ABCX AIRWAYS - Crisis Response Planning Manual

Part 1 - **E**MERGENCY **R**ESPONSE **P**LAN

Volume 3 - Airline Humanitarian Assistance Team (HAT) Operations

In memory of all those killed on MH Flight 17 / 17th July 2014 - and all other fatalities etc. due aircraft accidents / unlawful interference etc. - before and since

Guideline

Note - This series of guideline and guideline / template documents has been designed to provide a strong and well researched information framework - upon which aircraft operators can build reliable and high quality emergency / crisis response plans, which will deliver should the unthinkable happen - *provided, as always,* that the operator has done its part in the entire building process of the plan and everything else which follows on, particularly training in and exercising of the plan

Aircraft operators wishing to use the guidelines and guideline / templates to assist in the production (original or rewrite) of their own equivalent emergency plans, have the complete flexibility of using as much or little of the provided information - as is desired

A significant advantage of using this series of documents to prepare emergency plans is 'standardisation' - thus alleviating the potential difficulties of having as many different emergency response plans as there are aircraft operators and airports - which e.g. can make mutual emergency support operations between airlines (and airlines & airports, GHAs etc.) more problematic than they otherwise ought to be in the 21st century

www.aviationemergencyresponseplan.com (Parent Website)

PREAMBLE - it is suggested that the following notes are read before proceeding further

Note 1 - The document you are reading now is known by us as a '*guideline*', being designed to assist in the preparation, production and operation of an aircraft operator (particularly [but not exclusively] targeted at the larger passenger airline) emergency response plan (*ERP*). This particular document (Crisis Response Planning Manual [*CRPM*] Part 1 / *Volume* **3**) deals specifically with the subject of '*Airline Humanitarian Assistance Type Operations*' - as related to a *catastrophic aircraft accident* (aviation disaster) type scenario

Note 2 -There are two types of document in our CRPM (Crisis Response Planning Manual) series - you are reading one type right now i.e. a 'guideline'. The other is known as a 'guideline / template'

A '*guideline*' provides comprehensive information & guidance on its specific subject area - but is not a true template as described just above (nonetheless, it remains *a very useful aid in such task* - and should be used as such accordingly). A 'guideline' is typically used when the specific subject matter area(s) of concern are *relatively complex* - i.e. due the associated difficulties (because of such complexity) faced in adequately producing 'what is required' in the guideline / template version

In contrast, a '*guideline / template*', if implemented as intended, should lead to the successful production of an associated airline contingency (emergency / incident etc.) response plan, in the area of interest covered by the relevant 'subject specific' matter concerned i.e. it is a template, in the commonly accepted sense of the word. It is typically used when the associated 'subject matter' is *relatively non-complex* - i.e. due the associated, comparative 'easiness' (because of such non-complexity) of producing said guideline / template

Both types of document are produced (in their different ways) as '***works of reference***'. It is hoped that the reader appreciates that any work of reference needs to be comprehensive enough to deliver what is required - hence (in our case) the comparatively large size (and thus amount of information provided) of most of the guideline and guideline / template documentation which we produce

It should be anticipated that 'larger / more complex' aircraft operators will need to account for the greater majority of subject matter included in this document (when preparing their own, associated plans) - whilst smaller / simpler operators may be able to 'mix, match & adapt' to a degree, as appropriate to their own (specific) circumstances

Note 3 - Fictitious (scheduled) passenger airline '***ABCX Airways***' has been used to provide 'context' throughout this document - and has been broadly based on a medium to large sized UK registered, headquartered & main based operator. The airline is a (24 hour ops) long, medium and short-haul international carrier (including USA destinations). It is well resourced and supported from an emergency response planning context

Whatever applies to ABCX Airways herein may be regarded as being typically applicable, to a greater or lesser degree, to other similar airlines worldwide (and most other passenger carrying airlines e.g. charter / lease operations) - with regard to emergency response planning matters. However, there will always be differences (which must be adequately accounted for by the user, when producing emergency plans etc., as based on a CRPM series guideline or guideline / template document)

This document may be adapted for use as a guide by other aircraft operators (e.g. cargo / executive / VVIP / rotary etc.). However, appropriate differences should be accounted for

Non-UK registered and / or non-UK main based operators should interpret and adapt this guideline / template accordingly and as applicable to their own specific circumstances - but do remember that when operating into UK and / or the * European Union (EU), then some provisions documented herein may still be applicable / advisable e.g. those relating to humanitarian (family) assistance and the carriage of dangerous goods

* NB: The UK left the EU in 2020

Note 4 - Most terms and abbreviations used herein are *generic* i.e. not specific to any particular airline, airport etc.

Whilst many (most) will be the same / very similar to terms in actual (real / operational) use world-wide, the 'generic' use and nature of such should be accounted for accordingly i.e. when preparing *real* emergency plans based on this guideline / template, ensure that all (our) generic terms are replaced with specific (real / in-use) *local* terms (i.e. your own airline's / airport's / country's in-use terms) where appropriate

However, if you *are* able to adopt the terminology, acronyms etc. (+ associated concepts, practicalities) ***used herein*** in your own ERPs, this will assist in achieving a highly desirable degree of world-wide ***ERP standardisation***

Note 5 - An airline requires a suitably effective and efficient method of documenting, in detail, the contents, requirements etc. of its emergency response plans. A brief account of the method of documentation used in *this* series of 'guideline' and 'guideline / template' documents will be found herein on pages 19 and 20. It is a well tried and proven method and airlines should seriously consider adopting same. If done, this will further strengthen the *standardisation* aspects of ERPs amongst aircraft operators

Note 6 - How to use this Guideline / Template (Instructions)

Information for preparation & production of a new or upgraded airline's ERP '*policy & executive overview*' document (as based on **this** guideline / template) is typically provided by:

- Written instruction' - requiring already completed sections of the (our) appropriate guideline / template document (**pre-prepared** generic material) to simply be 'copy & pasted' directly into any new or upgraded airline plan under preparation. Where required, the 'copy & paste' material can (must) be altered of course, to suit any specific requirements of the new or updated plan being worked on ……………………………………………………………

  AND / OR

- 'Written instruction' - requiring the airline etc. person(s) (working on the new or upgraded airline plan under preparation) to obtain and insert appropriate information him / herself - which will almost certainly require considerable thought and research, decision making (e.g. policy & budget), time and effort etc. (The latter refers to information which no 'generic' guideline / template such as this [the document you are now reading] is able to provide)

  Below find an *example* of how a typical 'written instruction' might appear in the guideline or guideline / template documents series is shown on the next page:

Example **Instruction 1**:

The front cover sheet for *your own* CRPM Part 1 / Volume *xx* will be found on (enter the page number) of this guideline / template document - you can simply 'copy & paste' it into the front (first page) of your own document

Remember to:

* Insert the name of your airline in the appropriate place

* Change or remove the logo (top left of header)

* Amend the rest of the 'header & footer' text to your own requirements - as required

* Change any other information - as required

These 'written instructions' plus any associated material to 'copy & paste' will generally be included within the specific guideline or guideline / template document as associated with any new or upgraded airline ERP etc. under preparation. This means e.g. that for *each* airline Part 1 (ERP) *Volume* (reminder - see note 5 on page 4) to be produced / upgraded - there will be a *corresponding* and *separate* guideline or guideline / template document to refer to; 'copy & paste' information from; take instruction from etc. i.e. (see *below*):

Crisis Response Planning Manual Part 1 (Emergency Response Plan - **ERP**)

New / Upgraded Airline Plan under Preparation	Associated Guideline / G. Template Document
Volume 1	Volume 1*
Volume 2	Volume 2
Volume 3	Volume 3
Volume 4	Volume 4*
Volume 5	Volume 5
Volume 6	Volume 6
Volume 7	Volume 7*
Volume 8	Volume 8
Volume 9	Volume 9*
Volume 10	Volume 10

You are currently reading the document highlighted above. Other documents listed in the table (on right hand side) i.e. Vols 2, 5, 6, 8 & 10 are also 'guidelines' - the rest being 'guideline / templates'

CRPM *Part 1* is otherwise known *exclusively* herein as the 'emergency response plan' (**ERP**)

Only CRPM Part 1 is the subject of *this* aircraft operator ERP guideline / template document (i.e. the document you are reading now is a sub-part [a '*volume*' {i.e. one of 10 volumes}] of *CRPM Part 1*). (If required [e.g. for further guidance], see again pages 19 and 20 [of the document which you are reading now])

CRPM **Parts** 2 to 6 (*SEPARATE* documents from the one you are now reading) are *not* subjects included in *this* ERP guideline / template document - except where possibly shown for cross reference / contextual purposes only (i.e. Parts 2 to 6 cover *other* subject matter areas)

The 'emergency response plan - **ERP**' term / concept is *NOT* used about, for and within (except for contextual / cross reference purposes) CRPM Parts 2 to 6

Note 7 - Terms such as '*humanitarian assistance*', '*humanitarian assistance team*', '*humanitarian assistance centre*' etc. are used throughout this document (i.e. we are emphasising use of the word '*humanitarian*' here). There is good reason for this emphasis e.g. the common airline, airport, GHA etc. - use of the equivalent terms '*family* assistance team', '*family* assistance centre' etc. is still prevalent as at 2023. Unfortunately, such terms imply (due their very wording) that such teams, centres, services etc. are just for '*families*' - which is absolutely incorrect, confusing etc.

Similarly, use of words '*special* assistance team' and '*special* assistance' etc. typically implies (again to airlines, airports, airlines, GHAs etc.) services supplied as part of 'normal operations' (e.g. provision of wheelchairs; escorts for unaccompanied minors etc.). Consequently, the use of such terms is again confusing if used in an *emergency response context* - and should thus be avoided

Lastly, ABCX Airways is based upon a **UK** airline. For UK contingency (crisis) response operations the appropriate word used is '*humanitarian*'. Accordingly (for the sake of standardisation and to prevent confusion) - *exclusive use of the word* '**humanitarian'** (*as described and in context with this Note 7*) is actively encouraged - not just in UK but worldwide

Note 8 - This guideline is predicated on ABCX Airways deploying significant resources (including manpower, budget, facilities etc.) during a crisis response. This will not be possible for some potential users. For the latter, this document should be *adapted* and *downsized* accordingly, in the appropriate areas. It is acknowledged the latter might be difficult to accomplish - but should nevertheless be done to the best ability of the operator, commensurate with available resources. 'Outsourcing' options might be considered if appropriate (e.g. if you can finance them!)

Note 9A

- This original document (the '**work**') contains material protected under International and / or Federal and / or National Copyright Laws & Treaties. **Any *unauthorised* use of this material is prohibited**. However, all & any entities & persons are licensed / authorised (by the copyright owner / original author) to use the **work** under the terms of something known as a 'creative commons licence'. (Follow the link below to see the **basic** terms of this licence in plain language (from there you can then also link to the 'legal' language version)):

  Attribution - Non-Commercial 3.0 Unported Licence - (CC BY-NC 3.0)

  Note - 'attribution' means placing the following (below) text in the header (or some other prominent position e.g. the page after the title page / front cover) of all and any derivative document(s) (known as 'adaptations') - which you make at any time - as based on this work:

  '© AERPS / MASTERAVCON (A H Williams) - some rights reserved'

- For any *other* use of the **work** (e.g. use for *commercial* / for *profit* purposes) - *written permission is required*. The latter can be requested from - **info@aviation-erp.com**

- The copyright owner / original author agrees that the term 'commercial' (as used above) can be fairly interpreted as *not* applying to any use of this **work** as a template / guideline, where such use is made solely (only) for producing an emergency response plan or similar document - and where such use is solely made by an entity (e.g. an airline and / or a person[s] in the employ of such entity) - *for use by such entity alone*

- If derived / adapted / changed versions (*adaptations*) of this **work** are made, then a statement to this effect must be placed in some appropriate, prominent position (e.g. the page after the title page / front cover) of all and any such adaptations e.g.

  '................This is an adaptation of [insert title / name of the work] by AERPS / MASTERAVCON / A WILLIAMS (copyright owner and author) ....'

- If adaptations of this **work** *are* made, it is recommended that all images in the original are replaced and / or omitted in the adaptation - so as to avoid potential infringement of image copyright, which the original work copyright owner / author might have reasonably been unaware of

- Entities and persons intending to distribute this **work** and / or its **adaptations** to other entities and persons, shall be responsible for ensuring that the terms, conditions etc. of this 'Note 9A' - and the associated 'creative commons licence' referred to above, are passed on in turn. *All entities and persons receiving such distributed versions shall then be bound by these same terms and conditions*

Note 9B - Some information shown in Appendices A, D, E and F of this document is not our own copyright but is believed to be in the public domain. If this is not so - please see note 9C

Note 9C - Any person / entity having reasonable cause to believe that his / her / its copyright has been infringed in this document - should please contact us soonest (via email - **info@aviation-erp.com**), in order that the matter might be mutually and satisfactorily resolved

Note 10 - There is a distinct possibility that the airline's *GO Team* will need to deploy in support of a catastrophic aircraft accident. In most cases such deployment will be by air. Accordingly, all HAT managers and team leaders shall attain and retain an *excellent* working knowledge of (*separate* document in this series) CRPM Part 1 / Volume 5 - 'ABCX Airways GO Team Plan' (you might also wish to take a look at pages **19** and **20** now - and then return here?)

Note 11 - Despite every care being taken in the preparation of this series of guideline & guideline / template documents, they will inevitably contain errors, omissions and oversights, incorrect assumptions, non-working links, out of date info etc. Users identifying same in this particular document (the one you are reading now) are kindly requested to notify the author accordingly (via email) at - **info@aviation-erp.com**

End of Preamble Section

The info contained in this document is provided on an 'as is' basis, without warranty of any kind. Whilst reasonable care has been taken in its preparation, the author shall have no liability to any person or entity - with respect to any loss, damage, injury, death etc. caused (actual or allegedly) directly or indirectly, by use (directly or indirectly) of such information

Actual (real) instructions for use in *this* guideline document commence on page 9:

Memorial to **Swissair flight SR 111** - Crashed in the Sea near Peggy's Cove, Nova Scotia, Canada

Note - the *humanitarian response* (immediate & longer term) to the SR 111 mass fatality air accident (**September 2nd 1998**) is generally acknowledged (but there are always exceptions) *as an example of a very well managed and implemented operation by the airlines involved* (Swissair & Delta code-sharing - the former being the operating carrier). **Importantly**, this has been clearly acknowledged by many of the families, relatives & friends of SR 111 accident victims (there were no survivors). For more information re this accident, please follow this link: **https://en.wikipedia.org/wiki/Swissair_Flight_111**

Guideline - Instruction 1

The front cover sheet for *your own* CRPM Part 1 / Volume 1 will be found on the next page of *this* guideline document. You can simply 'copy & paste' it into the front (first page) of your own document.

Remember to:

* Insert the name of your own airline in the appropriate place

* Change or remove the logo (top left of header)

* Amend the rest of the 'header & footer' text to your own requirements - as required

* Insert anything else as required (e.g. an appropriate image)

Insert actual airline name here *xxxxxxx*

Crisis Response Planning Manual

Part 1

EMERGENCY **R**ESPONSE **P**LAN

Volume 3

Insert an appropriate image here?

Airline Humanitarian Assistance Team Operations

Guideline - Instruction 2

As this document (the one you are now reading) is a 'guideline' rather than a 'guideline / template', *no further instructions will be provided* other than the *general* instruction a little further below

It is assumed that this general instruction is targeted at the airline person(s) responsible for introducing '*humanitarian assistance* team type operations' into the airline's overall emergency response plan, as related to a catastrophic aircraft accident type scenario

Users are advised that this guideline document is based on the assumption that 'the airline' does not yet have its own Humanitarian Assistance Team operation (but is about to introduce one) - *OR* is desirous of reviewing and updating its current system

General Instruction

You should now use your own common sense, logic, skill, experience; research, consultation with appropriate colleagues and external 'experts'; direction from 'above' etc. - to adapt the information provided in this rest of *this* guideline document (the one you are now reading) to plan, prepare, document and implement a *Humanitarian Assistance Team* operation which is *specific to your own airline's circumstances and purposes* - possibly as influenced by interested third parties such as local airport operators; emergency services; government authorities; accident victims 'family groups / associations'; contracted (external) 'suppliers' of humanitarian assistance type services etc.

Where felt useful, the layout (but not necessarily the content) shown on pages **12** to **21** of *this* guideline document, might be adapted for use in the *introductory section* of your own 'Humanitarian Assistance Team Operations' plan

Contents

Document Review & Approval

This document has been *reviewed* for adequacy by 'ABCX Airways' Emergency Response Planning Manager, whose confirming signature appears below

(x xxxxxxx)   xx xxxxxxx 20xx

This document has been *approved* for adequacy by the 'ABCX Airways' Accountable Manager, whose confirming signature appears below

(x xxxxxxx)   xx xxxxxxx 20xx

List of Effective Pages

Pages 1 through xxx - effective xx xxxxxxx 20xx - Revision (Original)

Revision List

Revision No	Date	By
Revision (Original)	xx xxxxxxx 20xx	TBA

This document is available to all ABCX Airways employees, in electronic version, via *********
(Insert path to ABCX Airways intranet and / or nominated company share-point site here: ....)

xx * *hard copies* versions of this document are also available at *********
(Insert here the location(s) where hard copies are stored [and how to access then if so required] below): ....)

* At least **2 extra** *hard* copies shall be additionally located / stored '*off-site*' - for business continuity purposes

All soft and hard copies mentioned above are *controlled* documents

Revision Procedure

******* Manager shall be responsible for managing the revision process for this document

> Changed (i.e. new, revised, deleted etc.) information will be shown by a vertical bar to the right of the approximate area of the changed information (as demonstrated in this paragraph). Additionally, all changed text will be highlighted in blue (again, as demonstrated here)

Individual revision pages for this document will not be issued. When *internal* (ABCX Airways) revisions are required, the *whole / complet*e document will be re-issued *electronically* (via the company intranet site - otherwise via a nominated company share-point site or equivalent / similar method), with the new revision(s) (since the previous version) having been already incorporated

Each new revision will be notified to *all* ABCX Airways employees via a company-wide broadcast email message or similar. Additionally, all *pre-nominated* employees (as stipulated in the appropriate section of CRPM Part 1) must / shall check the appropriate section of the company intranet / nominated share-point site (or equivalent / similar) at least *weekly* for such revision updates (to back-up the broadcast messages etc. referred to above)

Pre-nominated employees as per the above paragraph shall notify the ******* Manager via email or similar - to *confirm* that they have studied the parts of the document affected by the appropriate revision, clearly understood the consequences / implications / expectations of same - and have accordingly implemented / will implement whatever measures (if any) may be required of them (by the particular revision concerned)

******* Manager shall maintain a current and accurate list of all such pre-nominated employees and use this list to manage the 'confirmations' referred to in the para immediately above

Revisions supplied to authorised *external* parties shall be managed by direct email / similar methods. ******* Manager shall maintain & retain appropriate, associated records

Hard copy document revisions will simply require removal of the complete 'old' document from its cover - and insertion of the complete replacement. ******* Manager shall be responsible for ensuring that this process is reliably achieved and that appropriate records are maintained and retained

Distribution

See above

Generic Acronyms used in this Guideline

AKA   'also known as'

C4   (Crisis Related) Command, Control, Co-ordination & Communication activities

CCC   Crisis Communications Centre

CD   Crisis Director (Person charged with overall *airline* crisis C4 - at the highest level)

CHC   CMC - Humanitarian Assistance (Team[s]) Controller

CIQ   Customs, Immigration & Quarantine ('Port Health' is an alternative name for 'Quarantine')

CISD   Critical Incident Stress (Management) Debriefing

CISM   Critical Incident Stress Management

CMC   Crisis Management Centre (highest level *airline* C4 facility - typically located at Airline HQ)

C-LACC Controller Local Accident Control Centre (Airline's local *Station* person charged with *local* C4 responsibility on behalf of that airline)

CPM   (ABCX Airways) - Crisis (Response) Planning Manager

CRPM   (ABCX Airways) - Crisis Response Planning Manual

CRC (A) (Uninjured) Crew Reception Centre - Typically located 'airside' at local (accident?) airport

CRC (L) (Uninjured) Crew Reception Centre - Typically a landside facility (e.g. a hotel) at or near local (accident?) airport

CST   Crash Site Team

CSU   Crisis Support Unit (selected elements of airline departments / business units - having direct emergency response accountabilities regarding the particular department / business unit)

DVI   Disaster Victim Identification (also known [particularly in USA] as 'DMORT' [Disaster Mortuary Operational Response Team])

ECC   Emergency (Telephone) Call / Contact /Information Centre

EOC   Local *Airport Operator's* Emergency Operations Centre (Airport's crisis response C4 facility [contrast with 'LACC' and 'CMC'])

* **ERP**   (Aircraft Operator) Emergency Response Plan (being part of the airline's overarching CRPM)

  * ERP -   the '*ERP*' part of the CRPM (i.e. CRPM *Part* 1 *specifically*) deals with 'catastrophic aircraft accident' type scenarios **only** - and does **not** cover e.g. aircraft incidents; operational disruption / business continuity; public health crises; natural disaster crises etc.

FAC   FR Assistance Centre (see alternative and *PREFERRED* term '**HAC**')

FCC   Forward Command Centre (a unit deployed by the involved accident *airport* operator)

FEC   FR Enquiry Card (used in association with / for crew, passengers, ground victims etc.)

FR   Family, Relatives and Friends (associated in some valid way with accident victims). As used herein, such FR are assumed to have **NOT** been travelling on board the accident flight

FRRC   FR Reception Centre (usually located landside at or very close to local [accident?] airport)

GHA   Ground Handling Agent / airline representative at airline Station locations (in general)

GHC   GO Team - Humanitarian Assistance (Team[s]) Co-ordinator

HA   Humanitarian Assistance

HAC   Humanitarian Assistance Centre (typically located landside [e.g. in a hotel{s}] - at or near local [accident?] airport)

HAT   Humanitarian Assistance Team (AKA Special / Family Assistance Team; Care Team and so on)

HQ   Headquarters

ICAO   International Civil Aviation Organisation (a United Nations organisation)

JFSOC   Joint Family Support Operations Centre (usually co-located within or near HAC [JFSOC concept is mainly {but not exclusively e.g. it is also used in the UAE} used in the USA])

LACC   Local Accident Control Centre (i.e. an airline *Station's* crisis response C4 facility) (contrast with '*EOC*' and '*CMC*')

LGT   Leader GO Team (person in overall charge of a deployed airline GO Team [reports to CD])

MGFR   Meeters and Greeters (at arrival airport[s]) of accident victims (including any FR)

NOK   Next of Kin / Closest Relative - and (broadly speaking) equivalent persons

NTSB   National Transportation Safety Board (part of USA's Department for Transport)

OCC   24H Operations Control Centre at airline HQ

ODM   OCC - Duty Manager

PDA   Person(s) Directly Affected. (Note - the preferred term '*victim*' is used in *this* document)

          Note - 'PDA' is a trademarked term registered to 'Kenyon International Emergency Services'

PFA   Psychological First Aid

PPE   Personal Protective Equipment

PRC   Passenger Record Card (also used for crew)

RA (A)   Re-uniting Area - on airport

RA (O)   Re-uniting Area - off airport

SRC (A)   (Uninjured) Passenger Survivor Reception Centre - Usually located airside at local airport

SRC (L)   (Uninjured) Passenger Survivor Reception Centre - Usually located in a land-side hotel at or near local airport

TDA   Transport Disaster Assistance unit (Part of the NTSB)

TL   (HAT) Team Leader

VRC   *Victim* Record Card (more precise [and preferred name] for '*Passenger* Record Card')

IMPORTANT NOTE

EMERGENCY / CRISIS RESPONSE PLANNING - *Definitions and Explanatory Material* (GLOSSARY)

If not already done, serious users of this document are advised to read through the associated (separate document) '*Glossary*' before proceeding further. You will find the latter at:

http://www.aviationemergencyresponseplan.com/information/

When the above webpage opens, scroll down until you find the 'information article' entitled:

* **Information Article** - **Glossary of Terms** - Aircraft Operator - Emergency Response Plan

Click on the article to open and read it

Additional explanatory material *specific* to **Humanitarian Assistance Team Operations** will *also* be found at appendix A (page **49**) to *this* document (i.e. - the one you are reading now)

(Without some pre-study of *all* the above material, it might be more difficult to acquire a clear understanding of what is to follow)

DEFINITION - **Next of Kin / Closest Relative / Emergency Contact Person / Equivalent Person**

For the purposes of this guideline - '*Next of Kin*' / '*Closest Relative*' / '*Emergency Contact Person*' / '*Equivalent Person*' etc. - typically (but not always) refers to some form of related person (*not* being an aircraft accident victim) *as associated* (in some valid way) *with* a specific aircraft accident victim(s)

Note that the words 'related' and 'valid' *can and do have many different interpretations around the world* - i.e. legal, quasi-legal, best practice, custom / culture / tradition, religious, informal etc.

This subject can be both complex *and* suffer (particularly in the context of a catastrophic aircraft accident and similar 'disaster' type scenario) from a distinct lack of clear, explanatory guidance material - mainly because there isn't (in reality) much 'clear' guidance to refer to

However, an attempt at an explanation is provided but, as it runs to more than 20 pages, is not included in the document which you are now reading. Interested readers will find further details at:

https://www.aviationemergencyresponseplan.com/information

When above webpage opens, scroll down until you find the document entitled:

* **Information Article** - **Major Air Accident** - '**Next of Kin**' / '**Closest Relative**' / '**Emergency Contact Person**' (click on it to open and read)

ABCX Airways - **Phone Home** / Call Home **Scheme**

A typical 'phone home' scheme will look a little like the following………………………:

In the extremely unlikely event of one of our aircraft being involved in a major emergency / accident, the airline will activate an emergency telephone / contact enquiry centre, to respond to calls from potential relatives and friends of those pax and crew believed to have been on board the crisis flight

(For a catastrophic, 'high profile' aircraft accident, 50 - 100,000 such calls / contacts could feasibly be made to this 'Emergency Call Centre', during the first 24 hours alone - post crisis occurrence)

If you are 'ABCX Airways' *staff* (or from a closely related organisation e.g. ABCX Group) and you are *NOT* directly involved with the crisis flight (i.e. you are neither a crew member nor passenger on that flight), you can be of great assistance at this time by participating in the '*Phone Home Scheme'* - which works as follows:

On hearing news of an ABCX Airways major aircraft accident, *IMMEDIATELY* contact your own family, relatives and friends to let them know that *you* are *not* involved, and that you are safe and well. You should make these contacts from wherever in the world you happen to be at the time

Ask your family, relatives and friends to pass on this information to others in turn, who might also need to be informed that *you* are not involved (as appropriate and as quickly as possible)

Also ask for everyone so contacted *NOT* to call ABCX Airways or the ABCX Airways Emergency Call Centre - unless the nature of the call is most urgent

If we all do this promptly, thousands of unnecessary calls coming into our Emergency Call / Contact Centre will be prevented, thus releasing precious call centre capacity to deal with those most in need

The scheme is particularly applicable to our *crew* (pilots, cabin crew etc.) as they form a major part of the airline by number and, furthermore, the nature of their employment sometimes means that family, relatives and friends (of such crew) might not always know which flights they are operating, when and / or in which part of the world they might be etc.

