a las siguientes preguntas. Si es necesario se realizará una evaluación médica a su llegada.

25. ¿Ha tenido contacto con un caso confirmado de enfermedad por nuevo coronavirus (COVID-19) en los últimos 14 días?

SI ☐ NO ☐

26. ¿Usted presenta fiebre, tos o dificultad respiratoria?. Por favor, marque con una "X" el o los síntomas que presenta.

SI ☐ NO ☐ Fiebre ☐ Dificultad respiratoria ☐ Tos ☐

V12



INDIVIDUAL form mandatory for ALL passengers arriving in Spain. Print in capital (UPPERCASE) letters. Leave a blank space between words

FLIGHT TO SPAIN INFORMATION:

1. Airline name	2. Flight number	3. Seat number
<input type="text"/>	<input type="text"/>	<input type="text"/>
4. Date of arrival (yyyy/mm/dd)		
<input type="text"/>		

PERSONAL INFORMATION:

5. Last (Family) Name	6. First (Given) Name	7. Your sex
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Male <input type="checkbox"/> Female
8. Passport Number/ID Number		
<input type="text"/>		

PHONE NUMBER(S) where you can be reached if needed. Include country code and city code.

9. Mobile	10. Other
<input type="text"/>	<input type="text"/>

11. Email address
<input type="text"/>

PERMANENT ADDRESS:

12. Number and street (Leave a blank space between street number and name)	13. Apartment number
<input type="text"/>	<input type="text"/>
14. City	15. State/Province
<input type="text"/>	<input type="text"/>
16. Country	17. ZIP/Postal code
<input type="text"/>	<input type="text"/>

TEMPORARY ADDRESS IN SPAIN: please, write only the first place where you will be staying

18. Hotel name (if any)	19. Number and Street (leave a blank space between Street number and name)	20. Apartment number
<input type="text"/>	<input type="text"/>	<input type="text"/>
21. City	22. ZIP/Postal code	
<input type="text"/>	<input type="text"/>	
23. Province	24. Autonomous region	
<input type="text"/>	<input type="text"/>	

MANDATORY HEALTH QUESTIONNAIRE TO ENTER SPAIN

REGARDING THE HEALTH EMERGENCY DECLARED BY COVID-19, it is mandatory to answer the following questions. If necessary, a medical evaluation will be carried out upon arrival.

25. Have you been in contact with a person that has been a confirmed case for COVID-19 during the last 14 days?

YES ☐ NO ☐

26. Do you have any of the following symptoms: fever, cough or shortness of breath?. Please, mark with "X" the symptom or sign that you present

YES ☐ NO ☐ Fever ☐ Shortness of breath ☐ Cough ☐



1

Formulaire INDIVIDUEL obligatoire pour TOUS les passagers arrivant en Espagne. Veuillez écrire en caractères d'imprimerie (MAJUSCULES). Pour indiquer un espace, laissez la case vierge.

**RENSEIGNEMENTS SUR LE VOL :**

1. Compagnie aérienne	2. Numéro de vol	3. Numéro de siège
<input type="text"/>	<input type="text"/>	<input type="text"/>
4. Date d'arrivée (aaaa/mm/jj)		
<input type="text"/>		

**RENSEIGNEMENTS PERSONNELLES:**

5. Nom famille	6. Prénom	7. Sexe
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Masculin <input type="checkbox"/> Féminin
8. Numéro de Passeport/Carte d'identité		
<input type="text"/>		

NUMÉRO(S) DE TÉLÉPHONE où vous pouvez être rejoint au besoin. Indiquez le code de pays et le code de ville.

9. Portable	10. Autre
<input type="text"/>	<input type="text"/>
11. Adresse électronique	
<input type="text"/>	

**ADRESSE PERMANENTE:**

12. Numéro et rue (Laissez une case vierge entre le numéro et la rue.)	13. Numéro/lettre de la porte
<input type="text"/>	<input type="text"/>
14. Ville	15. Département
<input type="text"/>	<input type="text"/>
16. Pays	17. Code postal
<input type="text"/>	<input type="text"/>

ADRESSE TEMPORAIRE EN ESPAGNE: s'il vous plaît, indiquez uniquement la première étape de votre séjour.