IMPORTANT NOTE

If you *are* 'ABCX Airways' staff (or from a closely related organisation e.g. ABCX Group) and *you are involved* (i.e. you were either a crew member or staff passenger on the incident flight [including for duty travel and / or vacation purposes etc.]) - then (if able to do so) *you should also 'phone home'* of course, as per above. You should additionally try to make contact with your parent department at airline HQ (by whatever means possible) without delay
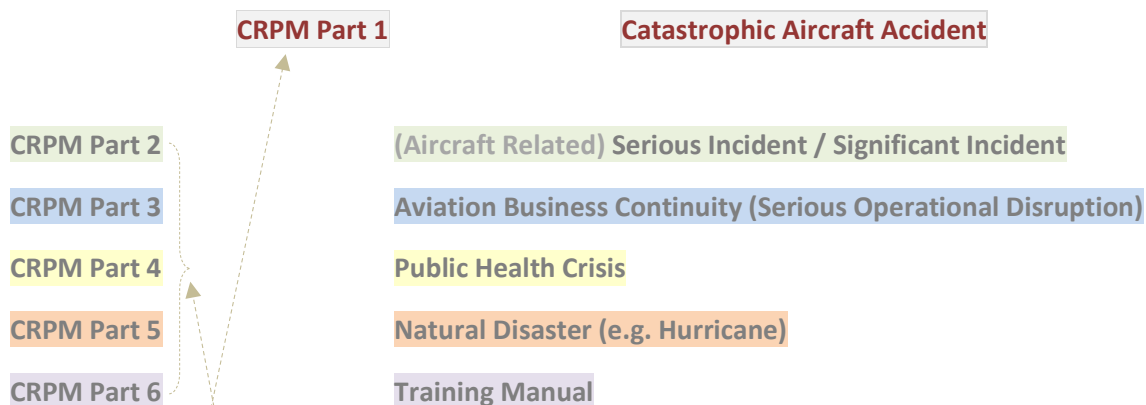
Crisis Response Planning Manual - CRPM

The CRPM is the 'master' document which regulates and guides all forms of crisis / emergency response related operations, training etc. conducted by ABCX Airways

The CRPM comprises **6** separate *Parts* - each part dealing with a specific type of emergency / crisis / contingency response ops and containing the associated procedures, checklists, information etc.

The 6 'Parts' of the CRPM are:

CRPM Part 1   **Catastrophic Aircraft Accident**

CRPM Part 2   (Aircraft Related) **Serious Incident / Significant Incident**

CRPM Part 3   **Aviation Business Continuity (Serious Operational Disruption)**

CRPM Part 4   **Public Health Crisis**

CRPM Part 5   **Natural Disaster (e.g. Hurricane)**

CRPM Part 6   **Training Manual**

CRPM *Part 1* is otherwise known *exclusively* herein as the '*emergency response plan*' (**ERP**)

CRPM Parts 2 to 6 are * *NOT* subjects included / covered in the document you are reading now or any other Volume (i.e. Vols 1 and 2 and Vols 4 to 10 [see next page]) which is an integral component of CRPM *Part 1* i.e. they do **not** form part of the **ERP**. However, they are all available via our website at:

www.aviationemergencyresponseplan.com

CRPM Part 6 (Training Manual) does NOT exist in reality i.e. it is a *notional* document only. This is deliberate as it is not possible to produce such a document which adequately meets the associated requirements (even generically) of all prospective users worldwide. However, when 'users' produce the equivalent of the CRPM series of documents in reality - then an associated training manual is obviously required

* Except where cross-referred herein - to / for contextual purposes only

CRPM 'Parts' are further split down into *Volumes* - where required by the document owner, in order to make the use of the particular 'Part' more effective and efficient - whilst also significantly reducing the amount of information required to be studied & retained by prospective users (e.g. because they only need study the document(s) of particular concern at any particular point in time)

CRPM Part 1 (Catastrophic Aircraft Accident - **ERP**) is further split into *ten* separate volumes:

Volume 1	ERP - Policy & Executive Overview (of CRPM Part 1)
Volume 2	ERP - Command, Control, Co-ordination & Communication (C4)
Volume 3	ERP - **Humanitarian** (Family) **Assistance Team**
Volume 4	ERP - Emergency (Telephone) Call / Contact / Information Centre
Volume 5	ERP - GO team
Volume 6	ERP - (Airline) Station (Destination Airport etc.) Emergency Response Plan
Volume 7	ERP - Crisis Support Units
Volume 8	ERP - Integrated Crisis Response Planning (e.g. with alliance partners)
Volume 9	ERP - Crisis Communications
Volume 10	ERP - Emergency Response Exercise Planning and Conduct

Requirements for all designated users of the CRPM

All nominated ABCX Airways and other appropriate personas needing to use the CRPM to prepare for and guide crisis response plan preparations, response etc. * *shall* / *should* (as appropriate):

- Acquire & retain an appropriate level of CRPM knowledge, commensurate with effectively & efficiently carrying out designated crisis *pre-preparation* and *actual* crisis response functions

- Use the procedures, checklists, information, guidelines, templates & other appropriate content of the CRPM to guide *pre-preparation of separate* (but still subordinate to the CRPM) crisis response plans i.e. *specific departmental / business unit / station etc. plans* dealing with different aspects of emergency / crisis response - such preparation to include appropriate training and testing. (See 'Crisis Support Unit' definition in Glossary [refer to page 17]; See also *separate* document in this series 'CRPM Part 1 / Volume 6 - Station ERP')

- Use the procedures, checklists, information and other appropriate content of the CRPM to *guide actual emergency / crisis response operations 'on the day'*

* Note - The word '*shall*' (as used above) implies a mandatory requirement e.g. applies to nominated ABCX Airways crisis response staff. The word '*should*' (as used above) implies a requested or non-mandatory requirement e.g. latter applies to non-ABCX Airways crisis responders who nonetheless are part of the airline's crisis response plan - such as ABCX parent Group; independent Ground Handling Agents etc.

IMPORTANT - the CRPM in general (together with the above requirements) has been approved & endorsed by the ABCX Airways *Accountable Manager* and thus forms the authority, direction and instruction etc. for/to nominated ABCX Airways staff, to undertake all appropriate/required action - as part of their designated (or otherwise assumed) emergency/crisis response accountabilities

Purpose & Scope

The *PURPOSE* of this guideline document is to provide a *framework* upon which an airline can build / rebuild its '*Humanitarian Assistance Plan*'

This framework may be regarded as the potential 'bones' of that plan. However, it will be for the *airline itself* to undertake the (considerable) further and on-going development, work etc. of putting the 'meat on the bones' which, if addressed adequately, should result in an acceptably effective and efficient plan - tailored to the airline's specific requirements

The associated *SCOPE* is limited to providing a *foundation* level of information re airline **Humanitarian Assistance Operations** - which an airline can then develop further / build upon, in order to produce its own final plan on the subject - as per the '*purpose*' documented just above

Accordingly, this document will, in general, *not* provide *detailed* procedures, processes, checklists etc. - except for some basic examples, in some cases. The reader will appreciate why this is so i.e. no generic guideline document such as this can realistically provide for all the variable circumstances specific to the humanitarian assistance plan of any particular airline

Note: Wherever possible and practicable so to do, the policy and implementation advice contained in **ICAO** Docs *9998* (*Policy* on Assistance to Aircraft Accident Victims and their Families) and *9973* (*Manual* on Assistance to Aircraft Accident Victims and their Families) respectively - should be considered and adequately accounted for

Both of the above documents can be found by clicking on / going to:

https://aviationemergencyresponseplan.com/information/

When the above webpage opens, scroll down until you see the info article entitled

* '**Guidance on Assistance to Aircraft Accident Victims & their Families**' - (ICAO **Docs 9973** & **9998**)

Click on the document of interest to open and read

Reminder: Other '**Parts**' of the CRPM (i.e. Parts **2** to **6**) are *not* covered by this document (the one you are reading now) except for possible contextual mentions and / or for cross-referencing purposes only

Section 1 - INTRODUCTION

Integral to any airline's overall emergency response plan (ERP) should be a '*sub-plan*' for how it intends to deal with the considerable humanitarian, welfare, informational and related responses required, following a catastrophic aircraft accident (aviation disaster). *In this document* all of the aforesaid come together under the generic subject matter heading - '*humanitarian assistance*'

The *first* 'group' of recipients of 'humanitarian assistance' will be those from the accident aircraft itself (*air victims*) - together with those 'on the ground' (*ground victims* [if any] - the latter being those killed, injured, traumatised etc. as a direct result of the accident aircraft hitting the ground / similar severity situation). In *this* document, *ALL* such persons are *collectively* known as '*VICTIMS*'

The *other* (second) group typically comprises those persons, having one form or another of a familial / emotional / support etc. type connection etc. - with said victims

This second group typically (but not exclusively) comprises '*family, relatives and friends - FR*' of accident victims, but can (in appropriate circumstances / in a wider context) also include all types of 'crisis responder' (amongst others) - including appropriate, responding airline and airport etc. staff

The *key requirements* for providing the most effective, efficient and expedient humanitarian assistance operations / services by an *airline* (aircraft operator and / or its representatives) include (list is not exhaustive):

- Adequate & continued approval and support (top management 'buy-in' and 'follow-up')
- An adequate plan (Humanitarian Assistance [Team] Plan)
- An adequate sized responder team (Humanitarian Assistance Team - HAT)
- Associated resources provided (budget, infrastructure, facilities, transport, equipment etc.)
- Adequate and on-going training and exercising provided and attended
- Adequate response (esp. set-up / operation of a Humanitarian Assistance Centre [HAC])
- Adequate supervision at all appropriate levels
- An 'environment' conducive to continual improvement
- Continual buy-in and support of the concept by all concerned

An airline will typically not provide its humanitarian assistance response in isolation - but rather as an integral part of a larger humanitarian response involving other, mostly non-airline (external) resources - typically:

- Emergency Services / Civil Defence / Equivalents (Police, Fire, Ambulance, Military etc.)
- Airline Representatives (e.g. Ground Handling Operators /Agents etc.)
- Airport Operators / Airport Authorities etc.
- Other airlines & similar where appropriate e.g. alliance, code-share and mutual aid partners
- Regulatory type authorities and equivalents (e.g. air accident investigation; disaster victim identification [DVI] etc.)
- Various Health, Welfare, Social & similar Service Providers (typically provided by national / federal, regional and local / tribal government etc. type agencies)

- Other appropriate elements of national, regional and local government etc. as required
- Non-government and voluntary organisations
- Religious (faith) groups
- Commercial (third party / external) Specialist Organisations (i.e. specialising in 'humanitarian assistance' type ops - particularly airline related)
- The Media etc.

It is important to understand the different *contexts* in which an airline might be required to provide / contribute its humanitarian assistance response:

- One context is related to a sophisticated and centrally managed national (government) and / or regional (local government) etc. humanitarian assistance response operation - where considerable airline participation is *legally* required in certain circumstances (e.g. as applies in the **USA**)

- In a different 'sophisticated' context, but similarly legally mandated and centrally managed at government and / or local government level - where airline participation is *not* highly placed (however, it *is* [at least] formally recognised) in the list of responders providing humanitarian assistance (e.g. as applies in the * **UK**)

    * Since December 2010 the European Union has also initiated similar measures (regulation) to the above - perhaps (arguably) positioned somewhere between the contexts of the US and UK systems

    However, as at 20**23** only a very small number (believed to be **3** i.e. Italy, Netherlands and Spain) of the **27** EU countries had actually implemented same

    A small number of other countries also have similar measures in place e.g. Australia; Brazil; China; Japan, South Korea, UAE etc.

- At the other extreme, the *airline* provided / sourced humanitarian assistance response operation (if any) might be all that is available 'on the day' i.e. the buck stops with the airline in such a situation!

    This is particularly applicable in some developing countries (and some developed countries too!) where an adequate crisis response infrastructure (including the humanitarian element) may be inadequate or even non-existent, from government etc. level down!

    It might also be applicable in some remote locations around the world - purely due to such remoteness (think 'North Pole' [airliners fly over it every day!]). However, in such circumstances it is likely that 'one or other country' involved in some way, will provide some measure of support e.g. Air France flight AF 447 (crashed in Atlantic Ocean in 2009) and Malaysian Airlines flight MH 370 (believed to have crashed in S.E. Indian Ocean in 2014)

Section 2 - **KEY ELEMENT considerations - airline provided HUMANITARIAN ASSISTANCE SERVICES**

(Before reading further, the user of this document is reminded of its scope - see page 21 again if required)

Adequate Approval and Support (1)

The first task in setting up an airline humanitarian assistance response capability is to gain unqualified approval from the airline's top manager and then (as required) from the airline board of directors (or equivalent[s])

Approval alone, however, is not enough as top level authority and commitment also need to be *adequately demonstrated*. This is evidenced by e.g. provision of an appropriate budget and all of the other considerable resources required, the main one of which is the provision of the *manpower* required to deliver said humanitarian assistance response in the first place i.e. an airline (and / or airline representative) '**Humanitarian Assistance Team**' - (HAT). A close second will be ongoing (and adequate) budget / monetary provision

An appropriate 'champion' for all things related to humanitarian assistance should be appointed (by the airline's 'accountable manager']) from the airline's top management team and appropriate 'terms of reference' issued - the main one being to 'troubleshoot / clear obstacles and problems' for the lower level managers etc. charged with actually preparing, introducing, implementing, training, exercising, maintaining and continually improving the humanitarian assistance response

Note - The main impetus to be considered by the top management team here is the risk to the airline's brand / image / reputation etc. if it is unable or unwilling to offer a credible humanitarian assistance response related to a catastrophic aircraft accident type scenario. This is a real (as opposed to imaginary) risk which could potentially impact adversely on the bottom line (financial performance and thus [possibly] on-going existence) of the airline itself, should the risk materialise i.e. should a catastrophic aircraft accident occur

Just as importantly as a 'persuader' is what is now termed '*corporate social responsibility*' etc. In simple terms (and in the context of this document only) the provision of assistance to those in need is a humanitarian duty - performed at any level within an involved 'corporation / entity' - from individual through to the entire entity itself. Many organisations world-wide (including airlines) now fully embrace the concept of 'corporate social responsibility'. The risks of not so doing might e.g. involve the airline going out of business; prison terms etc. for airline staff (including senior management at all levels) found to have been negligent etc.

Lastly, an increasing number of countries now have *legislation* in place relating to '*corporate manslaughter / equivalent*' - where companies, organisations and staff (particularly [but not exclusively] top management) can be found guilty of serious management failures resulting in a gross breach of a duty of care. Such duty of care might conceivably link to the need for an airline to have a viable emergency response plan (in the first place) - of which an adequate *humanitarian assistance response capability* should be an integral part

Adequate Approval & Support (2)

Top management buy-in may be adequate but, in practice, it is necessary for the *airline as a whole* to also be positively involved in the humanitarian assistance concept, whether as an interested, approving onlooker or as someone who will become much more involved e.g. as a future member of the HAT; part of the airline's emergency response command and control team (HAT element) etc.

Employee support (positive 'buy-in') can be engendered in a number of ways - with the entire, holistic approach being described as something like *'embedding humanitarian assistance into the airline as a whole'*. Some of the methods which might be considered in achieving this include:

- Awareness (leaflets / brochures; intranet articles; briefings; road-shows etc.)
- Consultation (consult, obtain feedback and act on it - where appropriate / practicable)
- Education (training - both general and specific [latter e.g. for potential HAT members])
- Reward (from 'personal' reward [as a HAT member] gained from the possibility of assisting a fellow human being - to material rewards e.g. free airline tickets; access to First / Business Class airline lounges; shopping vouchers; free / subsidised holidays etc.)

Note - Some airlines have tried the concept of making it *compulsory* for *all employees* to be part of the airline's emergency response system - including provision of manpower for the HAT. Anecdotal evidence suggest that such an approach will typically *not* deliver the desired outcomes

An Adequate Plan

Once approval and support (as described above) is provided or reasonably expected to be forthcoming, it will be necessary to produce appropriate documentation to guide how the humanitarian assistance response is to be resourced and managed, operated, trained and exercised, maintained and reviewed, continually improved etc.

Such documentation is produced (for ABCX Airways) in its '**C**risis **R**esponse **P**lanning **M**anual - Part 1 (ERP) - Volume **3** / *Humanitarian Assistance Operations*' (see pages 19 and 20 again if so required?)

The most likely *author* and *owner* of the latter manual will be the manager charged with preparing his / her airline for *ALL* aspects of emergency response i.e. either a dedicated '*Crisis* (Response) *Planning Manager* - **CPM**' - or otherwise a relevant manager employed primarily on some other duty but taking on emergency response planning as a secondary (or possibly 'joint primary') role

However, if the airline is large enough and approval / support is forthcoming (including budget), it would be ideal to employ a dedicated person to manage (under the direction and supervision of the 'CPM' [see para above]) all aspects of the airline's *humanitarian assistance* accountabilities - including e.g. documentation; recruitment, maintenance and retention (of the HAT), incentives; training and exercising, actual operations etc. i.e. such person known herein as a '**HAT Manager**'

The associated 'Humanitarian Assistance Operations' manual will typically have sections covering (in no particular order):

- Executive summary / overview (Bird's Eye View)
- Introduction / concept / background / 'setting the scene'
- Definitions & associated explanatory material - providing clarity of concepts & terminology used in the plan (i.e. a glossary - possibly placed in an appendix and / or cross-referred to)
- A brief overview of the airline's overarching Emergency Response Plan (of which the 'Humanitarian Assistance Operations' manual is one of several subordinate components)
- Overview of humanitarian assistance (HA) operations *in general* (including 'self-help' and 'peer support')

- Overview of the theory of the airline's HA operations *in particular* (including command & control; operations at airports / at hospitals / at mortuaries / at emergency holding or accommodation facilities [e.g. the HAC] / in the community etc.)
- Brief overview of possible HAT involvement with 'disaster victim identification'; 'personal effects recovery' and 'repatriation of human remains' type ops (see appendix H - page 181)
- Brief overview of 'air accident investigation' ops from the HAT viewpoint
- HAT - structure, recruitment, management, administration, health, security, retention etc.
- Airline GO Team in general - and HAT involvement in particular
- HAT specific Alerting & Activation procedure for major crisis response
- HAT communications during major crisis response ops
- The Humanitarian Assistance Centre (otherwise still widely [but incorrectly] known as '*Family Assistance Centre*')
- HAT Procedures, Processes (& similar) in detail - other than those already covered above
- HAT Checklists
- HAT - training and exercising objectives / requirements etc.
- Appendices covering e.g. contact lists; vaccination requirements; compensation / claims; forms' self-care / health (physical and mental) etc.

Producing an adequate / 'fit for purpose' documented manual / plan as per above is a vital initial step. However, unless further action is then taken to bring the 'written word' to reality (manual / plan implementation) - no airline humanitarian assistance response will exist in reality

An Adequate Response Team

The 'response team' in the above title is, of course, the airline's HAT

'Who' makes up the HAT?

For a number of valid reasons (not expanded upon here) it is *strongl*y suggested that, apart from the 'HAT Manager' and *perhaps* one, possibly two other dedicated staff, the HAT is made up of trained & exercised *volunteers*. This document (the one you are reading now) continues on that assumption

At least one dedicated (non-volunteer) person should be * permanently assigned to overall manage the HAT (this has already been covered on the *previous* page). To recap, the title used in *this* document for such person is '*HAT Manager*'

  * Note, however, that many airlines will only have the resources to provide a 'job-sharing' HAT Manager

HAT volunteers can, in principle, be recruited from almost all parts of the airline (and even externally if certain requirements are met - more on this later)

Where an airline is part of e.g. a parent group (and equivalent situations) - recruitment of staff from the latter is also encouraged, where circumstances so permit / are practicable so to do

Lastly, care should be exercised here as airline etc. personnel are also required to manage / conduct other (emergency related) duties - some of which will have a 'higher' manning priority than the HAT

For a scheduled pax airline operating (i.e. main based) from an *airport* at or near the (its) *airline* HQ and / or main airline hub (e.g. British Airways at London Heathrow; Emirates in Dubai; Cathay Pacific in Hong Kong) - it is likely that the greater majority of HAT volunteers will be recruited from the geographic area near to / in the vicinity of such HQ / hub location (which is typically where they will be living). Consequently, the BA HAT could e.g. report (assemble) quite quickly for a GO Team flight (or, alternatively, ground transport where deployment by air is not required) deploying from the London area (e.g. from LHR/LGW/ STN) - with similar applying to EK in Dubai, CX in Hong Kong etc.

Conversely, (tour operator owned) charter / lease airlines, low-cost carriers etc. are likely to need to recruit their HATs from a significantly wider geographical area, due the number and generally wide dispersion of their main operating bases (and thus where many of their 'people' are / live etc.)

For example, the UK 'holiday' airline 'Thomson Airways (TUI)' recruits its HAT in relatively small numbers from each of its (many) bases located all over the UK. This creates considerable logistics and transportation problems in getting such a dispersed team to come together at the nominated (primary) GO Team departure airport (assuming deployment by air required e.g. to a destination outside UK) - which would (for reasons not expanded upon here) almost certainly be located somewhere in South East England e.g. typically London Gatwick or London Luton airports

> Note - the above three paragraphs help to explain why many *scheduled passenger airlines* can reasonably expect their GO Teams to be in the air within about *3 to 4 hours* or sooner of accident notification to airline HQ; whereas *charter* (tour / holiday) *operators* will typically be looking at around *6 to 9 hours* or sooner

There will also be considerable benefit in providing HAT training to airline and / or airline representative staff (e.g. GHAs) at *airline stations* and in *airline country / regional* (commercial) *headquarters locations*, where appropriate - thus forming an extended and geographically localised part of the airline's main (central) HAT

The above is particularly important where long travelling times from airline HQ / main hub airport to a particular station / destination are involved i.e. where it is going to take the deploying (main) airline HAT a long time to arrive 'on site' (e.g. 1 - in reality, 36 - 48 hours in extremis is possible - depending on the airline's route system e.g. 2 - ABCX Airways HQ is in UK. It flies to New Zealand!)

Further to the above, another advantage is that other (ABCX Airways) stations close / relatively close to the (ABCX Airways or other) station, at or near to which an accident occurs, might be able to deploy small numbers of their *own* HAT trained staff to assist the accident station - prior to the arrival of the main airline HAT from HQ (part of a concept which some airlines call '*Buddy Stations*'). (As per the 2 examples [last para above] Sydney, Australia [to which ABCX Airways also operates] would be an ideal [associated] Buddy Station)

Airlines can be innovative in their search for additional HAT volunteers e.g. *retired staff* (especially if already HAT trained) and trained *adult family members* (of staff) have been used by some airlines (with appropriate insurance cover; vaccinations etc. being provided by the airline - and so on). Many airlines use their company intranet, social media, newsletters etc. to 'advertise' for HAT volunteers - and also provide a quick brief on the HAT during new employee induction training - reverting to them several months later, to see if they might be interested in joining the HAT

A *very* small number of *commercial, third party* (external) *specialist organisations* offer what might be termed 'one-stop shop' emergency response services for major incidents - particularly (but not exclusively) as related to transportation type 'disasters' (predominately airline related)

Most can provide airline related humanitarian assistance type services - including provision of a HAT, set-up, management and operation of a Humanitarian (Family) Assistance Centre(s) etc.

Many airlines, unable to provide HA services themselves (for whatever reason), contract for same with such 3rd parties - and most are generally satisfied with the arrangement. Of course, there are advantages and disadvantages to this and some airlines choose a compromise whereby they have their own, *core* HAT (in relatively small numbers) - supplemented by a commercial 3rd party HAT

Where such 3rd party HAT services are deployed operationally on behalf of a customer airline, it is important that the latter (airline) retains *strategic* command & control of same. This will require an appointed airline person (and *at least* two backup persons) to become 100% familiar with the third party's HAT related plans & procedures etc. *Tactical* command and control of any 3rd party HAT deployed on behalf of the customer airline is typically delegated, by the latter, to the 3rd party

How many HAT volunteers required?

The optimum target size of an airline HAT depends on many variables, all of which should be accounted for as appropriate - typically (list is not exhaustive):

- Seating capacity of largest aircraft in airline's fleet (potential max number of *pax* air victims)
- Maximum crew size for above aircraft (potential max number of *crew* air victims)
- Size of airline (provides an indication of max manpower availability for ERP type duties)
- Support from very senior management - particularly policy approval and budget
- Type(s) of operation - scheduled; charter (tour operator); budget; executive; * cargo etc.
- Statistical PAX analyses e.g. family groups carried versus single travellers
- ** Statistical analysis - HAT 'show / no show' rate during real deployments and exercises
- Time of year (peak staff holiday times & winter sickness rates etc. = *low* HAT turnout)
- Morale, dedication and commitment of HAT members (impacts on HAT turnout)
- What duties the HAT are expected to perform
- HAT rotations i.e. replacing a complete, deployed HAT with a complete (but different) team

* Yes - you need to include cargo airlines e.g. a B747 freighter (carrying very dangerous air cargo) crashing into the middle of Mexico City!!!

** Note - 'average statistics' with regard to **volunteer 'show' rates** are probably best obtained during / via exercises. **As a real example**, one major, passenger airline came up with a statistical '**show-rate**' figure of **between 60 - 70%** after monitoring such data (via real responses and / or exercises) over a number of years

Two more factors require consideration i.e. should a deployed HAT be planned to have enough team members to support 24H ops - or can it be assumed that uninjured accident victims (and / or family, relatives and friends of such victims) will need to rest / sleep - thus permitting most HAT members (assigned to them) to also rest / sleep at the same time (typically during the local night)??? If the latter assumption is considered reasonable, a proportionally smaller sized HAT becomes an option

One must also consider other / additional HAT support operations based e.g. at airline HQ / elsewhere (i.e. other than at / near to the accident site itself) - e.g. 24H shift manning of the HAT management / support desk in the airline's Crisis Management Centre; meeting and greeting at appropriate airports / wherever; deploying in support of family, relatives and friends (i.e. at their homes / wherever) who elect not to travel to / as near as possible to the accident location etc.

For an in-depth look at one fairly robust, reliable and well-researched method of calculating the ideal size of an airline HAT - see appendix **G** - page 181

HAT Selection

The majority of persons applying to be part of an airline HAT will *initially* be 'suitable' for the role in most ways e.g. education, skills, character, stability, commitment, willing to deploy overseas, willing to face traumatic situations, personal resilience, line manager's support, family's support etc.

An unwillingness to travel overseas or face traumatic situations face to face etc. - need not bar a person from becoming a HAT member e.g. at time of crisis they can serve in administrative / support positions at airline HQ; act as 'meeters & greeters' at selected airports etc.

However, a word of caution here i.e. be aware (and applicants might not be 100% aware of this themselves) that HAT applicants may already have *overriding* airline responsibilities which bar them from HAT duties e.g. *essential* staff required to maintain *normal* and *business continuity* airline ops during a major aircraft emergency (* pilots, cabin crew and ops control staff are typical examples); e.g. staff having a *higher priority commitment within the overall airline emergency response plan* - such as manning the airline's Crisis Management Centre in non-HAT related positions etc.

It is inevitable that a small minority of applicants will not be suitable (for varying reasons) for *final* selection as a HAT member - and a strategy for 'sensitively' managing such a situation is required

> * Note - despite the comment above re pilots and cabin crew, a *relatively small number* of same *should* be actively encouraged to join the HAT - primarily in the sub-specialist role of '**peer support**'
>
> For required numbers - it is suggested that multiplying the largest number of crew (required to operate the airline's largest aircraft type in terms of passenger seating) by a factor of **3** should be good enough e.g. for a long haul, wide-body aircraft with **4** pilots and **15** cabin crew, the ideal planning size of a peer support team (for crew) should be around **15** pilots (number rounded up to nearest '5') and **45** for cabin crew. The number of HAT Peer Support members required *must be independent of (additional to) associated calculations* required to estimate the planning number (size) of the remainder (*non*-Peer Support element) of the HAT
>
> Pilot & cabin crew *managers* should typically *not* be part of the Peer Support team, as they will almost certainly have higher priority crisis and / or normal business response roles to undertake. However, they should still receive HAT training in order (at time of crisis) to adequately provide the duty of care required of them in their management roles
>
> See (page **59**) for more on 'Peer Support'

Whilst the above notes provide some guidance re HAT selection - it is strongly recommended (when setting up an airline sourced HAT *for the first time*) that the airline engages the services of a 'specialist / expert' third party organisation to *assist* in the process (e.g. mental health professionals [or equivalent], experienced in psychosocial support of 'those directly affected' post major incident / trauma). The concept here is that the airline's own HAT recruitment person(s) works with said specialist / expert organisation, until such time as he / she feels confident enough to undertake the task alone - but with continuing specialist etc. support readily and quickly available, as required

It is further recommended that the airline also engages the services of the same (or similar) specialist / expert organisation (mental health professionals etc.) to undertake and / or assist with other HA related tasks - including training, testing (exercising), supervision, expert advice and psychosocial support (the latter three probably applying during actual, deployed HAT operations i.e. such specialist / expert persons should actually travel with and support a deployed HAT 'in the field')

It will be necessary to involve the airline's HR, Legal and other departments in appropriate HAT matters as there may be implications re employment contracts, conditions of service, personal record, disciplinary record, insurance, compensation / reward / financial reimbursement, health & safety / medical / vaccinations, competence, personal privacy, legal liability etc.

Applicants' Line Managers should provide written approval in support of HAT applications. Airline policy should reflect that such approval *not* be unreasonably withheld without good reason (e.g. overriding normal business duties; higher priority emergency response duties etc.)

Adequate Resources

Budget

Some cost is obviously involved in the provision of an *integral* (i.e. airline's own) 24H airline HA response capability. However, looking at the overall constituent components of an airline emergency response plan, HA is typically cost effective relatively, as it depends on 'unpaid' volunteers

However, *adequate* budget provision must still be made of course - and this is likely to relate to the following areas - i.e. mainly those occasions when the HA response is *not* being invoked for real i.e. for most of the time (e. g. during recruitment, training & exercising etc.):

> Note - Whilst not the subject of this guideline document*, it is vital for an airline* to pre-plan and approve in principle a budget (*and take out associated insurance*) to adequately cover the costs of the potential requirements of its *entire emergency response plan* (both pre-crisis and for actual [anticipated] crisis operations) - *including the Humanitarian Assistance element*. For example, the set-up and operation of a *REAL* (longer term) airline Humanitarian (Family) Assistance Centre (associated with a relatively recent *real* catastrophic aircraft accident) resulted in a cost (to the airline involved) *for use of this facility alone* (which was a 5 star hotel) of several million US Dollars

- *Selection & Recruitment*

  Selection & recruitment will incur costs mainly related to retention of third party specialist / expert support aimed at ensuring that only suitable persons are actually recruited. As the process becomes more mature / developed with time, the services of the expert / specialist might be gradually handed over to HAT management staff. Other costs related to selection & recruitment (e.g. travel to interviews) are generally covered under other headings below

- *Training*

  A major airline operating larger, wide-body aircraft word-wide is likely to require a HAT numbering between 1,000 to 2,000 persons - possibly more, depending e.g. on aircraft seating configuration; HAT deployment options etc. All such HAT members require training (initial & recurrent) and all aspects of same also need consideration for budget purposes (including preparation, issue and maintenance of training documentation, use of training facilities and materials, travel and accommodation, meals etc.)

Again, (external) 3rd party expert support is likely to be the major cost initially - as it is recommended that such external experts conduct all HAT training until such time as the airline is in a position to take over the role itself - which might typically take up to a year or so from the date on which the first course was run. Once the airline is able to undertake the latter task itself - and if it is able to use its own training facilities - training costs should reduce accordingly

- *Exercising*

  Realistic and reasonably frequent exercising is a must if the HAT is to be able to adequately put its training into effect during a real crisis. It is anticipated that most airlines will be able to run their own exercises - keeping costs (most being related to travel, accommodation and sustenance) to a minimum

- *Medical / Health*

  The major cost here will be for vaccinations

  As an aircraft accident can occur anywhere in the world - so must the airline's 'GO Team' be capable of world-wide deployment - and by far the greater part (typically around 80%) of any GO Team will usually be the HAT

  It follows that the HAT (and all other potential GO Team members too) should maintain current and adequate vaccinations for travel to any part of the world to which the airline operates ***or flies over*** (it is generally too late to vaccinate once the GO Team has deployed - as many vaccines need time [sometimes several months] to take effect. Some vaccines also require several [separate] doses before becoming effective)

  It is an unfortunate fact that some (too many) airlines willing to fund a comprehensive GO Team - hesitate at providing or paying for comprehensive, world-wide vaccination cover for same. This is a false economy as the inability to deploy an airline GO Team (due to lack of appropriate vaccinations) is counter-productive, to say the very least

  > Note - in many cases the *full* range of required vaccinations might *not* be required - as some airline employees already require vaccinations in order to undertake their duties (e.g. aircraft crew; staff travelling regularly on duty) and many others will have been vaccinated (to a greater or lesser degree) at their own choice and expense e.g. for vacation and similar purposes

- *Travel, Accommodation, Food & Beverage etc.*

  Mainly related to recruitment, training and exercising

- *Administration*

- *Communication e.g. newsletters*

- *Rewards*

    Some airlines offer incentives to HAT members if e.g. they attend recurrent training; participate in exercises etc. Such rewards are typically of little or no cost to the airline but can really encourage team member participation. Examples of incentives include free flights and holidays; access to First & Business Class lounges; shopping vouchers etc.

    > Note - A real life example relates to a competition run by a major airline to see which *current* HAT volunteer could recommend for selection the most *new* volunteers. The actual winner's reward (which was only awarded when all selectees finally became fully trained HAT volunteers - there were about 45 of them!) was a week's holiday for said winner + family in an upmarket resort in Mauritius. The flights were provided by the airline and the hotel stay was 'donated' by an associate company

- *Miscellaneous*

    Employment of a full time airline person (*HAT* Manager) - dedicated only to planning for and overall management of the humanitarian assistance response - is *very* strongly recommended. Should such a manager be employed, this will also be a budget issue

    Whilst a dedicated airline Crisis (Response) Planning Manager *could* undertake this task as one of his / her many other duties, it would be almost impossible to manage effectively / efficiently if the size of the HAT is considerable and, consequently, such recourse is **NOT** recommended

    This situation is exacerbated if the airline's *entire* emergency response plan (including humanitarian assistance aspects) is the responsibility of a *non-dedicated* person undertaking the task as a 'secondary duty' - e.g. the airline's safety, quality or security manager

    Where an airline cannot provide an adequate *integral* (its own) HAT resource - the costs re engaging 3rd party (external) HA support must also be included in the appropriate budget, including (as already mentioned) acquisition of associated, appropriate insurance

Material Resources

The HAT requires few additional, material resources over and above those 'service resources' already identified further above. Those that *are* necessary typically include:

- *Uniform and 'Bespoke' Identification*

    Many airlines identify their HAT by means of 'uniform' - which may be essentially the same / similar as / to that worn by uniformed airline staff working e.g. as cabin crew, at airport customer facing positions etc. - or can be unique to the HAT, albeit retaining some form of parent airline branding

    It is also essential to create unique (additional) airline identification (ID card or similar) for the HAT, to include airline branding and a photograph. Somewhere on this ID document / card should be a very brief explanation of the HAT members' roles and responsibilities - with a 'request to all parties' to fully assist the HAT member in that role

    > Note - Normal airline ID should *also* be carried and displayed whilst on HAT duty

- *GO Kit*

  The airline's GO Kit comprises equipment, documentation etc. designed to support a deployed airline GO Team, for an appropriate period of time. *Part* of the GO Kit will be specific to supporting the HAT element - typically including (list is *not* exhaustive):

  - Basic Personal Protective Equipment (PPE) e.g. surgical gloves & masks; anti-bac / virus hand wash; mosquito nets; sun hats; sun cream; water purifying tablets etc.
  - First-aid kits - from basic to fully comprehensive
  - Permitted Medical supplies e.g. anti-malaria drugs; permitted pain killers etc.
  - Resilient communications e.g. satellite phone(s); mobile (smart) phones capable of sending & receiving data via e.g. video / voice, email, social media; FAX etc.
  - Portable ICT equipment e.g. laptops; printers
  - Badging equipment & associated supplies (Note - Those to whom the HAT is providing assistance at e.g. a central facility - such as a 'Humanitarian [Family] Assistance Centre' (HAC) - should be provided with identification badges. This will assist considerably with both the administration and security of such persons and the operation of the HAC facility itself)
  - Portable office equipment e.g. filing cabinets; fold-up desks and chairs etc.
  - Spares; refills; adapters, cables; batteries; chargers etc. - as appropriate
  - Appropriate (HAT emergency response related) documentation e.g. airline ERP; HAT Manual (including all appropriate procedures, checklists etc.); Crisis Contacts Directory (listing essential / useful telephone & FAX numbers; email addresses etc.)
  - Stationery - all types and in sufficient quantity

Note - it is implicit that the *HAT element* of an airline GO Team will **NOT** deploy to / operate in what might be termed 'survival conditions' and similar e.g. in harsh or hazardous terrain and / or environmental conditions; in areas where personal safety cannot be reasonably guaranteed etc.

Consequently, a deployed HAT requires some form of minimum supporting infrastructure in which to operate. This is generally not a problem at major cities, towns and airports but, where this is not the case, the HAT will require the following *minimum* operating facilities / conditions (list is not exhaustive):

- Adequate security - for both personnel and equipment. **THIS IS IMPORTANT**

- Basic accommodation / shelter - e.g. minimum of school hall; gymnasium; suitable tent(s) etc.

- Basic sustenance (food and drink). The latter must be contamination free or, in the case of water, capable of being easily de-contaminated e.g. using water purifying tablets. Type / quality of foodstuffs to be 'reasonable' (Note - the *pre-planning* expectation is typically that it will *not be possible* to cater for cultural, ethnic, religious and similar dietary requirements etc.)

- Basic sanitation (washing and toilet facilities). 'Primitive' type facilities will *not* be acceptable

- Basic health protection e.g. measures available to avoid malaria (mosquito nets available; mosquito repellents and anti-malaria drugs available; written guidance on avoiding infection etc.) and other, appropriate diseases / health hazards

- ▪ Electrical power supply essential (use of generators; solar panels etc. acceptable - as appropriate)

- ▪ Landline telephone connection highly desirable; land based IT connection highly desirable (Note - reliable telephone & IT connections via mobile, satellite or similar [e.g. 5G] networks are acceptable alternatives provided that the GO Team / HAT has ready access to them + associated hardware etc.)

    Note - the 'host organisation' (e.g. government [all levels]; police; hospitals; military; Red Cross / Crescent'; NGOs; local airlines / ground handlers / airport staff; 'faith' representatives; hotels etc.) should be requested to supply appropriate resources as per above (if / as available - which they might not be in some parts of the world) - if not already in place / otherwise available to a deployed HAT

HAT Training

All HAT members require *initial training* and, thereafter, must attend *recurrent training* as specified by the airline (typically annually). There should never be such a thing as an 'untrained HAT member'

The airline should *initially* engage the services of a third party (external) mental health expert or similar / equivalent specialist to prepare and deliver both initial and recurrent HAT training. The specialist should be familiar with the concept and operation of mass transport related humanitarian assistance operations, particularly those related to aviation. *(Such specialists do exist!)*

Perhaps the best way to find such specialist (the specialist can be an individual(s) or an organisation) is via recommendation from other airlines which have already been through the same process

Prior to commencing actual training, the airline and external specialist(s) involved should jointly agree on and prepare all training related material. They should also agree on the adequacy (fitness for purpose) of the proposed training syllabus, method(s) of training delivery to be used and a suitable means of checking that associated learning objectives have been achieved

The airline person responsible for HAT management (i.e. the HAT Manager or equivalent) should be involved in all aspects of training preparation and attend all training sessions up to the point where he / she feels confident in proficiently delivering the training him / herself. A similar concept should apply to selected *'next level below'* HAT supervisors (e.g. team leaders) in order to spread the training load and allow for trainer leave, sickness etc.

Once the airline is able to conduct its own training, it is recommended that the external specialist still be retained to *periodically audit the entire HAT training system* - including on-going assessment of all trainers. The specialist should also deliver appropriate (initial) training for all new '*prospective trainers*' joining the training team

Assuming that HAT training will be conducted in the 'traditional' (face to face) classroom way - it is suggested that *initial* training be conducted over a *minimum* of two full days in order to provide sufficient time for the appropriate syllabus to be delivered. Anything less probably means that the syllabus is not comprehensive enough for purpose (Note - significant role play will almost certainly be involved in initial training, and this takes time). As mentioned, an appropriate method of checking that learning objectives have been achieved should also be in place

Recurrent HAT training is typically undertaken annually by all HAT members (not all at the same time of course i.e. staggered training is required). It is suggested that half a day should be set aside for annual recurrent training - with a full day being required every two years.................and so on

A *separate* training regime should be available for HAT managers / subordinate managers / team leaders / trainers etc. As mentioned, all such training should be delivered by the retained third party specialist

Many airlines now use 'on-line learning' to assist with training in general e.g. it is feasible to cut face to face *initial HAT* training down to about 1 day, provided that an appropriate on-line learning package has been *pre*-studied and trainees 'tested' in same accordingly. (The '*face to face*' requirement is still necessary, however, for the *practical* element of any such training i.e. this is over and above [additional to] the academic training delivered on-line). The same concept applies to *recurrent* training

Comprehensive training records must be maintained and retained by the airline

> Note - where an airline has its own training department, the latter can potentially be of considerable assistance in the *preparation* of HAT training, especially with use of on-line training (if available)

Exercising the HAT

The process of preparing a HAT to the point where it is 'fit for purpose' (and keeping it there) involves many considerations - two of the most important being quality documentation and quality training. Hand in hand with these goes effective and efficient *exercising / testing* of all aspects of the HA concept and its actual practice

Major Exercises - HAT Involvement

Many airlines hold *major* emergency response exercises every one or two years. A 'good' exercise typically requires many months of planning, considerable resources, is as realistic as possible and 'practises' most major elements of the airline's ERP

The HAT Manager (or equivalent) must take every opportunity to involve the HA plan / HAT in such exercises, to the fullest extent possible - as this is typically the only emergency exercise where *everything* has the opportunity to get 'joined up'

In general, commercial *airports* are legally required to conduct a full scale emergency response exercise at least every two years. 'Smart' airlines will arrange for one of their own (major) emergency exercises to run concurrently with and as part of such airport exercises, if circumstances so permit (e.g. where airline concerned has a strong 'presence' at the airport conducting the exercise)

Not only will this enhance the airline's 'learning experience' as a whole, but the HAT in particular will probably be able to actually deploy to airport (and even off-airport) facilities where their services will be required (as they would be in reality). Such facilities typically include:

- Airport Uninjured (Survivor) Reception Centre(s)
- Airport Family, Relatives & Friends Reception Centre(s)
- Airport and off-airport Re-uniting Locations
- Hospital(s)
- Mortuaries / Morgues
- Off-airport facilities where uninjured victims can be held / accommodated
- Off-airport facilities (HAC / FAC) where family & friends (of all victims) can meet / be accommodated / be provided with info / be cared for etc.

Another type of major airline exercise might be based on an aircraft accident occurring e.g. 'overseas' etc. - the aim being to exercise as many aspects as practicable of *GO Team* deployment. Such exercises can (and should) extend to the point where the GO Team is *actually* on board the GO Aircraft (fully crewed, catered, flight planned etc.) - e.g. up to the point where (in reality) the pilots would be ready to start engines

As it is expected that around 80% of an airline GO Team will typically comprise the HAT - the above is an excellent opportunity to exercise HAT alerting & activation; travel to departure airport; check-in and boarding; loading of GO Kit and other professional equipment; pre-departure briefings; meet the rest of the GO Team etc.

An unavoidable disadvantage of major airline emergency response exercises is that they cannot (for a number of valid reasons) be held as often as might be considered ideal e.g. with a 1000 strong HAT (some airlines have HATs *VERY* considerably larger than this!) and a *major* exercise being held (at the very most) annually, it will take several years + before *all* HAT members get the chance to participate………………and so on, ad infinitum

HAT - Modular (Minor) Exercises

Modular HA exercises are designed to test selected *components* of the airline's overall HA operation

Such exercises are typically run every three to six months and thus give the opportunity for significantly wider HAT involvement - albeit at the cost of not being able to participate in a totally 'joined-up' exercise which tests the entire plan

Modular exercises should (over a period of around two years [i.e. about 4 different exercises]) be designed to cover the entire HA operation. They should be de-conflicted and well separated by time from any other major exercises

> Note - Comprehensive exercise reports / records must be maintained and retained by the airline

> Note - Each exercise should be followed up by 'wash-up' debriefings designed to *highlight AND deal with* issues which 'could have been done better'

Adequate Response

As per the 'purpose and scope' of this document (page 21) it is generally *not* the intention to provide *detailed* information herein - as to what might be considered to be an 'adequate response' - from the HA viewpoint

It is for the 'retained external / third party specialist' and the HAT Manager (or equivalent person[s]) to include in the airline's 'Humanitarian Assistance Operations' manual /plan (CRPM Part 1 / Volume 3) all of the information / detail etc. necessary to conduct actual HA operations to a defined, achievable level - which is commensurate with the task - i.e. an adequate (fit for purpose) response

After the latter has been successfully accomplished, adequate training / exercising (mixed in with any real HAT deployments) should do the rest

However, some limited example / sample information (e.g. a small number of typical **terms of reference**, **checklists** etc.) has been provided herein to assist in the task documented immediately above. This information can be found at Appendix B (starts page **90**). (Note - examples of typical [associated] **procedures** / **processes** have **not** been provided - but in reality, same **must** be documented, trained and exercised for of course)

Additionally, some simplistic, diagrammatic type information has been provided on pages 39 to 47, which might be of assistance in better understanding how an airline HA operation works and interrelates with other emergency responders - within and without the airline

Lastly, as it is particularly important that airline participation in *Humanitarian Assistance Centre* (HAC) operations is conducted effectively, efficiently and competently - a fair amount of *general* information on the latter has been provided herein

Adequate Supervision

As already described, an airline HA operation should be 'fit for purpose'. However, where the 'purpose' extends to mental health and similar issues, there is only so much that an airline can do i.e. typically no more than the application of '*psychological first aid - PFA*' (if so trained) in the shorter term, and only then where circumstances so warrant and (in theory at least) at the 'invitation' of the persons at which the * PFA is to be targeted

*See page 59 for explanation of term & concept - 'PFA'

Following a catastrophic aircraft accident there will no doubt be cases of *significant* psychological trauma amongst some surviving victims and also their associated Family, Relatives & Friends (FR), which can only be treated effectively by *mental health* (or equivalent) *professionals / specialists*

Associated statistics indicate that those requiring such intervention in the medium and possibly longer terms comprise a *significant minority* of all such persons so impacted. Accordingly, the airline should retain the services of a suitable 3rd party / commercial entity capable of providing such professional mental health interventions, in the required manner

Additionally (and as already mentioned earlier), such retained '3rd party' should *also* assist the airline in producing its 'HA Operations' Plan - and also conduct training and audit in / of the airline's entire HA operation, as required by the airline

During *actual* crisis response operations, such 3rd party specialist(s) *may* also be asked by the airline to supervise *certain elements* of its HAT operation. This will typically apply to situations where any particular psycho-social support task (PFA and similar) being conducted by the HAT, is deemed to require (or be bordering on) the need for specialist intervention

Where necessary, such specialist can also recommend / advise higher level intervention(s) in appropriate cases - and then (circumstances so requiring) take over and / or facilitate / supervise said intervention

IMPORTANT REMINDER

An airline's (as per ABCX Airways) emergency / crisis response will not be viable unless people (the airline's most important resource - and *which includes the HAT*) are:

Available in required *numbers + disciplines / roles / specialisations* etc. - to *adequately* operate 24 / 7 for long periods (12 hour shifts assumed)

Quickly available e.g. less than 1 to 2 hours response time on a 24 / 7 / 365 basis (airline 24H ops assumed here)

Reliably available 24 / 7 / 365

Adequately trained & exercised

Capable of rapid, worldwide deployment (selected elements [i.e. as part of a GO Team])

There are various methods which an airline can use to achieve the above requirements - *but above all else an airline must have such a system in place*, which works consistently and reliably under all circumstances envisaged

If an airline does not have such a system in place, its chances of effectively & efficiently handling any type of major crisis **WILL** be *significantly* impaired

Airline HA Operations- some diagrammatic representations

The diagram on the next page depicts the entire ABCX Airways *command and control system* applicable to the HA model used in *this* guideline document

Page 40's diagram indicates *typical locations to which the HAT might deploy* during actual operations.......... and the diagram on page 41 portrays a typical *GO Team* deployment (which will almost always include a HAT element)

Page 42 shows *initial, typical movements of uninjured, injured & deceased victims* at an accident location

Pages 43 & 44 indicates *subsequent, typical movement of uninjured, injured & deceased victims*

Pages 45 & 46 depicts *typical expected movements of associated FR* (including MGFR) - *wherever they might be at the time of and subsequent to* (in the shorter term) *accident occurrence*

Page 47 provides a simple representation of the *major communication links* associated with a catastrophic aircraft accident

ABCX Airways - **Humanitarian Assistance Team** (HAT) - **Command & Control** Schematic
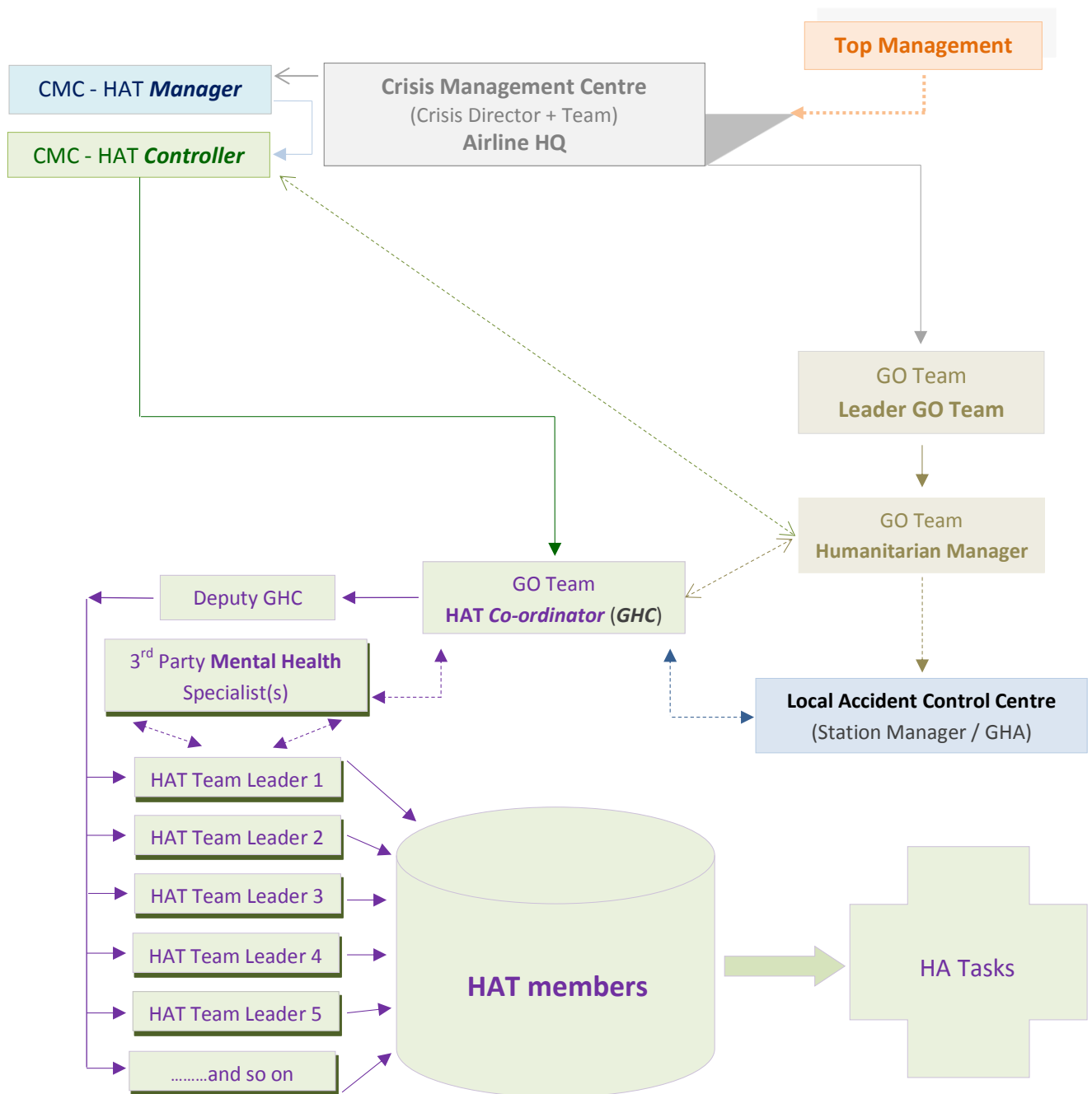
CMC = Crisis Management Centre; HA = Humanitarian Assistance; HAT = HA Team; GHC = GO Team / HAT Co-ordinator

Note - for simplicity, the above diagram does not show any engaged 3rd party (commercial / external) HA support specialists. In reality, many airlines engage such support e.g. from Aviem; Blake; Crisis-Advisors: FEI; Kenyon etc. Such 3rd parties typically deploy independently to the accident site i.e. they do not usually deploy directly with the airline GO Team (whereas engaged 3rd party mental health specialists typically do)

Catastrophic Aircraft Accident-**Humanitarian Assistance Team** (HAT) - **Typical Assignments**

Crisis Director or Leader GO Team

⬇

HAT Manager (+ HAT Controller + HAT Co-ordinator)

⬇

Airline Contracted Third Party HA Support (if any) ⟵ ⟶ HA Team Leaders

⬇

HAT Members

Alerting & Activation

⬇

Deploy to: (i.e. as **part** of a GO Team on most [*but not all*] occasions)

— **Uninjured Crew Reception Centres** (Airport Airside and / or [typically off-airport] Landside)

— **Uninjured Passenger Reception Centres** (Airport Airside and / or [typically off-airport] Landside)

— **Family, Relatives & Friends Reception Centre** (Landside - usually at or very near to the airport)

— **Re-uniting Centres** (one on-airport and the other off-airport [latter possibly part of the HAC])

— **Humanitarian Assistance Centre** (Land/Groundside - usually off-airport but typically close by)

— **Hospital(s)**

— **Mortuary / Mortuaries**

— **Homes / residences of Victims and associated Families, Relatives and Friends**

— **Peer Support** - i.e. in support of each other, other airline colleagues & external responders

— **Anywhere else as required** (e.g. JFSOC or equivalent [if set up]; airport 'meet & greet' etc.)