18. Nom de l'hôtel (le cas échéant)	19. Numéro et rue (Laissez une case vierge entre le numéro et la rue.)	20. Numéro/lettre de la porte
<input type="text"/>	<input type="text"/>	<input type="text"/>
21. Ville	22. Code postal	
<input type="text"/>	<input type="text"/>	
23. Province	24. Région autonome	
<input type="text"/>	<input type="text"/>	

**QUESTIONNAIRE SANITAIRE OBLIGATOIRE POUR ENTRER EN ESPAGNE**

EN CE QUI CONCERNE L'URGENCE SANITAIRE DÉCLARÉE PAR LA COVID-19, il est obligatoire de répondre aux questions suivantes (si nécessaire une évaluation médicale sera réalisée à votre arrivée sur le territoire espagnol)

25. Avez-vous été en contact avec un cas confirmé de maladie coronavirus (COVID-19) au cours des 14 derniers jours?

OUI ☐ NON ☐

26. Présentez-vous des symptômes de fièvre, toux, difficulté respiratoire? En cas de réponse affirmative, S'il vous plaît, cocher avec un "X" le ou les symptômes que vous présentez.

OUI ☐ NON ☐ Fièvre ☐ Difficulté respiratoire ☐ Toux ☐

V5





1

OUI ☐ NON ☐

29. S'il vous plaît, indiquer le pays de départ du voyage

[illegible][illegible]

Tourisme   Travail   Famille   **Mission Spéciale**   Coopération   Un autre

Et pour que cela soit consigné à temps, je confirme la véracité des informations fournies.

Cocher pour accepter: ☐

2	0						
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V5

Jeder Passagier soll ein Formular ausfüllen. Füllen Sie das Formular in GROSSBUCHSTABEN aus. Lassen Sie für Leerstellen ein Kästchen frei

#### INFORMATIONEN ZUM ANKUNFTSFLUG NACH SPANIEN:

1. Fluggesellschaft	2. Flugnummer	3. Sitznummer
<input type="text"/>	<input type="text"/>	<input type="text"/>
4. Ankunftsdatum (JJ.JJ/MM/TT)		
<input type="text"/>		

#### PERSÖNLICHE ANGABEN:

5. Nachname	6. Vorname	7. Geschlecht
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> M <input type="checkbox"/> W
8. Ausweisnummer		
<input type="text"/>		

TELEFONNUMMER(N) unter der (denen) Sie falls nötig erreicht werden können, einschließlich Landesvorwahl und Städtevorwahl

9. Mobiltelefon	10. Andere
<input type="text"/>	<input type="text"/>

#### 11. E-Mail

#### WOHNANSCHRIFT:

12. Straße und Hausnummer (Bitte lassen Sie zwischen Straße und Hausnummer ein Kästchen frei)	13. Haustürnummer/Buchstabe
<input type="text"/>	<input type="text"/>
14. Stadt	15. Staat/Provinz
<input type="text"/>	<input type="text"/>
16. Land	17. Postleitzahl
<input type="text"/>	<input type="text"/>

VORÜBERGEHENDE ANSCHRIFT IN SPANIEN: Wenn Sie ein Besucher/ Tourist sind, tragen Sie nur den ersten Ort ein, an dem Sie sich Aufhalten werden.