Catastrophic Aircraft Accident - ABCX Airways **GO Team / GO Kit / GO Aircraft**

OCC / ODM
Alert, Activate, Generate & Despatch

Leader GO Team (LGT)

Forward GO Team

Airline Air Accident Investigation Team + Support

Investigation Manager in Charge

Rear GO Team

HAT + CSUs

Deputy LGT in Charge

Forward GO Kit

Rear GO Kit

GO Kit

* HAT + CSUs

GO Aircraft Crew

Despatch - Departure Airport

GO Team Check in - Departure Airport

Load

Board

Board

GO AIRCRAFT

Target airborne time within 3 to 4 hours or *LESS* of *initial* alert to airline

Land at **GO Team Airport Nearest**

Set up **Deployed Ops Control Centre**

* + 3rd Party / External (Commercial) HAT and Local Support Services (if any)

Conduct Deployed GO Team Ops

Uninjured Holding Area

Medical Treatment Area

Deceased Holding Area

Medical Services

Airport Police / Security

Mobile **I**ncident **C**ommand **C**entre / **F**orward **C**ommand **P**ost

Accident Airline's **C**rash **S**ite **T**eam

TRIAGE AREA

Airport **F**ire & **R**escue **S**ervice

Inner Cordon

Inner Cordon

Inner Cordon

TYPICAL CRISIS RESPONSE ACTIVITIES AT / NEAR TO ACCIDENT SITE (*On airport* accident assumed)
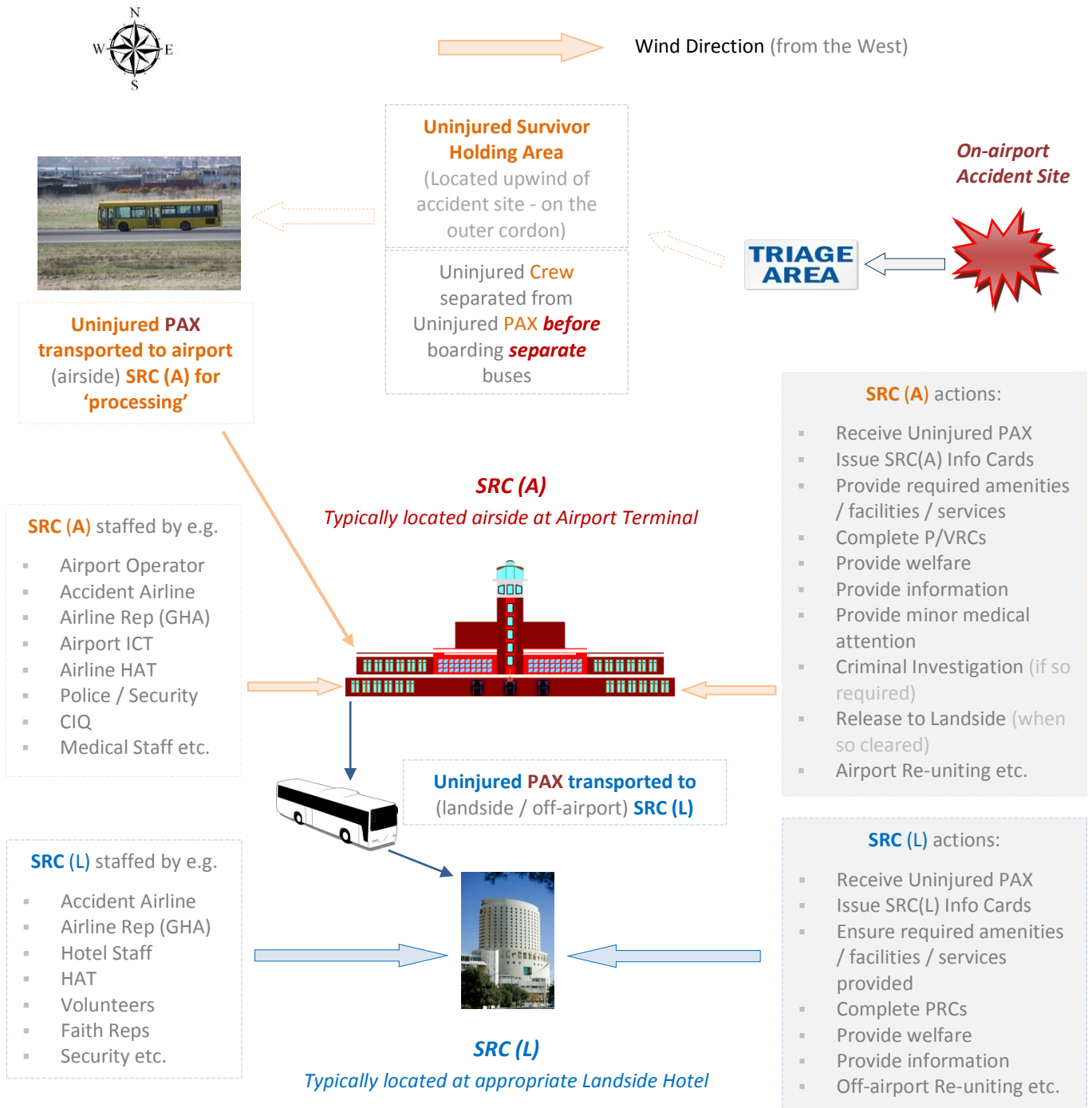
CST - This 2 person team represents the accident airline at the **MICC** / **FCP**. Amongst other things it e.g. delivers the accident flight's Crew List, PAX List & Dangerous Goods info to those needing same

The *MICC* / *FCP* conducts operational [Bronze] command & control (delegating as required) of all resources shown opposite - whilst same are operating at / near to the accident site. Each agency shown in the diagram opposite should send a liaison rep to the MICC / FCP

For simplicity, diagram is not 100% complete e.g. *outer cordon* not shown - but all agencies shown opposite [except AFRS] operate from the outer cordon; *off-airport* responding resources not shown; *Tactical* [Silver] & *Strategic* [Gold] lines of command & control etc. have been omitted for both on-airport & off-airport agencies etc.

Typical Movement of Uninjured *Passengers* from (*on-airport*) Accident Site

Wind Direction (from the West)

Uninjured Survivor Holding Area
(Located upwind of accident site - on the outer cordon)

Uninjured Crew separated from Uninjured PAX *before* boarding *separate* buses

On-airport Accident Site

TRIAGE AREA

Uninjured PAX transported to airport (airside) **SRC (A) for 'processing'**

SRC (A) actions:

- Receive Uninjured PAX
- Issue SRC(A) Info Cards
- Provide required amenities / facilities / services
- Complete P/VRCs
- Provide welfare
- Provide information
- Provide minor medical attention
- Criminal Investigation (if so required)
- Release to Landside (when so cleared)
- Airport Re-uniting etc.

SRC (A)
Typically located airside at Airport Terminal

SRC (A) staffed by e.g.

- Airport Operator
- Accident Airline
- Airline Rep (GHA)
- Airport ICT
- Airline HAT
- Police / Security
- CIQ
- Medical Staff etc.

Uninjured PAX transported to (landside / off-airport) **SRC (L)**

SRC (L) actions:

- Receive Uninjured PAX
- Issue SRC(L) Info Cards
- Ensure required amenities / facilities / services provided
- Complete PRCs
- Provide welfare
- Provide information
- Off-airport Re-uniting etc.

SRC (L) staffed by e.g.

- Accident Airline
- Airline Rep (GHA)
- Hotel Staff
- HAT
- Volunteers
- Faith Reps
- Security etc.

SRC (L)
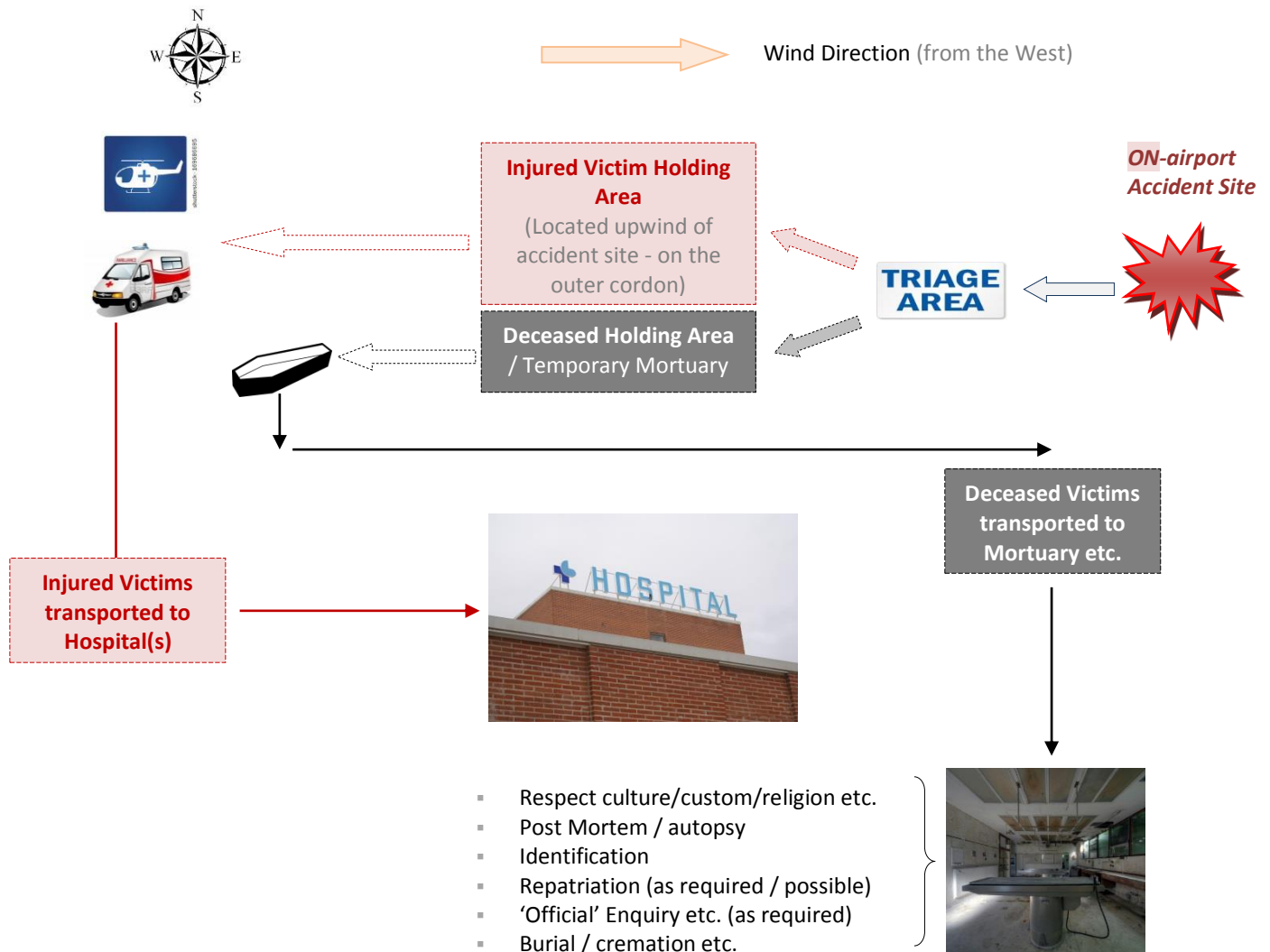### *Typically located at appropriate Landside Hotel*

Note 1 - Instead of going to the SRC (L) (*after release* from SRC [A]) uninjured **PAX** might e.g. 1. Go to other local accommodation (including local homes); 2. Carry on with journey; 3. Return to journey start point; 4. Anything else achievable (Accident airline will assist with 1. to 4. above - insofar as is possible / practicable).

Note 2 - It is highly desirable that uninjured **CREW** typically (but not always e.g. if crew are only form of assistance to uninjured PAX) remain separated from PAX after leaving the 'uninjured survivor' holding area

Typical Movement of Injured & Deceased *Victims* from (*on-airport*) Accident Site

Wind Direction (from the West)

ON-airport
Accident Site

Injured Victim Holding Area
(Located upwind of accident site - on the outer cordon)

TRIAGE AREA

Deceased Holding Area / Temporary Mortuary

Deceased Victims transported to Mortuary etc.

Injured Victims transported to Hospital(s)

HOSPITAL

- Respect culture/custom/religion etc.
- Post Mortem / autopsy
- Identification
- Repatriation (as required / possible)
- 'Official' Enquiry etc. (as required)
- Burial / cremation etc.

Notes: **1**. **PRC**s **/ VRC**s (or equivalent local forms) to be completed for hospitalised victims (if possible). **2.** P/VRCs to be completed for any accompanying, **uninjured** FR type victims (travelling companions from accident flight) also present at hospital(s). **3.** **FECs** (or equivalent local forms) to be completed for *any other* FR / MGFR present at hospital(s) - (unless any such FR / MGFR has *already* been re-united with his / her associated, hospitalised victim[s]). **4.** Apply same principles / actions (as per items **1** to **3** above) to any mortuary / mortuaries in use for **deceased** victims. **5.** The accident airline and / or its local airline reps should have enquired beforehand as to whether or not its staff and reps (e.g. the HAT) will be allowed access to the potential hospital(s) involved. If not, appropriate agreements, SOPs etc. should have been *pre*-negotiated so as to ensure that the accident airline and / or its reps is / are given access to the appropriate information, in order that it / they can carry out the appropriate humanitarian / equivalent duties. Nevertheless, in some countries / jurisdictions etc. the airline might still be denied such access / info. **6**. The latter (item 5) *might* also apply to some mortuaries. **7**. In some countries / jurisdictions / circumstances it is possible to encounter insensitive / inhumane / degrading etc. handling of the injured and (particularly) the deceased. **8**. In some countries / jurisdictions / circumstances etc. only some (or even none) of what has been written on this page can be expected to take place

Typical Movement of *MGFR* waiting at Accident Airport (+ *locally living FR* also)

- Put out PA messages for appropriate MGFR to go to appropriate airport info desk / wherever (flight number, departure airport, scheduled arrival time etc. to be provided)
- Likewise for Flight Info Display System - FIDS
- At airport info desk etc. - trained airport / airline / GHA staff 'screen' enquiring MGFR to ensure some form of 'valid' involvement with someone on board the 'accident flight'
- 'Valid' MGFR 'requested' to go to the airport's *FRRC* (pre-prepared 'map' issued)
- MGFR 'checked' again at FRRC entrance & (if still assessed as 'valid') given access

IMPORTANT - wording / actions re any of the above to be appropriately sensitive, diplomatic, compassionate etc.

- Issue FRRC 'info cards' as MGFR enter
- Briefly advise MGFR 'why they are here'
- Advise MGFR that they can typically leave FRRC at any time
- Direct MGFR to the 'unprocessed MGFR' area of the FRRC
- Complete 'FECs' with MGFR
- Direct MGFR to 'processed MGFR' area of the FRRC
- Provide MGFR with appropriate welfare (humanitarian assistance of all [available] types)
- Provide MGFR with appropriate facilities
- Provide MGFR with ongoing info updates
- When (if) possible / appropriate update MGFR on efforts to reunite them with those they were waiting to 'meet & greet'
- When FRRC closes down - brief MGFR on what 'services' might be 'available' to them next e.g. use of the airline provided '*Humanitarian* (Family) *Assistance Centre* - **HAC**

Humanitarian Assistance Centre(s)

Notes: 1. - A local **HAC** is typically set up by the accident airline ASAP after accident occurrence. Where possible, it is located in a suitable, relatively local (to the accident site) hotel(s). **2.** Airline provided / arranged HAC services should be available 24H to MGFR and other locally living FR. Such 'local' persons can opt to be accommodated in the HAC or stay at local residences. For those not choosing HAC accommodation, invitations are typically made for them to attend 'daily' HAC briefings - or otherwise to view such briefings via one or other forms of 'visual' electronic conferencing system **3.** For 'non-local' FR requiring HAC accommodation and services etc, see info on next page. **4.** In the HAC itself a wide array of humanitarian / welfare etc. assistance services should ideally be available. **5.** It is typically 'expected' of the accident airline that it meets all reasonable costs and expenses associated with HAC ops. **6.** In some countries / jurisdictions / circumstances etc. only some (or even none) of what has been written on this page can be expected to take place

Typical Movement of non-*MGFR* type / non-*local* type **Family, Relatives and Friends**

Humanitarian Assistance Centres

Notes: 1. - In the shorter term post major aircraft accident, most FR will typically be communicating with the accident airline via the latter's Emergency Call / Contact / Info Centre (ECC). Amongst many other matters, the ECC should eventually ask 'qualifying' FR (__NOT__ living relatively locally to the accident location) 'whether or not they wish to be transported to and accommodated at the airline's local HAC'? For those wishing to take-up this offer, the airline will typically arrange, manage and pay for much of what is required. **2**. - See appropriate notes on previous page for more details re the HAC itself. **3**. - It is expected that some non-local (to HAC) FR will elect *not* to take up the above offer to travel. In such circumstances the accident airline might consider (with permission of the appropriate FR) sending (for a limited duration) some of its HAT members to visit such FR in their local locations, offering appropriate humanitarian and related services. **4**. - Re **FRRC** (see previous page) and HAC ops - note that it _might_ be necessary to **additionally** set up and operate both types of centre at the origin / departure / upline airport(s) from which the accident flight departed prior to the accident occurrence at the arrival / destination / downline airport (which [latter] is what we are writing about here). Again, the accident airline and its local reps are typically responsible for so doing. **5**. - In some countries / jurisdictions / circumstances etc. only some (or even none) of what has been written on this page can be expected to take place

Catastrophic Aircraft Accident TYPICAL *COMMUNICATIONS* & *INFORMATION FLOWS*
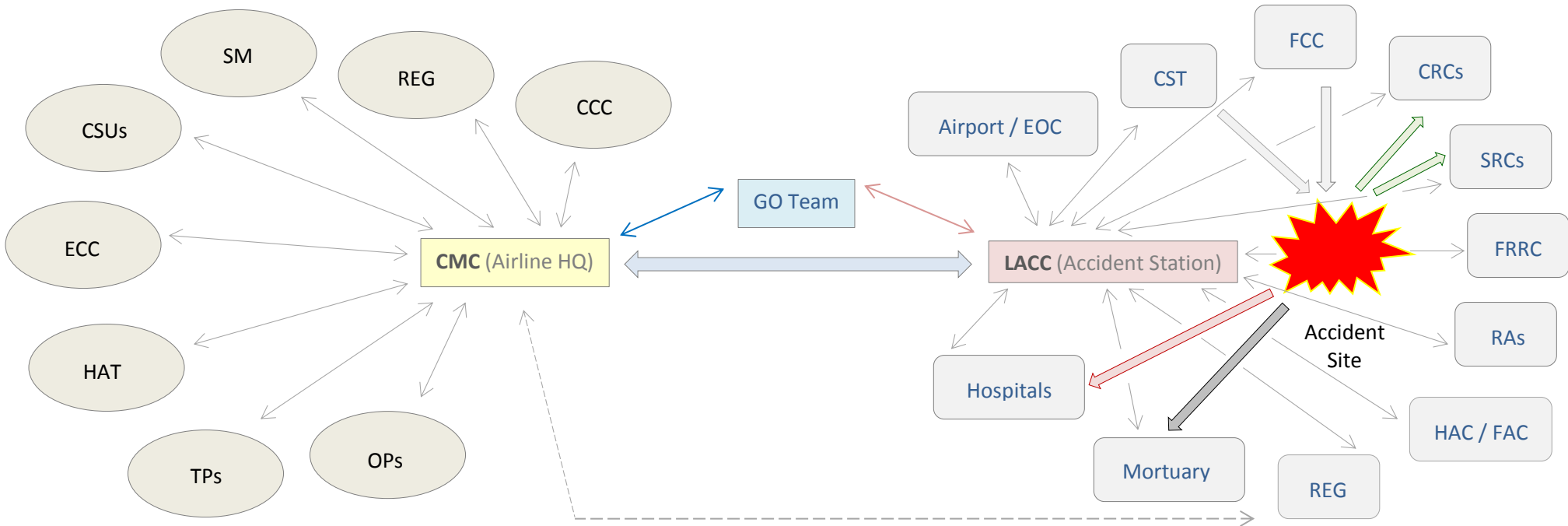
OPs = Other Parties; **REG** = Legal / Regulatory etc. **SM** = Senior Management; **TPs** = Third Parties providing accident airline with emergency response support services

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Additional Explanatory Material (Glossary)

Study of this appendix plus attachments (plus [+] the other appendices which follow on) is strongly recommended in order that the explanations, concepts etc. used in this guideline document are clearly understood

Even if you are already an experienced airline 'emergency planner / humanitarian assistance expert' - you will hopefully find study of this section useful if you are to implement this guideline effectively, efficiently and to best advantage, for your airline

App A1 - **Critical Incident Stress Management** - CISM

CISM is an intervention (support) treatment developed specifically to assist victims of traumatic events who are (or might be) suffering from related psychological trauma. It is a formal, structured and professionally recognized process for helping those involved in major incidents to share experiences, vent emotions, learn about stress reactions + their symptoms & mitigations - and to provide referral for further help, if so required. CISM providers are typically mental health professionals

There are several types of CISM intervention which can be deployed, depending on the actual circumstances. Variations can be used for dealing with groups, individuals, families and in the workplace. Two of the better known interventions are:

- CISM *Debriefing* - a proactive, confidential intervention, typically involving a *group* meeting or discussion (as appropriate) following a particularly distressing event

  It is designed to mitigate the impact of a major traumatic occurrence by assisting those affected to recover from and / or deal with the associated stress and other adverse impacts - and is typically 'facilitated' by a specifically trained (professional mental health) team or individual. It is ideally provided between around 24 to 72 hours post incident occurrence (which caused the trauma), but may be held later, where circumstances so dictate

- CISM *Defusing* - a shorter, less 'formal' version of a 'CISM debriefing'

  As with the 'debriefing', defusing is a confidential, voluntary opportunity for 'those affected' to learn about stress, share reactions to an incident and vent emotions. The main purpose is to stabilise those impacted by the incident so that they can better prepare to return to normal routines without experiencing undue stress

  Defusing is typically a *'one-on-one'* intervention lasting about 30 - 60 minutes, but may be longer. It is best conducted soon after (i.e. within a few hours) the associated major incident occurrence - but should not be used more than about 12 hours after such occurrence. Where appropriate, CISM *Debriefing* may *additionally* be offered / recommended

Note For some considerable time now a growing number of mental health experts believe that **Psychological First Aid** (PFA) (see page **59**) is the better intervention of choice (in contrast with the **major** element of CISM i.e. - *Debriefing*) to help (those affected by major crisis) to better manage (cope with) post traumatic occurrence stress - and to also assist in identifying those persons who might need additional treatment

Such experts are of the opinion that '*debriefing*' those affected (in a group setting) or asking them to recount their experiences (again, as a group) in the first week or so after a traumatic event (as per CISM *Debriefing* protocols) is **NOT** recommended - as such approach is now thought to 'have no impact' (best case scenario) or 'make things worse' (worst case scenario). Furthermore, they (such experts) think that it is important not to impose any particular method of treatment and / or a timeline for associated recovery

However, they also believe that CISM *defusing* appears to equate fairly well with *Psychological First Aid* at achieving 'what is required' and, for the purposes of this guideline document *only* (CRPM Part 1 / Volume 3), these two terms (CISM *Defusing* and *Psychological First Aid*) and their principles / concepts / efficacies etc. are treated as being generally synonymous and used interchangeably

Appendix A2 - **Humanitarian Assistance** - HA (Generic Term)

> Those activities aimed at addressing the ***practical and emotional needs*** of persons affected by major traumatic occurrences. (In the context of the document which you are now reading, the 'traumatic occurrence' relates to a catastrophic air accident type scenario or equivalent impact [aviation related] event)

Expressed more 'technically', such needs are typically categorised as:

1. Psychological & Social (*psycho-social*) Aftercare and Support - provided in the short, medium and longer terms, as required. The associated '***needs***' relate to the following:

   - **Psychological**
   - **Emotional**
   - **Social**
   - **Physical**

The table below indicates some typical human reactions in the immediate aftermath of a major traumatic occurrence. The reactions may be of variable intensity, duration and meaning. Appropriate psycho-social interventions can be provided as required / requested

Psychological	Emotional	Social	Physical
Impaired memory	Shock & numbness	Regression	Insomnia
Impaired concentration	Fear & anxiety	Withdrawal	Hyper-arousal
Confusion or disorientation	Helplessness	Irritability	Headaches
Intrusive thoughts	Hopelessness	Interpersonal conflict	Somatic problems (pain, weakness, fatigue etc.)
Disassociation or denial	Fear of recurrence	Avoidance	Reduced appetite
Lack of confidence or self-esteem	Guilt	Hyper-vigilance	Reduced energy
	Anger		

Psycho-social aftercare and support is an approach (e.g. to '*persons adversely affected*' psychologically by a major [traumatic] incident) designed to foster '*resilience*'. Its aims are to ease resumption back to 'normal life, by encouraging:

   - Self-participation in the convalescence process (whatever that might mean) ....and
   - Prevention and / or mitigation (lessening) of mental illness

'*Persons Adversely Affected*' (in the context used on the previous page) refers to those who are *directly* and adversely affected by the consequences of a major traumatic occurrence (i.e. they were 'part' of the occurrence itself in one 'way, shape or form')............... together with any other persons *indirectly* and adversely affected - being associated in some 'relevant' way with such persons directly affected. Those indirectly affected typically (but not exclusively) include family, relatives & friends (FR) of those directly affected

Note - It is important to clearly understand that crisis responders (e.g. airline staff) can also indirectly become 'persons adversely affected' - thus possibly requiring appropriate HA intervention (including psycho-social assistance) themselves - in any of its forms

'*Resilience*' (in the context used on the previous page) is the positive capacity of people to cope with stress and adversity. This 'coping' may result in the individual "bouncing back" to a previous state of normal functioning - or possibly using the experience to produce a "steeling (reinforcing) effect" and, consequently, function better than expected (in a similar way to a vaccinations giving a person the capability to better cope with future exposure to associated diseases)

Note - psycho-social support (in the context of more immediate / shorter term airline humanitarian assistance type operations) is typically provided by first responders (e.g. emergency services) and trained laypersons - particularly (for the latter) the airline's own '**Humanitarian Assistance Team**' - (**HAT**) or similar / equivalent entity

The psychological element of such support is known herein as '**Psychological First Aid**'. Providers should be appropriately trained (initial & recurrent training), exercised, supported and (where required) supervised by professional mental health specialists

Longer term / specialist psycho-social support (including treatment for mental health problems) should be administered by appropriate medical, mental health and 'social services' professionals

The airline **HAT** is additionally likely to be involved, to a greater or lesser extent, with the provision of **welfare** (see below)

2. Welfare - in all of its appropriate forms...............including:

   - Physical Needs (Medical; Health & Safety; Shelter; Sustenance etc.)
   - Personal Needs (Clothing; Transport; Finance / Money; Legal; etc.)
   - Personal Needs (Communicating e.g. with family, with other affected persons etc.)
   - Personal Needs (Directly & Indirectly Involved Family, Relatives & Friends)
   - Personal Needs (Faith & equivalent [as appropriate])
   - Security Needs (Personal; Property; Information; etc.)
   - Information Needs (General - who, what, where, when, why, how? etc.)
   - Information Needs (How to get further help, in the short, medium & longer terms?)
   - Information Needs (Investigations; inquiries; prosecutions etc.)
   - etc.

(Airline Provided) Humanitarian Assistance Centre - HAC

Reminder - the appropriate and preferred term to use here is 'Humanitarian Assistance Centre' (HAC). However, the equivalent term 'Family Assistance Centre' is still in very common airline use world-wide. Both may be used herein with the same / interchangeable meaning

Note - what is written below is based on the HAC being set up (in an appropriate facility e.g. a hotel) near to the accident site - *where the latter is assumed to be at or near to the intended* destination *airport of the accident flight*

The reader should always bear in mind, however, that it might be necessary to set-up and operate *alternative / additional* HACs concurrently in *other* locations i.e. typically near to the accident flight's departure airport - and possibly also at some third location if the aircraft accident site / location is neither at or near the destination - nor at or near the departure point

The *airline* (or equivalent facility) **HAC** is the location to which *local* (i.e. living locally to the accident location) *Family, Relatives & Friends* (FR) (including airport 'meeter & greeter type FR') of aircraft accident victims might eventually be taken (if they wish to go), once their initial processing is complete at the *'FR Reception Centre' (FRRC)* facility - latter being typically located **at the accident airport** (AND / OR near to accident site AND / OR at some other specified location, as appropriate)

The purpose of an airline HAC is to provide FR with a more comfortable and longer term environment (other than the airport and / or accident site's etc. FRRC) where the airline and others involved might typically provide them (FR) with the necessary humanitarian, welfare, information, financial and other support required (however mandated / provided for e.g. legal, regulatory, best practice, whatever)

The 'planned for' HAC should typically be located (circumstances permitting) **in one or more suitable hotels, as it is likely that it** (the HAC) **will need to accommodate large numbers of FR** (possibly 1,000 persons +) **for a significant period of time**

Activation, setup and management of a HAC are usually (*but not exclusively* - as is the case e.g. in the USA, UK and a small number of other countries) responsibilities of the accident airline and / or its local representative(s)

Local airline / airline representative / other staff and possibly 'volunteers' + others from organisations such as the Red Cross / Crescent, local 'welfare' authorities, faith representatives, other humanitarian and welfare organisations, hotel staff (as appropriate) etc. - should typically receive and handle FR at the HAC. This should continue until others e.g. the airline's own *'Humanitarian Assistance Team'* (HAT) **might** become available with time, to supplement and / or take over the task. Appropriate security should also be provided

The accident airline's HQ should send an appropriate number of its HAT personnel (if available) to manage / support the response at the local HAC. However, note well that it might take considerable time (36 to 48 hours+ in extremis) for the airline HAT to arrive 'on site' / in situ

Where the accident airline cannot (for whatever reason) provide an adequate HAT from its own (internal) resources - it should (???) have *pre*-contracted for provision of same with an appropriate 3rd party (commercial) provider of such service. This should be done 'beforehand / in advance' as all such providers will typically *not* assist unless the airline is already a contracted client

Other *FR* travelling to the accident location (post-accident) *from locations not local to the accident site* (e.g. from overseas etc.) should also be accommodated at the HAC upon arrival, if they so desire (Note that no one is 'forced' to use the HAC)

Once the airline (whoever) has made appropriate matches (if any) between accident flight victims and appropriate / associated * *local* FR, the latter (possibly [but not necessarily] located at the HAC after e.g. eventually leaving the airport FRRC) should (in 'best practice' theory) be re-united with their associated victim(s) - the latter typically (but not necessarily) being located at any / all of '*Uninjured Survivor Reception Centre(s) - Landside*' and / or *Hospitals* and / or *Mortuaries*, as appropriate (This specific paragraph assumes that immediate re-uniting [e.g. at the airport] had *not* been accomplished or had only been partly accomplished - for whatever reason)

* Same principle applies to '*non-local*' FR who decide to travel to / as near as possible to the accident location

Note - *for several <u>VERY</u> valid reasons* (not discussed here) many airlines prefer to place *uninjured* victims (requiring immediate local accommodation post aircraft accident - and in circumstances where they have been *cleared to leave the accident airport / wherever* - or similar situation) in a land-side / off-airport location (hotel if possible) which is *DIFFERENT* from the local facility used for associated FR (*i.e. different from the HAC*). The term which ABCX Airways uses for the former facility is '*Uninjured Survivor Reception Centre - Landside*'

However, note that in some jurisdictions (e.g. USA & UK) it is e.g. a legal / semi-legal / best practice requirement to initially place **both** uninjured victims **and** their associated FR in the **same** facility i.e. typically in the *HAC* or its equivalent. *This* (for all sorts of valid reasons not expanded upon here) *is <u>not</u> a good idea*!

For accidents involving many deaths, irrecoverable human remains, longer term search and rescue operations etc. - it is likely that the HAC might be operational for many days and possibly several weeks or even longer

Note - if the HAC is located in a hotel(s) - eventual costs for same can easily run into millions of US dollars! (e.g. 1000 rooms at USD$300 per night [inclusive of meals etc.] for 30 nights = $9 million - and there will also be other associated costs to account for. [Just one of several good reasons why an airline should '*insure*' against potential risks / costs etc. associated with its potential emergency response plan operations])

'ABCX Airways' Station Managers or equivalents (airline representatives e.g. GHA) should be required to *pre-identify and pre-arrange for a suitable HAC* facility / facilities as part of their local 'ABCX Airways' station emergency response plan preparation. This information should be documented in the 'ABCX Airways Emergency Response Plan' for the particular Station

Specific, government mandated procedures for the operation of a HAC / FAC (and JFSOC also in USA, UAE and some other countries - see pages 65 - 69) apply in some jurisdictions e.g. the USA and UK
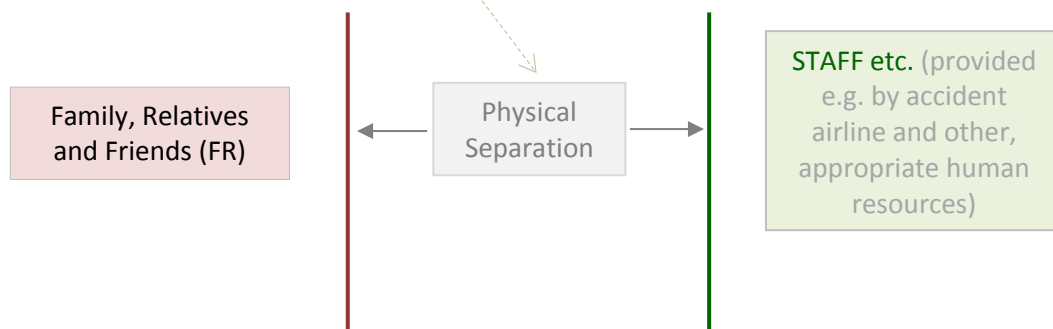
Note - for more comprehensive background information on 2 types of *real* HAC models (planned for actual use at time of major crisis) - see attachments **1** & **2** (starts page **61**) to *this* appendix A

Typical Humanitarian (Family) Assistance Centre - Simplistic Schematic Diagram
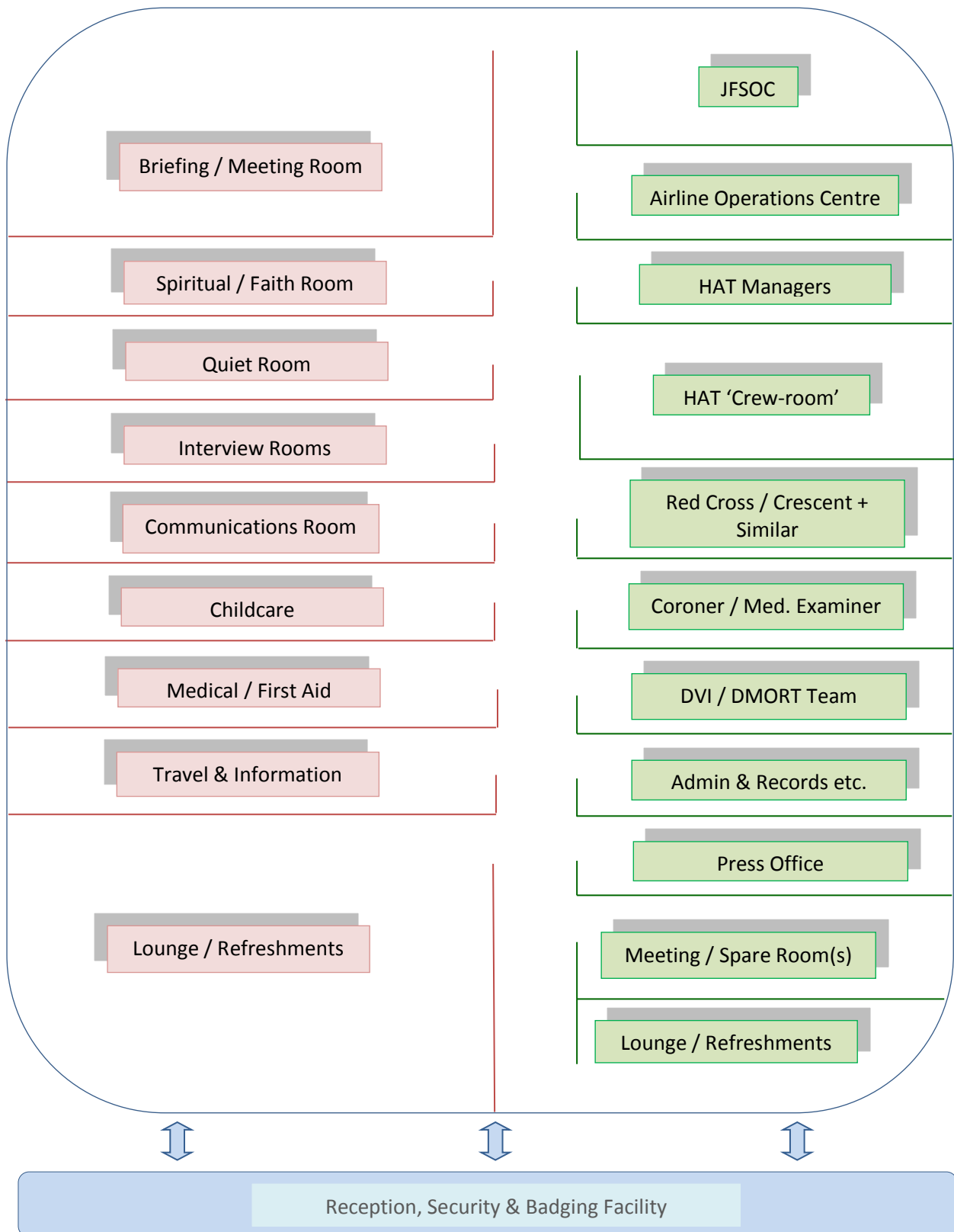
See diagram next page. Note that:

- The diagram is 'simplified and stereotypical' - but serves as an outline representation
- There *are* other ways to set up and operate a HAC
- The diagram has not been drawn to any particular scale
- Whilst only one 'interview room' is portrayed - more will be required in reality
- Not shown but understood is that appropriate accommodation (lodging) & dining facilities (both being at / within and / or near to the HAC) are available
- A HAC is typically located in (one or more) large hotel(s), large public building(s) or similar
- HACs (especially if located in hotel[s]) can be very expensive to operate over a protracted period e.g. typically running into millions of US ($) dollars
- *Separate* areas of the HAC for FR and for 'staff' use is a typical HAC 'best practice' - shown in the diagrams by colour coding (as per simple example shown immediately below and expanded example shown on the next page)
- Ideally 'staff' should be accommodated and fed etc. - in a facility / facilities *separate* from the HAC (Such staff will, however, still work [perform their various functions] at the HAC)
- For details of what a 'JFSOC' is - see info starting page 65
- DVI (DMORT in USA) refers to the 'Disaster Victim (i.e. the deceased) Identification' process
- See also associated diagram on page 64 (which portrays [in more detail] how a typical HAC is set up *in the USA*)

See Next Page

Humanitarian Assistance Centre - Typical Layout

Left side	Right side
	JFSOC
Briefing / Meeting Room	Airline Operations Centre
Spiritual / Faith Room	HAT Managers
Quiet Room	HAT 'Crew-room'
Interview Rooms	Red Cross / Crescent + Similar
Communications Room	Coroner / Med. Examiner
Childcare	DVI / DMORT Team
Medical / First Aid	Admin & Records etc.
Travel & Information	Press Office
Lounge / Refreshments	Meeting / Spare Room(s)
	Lounge / Refreshments

Reception, Security & Badging Facility

(Airline) Humanitarian Assistance Team - HAT

Reminder - the more correct, appropriate and preferred term to use here is *'Humanitarian Assistance Team'* (HAT). However, the equivalent terms *'Family or Special Assistance Team' or 'Care Team'* (amongst quite a few [other] equivalent terms) are still in common use world-wide. All may be used herein with the same meaning

An airline HAT comprises specifically trained and exercised airline and other personnel - providing / facilitating etc. the initial and on-going (generally [but not always] face to face) humanitarian, welfare, emotional, financial and other support (to crisis victims and their associated families, relatives and friends [FR]) - in the days and weeks (possibly months *or even longer* in some cases) post an emergency / crisis (typically at a 'catastrophic / disastrous' etc. type level) involving one or more of the involved airline's (i.e. the parent airline of the HAT) aircraft

Note - the HAT might respond to several different types of major emergency / crisis but, we shall be referring to the *catastrophic air accident type situation* only herein, unless stated otherwise

Assuming 24H airline ops, a HAT must be similarly 24H capable of rapid deployment. The latter could be to a location relatively local to airline HQ and / or to a destination at the other side of the world (Reminder: our 'example' airline 'ABCX Airways' operates worldwide). Accordingly, the latter's HAT must achieve and maintain a capability of rapid world-wide deployment, as an integral component of the ABCX Airways GO Team

Amongst other duties, the HAT might be described as providing *'psychological first aid - PFA'* to *victims* and *others* adversely affected, as a result of an associated traumatic occurrence

* Airline staff, including HAT members themselves, can and do (in appropriate circumstances) fall under the category of 'others'

In the *initial* phases of an *airline HQ / main operating base / main airport hub* located catastrophic aircraft accident - the HAT would typically deploy (i.e. relatively locally) to associated (Uninjured) *Crew Reception Centres*, (Uninjured) *Passenger Reception Centres*, the *RA (A)* and *RA (O)* - and the *FRRC* - typically taking over from (or augmenting) other first responders already present, as applicable. Additionally, the HAT might deploy to hospitals, mortuaries, family homes etc. (if permitted, safe, culturally acceptable so to do etc.)

Longer term, the HAT would (in most [but not all] jurisdictions) primarily be responsible for the set up & operation of the airline's *HAC* and (for *USA* operations and / or when so directed) for providing the set-up (of) plus airline representation, support, payment (at / for) a *Joint Family Support Operations Centre - JFSOC*

A potentially, significant *limitation* on the use of the HAT for deployment *away from* airline HQ / main operating base etc. (typically due to the accident location) might relate e.g. to a long duration (36 - 48 hours [possibly longer] in extremis) travelling time required (as part of a deployed ABCX Airways GO Team) to arrive at / as near as practicable to, the accident site location

To account for the latter limitation, *all* local airline / other staff (i.e. traffic, cargo, engineering, commercial and tour operator representatives etc.) at *pre-identified* ABCX Airways stations and / or associated city / town offices worldwide - should receive *abbreviated* (initial and recurrent) HAT training - so that they might 'hold the "HAT" fort' - until the 'relieving' airline HQ based HAT arrives (as part of the airline's deployed GO Team) in situ

Other limitations affecting a deployed HAT might relate to local politico / legal / security / other etc. matters, re airline involvement with humanitarian aspects of an aircraft accident response. For example, as with a major aircraft accident occurring in any of *Australia, Brazil, China,* some members (Italy, Netherlands and Spain only as at 2021) of the *EU, Japan, South Korea, the UAE, the USA* - and possibly a very small number of other countries

For HAT operations required in locations referred to / listed in the last **3** paras above (possibly with the exception of when one of them is where the airline concerned is main based / headquartered) - potentially impacted airlines should consider 'buying-in' (pre-arrange) appropriate *commercial* (3rd party) *local and / or relatively 'nearby'* Humanitarian Assistance services (if possible / available) - to represent the 'accident airline' - until such time as its own HAT (if any) can arrive 'on site'

The above is necessary due to some such countries (particularly the USA) having an expectation (legal requirement in some cases) of a *near immediate* HAT etc. type deployment (airline responsibility) in support of air accident victims and their FR, in any such country

The above concept 'works' in principle as most such 3rd party providers typically have relatively small numbers of their own (HAT equivalent [trained and exercised]) persons located in various strategic locations all around the world. This means that, in *some* circumstances, such 3rd party HAT *might* arrive in situ considerably earlier than the airline HAT - albeit in relatively small numbers initially

Moving on, note that an integral part of any airline HAT should be a *Peer Support* team - having a prime goal of linking HAT type support in a 'like on like' manner e.g. pilot to pilot; cabin crew to cabin crew; aircraft engineer to engineer etc. i.e. *volunteers from such staff categories* become trained HAT members (same training as other HAT members), deploy with the HAT in the usual way and then provide their services to their associated 'peers'

Of course, all HAT members can (and should) also offer peer support to each other and, for that matter, to all staff & other, appropriate responders (see also headed para [on the same subject] on the *next* page)

Note that whilst an airline HAT should be fully trained and exercised in its roles and responsibilities, it is prudent (probably 'essential'?) for a 3rd party (professional) *mental health* specialist(s) (pre-contracted to the airline specifically for the purpose) to also deploy with the airline GO Team. Roles might include supporting the HAT and, where directed and / or felt necessary, supervising (and / or undertaking themselves) the more 'complex / sensitive' HAT interventions with 'affected' persons

Such professionals can also provide expert intervention to HAT and other airline GO Team staff in need of same, where the already provided peer support and PFA might need further 'enhancement

Humanitarian Manager - Airline GO Team

The GO Team Humanitarian Manager will be a suitably experienced and senior airline manager, responsible to the airline's Crisis Director at airline HQ (via Leader GO Team) for overall co-ordination and control of all relevant aspects of GO Team emergency response as it relates to '*people* and *humanitarian assistance*' etc. type matters. Such manager might typically (but not necessarily) be provided by e.g. the airline's HR or Customer Services departments

Peer Support

Peer support ops (major aircraft accident context) involve airline colleagues meeting as equals - to provide each other with 'humanitarian assistance' type support, on a reciprocal and/or 'donor' basis

Typically, members of an airline's 'peer support team' are already fully trained and exercised members (i.e. a sub group) of the overarching airline Humanitarian Assistance Team (HAT) - the main difference being that the peer support team typically comprises relatively small numbers of e.g. flight crew, cabin crew and (more rarely) other groups such as aircraft engineers

The intention is, that whilst the (*non*-peer support) HAT element provides 'humanitarian assistance services' (during major crisis response ops) to passengers, ground victims and their associated families, relatives and friends etc. - the *peer support* element does likewise for crew (and other *airline* etc. staff also where appropriate) and their associated families, relatives and friends - pilot on pilot; cabin crew on cabin crew etc.

In fact, all HAT members are actually each other's 'peers'. Consequently, the act of HAT members 'defusing' each other is highly recommended. The latter can be as simple as chatting to each other after work, about the day's events, perhaps over a cup of tea or coffee etc. This equates to effective defusing (psychological first aid) at its simplest! Furthermore, HAT members might similarly support other airline staff (outside of the peer support context) and, if required, anyone else in need of same (in addition to their 'primary' customers - the latter being surviving accident victims and their FR)

Appendix A3 - **Psychological First Aid** - PFA

For information concerning PFA, refer to our *separate* 'information article' on the subject, which can be accessed as follows:

Click on the below link:

http://www.aviationemergencyresponseplan.com/information/

When link opens, scroll down the webpage displayed until you find the information article entitled:

* Information Article - Providing '**Psychological First Aid**'- Air Accident Type Situation

Click on the article to open and read

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The (USA's model of a) **Family Assistance Centre** (FAC [HAC])………………and

Joint Family Support Operations Centre (JFSOC)

Relevance: *Airline Crisis Response Ops - Assistance to Aircraft Accident Victims and their Families*

The 'original' concept and models for the FAC (HAC) & JFSOC was a direct consequence of mid 1990s United States *legislation* regarding support to major aircraft accident victims - plus their (not having been on board the 'accident flight' etc.) family, relatives & friends. The current 'evolution' (2008) version can be found by following the link in the boxed info, at the bottom of this page

This section (Att. 1 to App A) of the guideline document (i.e. the one you are reading now) relates directly to certain aspects (e.g. FAC & JFSOC) of these USA *legal* requirements - as they apply to most *air carriers* (airlines) *operating into* and / or *over* the **USA** and its *Territories*. Note that information contained herein does *not* apply to foreign air carriers (i.e. non-US airlines etc.) when *not* operating into, out of and / or over the USA and its Territories

Note - A *small* number of *countries* have one form or another of broadly / very approximately equivalent humanitarian (family) assistance type legislation, best practice, code of conduct etc. - to that of the USA - currently thought to be Australia, Brazil, China, EU (Italy, Spain and Holland only as at late 2021), Japan, South Korea, the UAE and perhaps a very small number of other countries. Where not mandated by law or in line with any best practice, code of conduct etc. many airlines have *voluntarily* adopted similar humanitarian assistance *principles* to those described just above. As such they typically incorporate the broad concept of the FAC (HAC). However, the *JFSOC* concept (or equivalent) is considerably less prevalent outside of the USA

FEDERAL FAMILY ASSISTANCE PLAN FOR *AVIATION* DISASTERS

Prepared by the United States **N**ational **T**ransportation **S**afety **B**oard

Office of **T**ransportation **D**isaster **A**ssistance

Revised December 2008

FEDERAL (publicintelligence.net)

IMPORTANT REMINDER

The information in this attachment '1' to appendix 'A' generally concerns air carrier (typically passenger carrying airlines) operations within / over the United States of America and its Territories

It is specifically related to aviation emergency response (disaster) type operations

It might be found useful (i.e. as one example of 'how it might be done') to those persons within airlines (worldwide) charged with humanitarian (family) assistance type responsibilities related to major crisis - more particularly the 'catastrophic aircraft accident / aviation disaster' type scenario

Of course, if your airline operates to / from the USA and / or its Territories - such 'compliance' with these associated, legal requirements will typically be mandatory

Info taken from APPENDIX A to: **FEDERAL FAMILY ASSISTANCE PLAN FOR AVIATION DISASTERS** - **2008**

Family Assistance Centre (FAC) Operations

The FAC (FAC) is the focus of services for family members when they travel to / arrive at (near to / as close as possible to etc.) the aircraft accident location. It is designed to meet their appropriate, immediate and shorter term needs e.g. safety, security, physiological needs (food, sleep etc.), information (e.g. search progress; victim recovery and identification process, various investigations taking place etc.), crisis / grief (psycho-social) counselling / needs etc.