18. Name des Hotels (falls zutreffend)	19. Adresse (Lassen Sie ein leeres Feld zwischen Hausnummer und Straße)	20. Haustürnummer/Buchstabe
<input type="text"/>	<input type="text"/>	<input type="text"/>
21. Stadt	22. Postleitzahl	
<input type="text"/>	<input type="text"/>	
23. Provinz	24. Autonome Gemeinschaft	
<input type="text"/>	<input type="text"/>	

#### OBLIGATORISCHER GESUNDHEITSFRAGEBOGEN ZUR EINREISE IN SPANIEN

IM ZUSAMMENHANG MIT DEM COVID-19-GESUNDHEITSNOTSTAND sind Sie verpflichtet, die folgenden Fragen zu beantworten. Bei Bedarf wird bei der Ankunft eine ärztliche Untersuchung durchgeführt

25. Haben Sie, innerhalb der letzten 14 Tage, Kontakt zu einem bestätigten Coronavirus-Fall gehabt?

JA ☐ NEIN ☐

26. Haben Sie Fieber, Husten oder Kurzatmigkeit? Bitte Zutreffendes ankreuzen

JA ☐ NEIN ☐ Fieber ☐ Kurzatmigkeit ☐ Husten ☐



## INFO - COVID-19

Disease caused by the SARS-CoV-2 virus



### Plan your journey



Do not go to the airport if you have the following symptoms: Fever, Cough, Shortness of breath, Loss of Taste or Smell



Complete your statement of health prior to checking in



Ensure you have enough medical face masks for your journey

## INFO - COVID-19

Disease caused by the SARS-CoV-2 virus



### To the airport



Be aware that **only travellers** may enter the airport terminal buildings



Leave enough time to allow for checks and new procedures



Follow **cough etiquette** and wear a **medical face mask** to protect yourself and your fellow passengers



[EASA-ECDC Posters - Blank and white - 28MAY2020 // *Blue version is also available*]

## INFO - COVID-19

Disease caused by the SARS-CoV-2 virus



### Departure airport



Ask airport or airline staff if you have any **questions** or concerns



**Check in online if possible,** bring everything you need for your journey and have all documents ready



Make sure to practice **physical distancing,** wear a **medical face mask** and expect to be refused boarding if you don't

Comply with thermal screening, if requested



[EASA-ECDC Posters - Blank and white - 28MAY2020 // *Blue version is also available*]

## INFO - COVID-19

Disease caused by the SARS-CoV-2 virus



### On the plane



Practice **hand hygiene**, follow **cough etiquette** and wear a **medical face mask**



Watch the cabin safety demonstration to be aware of **specific instructions** for your flight



If you feel ill while travelling, inform crew and seek medical care as soon as possible



Limit your movement in the cabin to that essential for well-being

[EASA-ECDC Posters - Blank and white - 28MAY2020 // Blue version is also available]



# INFO - COVID-19

Disease caused by the SARS-CoV-2 virus



## Arrival airport



Practice physical distancing, hand hygiene and cough etiquette and wear a medical



Collect your bags and leave the terminal building as soon as possible



Reduce the risk of virus transmission by minimising interaction with people in the arrival terminal



**COVID-19 Aviation Health Safety Protocol**  
**Guidance for the management of airline passengers in relation to the COVID-19 pandemic**  
**Issue no: 01 Issue date: 20/05/2020**

## Annex 2 – Notification of Health status prior to Issuing Boarding Pass

An example of a notification of the health status, to be completed prior to issuing a boarding pass, is presented below. It should be made clear that this applies for each individual passenger in a booking for more than one person.

I understand that I must advise <name of airline or travel agent> as soon as possible, and should on no account report to the airport for the flight, if any of the following statements apply:

- ☐ I have been diagnosed with COVID-19 at any time during the 14 days prior to my flight.
- ☐ I have had any of the COVID-19 relevant symptoms (fever; newly developed cough; loss of taste or smell; shortness of breath) at any time during the 8 days prior to my flight.
- ☐ I have been in close contact (e.g. less than 2 metres for more than 15 minutes) with a person who has COVID-19 in the 14 days prior to my flight.
- ☐ I am required by local or national regulations to be in quarantine for reasons related to COVID-19 for a period that includes the date of the flight,

I understand that any of these circumstances will result in refusal to proceed with my travel if I do not disclose this information to the airline and my circumstances are identified on site at the airport.

This declaration should be updated in line with latest developments on microbiological testing for COVID-19.

[COVID-19 Aviation Health Safety Protocol Guidance for the management of airline passengers in relation to the COVID-19 pandemic]