Family members might also be asked to e.g. facilitate the process of gathering ante-mortem (pre-death) information re deceased victims, submitting DNA samples etc. - in order to facilitate the victim identification process etc.

The air carrier (accident airline[s]) is / are typically required to provide (and pay for) the set-up + operational and administrative support of the FAC

The FAC is typically established at an appropriate (location, size, facilities, security etc.) hotel(s) or similar. Consideration should be given to a facility that has e.g. suitable accommodation, multiple meeting rooms, a large ballroom or similar (for briefing purposes), up-to-date ICT resources, sustenance (food and beverage) provided, appropriate security provided etc.

Arrangements for the FAC are *co-ordinated jointly* by the air carrier and the US Government's National Transportation Safety Board (**NTSB**). The latter's 'Director of Transportation Disaster Assistance' (**TDA**) *manages overall FAC operations* and / or assigns a designee in her / his absence

FAC staffing should include (list is not exhaustive):

- Air carrier support team personnel (e.g. the airline's Humanitarian [Family] Assistance Team) and other airline staff, as required
- NTSB (Transport Disaster Assistance - TDA) staff
- Local law enforcement personnel (possibly the FBI also in certain circumstances)

- American Red Cross (ARC) personnel, including approved child care providers, spiritual care staff, health professionals and crisis counsellors
- Medical examiner (coroner) and staff
- Personnel designated by the medical examiner to conduct ante-mortem interviews
- Management representative(s) of personal effects contractors appointed by air carrier
- Local support agency personnel
- etc.

Certain functions take place at the FAC which must be closely managed and co-ordinated - typically:

- Safety and security - including badging of staff and family members
- NTSB briefings - typically held twice daily
- Ante-mortem interviews - conducted by medical examiner personnel or designee(s)
- Childcare, spiritual care & crisis counselling (conducted by ARC and similar)
- Death notifications - typically made by the medical examiner (coroner)

A FAC will typically remain operational until fatalities have been identified - or until families are notified that the identification process will need to continue for an extended period of time. For the latter, families will be advised to return to their homes etc. where they might be contacted (at some future point) regarding positive identifications or otherwise

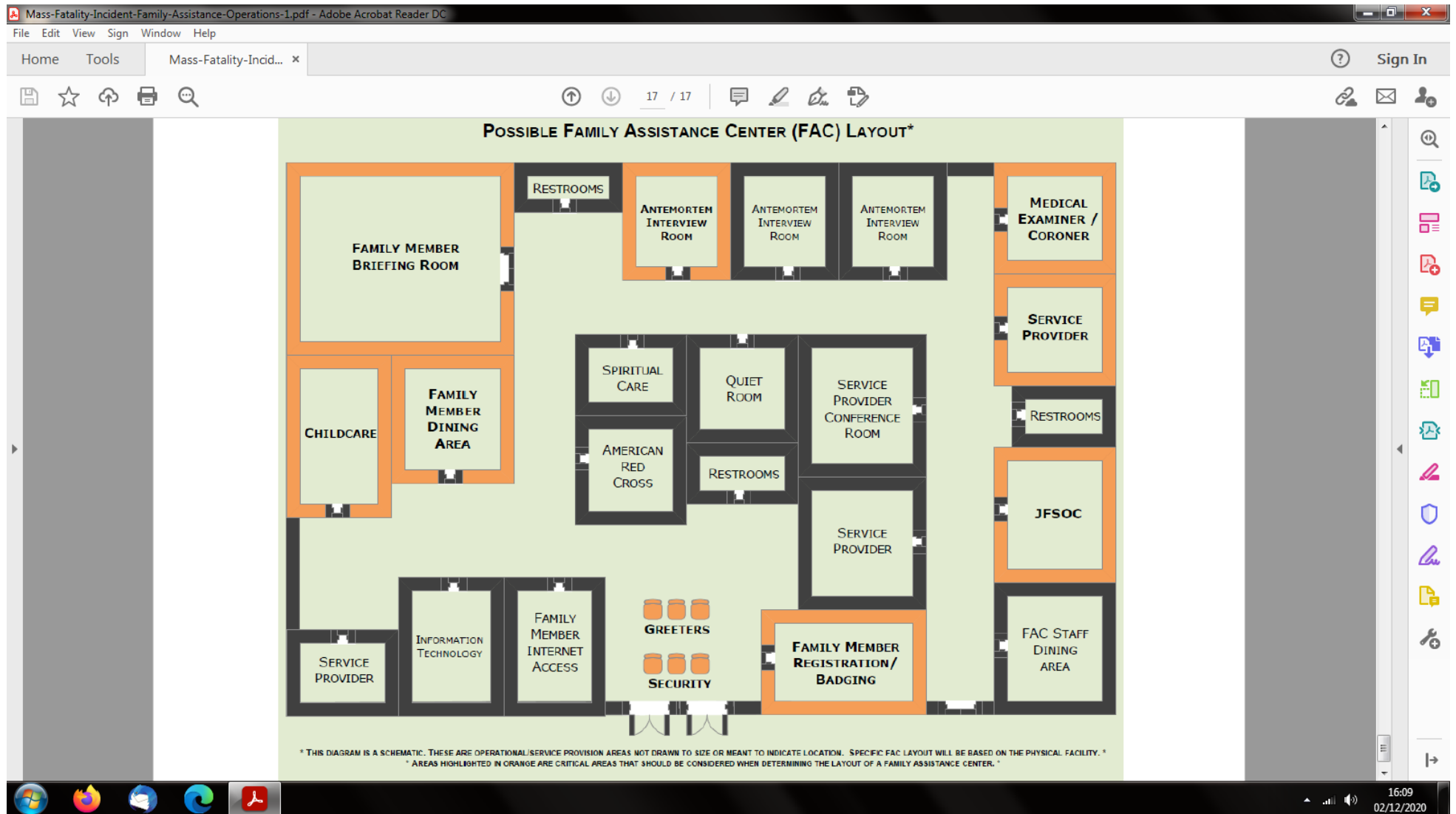It is essential that each agency in the FAC understand its role in the support of families

Not all family members will travel to / attend the FAC. If there are family members already residing in / near to the accident city / location, they will most likely visit the FAC to receive updates at the daily briefing(s) and then return home. Other family members might participate in the briefings via a telephone conference bridge / video link (known as a 'virtual FAC' service)

Simple schematic of a typical Family Assistance Centre

See next page:

POSSIBLE FAMILY ASSISTANCE CENTER (FAC) LAYOUT*

* THIS DIAGRAM IS A SCHEMATIC. THESE ARE OPERATIONAL/SERVICE PROVISION AREAS NOT DRAWN TO SIZE OR MEANT TO INDICATE LOCATION. SPECIFIC FAC LAYOUT WILL BE BASED ON THE PHYSICAL FACILITY. *
* AREAS HIGHLIGHTED IN ORANGE ARE CRITICAL AREAS THAT SHOULD BE CONSIDERED WHEN DETERMINING THE LAYOUT OF A FAMILY ASSISTANCE CENTER. *

Info taken from APPENDIX C to: **FEDERAL FAMILY ASSISTANCE PLAN FOR AVIATION DISASTERS** - **2008**

Joint Family Support Operations Centre - **JFSOC**

The JFSOC is an important element re the *centralised control and coordination of supporting organisations' responses and resources - to aviation accident victims and their families*

It is typically located in a suitable location where participating organisations can be brought together to monitor, plan, coordinate and execute a response operation, maximising the utilisation of all available resources. (Note - communication & information sharing continue to be challenges to successful emergency response ops. JFSOC ops are designed to address such challenges)

Organisations involved in the JFSOC typically include:

- NTSB (TDA)
- Air Carrier (the accident airline)
- American Red Cross
- Local Government and Law Enforcement
- Supporting Federal agencies
- Other organisations as required - depending on the extent of the disaster

The JFSOC and one or more of the organisations involved (listed above) will generally:

- Serve as the central point for co-ordination / sharing of information among participating organisations

- Monitor on-going family support activities and track mission activities (such as the status of available resources) of each organisation

- Maintain a current list of locations and key telephone numbers of participating organisations and personnel

- Manage and co-ordinate requests for services

- Maintain a daily journal (log) of organisational activities and responses

Agency representatives assigned to the JFSOC typically undertake the following tasks:

- Maintain current status of family support activities

- Prepare information for the NTSB TDA family website

- Provide information for the daily FAC family briefings - face to face and via simultaneous, virtual briefings (virtual FAC)

- Brief participating agencies daily about activities concerning family support

- Co-ordinate and share information among all organisational representatives

- Maintain locations & contact details of involved organisations along with key personnel (e.g. FAC, medical examiner, staff processing centre, NTSB investigators, air carrier, accident site, supporting organisations, national law enforcement (FBI), local law enforcement, local government etc.)

- Maintain and update daily plans, incident action plans and plans for future operations

- Maintain the status and location of injured victims

- Maintain the status of the victim identification effort, utilising info provided by medical examiner personnel and / or their designee(s)

- Update information on numbers of families at the accident city / location / FAC etc. + projected departures / arrivals (next 24 - 48 hours)

- Track the progress of ante-mortem interviews and data collection

An aviation accident may take place anywhere. Consequently, flexibility is required in planning where to establish the JFSOC, taking into consideration the location and severity of the accident. JFSOC location will also typically depend on the basis of available space e.g. in a hotel(s), local government building(s), local sports hall(s) etc.

The involved air carrier (airline) is responsible for securing space to accommodate family members, the FAC and the JFSOC. This should be a suitable hotel(s) (if possible) capable of meeting the requirements of all concerned

Although hotel space for all of the above might be at a premium, it is important that the JFSOC be co-located with (or *very* close to) the FAC, where possible. A small ballroom or large conference room is appropriate

Should the air carrier have difficulty securing space, the NTSB TSD will contact local authorities to determine the availability of alternatives

The following is a general description of the duties and responsibilities of agency representatives assigned to a JFSOC:

1. **Co-ordinator:** The JFSOC Co-ordinator represents the NTSB and is charged with managing the day-to-day JFSOC activities. The co-ordinator may direct any of the following tasks:

   - assign responsibilities to JFSOC members
   - facilitate the exchange of information among JFSOC participants
   - ensure that critical information is kept current
   - inform other participants of significant developments
   - collect information that may be used for family briefings
   - ensure that individual logs are kept current
   - coordinate with NTSB headquarters regarding information to be placed on the NTSB's special family website
   - other duties relating to the specific requirements of the accident response

2. **Deputy Coordinator:** A Deputy Coordinator may be designated to assist the Coordinator. The Deputy Coordinator may be from the air carrier or from the local emergency management agency

3. **Administrative Officer:** An Administrative Officer will assist the Coordinator with administrative functions, such as preparing drafts of documents, collecting and posting logs, assembling clips of media coverage of the accident, providing supplies / consumables - and performing other duties relating to the specific requirements of the accident response

4. **Air Carrier** (airline & similar) **Representative:** The air carrier rep serves primarily in a coordinating role for the carrier. Responsibilities include passing along information to the carrier's command centre regarding positively identified passengers (after families have been notified); addressing questions related to current and future support provided to families by the air carrier; providing updates regarding other agencies' current and future plans and developments; scheduling meetings and related agendas; maintaining a daily log; monitoring status of injured victims and numbers of family members on and off site; providing information for daily briefings to family members; updating other JFSOC participants on the carrier's activities & developments etc.

5. **Local Government Representative:** The local government representative is the coordinating point for JFSOC participants on issues of security of the morgue, FAC, hotels for family members and other designated sensitive areas. He / she is responsible for keeping his or her organisation informed of family affairs activities & meetings, updating other JFSOC participants on local government's activities & developments and maintaining a daily log of events. He / she will provide information for the daily family member briefings and identify local assets and resources to support same. He / she also assists other participants in their understanding of the local community, their leaders etc.

6. **Medical Examiner (ME) Representative:** The ME rep serves as a liaison between the victim identification activities at the morgue, the ante-mortem interview process at the FAC, and the DMORT FAC team. They may also provide information on the victim identification process at family briefings

7. **American Red Cross (ARC) Representative:** The ARC rep co-ordinates its FAC operations and the staff processing centre. Responsibilities include answering questions re current and future support provided to families and support workers; questions related to persons and organisations wanting to volunteer services or support; informing the ARC of scheduled meetings; maintaining a daily log; monitoring status of support personnel in the FAC and other sites; answering or redirecting calls from family members who may be off site; providing information for daily briefings to family members and updating other JFSOC participants regarding operational activities and developments

8. **Department of State (DOS) Representative** (if required)**:** The DOS rep serves in a coordinating role between the JFSOC and the DOS. The representative will coordinate issues involving foreign passengers and the support they will need from DOS, the victim's embassy / consulate, and other participants of the JFSOC. Other tasks include maintaining a daily log, monitoring status of foreign victims and their families, providing advice on cultural issues, answering or redirecting calls from foreign government officials, providing information for daily briefings to family members and updating other JFSOC participants on the organisation's activities and developments. If foreign consulate officials participate in the activities of the JFSOC, the DOS representative will serve as their sponsor

9. **Department of Justice (DOJ) / FBI - Office for Victim Assistance (OVA) Representative** (if required)**:** DOJ / FBI OVA will only be involved in the JFSOC when the cause of the disaster is suspected to be of criminal intent. The representative serves primarily in a coordinating and informational role for DOJ / FBI

10. **Federal Emergency Management Agency (FEMA) Representative** (if required)**:** The FEMA representative is not normally involved in the JFSOC, unless the disaster requires substantial Federal government assistance. For example, a disaster that occurs in a highly populated area causing severe structural damage and a substantial number of ground casualties will require a FEMA representative at the JFSOC. The representative will be primarily responsible for coordinating the local and State emergency management agency efforts with the family support operation

Info taken from APPENDIX D to: **FEDERAL FAMILY ASSISTANCE PLAN FOR AVIATION DISASTERS - 2008**

	JFSOC - List of Daily Status Reports Required	By?
1	Number of families notified / number pending notification	AC
2	Number of families on site / in transit to site / at home / other	AC
3	Number of total family members at the FAC hotel(s) / facility(ies)	AC
4	Number of families expected to arrive at FAC within next 24 hours	AC
5	Number of families expected to depart from FAC within next 24 hours	AC
6	Number of families (at homes) contacted by air carrier within last 24 hours	AC
7	Location and Status of injured persons + location of associated family members	AC
8	Number of families on site who have requested American Red Cross (ARC) assistance and who have received same / been contacted by the ARC within the last 24 hours	ARC
9	Number of families at home who have requested ARC assistance and who have received same / been contacted by the ARC within the last 24 hours	ARC
10	Number of workers who have received ARC assistance in last 24 hours	ARC
11	Number of emergency responders who have received ARC assistance in last 24 hours	ARC
12	Status of ante-mortem data collection and DNA reference sample processes	ME
13	Status of 'ante-mortem' and 'disposition of remains' interviews	ME
14	Status of identification efforts	ME
15	Status of families notified of positive identification	ME
16	Status of the release of human remains	ME
17	Update on assistance provided to foreign families	DOS
18	Update on assistance provided to victims and families	DOJ
19	Number of Federal support personnel on site (including DMORT and ARC personnel) - plus their locations	All
20	Remarks on daily activities	All
21	Remarks on activities scheduled for the next 24 hours	All

AC   =   Air Carrier (Airline)
ARC   =   American Red Cross
ME   =   Medical Examiner
DOS   =   Department of State
DOJ   =   Department of Justice

If your airline (*not* being a US airline) flies into / out of and / or over US territories, it is strongly recommended that the entire (current) version of the US '*FEDERAL FAMILY ASSISTANCE PLAN FOR AVIATION DISASTERS*' - be studied in depth and then acted upon

Follow link below for 2008 version. However, checks should be made for later updates before any operational, administrative or training use of same

FEDERAL (publicintelligence.net)

Note - *United Kingdom* legislation (Civil Contingencies Act 2004 - as updated) and 'best practice' provides for a similar facility (to a USA type FAC) to be set up and operated (as required) following a major UK (or UK related) emergency / crisis. This UK * equivalent of the USA's FAC concept, is the '**Humanitarian Assistance Centre**' - (**HAC**)

* Strictly speaking the UK's *HAC* relates to *any* major emergency / crisis event which requires its use (i.e. not necessarily airline / transport related - but including same, as required)

Whilst the basic concepts of FAC and HAC are similar, the UK has taken the opportunity (with the benefit of lessons learned from previous major emergencies / crises) to further develop some of the concepts to better support the intent of its own HAC concept. Just a *few* are mentioned below:

- The previously used title '*Family* Assistance Centre' was changed to '*Humanitarian* Assistance Centre'- as UK experience indicated that many persons 'involved' had previously perceived that such a facility was primarily for use by *families* only. This is obviously far from the intent of both the UK and USA systems i.e. a HAC / FAC is meant to support **ALL** (i.e. uninjured survivors; family, relatives and friends of the latter etc.) who are adversely affected by a major emergency / crisis - regardless of whether directly or indirectly involved

- Primary (legal) responsibility for setting up and operating a HAC is placed on the appropriate UK *local government* authority (i.e. not on the accident airline as in the USA). Furthermore, the accident airline is also expected to fund USA FAC operations - which is typically not the situation in UK HAC ops - which are typically government (all levels) funded

- Dedicated HAC staff recommended for dealing with the media and (separately) maintaining and operating web sites, email correspondence, social media etc.

- Whilst a 'physical' HAC should always be maintained, it was found that concurrent use of a '*virtual*' HAC can provide significant benefits

- No separate JFSOC - rather the JFSOC equivalent is already embedded within a UK HAC by design

For more info on the UK's HAC - see Attachment **2** to *this* Appendix A (Starts next page)

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The (UK model of a) **HUMANITARIAN ASSISTANCE CENTRE** (HAC) (Crown copyright acknowledged)

Relevance: Airline Crisis Response - Assistance to Aircraft Accident Victims and their Families

As already mentioned, the 'original' concept and model for a Family Assistance Centre (FAC) came about as a consequence of mid 1990s *United States* legislation re support to families of victims involved in a major aircraft accident (catastrophic aircraft accident / aviation disaster)

Whilst the US FAC model has developed over the intervening years, separate UK legislation (Civil Contingencies Act 2004 - as amended) has placed a legal requirement on certain UK 'authorities' (including all levels of government) to set up and operate a similar facility (to a US style FAC) for similar (to USA) type situations - with similar objectives. The latter is known herein by its UK title '*Humanitarian Assistance Centre* - HAC'

'*Official guidance*' (provided by the appropriate UK authorities) on how to prepare for, set up and operate a UK HAC, is the subject covered in this 'attachment 2 to Appendix A'. Its content has been taken directly (in parts) from the associated UK government publication entitled:

Humanitarian Assistance in Emergencies

Non-statutory Guidance on Establishing a Humanitarian Assistance Centre

Whilst this 'attachment 2' is a little lengthy, it *does* go some way into the type & depth of detail *that airlines must also consider* (with adaptations of course) re plans for their own HACs / FACs (i.e. when used *outside* of the UK and USA) and, consequently, the detail provided might be considered by the interested (airline) reader to be worth studying?

Note - as already mentioned, a small number of countries have similar FAC / HAC etc. legislation, regulation, codes of conduct etc. to that of the USA and UK. They currently include Australia, Brazil, China, Japan, South Korea and the UAE. Similar legislation is still (as at 2021) developing *very* slowly within European Union (EU) countries - based on a December *2010* EU regulation (e.g. Spain produced its related legislation in August 2013, Italy in late 2014 and Holland in late 2016 - there were no others as at 2021). Where *not* so mandated - *some* airlines / air carriers have *voluntarily* adopted and developed similar humanitarian assistance *principles, plans, resources etc.* to those described above - with the very firm intention of using them - if ever required

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REMINDER

The information in this Attachment 2 to App A applies to the UK only. It covers all types of major incident and is not specific to (but includes) aviation emergency response ops. It might be found useful (i.e. as an example) to those within airlines etc. charged with humanitarian assistance type responsibilities related to major crisis - particularly the catastrophic aircraft accident type scenario

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The UK's HAC MODEL - an INTRODUCTION

Focus and Structure of the Guidance

This (UK) guidance focuses on how to plan for and operate a UK based and / or operated Humanitarian Assistance Centre (HAC). It also describes how a HAC might complement other associated / related UK 'welfare type' facilities when used concurrently / near concurrently with them e.g. Survivor Reception Centres, Family and Friends Reception Centres, Rest Centres etc. Lastly, it outlines a multi-agency framework for taking this work forward

The guidance is not specific to aviation related operations but nevertheless applies to such operations (as required) in UK (and also elsewhere in the world where establishment of a UK HAC is required, in order to support the interests of British citizens involved)

Why has the name changed from FAC to HAC?

The UK's HAC concept was originally given the name (title) '*Family* Assistance Centre - FAC' (as still used in the USA, many other countries and ICAO). However, a significant lesson learned from associated major emergencies / crises around the world was that use of the word '**Family**' (in such context) might potentially lead to some of those 'directly affected / involved' (*particularl*y surviving *victims* of the emergency / crisis in question), incorrectly assuming that the 'services' of a FAC did not apply to / include them (but they do of course) – specifically due to use of the word 'family'

Consequently the title was changed to '*Humanitarian* Assistance Centre' (HAC) - the word 'humanitarian' clearly being more inclusive and unambiguous than the word 'family'

Furthermore, any operational UK HAC will typically be given a specific 'title' associated with the particular (major) emergency / crisis which it 'supports' e.g. the '*7 / 7' bombings in London in 2005* lead to the associated HAC being known as the '**J7AC**' (July 7th [Humanitarian] Assistance Centre). Such practice should assist in the facility being more readily identifiable by those needing to use it

UK (mainly [but not exclusively] government provided) organisations such as the 'Strategic Co-ordinating Group' (SCG) and the 'Humanitarian Assistance Centre Management Group' (HACMG) are responsible for *prioritisation* pre-planning for who will typically have access to / be able to use the services of a HAC, at time of associated major emergency / crisis. This is important in high, adverse impact type situations - where associated resources might become rapidly overwhelmed

A flexible approach should be taken to reflect the need for different (e.g. emergency; social / welfare; medical [general and mental health]; service provider [e.g. the accident airline itself will be one of several] etc.) services to be available during the varying stages of a major emergency / crisis and recovery process - particularly as they relate to associated HAC roles and responsibilities

Context - The 'Wider' Humanitarian Response

The consequences of a 'catastrophic' type emergency / crisis can be devastating and far-reaching for all those adversely affected, particularly survivors, worried / bereaved etc. family, relatives and friends etc. (of survivors and non-survivors) etc. - not forgetting involved emergency services, other responders and the wider community

From the outset, the relationship between such 'persons adversely affected' (in whatever way this might be manifested) and the responding agencies is crucial. To provide an effective humanitarian response, such responders must clearly understand the needs of those they might potentially be assisting at such times - and be able to draw on previous joint planning, exercising, training, real-life experience etc. to meet these needs in a joined up, people focused (humanitarian) way. Appropriate use of flexibility 'on the day' will be paramount

The highest priorities will typically be the saving of life and meeting the immediate needs of survivors (injured or not). However, associated (pre-planned) 'mechanisms' etc. must also be rapidly established to effectively provide information, support, shelter, sustenance etc. - to **ALL** others (potentially) adversely affected in some valid / associated way - including family, relatives and friends (FR) of victims; responders themselves etc.

The above response typically comprises a 'package' of care measures, involving a range of relevant agencies working together. The exact focus and nature of same will typically depend on the nature of the emergency / crisis itself, its impact(s) on those involved, their subsequent 'needs' etc. It is likely to include (as applicable) all / any of the following (list is *far* from being exhaustive):

- Info re what has happened / is known / is expected to happen (updated as required)
- Appropriate details (if any) of the condition / location etc. of appropriate persons involved (the latter being 'victims' of the associated emergency / crisis - typically having some form of relationship with the 'persons' [e.g. family, relatives and friends] to whom such 'details' are being provided / made available / being sought etc.)
- What is expected to happen 'next'? (e.g. in the near, mid, longer terms - as appropriate)
- Provision of appropriate shelter and sustenance (as required / available)
- Financial, legal etc. advice / support (as required / available)
- Emotional advice / support (as required / available)
- Logistics, travel etc. advice / support (as required / available)
- Advice on how to get further help and assistance (as required / available)
- Facilitating provision / use of the communications required (as required / available)
- Where relevant, a link to any on-going police etc. and other (e.g. 'air accident') investigations (as required / available)
- Points of contact for further and longer-term support and advice (as required / available)
- etc.

Regardless of the nature, location etc. of a major emergency / crisis event, those adversely affected (in some appropriate way) will need to know that there is somewhere where they can access timely and accurate information, advice and support

As such persons may well be in a state of shock, confused, vulnerable etc. it is vital that any such services etc. provided be well 'signposted', adequate (fit for purpose), co-ordinated, consistent, clear, provided in a safe environment etc.

Thus a HAC's primary role might be described as providing a focal point for the provision of all of the above and more. However, whilst it (the HAC) does have such a central role, remember that it forms _**only**_ one part of an overall, humanitarian response - to any particular major emergency / crisis

HAC PURPOSE

To expand on some of the aforesaid, the purpose of a HAC (with regards to some or other form of related catastrophic accident / incident / event etc. involving e.g. significant loss of life and / or some other form of similarly adverse degree human trauma etc.) is to:

- Act as a focal point for providing information, humanitarian assistance (in all appropriate forms) and broadly equivalent services to:

  - Surviving Victims (typically uninjured and slightly injured [the injured will be cared for in hospitals and the dead will eventually be transferred to mortuaries etc.])

  - Family, relatives and friends of those missing / injured / killed

  - All others otherwise directly or indirectly (adversely) affected by the accident / incident / emergency etc. *in some valid way*. The latter might include elements of the 'wider community' to a greater or lesser degree

- With regards to all of the above, facilitate a seamless, multi-agency approach to minimise duplication, prevent mistakes, avoid information gaps etc.

- With regards to all of the above, enable those adversely affected to benefit from appropriate information and assistance in a timely, co-ordinated and humanitarian manner

- With regards to all of the above and where necessary, facilitate the gathering of forensic samples in a timely manner, in order to assist any associated identification process

- With regards to all of the above, offer access to and guidance on a range of 'other' agencies and services - which might assist and allow 'those adversely involved' to make informed choices according to their specific needs

Note - in order for a viable HAC to be capable of rapid establishment it is essential to incorporate multi-agency planning

Note that a HAC is quite distinct from other (initial reception / rest 'centres') which may also be part of an associated humanitarian response (particularly [with regards to such 'other' centres] during the very early stages of an associated response). However, such 'initial' centres are expected to eventually channel individuals on to an associated HAC(s) (when established) for further support, information, guidance etc. - after which they (such initial centres) are likely to cease operations

It is vital that people are not passed on (transferred) from initial reception and / or rest centres to a HAC without their circumstances and needs firstly being fully understood and communicated accordingly. Consequently, appropriate procedures need to be developed to allow the necessary acquisition and flows of information between the various types of centre which might be set up

Also note that it is feasible for such initial centres themselves to eventually 'develop' into an associated HAC(s), in appropriate circumstances (i.e. same location / facility with 2 different [but related] roles)

Establishing and operating a HAC is a significant factor in any UK response to a wide range of major emergencies / crises etc. including terrorist incidents, *major transport incidents* (including aircraft accidents), natural disasters etc. This will better enable the appropriate authorities, responding organisations etc. to focus timely resources on providing for the needs of those most adversely affected

The HAC concept (as described above) has been primarily developed with regards to an associated emergency / crisis occurring in the UK. However, there is no reason why, if appropriate and the circumstances are suitable, some form of HAC cannot be mobilised in the UK when there are a significant number of UK citizen 'casualties' consequent to a major *overseas* emergency/ crisis. Where UK interests are paramount, and in exceptional circumstances, it is feasible that a 'UK' operated HAC can be set-up 'overseas' - provided associated permissions and 'local' support for same are forthcoming and adequate

Back to HAC 'basics' - the first consideration should be how to get HAC support to the people that need it, rather than the other way around. This is particularly pertinent e.g. where emergencies occur abroad; where they require significant use of national UK transport links etc. i.e. where UK citizens involved could be from locations all across the UK - and even further afield - and thus their (not directly involved) families, relatives and friends in UK are also more than likely to be similarly dispersed etc.

In such circumstances (as per the above para) it may be advisable to set-up a number of smaller / simpler HACs in the UK (to try to facilitate better accessibility to those that might need their associated services) instead of just the one 'major' HAC. Such 'dispersed' HACs should be provided in number and location best suited to 'actual circumstances' on the day. Effective communication links between all elements involved would be vital. (Note: We have already covered the 'overseas' situation a little further above)

When persons involved (surviving victims *and* the family, relatives and friends of *all* victims [the living and the deceased] etc.) eventually return to their homes, it will be important to ensure they receive support from their 'home' Local Authority; doctor / health services etc. - if so needed. The HAC can help put such persons in touch with such authorities and also assist in 'joining-up' the various responses, services etc. provided by different and / or neighbouring authorities

HISTORICAL EXAMPLE: The Tsunami Support Network - a virtual HAC

A few months after the Indian Ocean Tsunami (26 Sep 2004) the British Red Cross, with UK Government support, extended what had been the 'Tsunami Support Line' to become the *Tsunami Support Network* (TSN). This included a helpline; website (www.tsunamisupportnetwork.org.uk); facilitated local support groups; newsletters; national meetings etc.

UK Police Family Liaison Officers (FLOs) continued to act as points of contact for bereaved families and survivors

Over time, members of the TSN established the Tsunami Support Group UK - a self-help group operating *without* external facilitators

When should a HAC be Set-up and Operated?

During the first 48 - 72 hours or so (i.e. in the shorter term) following a major emergency / crisis, it is expected that various types of services and service centres will be established - typically:

- *Immediate emergency services operations* e.g. fire and rescue operations; medical operations; police operations - including fatality related matters etc.

- Rapid set-up and operation of a shorter term '*Survivor Reception Centre*' - for use by the *uninjured* and possibly the *slightly* injured

- Rapid set-up and operation of a shorter term '*Family, Relatives and Friends Reception Centre*' - the latter being persons having some form of personal / familial etc. relationship with emergency / crisis victims (i.e. [and as *directly associated* with the emergency / crisis] the term '*victims*' as used herein includes the dead, injured, traumatised, uninjured / slightly injured, missing etc. - but *NOT* 'Family, Relatives and Friends' etc. of such victims)

- Rapid set-up and operation of shorter term '*Rest Centres*' (provision of sustenance & shelter etc.) to all 'entitled / invited etc.' to use such centres - typically persons forced out of (evacuated from) their homes etc. by an associated emergency / crisis e.g. flooding

Whilst the last 3 facilities listed just above will be *temporary* - the first and second of those last 3 are typically expected to operate for only around the first 48 - 72 hours or so post emergency / crisis event occurrence time i.e. *in the intervening period before an associated HAC activates*

It is anticipated that such an 'intervening period' will provide sufficient time for the appropriate (government etc.) authority / authorities etc. involved to invoke their ***pre-prepared*** (trained, exercised, resourced etc.) plans for the set-up, manning and operation of an associated HAC - when so directed by an appropriate, superior authority (i.e. typically by the senior police officer [in {strategic} charge of the entire emergency / crisis response operation] - known in UK as the '**Gold Commander**')

The Following Days & Weeks (possibly longer)

The HAC (in physical and / or virtual form) may be expected to operate for a period of weeks to months - and potentially for a much longer period (particularly for a virtual HAC). During that time, it will be important to:

- Maintain a constant publicity / communications campaign to try to reach everyone who might find HAC services useful (in some way, shape or form) and to make them aware of its existence, location, functions etc.

- Develop and maintain telephone, website, social media etc. services to back up and enhance what is provided by the physical HAC (i.e. establish a 'virtual' HAC)

- Ensure that the HAC brings in additional support services as they are needed / developed / available (e.g. particular benefits packages, pro-bono [free] legal / financial help etc.)

- Formulate a plan for the eventual closure of the HAC (exit strategy)

- Consequent to eventual HAT closure, conduct an assessment of HAC effectiveness via an associated 'lessons learned' process - and (in due course) rectify all identified deficiencies

When the HAC closes, it is likely that the associated personal data generated will need to be transferred to a successor support service(s) at local, regional or national level (see Chapter xx for advice on how such data must be managed from a 'data protection' viewpoint)

The appropriate Local Government Authorities must now consider what other resources they might make available in the longer-term recovery period e.g. facilitating additional (follow-up) support; e.g. establishing help lines, mutual support networks; e.g. contributing to (attending where necessary) associated monuments, memorials, anniversaries ………… and so on

Key Factors for Consideration - by those accountable for HAC Set-up & Operation

- Put together flexible and workable multi-agency plans for a humanitarian response, including the detail for how a HAC could be set up and operated, within a period of about 48 - 72 hours, from the time that the need for same has been identified / declared

- Focus the planning on meeting the *particular* needs generated by any *specific* emergency / crisis which might reasonably be included (planned for) - and structure the HAC modelling accordingly (Not every emergency / crisis will require the same response. Accordingly, HAC implementation and operations plans must be flexible enough [and a wide enough scope] to account for same)

  The primary objective here is to find potentially the best methods possible to assist those 'in need' - in the most appropriate, effective, efficient and expedient manner possible / available - commensurate with the prevailing circumstances 'on the day' - whatever they might be

  Of course, all of this needs to be thought out and prepared in one way, shape or form beforehand *BUT*, above all, in a manner which might reasonably be expected to successfully work (at least in principle) 'on the day'

- Take action to ensure that 2 way information will 'flow' in the required / desired manner without undue delay; ensure that all forms of HAC contact information will be easily 'findable' by those who might need to use them; ensure that there will be a properly controlled and co-ordinated process for collecting, managing and retaining data from those who visit and / or contact the HAC etc.

- Produce a template for producing an associated and co-ordinated publicity and media-handling strategy, to be led by Local Authorities, working with appropriate 'specialist / professional' partners

- Calculate and establish an adequate budget (including an adequate element for 'contingencies' which might not have been originally foreseen and thus not accounted for)

- Subsequent documentation of all of the above is the next step, combined with associated and on-going training, exercising, maintenance, review, continual improvement etc.

- ……………… and so on (above list is far from being exhaustive)

THE PLANNING PHASE (What can be done in advance)

HAC - General Planning Principles

HAC related planning should be:

- *Risk-based and scalable.* Risk assessment work required as per the Civil Contingencies Act 2004 (as amended) should be used to better inform associated HAC planning preparations. Furthermore, planning should be flexible and scalable so as to allow for the delivery of a HAC (physical and / or virtual) which is anticipated to be suitable for and proportionate to 'actual circumstance on the day' (based on various [but realistic] contingency scenarios)

- *Realistic.* Establishing a HAC will be a complex undertaking requiring the co-ordination of personnel and resources provided by a wide range of organisations. It will also take time and will need to take account of other support mechanisms already in place (including rest and reception centres). This should be reflected in planning frameworks

- *Integrated.* Multi-agency planning, training, exercising etc. is crucial to effective preparation for effectively, efficiently and expediently establishing a HAC, when needed. This guidance recommends establishing a Humanitarian Assistance *sub-group* to oversee such work in the preparation phase

  Planning and preparation for delivering a HAC should not be carried out in isolation from planning for other (connected) welfare facilities / services - otherwise fragmentation, confusion etc. could result

HAC - Location

In most circumstances a HAC will need to be located in / at a physical site, at which the appropriate support, information and other required services can be located / managed etc. The responsibility for identifying, securing, documenting, facilitating etc. the use of suitable premises rests with the appropriate Local (Government) Authorities

It may not be appropriate or even desirable to locate a HAC too near to the location of an actual emergency / crisis. Rather, the emphasis should be on creating an environment which is safe, secure and private - with easy access to public transport, accommodation and other facilities, including reliable landline; mobile / smart phone; internet etc. capabilities

A number of (potential) alternative HAC sites should be identified in advance. The choices should be made with great care and special attention paid to whether they will be 'fit for purpose'. Issues to be considered include:

- Size, i.e. sufficient to accommodate its appropriate functions e.g. family briefings
- Health and Safety requirements
- Security
- Public transport links

- Communication or potential communication links
- Impact on location's normal use
- Impact on the local community
- Able to meet the additional requirements of people with disabilities (including the sensory impaired); young people and small children
- Sustainability - a HAC is likely to be a longer-term facility and on-going availability and affordability are likely to be issues
- Potential for the site to itself be subject to the emergency. HACs should not, for example, be located in high-risk flood zones

Bear in mind that more than one HAC, at different locations may be required - depending on the geographic location and scale / nature of the emergency. Other factors to be considered include:

HAC - Security

Depending on the nature of the emergency / crisis, it may be essential for the HAC to have adequate security

A full security related risk assessment should be conducted at the outset and reviewed on a regular basis. The local Police, particularly the 'Counter-Terrorism Security Advisors' in each force, can provide advice to local emergency planners on particular sites which might be subject to potential risk

Those manning and using a HAC also need to feel (and actually be) physically safe - and a range of associated issues could impact on this, including the physical location of the HAC itself e.g. locations high up in tall buildings or in isolated (possibly dangerous) parts of a city / town are unlikely to be appropriate

There will also be issues for those manning / operating / 'using' the HAC, re personal data privacy and protection

HAC - Facilities

A HAC should ideally be a 'comfortable' facility where people (requiring HAC services) can also readily access multiple areas of expertise and assistance in ways which best suits their needs. It should also be 'environmentally' suitable for the purpose (insofar as is possible / practicable, considering actual circumstances 'on the day')

Access to interpreters, people with special language skills and an informed awareness of cultural sensitivities etc. will also facilitate an integrated, inclusive response

'Planning' should have included preparation of procedures etc. necessary to permit a HAC to be opened as soon as possible / practicable after a relevant / associated 'event' occurrence. However, this needs to be managed 'on the day' such that the HAC's eventual function is not undermined by lack of adequate preparation, resources etc. (e.g. due to opening too soon)

Opening of a HAC also needs co-ordination with any other temporary centres which might have *already* been established / are functional / will be closed when the HAT becomes operational etc.

(Experience suggests that *rest and reception centres* [and / or equivalents], typically set-up ASAP following a major emergency / crisis, are able to deal with the more immediate needs of associated, involved individuals. However, within about the next 48 - 72 hours thereafter, the needs of those affected typically become more complex / demanding etc. and consequently the more sophisticated and integrated support which a HAC can provide becomes necessary)

Consideration should be given to locating some or all of the following facilities / services etc. within / as an integral part of any HAC. Not all will be required (and, some of those which are, might be delivered separately [i.e. typically from non-HAC type resources)

HAC staff will need to draw from the below list (and more) in order to meet actual circumstances 'on the day'. However, for *planning* purposes, it is necessary to identify how the following, potential requirements might be met - if deemed to be potentially necessary:

HAC - Examples of Potential Services / Service Areas and Facilities (in no particular order)

- Registration and Reception Area - where e.g. police and / or other appropriate agency (e.g. local government staff, contracted security company, trained volunteers etc.) can check the 'validity' and record details of all those attending a HAC

    These same persons could also e.g. distribute regular bulletins on the 'current situation'; provide practical resources such as pens, paper, plans of the HAC, the location of local amenities and services e.g. banks, places of worship, where to buy phone cards, public transport info................and so on

- Interview Area(s) - where 'relevant persons' can be taken in order that their enquiries are dealt with in a private and compassionate manner, with the minimum of disruption etc.

- Telephone, Internet, Social Media, Video Conferencing etc. - Access Area(s)

- Welfare Area - typically manned by suitably trained and exercised persons from e.g. adult and children's social care services, the voluntary sector, other appropriate organisations available to assist and offer associated support, whether this be in a listening role and / or to discuss, identify and respond to the needs of persons adversely affected etc.

- Quiet Area(s) - for persons needing somewhere e.g. for private time alone

- Toilet / Washroom etc. Facilities

▪ Food / Refreshment etc. Facilities - varied dietary requirements should be provided for

▪ Child / Baby-care Facilities - many families will find it difficult to attend a HAC without such a facility being available. Provision should be made e.g. for suitably qualified carers, separate crèche capability, toys for various ages, associated sanitary arrangements etc.

▪ Basic First Aid Facilities - provision for same should be made available

▪ Pets - for health and safety reasons, pets should not be allowed access to a HAC. Exceptionally, a separate pet holding area should be identified, if so required / permitted

▪ Area(s) / Rooms etc. for Staff and Responder Team Desks and / or Equivalent Arrangements (with telephone / electrical / data sockets etc.) used to accommodate required staff / 'official' personnel / volunteers etc. Such areas might typically relate to (list is *not* exhaustive):

  o 'Casualty Bureau' (a UK Police operated 'Emergency Call / Contact / Information Centre') liaison person(s)

    Important: The primary role of a UK Police Casualty Bureau is to match accident / incident etc. victims with associated family, relatives, friends etc. It typically has *no* roles / responsibilities related *directly* to the provision of 'humanitarian assistance'. This is consequently a significant factor to account for in the UK (e.g. contrast the latter with e.g. a typical *airline* 'emergency call / contact / info centre' - which *does* typically need to account for humanitarian assistance type considerations)

  o 'Family and Survivor Liaison' - a UK Police team providing up to date information about any investigation or victim recovery / identification process; provision of information and support to families prior to and during viewing of deceased at mortuaries; arrangements for accident / incident site visits, if appropriate etc. Survivors might also have questions relating to the accident / incident event which this unit might be able to assist with

  o Local Authority reps (Adult and Children's Social Care, Welfare, Benefits etc.) - available to assess the social, financial etc. needs of individuals; discuss the options available to them ………………and meet / facilitate such needs, if possible

  o Accommodation Desk. Dealing with temporary accommodation, re-housing etc.

  o Transport Desk. Dealing with travel advice; transport (e.g. to and from the HAC) …………… and also to / from other relevant facilities such as hospitals, mortuaries etc.

- o Finance Desk. For those requiring, for example, emergency financial assistance / vouchers etc. to pay for clothes, childcare, toiletries, food, travel, accommodation etc.

    If the emergency / crisis is connected to certain commercial entities e.g. transport operators (airline; rail company; passenger ship) - same might (mandated in certain circumstances for *airlines*) be able to provide some form of immediate financial assistance to 'eligible' persons

- o Representative(s) from the Coroners Service (if appropriate)

- o Voluntary sector services

- o Interpreters and signers, if necessary

- o Assistance in respect of individual and diverse requirements - including multi-faith and cultural support

Where applicable:

- o Victim Support Services

- o Criminal Injuries Compensation Authority reps

- o UK Foreign and Commonwealth Office reps - via Local Government Offices and / or Central Government + appropriate officials from foreign governments if necessary

- o Reps from *airline*/ train / bus / sea travel etc. operator 'Humanitarian Assistance' (Care) teams

- o Legal Advisors and Insurance company reps (latter possibly via the umbrella organisation - the 'Association of British Insurers - ABI')

Office space / work areas etc. in the HAC (for all such agencies listed above) should be kept separate from public areas

HAC - Additional Support

'Physical' HAC operations typically require the *additional* support (in the weeks [possibly longer] following an associated emergency / crisis) of a telephone helpline (typically available 24H), a website and some basic leafleting / printing capabilities. In some (rare) circumstances, consideration may be given to establishing an entirely virtual HAC i.e. with no physical premises

Such considerations should be built into the planning process

Voluntary organisations such as the Red Cross / Crescent can provide particular advice about running such services. The Police should also be consulted in order to ensure that no telephone lines are set up before the initial (Police) Casualty Bureau has done its job (as it is vital to avoid confusion about who to contact report information [by telephone] relevant to any associated police investigation)

Websites, Social Media sites, email and telephone forms of contact should form part of a co-ordinated communications strategy to make sure that everyone who might want to use / access the HAC is aware of its existence and has a means of accessing its services

Chapter xx provides detailed guidance on how to develop a communications strategy and the key elements it should contain

Support Telephone Lines

The purpose of a support telephone line is to offer information, advice and practical /emotional support to those adversely affected by an associated major emergency / crisis. The line should *never* be diverted to an answering machine (i.e. where the latter has no further recourse to [reliably and reasonably quickly] permit a caller to talk to a 'real' person, during that same call)

Telephone systems' should have sufficient capacity (technical and human) to deal with the potentially large numbers of calls anticipated, accounting for actual circumstances 'on the day'. This could feasibly run into the tens of thousands of calls per 24H period - and quite possibly even more

Care should be taken in finding a suitable location for operating staff e.g. such a telephone support call centre should not be located in the HAC itself (if it is still operating)

Staff employed on manning any support / helpline must have been adequately trained (initial and recurrent) and exercised on the role & facilities available at the HAC, so that they might confidently and competently offer the appropriate advice and support to callers, commensurate with the demands of the emergency / crisis

If the emergency / crisis is subject to certain Police investigations, it is recommended that Police FLOs (Family Liaison Officers) form part of any support telephone team

Websites

Many Local (Government) Authorities already have 'resilience' capabilities as part of their own 'normal business' websites - and these could be expanded in the aftermath of a major emergency / crisis event to e.g. provide associated information on the purpose and location of the HAC; indicate the HAC facilities available; provide details of any telephone helpline in place etc.

Alternatively, a specific (unique to the specific emergency / crisis) website could be created. If so, advanced planning and pre-acquisition of the appropriate resources is important so as to allow for a prompt response, a skeleton template to be pre-prepared etc.

Care should also be taken to make sure any web presence is co-ordinated and linked with all other response etc. teams which might be putting official and related information on-line in various forms - including via social media. Furthermore, some form of 'publicity campaign' will be required to facilitate how 'those in need' can quickly / easily become aware (how to find it) of such an activated website etc., what it (they) provides, how to use it (them) etc.

Cross-promotion / cross-referencing is also vital to ensure that everyone who is in need is reached. Responding partners should agree common phrasing which can be posted on all of their own websites etc.

HAC - Funding

The appropriate 'Local (Government) Authority/ies' will typically assume *ultimate* responsibility for meeting the costs of securing the use of premises and for providing the HAC itself, in the event of a 'qualifying' emergency / crisis. However, it is important to also note the need to adopt a multi-agency approach to this task, in both the planning and response phases. Local Authority 'Procurement' and 'Finance' Departments would be involved from the outset

During the planning phase such Local Authorities should consider entering into agreements with voluntary agencies to provide certain aspects of assistance in the event that a HAC is established. Where such agreements are entered into, they should be built on shared expectations as to what, if any, costs will be reimbursed - by whom to whom

Consideration should also be given to involving local businesses, as they may be well placed to donate funding and / or resources (particularly e.g. furniture and associated equipment - including ICT related)

Wherever possible, standing contracts should be entered into, since they can significantly reduce costs. Planning on a regional basis can also enable costs to be pooled

The use of pre-prepared and purpose-designed requisition / purchase order forms (and the pre-setting up of dedicated budget codes within involved departments / organisations) for use during a major emergency / crisis should be planned for, so that the cost recovery etc. from insurance companies and other emergency grant schemes, has a clear audit trail

HAC - Staffing

It is important to pre-identify and train the staff (including potential volunteers - if any) who will be responsible for providing the range of potential human services available at an activated HAC. As far as is practicable, this training should be accomplished on a multi-agency basis

Whilst (as we have seen) there will typically be a fairly wide range of services offered at the HAC (possibly augmented e.g. by agencies who are likely to supply their own staff e.g. airlines where an aircraft accident has occurred and ditto for railway operators etc.) there will also be a requirement for a core (central) staff team to be 'in overall charge' of 'everything' HAT related

It is likely that 'manpower' for the latter (in UK) will be provided by the appropriate (adults; children etc.) social services departments of the involved Local Government Authorities - typically supported by colleagues in emergency planning and communications disciplines

The police will tend to be the initial point of contact at an activated HAC and, in some cases, police Family Liaison Officers (FLOs) will be on site to 'guide' families, survivors etc. around. The 'core staff' team (mentioned just above) should work closely with such FLOs (if the latter are also deployed) - to avoid confusion; ensure a coordinated approach etc.

As mentioned earlier, all potential 'core' HAC staff are required to establish associated competency via appropriate pre-training and pre-exercising in the associated plans

'Burn-out' is a risk to be factored into planning, especially as the HAC may need to be operative for a number of weeks - or even months. It is therefore important in the planning phase to identify:

- How the additional demands on staff will be handled - for instance by working in shifts and / or putting in place a network of trained volunteers; other external providers e.g. an airline's HAT in the case of an aircraft accident etc.

- How handover procedures will operate between shifts to ensure seamless continuity of care to HAC users

- How to plan for the involvement of outside agencies at appropriate stages in the response

   For example, whilst the tendency might be to activate 'everything' immediately, some agencies might have experience, skills etc. better suited to meeting the needs of 'persons using HAC services' - some weeks or even months, further in the future. Such agencies etc. should be' built' into plan timings etc. according to their strengths and capabilities

Lastly, planning for a HAC should include arrangements to look after the short and long term needs of staff, volunteers etc. Robust support mechanisms should be in place for this purpose - both during and after (to a certain degree) such involvement

HAC Staff - Training and Exercising

Anyone designated, anticipated etc. (actually and / or potentially) to 'man' any HAC function during a major emergency / crisis response type situation, must be adequately pre-trained and pre-exercised in order to competently perform any pre-designated HAC role and / or deliver an associated HAC service

Guidance re such training is contained in the Cabinet Office (2005) 'Emergency Preparedness' document (as revised):

https://www.gov.uk/government/publications/emergency-preparedness

HAC - THE RESPONSE PHASE

The HAC 'response phase' lies outside the 'scope' of the document which you are reading right now. However, it is likely that such response would be delivered under the following, general headings:

Initiating the Response

HAC Management

Communications Strategy

Specific Roles and Responsibilities

Staff Briefings

Ground Rules

Delivery of Services

HAC Closure

Note: For the 'interested' reader, the complete UK government document upon which these last 16 pages have been loosely based - can be found by following the link immediately below:

http://www.cabinetoffice.gov.uk/sites/default/files/resources/hac_guidance.pdf

It might also be worth taking a look at the document found at the end of the below link:

https://www.london.gov.uk/sites/default/files/lrp_humanitarian_assistance_framework_v_6.2_-_public_version_june_2021.pdf

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Appendix B - to CRPM Part 1 (ERP) / Volume 3 Guideline

App. B provides some example (generic) '*terms of reference*' and *checklists* used in typical *airline* HAT operations. Appendices B1 to B3 and appendix B4.4 contain *actual* (albeit generic) information

The remainder (checklist outlines only) are blank, *but are included* **by title** *to indicate to the reader some typical checklists to also include* (fully completed of course!) when preparing HAT checklists

Note that we have included two examples with associated 'terms of reference' added i.e. appendices B1 and B4.4. All other 'example' checklists (as per appendices B2 through to B4.12) *must*, 'in reality', *also* include such associated terms of reference - so please don't forget to prepare and insert them in your own (real) HAT plans 🙂

The reader is reminded that the content of this appendix B is a 'sample' only, and a relatively limited one at that! As to why - see again the *scope* of this guideline document (page 21)

IMPORTANT NOTE 1

When *planning* / *preparing* for emergency / crisis response type ops, airlines should always work on a 'worst case scenario' type situation - and thus on a corresponding response, which adequately accounts for *all* potential aspects of such scenario(s)

Typically, a major emergency / crisis requiring some form of airline *GO Team* deployment fits (in some way, shape or form) within the scope of such a 'worst case scenario'. The following (example) checklists account accordingly for this *i.e. they relate to an airline GO Team Deployment type situation* (which will be *by air* as documented herein - unless stated / intimated otherwise)

This means that all such checklists *must* be modified in actual / real circumstances in which *no GO Team deployment is required* - the most common example of which being a major (aircraft related) crisis / emergency occurring at or very close to the associated airline's 'home (**HQ**) base' airport - and at which (for the purposes of this example only) most of its 'people' / other resources are based

The recommended way to achieve the above (but which has *not* been included / covered in the document you are reading right now [for purposes of simplicity]) might be to have 2 (two) pre-prepared versions of *each* such checklist - one for an emergency / crisis where no GO Team deployment is required - and the other used when a GO Team *is* deployed

Further to the above, all concerned (particularly HAT Manager; HAT Controllers; HAT Co-ordinators; HAT Leaders; GO Team's Humanitarian Manager; etc. [list is not exhaustive]) *must be fully familiar with the ABCX Airways GO Team Plan*. This can be found in (*separate* document) CRPM Part 1 / *Volume 5* (i.e. part of the ABCX Airways 'CRPM Part 1' series of guideline & template documents)

In particular, the Volume 5 section re *HAT deployment* *must* be fully studied / trained, understood and exercised. (Reminder: You are currently reading ABCX Airways CRPM Part 1 / *Volume 3*)

IMPORTANT NOTE 2

For the purposes of *'simplicity'* some of the subject matter (checklists) covered in this Appendix B is based on the associated emergency / crisis occurring during 'normal working hours' for ***ABCX Airways HQ*** location. However, this is statistically more than likely to ***NOT*** be the situation in reality, as ABCX Airways flights operate 24H world-wide

In contrast, the greater majority of staff at airline HQ work local weekdays only, between around 0900 - 1700 local time. Accordingly, any of the following 'example checklists' which need to be carried out in an airline HQ location context ***must be expanded / adjusted in reality*** to make them 'workable' i.e. by also allowing for the situation where an emergency / crisis occurs ***outside*** of such normal working hours

Furthermore, should an emergency / crisis occur 'outside' such normal working hours (at airline HQ), it will take considerably longer 'to get everything ready and working' than would be the case for the 'normal working hours' equivalent situation i.e. there will also be an adverse 'time factor' consideration to account for here

Lastly, the example HAT checklists following below typically relate to a context in which the 'aircraft accident' occurs at or relatively near to the ***GO Team's destination airport***. This will not always be the case e.g. an aircraft accident location might be many hundreds of miles (possibly further) from the 'best available' (possibly only) GO Team destination airport. Examples include North Pole area; South Pole area; Middle of the Pacific Ocean area; Middle of the Amazon rainforest area etc. And yes, passenger aircraft (reasonably) regularly flow over such areas! A ***real life*** example of same relates to the Air France flight 447 aircraft accident in June 2009

IMPORTANT NOTE 3

This entire CRPM Part 3 document is primarily based on our 'fictional' airline (ABCX Airways) having its own (ABCX Airways internally sourced) HAT - which is of adequate size; is well trained / exercised / equipped; for which adequate budget is provided etc.

Where this is not the case (e.g. a 3rd party 'commercial provider of HAT services is used instead e.g. airline's own HAT [if it has one] is not big / developed etc. enough to deliver 'what is required' etc.) the advice contained herein ***will require considerable modification*** by the 'user'

Lastly, it is an unfortunate fact that many airlines around the world still (today) **have absolutely zero / nil / no / nada / zilch etc. HAT capability whatsoever - not even including engagement of the outsourced** (commercial 3rd party provider) **options mentioned herein**

The following 'example' check-lists should be used as a high level (overview) **guide only**

Considerable flexibility, logic, common sense, imagination, lateral thinking, extension / more work etc. - will be required, in their scope, preparation and actual use - in conjunction with what has been expanded upon in 'IMPORTANT NOTES 1 to 3' - just above

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Appendix **B1**

EXAMPLE ONLY

Typical *Terms of Reference* (TOR) and *Checklist*

Humanitarian Manager

Responsible to Leader GO Team (LGT) for:

Tactical oversight (including co-ordination and control where required) of relevant aspects of the ABCX Airways GO Team emergency response, as they relate specifically to 'humanitarian assistance' and 'people' etc. type issues

Main Purpose of Job

- Oversee all 'on-site / local' *airline* emergency response functions related to *Humanitarian Assistance* (HA), *Personnel* & *Administration* (HR), *Employee Welfare*, *Medical*, *Health* & *Safety* and other appropriate (similar / related) functions

- Oversee (where possible / practicable / permissible etc.) establishment of *Humanitarian Assistance Centre* (HAC), (Uninjured) *Crew Reception Centre - Landside* (CRC [L]) and (Uninjured) *Passenger Reception Centre - Landside* (SRC [L]) at or near to accident location, as applicable (if not already accomplished upon arrival of GO Team)

- Oversee (where possible / practicable / permissible etc.) all aspects of management and operation of *HAC*, *CRC (L)* and *SRC (L)*, as appropriate

- Oversee (where possible / practicable / permissible / relevant etc.) *airline* aspects of management and running of *Joint Family Support Operations Centre* (JFSOC) (ideally co-located with the HAC, circumstances permitting)

- Ensure (where possible etc.) *re-uniting process* commences and / or continues, as appropriate - and oversee the effectiveness, efficiency and expediency of same from the *airline* viewpoint

- Oversee (where possible etc.) *on-going local arrangements* for the humanitarian assistance, welfare, safety, security etc. of all surviving victims; others involved directly in the accident; associated families, relatives & friends (FR); deployed and locally based airline staff etc.

- Ensure (where possible etc.) the effective, efficient, expedient and compassionate *local handling of the deceased* + their *locally present and associated FR* (in conjunction with local authorities etc. + any 3rd party organisation(s) engaged by the airline for the purpose - as appropriate)

- Ensure (where possible etc.) the effective, efficient and expedient *search for, recovery and disposition* of victims' *property*, *personal effects* etc. (in conjunction with local authorities etc. + any 3rd party organisation(s) engaged for the purpose - as appropriate)

- Oversee (where possible etc.) the *protection* of survivors, FR and airline staff *from unwanted* media / other *intrusions*

- Ensure (where possible etc.) that locally situated / located surviving victims and / or FR are provided with *timely situation briefings* (in conjunction e.g. with local authorities etc. + any 3rd party organisation(s) engaged by the airline for the purpose)

- Oversee daily *situational briefing sessions for all appropriate staff* / other relevant emergency responders, any 3rd organisation(s) engaged by the airline etc. - as required and appropriate

- Control and co-ordinate (where possible / permissible / advisable etc.) *local* efforts by the airline (as delegated by CMC and LGT) for FR *visits to the site of the accident* (in conjunction with e.g. air accident investigation authority, local authorities etc. + any 3rd party organisation(s) engaged by the airline for the purpose)

- Unless governed otherwise by law / local custom etc. or in exceptional circumstances, liaise with local authorities / media / whoever .... for them *NOT* to release the / any victim name list and other associated personal information into the 'public domain', **unless** the next-of-kin / closest relative / equivalent person etc. has been pre-notified and associated permission been given **and** the accident airline's *Crisis Director* has also authorised such release (but note well that in some parts of the world all of this is just not going to happen![i.e. it will all get released regardless])

- Determine with GO Team and / or airline HQ experts (legal, finance, insurance etc.) and relevant local staff / experts etc. an appropriate level of *immediate economic needs type payments*, together with when and how to activate payments and who (in principle) should receive them. Co-ordinate this with the CD at airline HQ - via Leader Go Team

- Ensure Finance GO Team staff, and other associated local staff, are *tracking and recording all local airline related expenditure* with regards to the emergency response

- *After consultation with appropriate FR*, (and any local 'authorities' as required) - *liaise with any 3rd party organisation*(s) engaged by the airline for the purpose - *re the conducting of memorial services and erecting of monuments etc*. - ensuring (if possible / appropriate) airline representation at all such memorial services and dedication of monuments etc.

The *Airline HQ CMC* based - *Humanitarian Assistance Team Controller* typically has * delegated *strategic* oversight of any GO Team deployed airline HAT. Such oversight is shared with the (deployed) *Leader GO Team* and, as agreed, *the HQ strategic team* of any commercial (external) 3rd parties (if any) engaged by the airline for the purpose of HA support operations

* As delegated by the CMC's '*Crisis Director*'

The *GO Team* deployed *Humanitarian Manager* typically has *tactical* oversight of any *airline* (ABCX Airways) sponsored humanitarian assistance and similar responses / operations - as related to *local* (on-site / deployed) *operations*. This typically includes delegated / transferred / shared *tactical* oversight of commercial (external) 3rd parties (if any) engaged by the airline for the purpose of HA support operations

The *GO Team* deployed *Humanitarian Assistance Team Co-ordinator* typically has *operational* oversight of any *airline* (ABCX Airways) sponsored humanitarian assistance and similar responses / operations - as related to *local* (on-site / deployed) *operations*. This typically includes delegated / transferred / shared *operational* oversight of commercial (external) 3rd parties (if any) engaged by the airline for the purpose of HA support operations

GO Team Checklists (Assumes GO Team deployment will be *by air* - which will **not** always be the case. If the latter [not by air], adapt the below checklists accordingly)

GO TEAM - Humanitarian Manager

Note - where *no* Humanitarian Manager is available to deploy with the GO Team, this checklist will be carried out by the *Leader GO Team*. The numbered (sequence) order of this checklist is advisory only

Item	Action	☑ ?
1.	Upon initial alerting & nomination - check the appropriate (pre-issued and separate) '*GO Team Quick Reference Guide*' to assist with your initial preparations	
2.	When so directed - *report to nominated departure airport* as quickly (but safely) as possible. *Check-in* for the GO Team flight as per instructions provided	
3.	Identify and *make contact with Leader GO Team* and receive any briefing update	
4.	*Board GO Aircraft* & take your reserved seat near the front of the aircraft. (During flight prepare [with LGT & other GO Team managers] a *general* action plan for arrival at destination)	
5.	*Contact & brief* Humanitarian Assistance Team (HAT) Co-ordinator	
6.	In conjunction with LGT, HAT Co-ordinator / whoever - *formulate a provisional HA specific action plan* for implementation upon arrival at final destination. Refine this plan progressively as / if more information becomes available	
7.	*On arrival* at 'GO Team airport nearest' *report for local briefing* (if any) with nominated GO Team managers (including HAT Co-ordinator [Note: Deputy LGT & remainder of GO Team remain on-board GO aircraft])	
8.	Return to GO Aircraft and *assist LGT to brief* those staff who remained on-board	
9.	Assist in management of *immediate post-arrival tasks* e.g. disembarkation; Customs / Immigration / Health clearances; off-loading, clearance and collection of GO Kit / specialist equipment / luggage etc.	
10.	Circumstances permitting & in conjunction with your HAT Co-ordinator / local expert direction / advice provided (if any) etc. - *update the HA specific action plan* as required	
11.	When applicable, possible, practicable and agreed with LGT (typically following consultations and / or clearances with / from any local government authorities and similar [e.g. local airline representative; local airport operator; local emergency & security services; local organisations such as Red Cross / Red Crescent; any external / 3rd party organisation(s) engaged by the airline for the purpose of HA support etc.]) - *oversee* (via HAT Co-ordinator) *initial deployment of the humanitarian assistance team(s)* to their various emergency response duties / locations, then adopt and adapt the *following* general responsibilities accordingly - *i.e. from item 12 of this checklist onwards*	

GO Team - Humanitarian Manager - *continued*

12.	If requested, *assist LGT* in oversight (to maximum extent possible / practicable / permitted) of matters associated with GO Team *arrival and initial preparations* at destination airport and / or at or near to the accident location - including (list is not exhaustive):
	
	    o Any other initial arrival procedures
	    o Subsequent arrival procedures
	    o Briefings (received & given) & meetings
	    o Establishing & complying with local legal, regulatory, custom, culture, best practice + any other specific & / or implicit requirements
	    o Security (personal & equipment)
	    o Transport
	    o External (3rd party) organisation(s) engaged by airline for HA support etc.
	    o *Initial* on-site crisis response / liaison / co-ordination / support ops
	    o Finance / budget / allowances / expenses / expenditure tracking
	    o Acquisition of appropriate office (working) accommodation (DOCC)
	    o Acquisition of appropriate domestic (lodging) accommodation
	    o Arrangements for sustenance (food & beverage etc.)
	    o Medical + Health & Safety matters
	    o GO Team staff welfare *in all of its forms*
	    o Anything else (there will almost certainly be lots of 'anything else'!)	

13.	Maintain *regular communications* (information in / out) with LGT, HAT Co-ordinator, the CMC's 'HAT Controller' (**CHC**) at airline HQ etc.	
14.	Ensure that you & the deployed HAT (appropriate persons) maintain *adequate logs / records of events* and details of *appropriate expenditure*	
15.	*Establish contact* with all relevant *local authorities* etc. responsible for HA (if not already done) and advise them of your roles, responsibilities & contact information (include contact info for HAT Co-ordinator also). Establish mutual support & 'exchange of information' arrangements	
16.	Ensure that full airline & other available support is offered to any *immediate reconciliation / reuniting task* (usually at or near crisis airport [as applicable]), if such processes are *still* being conducted	
17.	Ensure (insofar as is possible / permitted / available) the *initiation and / or on-going provision of psycho-social, welfare etc. type services* to all in need of same - (including GO Team staff and other crisis responders, if so required)	

GO Team - Humanitarian Manager - *continued*

18.	Report to (or arrange search, selection, negotiation, acquisition etc. for and set up / manning of [if not already established]) the *Humanitarian* (Family) *Assistance Centre* (HAC / FAC) or equivalent facility. Establish therein the airline's local * HA control & co-ordination centre /office, as appropriate - in conjunction with local authorities, HAT Co-ordinator + any external (3rd party) organisation(s) engaged by the airline for the purpose (* where appropriate and with agreement of LGT, this location / facility can also serve as the ABCX Airways - GO Team - *Deployed Operations Control Centre* - [DOCC])
19.	*Pre-invite* appropriate parties to nominate a representative to the *Joint Family Support Operations Centre - JFSOC*, when / if it is eventually established (explain JFSOC role & provide estimated date & time [+ location] of HAC / JFSOC opening - as appropriate [see also checklist item **25** further below now]. Note that many countries will not have a JFSOC capability / requirement [or equivalent]. In such circumstances aim to conduct equivalent JFSOC type ops from / as part of the deployed ABCX Airways DOCC)
20.	Unless dictated otherwise by appropriate laws, customs & culture etc. - *ensure* insofar as is locally possible & permissible - that *no victim related information is made public / issued to the media etc.* before the appropriate FR (and / or surviving victims themselves where appropriate) have first been advised & appropriate permissions obtained. CD permission is *additionally* required where fatalities are involved
21.	Ensure appropriate *support is provided to airline / associated staff operating from Hospitals & Mortuaries*. Maintain / establish etc. a regular & reliable flow of victim and FR related information to / from such locations. Guarantee appropriate medical type payments / lines of credit as required - in conjunction with GO Team Finance CSU staff and / or any specialist 3rd party organisations deployed by the airline
22.	Oversee relevant, airline aspects of *effective and efficient set up and running* of local *HAC, SRC (L) and CRC (L) etc.* and maintain / establish a reliable two way flow of crisis related information with them. Where necessary, guarantee appropriate & associated payments / lines of credit - same as per checklist item 21 above
23.	Ensure that full / agreed facilities of *HAC, SRC (L) and CRC (L) hotels or similar* (if appropriate) *are made available* to Victims and FR as appropriate - and that the airline and hotels (or similar) support to same is 100% committed, up front and 'visible'
24.	Oversee all relevant *airline* aspects of the non-immediate *local* (longer term) reconciliation (re-uniting) processes (as appropriate), to the extent permitted by local authorities, actual situation 'on the day' etc.
25.	*Set up and facilitate* (if appropriate) a *JFSOC* (JFSOC) co-located with (or otherwise near to) the HAC, if possible (JFSOC typically headed by most appropriate senior *local* authority / senior officer present i.e. *not* generally headed by the airline, but the airline typically pays for it). An appropriate airline rep(s) should attend an activated JFSOC
26.	Obtain CD's policy on *transport of non-local FR to* (or as near as practicable to) where the GO Team is based and (if appropriate) oversee all *local* (where GO Team is based) airline aspects of managing same - including general welfare (Such FR to be accommodated in HAC where possible / available)
27.	Where so permittee, oversee arrangements and conduct for / of *regular FR / surviving victim briefs* in HAC, SRC (L), CRC (L), Hospitals, wherever (including via video conferencing methods as appropriate)

GO Team - Humanitarian Manager - *continued*

28.	In conjunction with LGT & GO Team Finance staff - *establish daily living allowance payments* (e.g. typically based on 50% of local **full** Per Diem as published [if available] for airline staff or similar) for Victims and / or FR located in HAC, SRC (L), CRC (L) hotels or similar and Hospitals (if appropriate) - and oversee disbursement of same (Note 1 - this is effectively 'pocket money' as all usual hotel type expenses [including sustenance] will generally be met by the airline. Where such per diem *rate* is not available, an appropriate amount will be decided by Finance CSU at airline HQ and approved by CD. Note 2 - Airline staff and similar will typically be lodged on a 'full-board' and 'reasonable expenses reimbursed' basis - and thus not be in receipt of 'allowances')	
29.	When associated policy issued by CD, oversee (via GO Team Finance, Legal & Insurance staff) correct and timely disbursement of '*immediate economic needs*' type payments	
30.	Ensure GO Team Finance staff keep *full track of all crisis related expenditure*	
31.	Ensure provision of and oversee daily *HAT & other staff* (internal) *briefings*	
32.	*Look out for staff welfare; review daily activity; troubleshoot; cyclically plan next few days' activities; continually review current & proposed future plans etc.* **Revisit this checklist item 32. on <u>at least</u> a daily basis**	
33.	Co-ordinate with appropriate authorities, CMC, whoever - re *FR visits to accident site* (as applicable). If approved, *oversee* local (on-site) *airline* aspects of such arrangements	
34.	If '*Victims' Rights*' / '*Family Advocacy*' type rep(s) present, assign a suitable HAT (via HAT Co-ordinator') liaison person(s) and afford all courtesies and co-operation	
35.	Monitor (and control as required - to the extent permitted locally) the compassionate, sensitive and efficient *handling and eventual disposal of deceased victims* (in conjunction with associated FR, local authorities etc. + any 3rd party specialist organisation(s) engaged by the airline specifically for the purpose)	
36.	Monitor (& control as required - to the extent permitted locally) the *recovery and disposition of victims', airline and other property* (including any victims' personal effects) (in conjunction with associated FR, local authorities etc. + any 3rd party specialist organisation(s) engaged by the airline specifically for the purpose)	
37.	*Maintain appropriate resources* (human, financial, logistical) at SCR (L); CRC (L), HAC, JFSOC , Hospitals, Mortuaries etc. *for as long as is required* (e.g. up to exit strategy point)	
38.	Liaise with CMC (via LGT), local authorities and any 3rd party specialist organisation(s) (engaged by the airline specifically for the purpose) - regarding any '*on-site / near-site*' *inter faith etc. memorial service(s)* for accident victim fatalities (with adequate and appropriate airline representation where possible / permitted etc.) **This must *always* be done** (if possible) **in accordance with the express wishes of:** ▪ **surviving victims** (if capable of so doing) and ▪ **appropriate, associated FR**	

GO Team - Humanitarian Manager - *continued*

39.	Liaise with CMC (via LGT), local authorities and any 3rd party specialist organisation(s) (engaged by the airline specifically for the purpose) - re the ***erection of a suitable*** (memorial) ***monument***(s)
	
	This must *always* be done (if possible) **in accordance with the express wishes of:**
	
	   ▪ **surviving victims** (if capable of so doing) and
	   ▪ **appropriate FR**	

40.	Liaise with the CMC (via LGT) re any private / separate ***in-house <u>local</u>*** (i.e. at or near to the accident location) memorial service(s) for fatalities involving airline ***staff / employees / staff family members***, as appropriate
	
	This must *always* be done (if possible) **in accordance with the express wishes of:**
	
	   ▪ **surviving victims** (if capable of so doing) and
	   ▪ **appropriate FR**	

41.	Oversee, from airline aspect, any plans for memorial services required for any ***future*** burial / disposal of unidentified remains (as applicable), in consultation with local authorities and any 3rd party specialist organisation(s) (engaged by the airline specifically for the purpose)
	
	This must *always* be done (if possible) **in accordance with the express wishes of:**
	
	   ▪ **surviving victims** (if capable of so doing) and
	   ▪ **appropriate FR**	

42.	In conjunction with CD, LGT, HAT Co-ordinator etc. and any external organisation(s) engaged by airline for purposes of HA support etc. - ***decide*** on an appropriate ***exit strategy*** concerning local HA operations - and ensure that 'all needing to know' are aware of it	
43.	Work with LGT in ***implementing*** the HA ***exit strategy*** at the appropriate time	
44.	On return to airline HQ oversee ASAP (hot) and longer term (cold) 'wash-up' debriefings (with all concerned) re associated HAT operations - together with subsequent recommendations for improvements due 'lessons learned'	
45.	Submit wash up / lessons learned + recommendations report to the airline's senior management team - for their consideration and subsequent action (as required / approved)	
46.	Liaise with senior management, LGT and anyone else concerned to decide on the policy of formal recognition and recompense (if any for latter) of / for all airline / airline related staff involved in the crisis response - not forgetting those who maintained 'normal & business continuity operations' - whilst the crisis response was underway	
	END of CHECKLIST	

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Appendix **B2 / 1** - <mark>**EXAMPLE ONLY**</mark>

Typical Checklist for *Airline Crisis Management Centre (CMC) based*:

On-call / on duty CMC Humanitarian Assistance Team (HAT) Controller - CHC

(Assumes GO Team deployment will be *by air* - which will **not** always be the case. If the latter [not by air], adapt below checklist accordingly [exceptionally see 'Note to Reader' page **104** - follows checklist item **15**])

Upon Alerting - and / or whilst en-route to airline's Crisis Management Centre (CMC)

	TASK	☑ ?
1	Upon alerting (appropriate **RED Alert** message received) the on-call *'CMC HAT Controller'* (**CHC**) shall report without delay to the CHC Desk, located at / in airline HQ CMC	
2	Select / appoint and contact two 'fully current' *HAT team leaders* - one assuming the title and role *'GO Team / HAT Co-ordinator'* (**GHC**) and the other *'Deputy GHC'*. (The role of the GHC is to lead the (main) deploying HAT under the overall direction of the [similarly] deploying *'Humanitarian Manager'*). Direct them to report directly to the Go Team * departure airport **OR** ground / surface transport assembly point - when so advised by you Advise the GHC & deputy GHC of the GO Team departure airport etc. as soon as this information is known to you. Also ensure that you have both the GHC and deputy GHC's full contact details - and that *they* have *your* full contact details - including those for your own CMC CHC workstation / desk * Where GO Team deployment is to be by air, the GHC & deputy GHC should be directed *not* to start travelling until the departure airport has been confirmed to them by the CHC (i.e. by you) Note - the GHC will eventually be in 'operational command' of the deployed HAT at / near to etc. the accident location and will also act as the key (GO Team HAT) liaison person with the CHC i.e. you (via the 'Humanitarian Manager' - where appropriate)	
3	*Depending on accident location and nature*, consider appointing *additional* HAT Team Leader(s) to deploy ASAP to the scheduled Departure and / or Arrival Airport(s) of the accident flight (**this assumes that the accident did *not* occur on or near either airport**[s]) Again (and as required) ensure that you have *this* (these) *person's* (persons') full contact details - and that they have yours - including those for your own CMC CHC workstation / desk Note - this / these person(s) can deploy immediately (subject to transport arrangements etc.) as he / she / they will eventually be co-ordinating HAT support to *'families, relatives & friends - FR'* who are already at or travel to this / these airport(s) Method of deployment is expected to be via any appropriate form of commercial transport, as appropriate. Liaise with CMC Business / Staff Travel workstation / desk to set up associated travel arrangements etc. Additional HAT manpower (reinforcements) can be sent later On arrival at destination, this / these person(s) will liaise with CHC directly and also work alongside the *'Controller - Local Accident Control Centre'* (i.e. the ABCX Airways local representative [e.g. station manager / GHA] at the station(s) / airport(s) concerned)	

CMC Checklist - HAT Controller / continued

4	Double check with airline's 24H Ops Control Centre (OCC) that the *entire* HAT had been included in his / her *RED Alert* automated alerting system message - and that the subsequent report indicated that the alert had been successfully accomplished. If not (unlikely) request that the alert be transmitted / re-transmitted as required (and to keep you updated on progress) (Insert full contact details for OCC here: *+ xx xxx xxxxxxx etc.*) Also see Notes 1 & 2 to *this* checklist item 18, **NOW** - and act on them if so required	
5	Contact and appoint an appropriately qualified / current / experienced etc. HAT person to take over the next CHC shift from you (assume 12 hour shifts) (Insert full 24H contact details for all such persons here: *+ xx xxx xxxxxxx etc.*)	
6	Contact the contracted (external) 3rd Party providing *'mental health specialist services and support'* to the airline, to ensure that they have been alerted and are preparing to deploy with the airline GO Team. Provide them with all appropriate information and update regularly. Note details (especially contact details) of those so deploying Insert full 24H contact details for this 3rd Party: *+ xx xxx xxxxxxx etc.*	

On Arrival at CMC

7	Open CMC / airline email system on your device (PC / laptop etc.) at your designated CMC desk / workstation - your email address is: hatcmc@abcxairways.com Also open **HAT** 'Roster and Contacts' folder stored under *'My Computer / CMC Drive / Contingency Response Planning / HAT'* **Hard copies** of this checklist (the one you are reading now) and the (separate) HAT Handbook are stored in the blue, plastic box on your desk. They are also available electronically under the same path as shown above .... + also on the ABCX Airways intranet at: Insert appropriate intranet path here: ………………………………………………………	
8	Act as humanitarian assistance 'expert' within the CMC and keep CMC management appraised of all significant information concerning HAT ops - together with updates on all significant / relevant humanitarian, welfare etc. matters, as you become aware of them	
9	Commence written log of events (Hard copy as a minimum. Soft [electronic] copy log can be additionally maintained if so required [latter is recommended])	

CMC Checklist - HAT Controller / continued

10	As available, provide deploying GHC / deputy GHC with names / full contact details for:	
	▪ Leader GO Team ▪ GO Team - Humanitarian Manager ▪ GO Team - Ops Support & Admin Manager ▪ GO Team - HAT Team Leaders deploying under GHC leadership ▪ GO Team - 3rd party providing specialist 'mental health services & support' (as required) ***Also ensure*** that all listed above have the names and full contact details of the GHC, deputy GHC and yourself	
11	Ensure that deploying GHC has or will have available to him / her sufficient copies of the *HAT Handbook* - and also (separate) HAT *checklists* for all possible locations to which the HAT might eventually be deployed - after arrival at / near to etc. accident location Note - sufficient hard *and* soft copies are carried in the airline's GO Kit. However, note that the *GO Kit may not always be deployed* (e.g. accident at airport *co-located* / *close to* airline HQ)	
12	Depending on accident circumstances, decide if *full* or *partial* HAT deployment is required. Use the airline's automated alerting system (or use direct communication with individual HAT Team Leaders / members if more appropriate) to manage whatever course of action you decide upon Note - The maximum size of the HAT if deploying *by air* will depend on the maximum seating capacity / actual seating configuration of the GO Team aircraft used. You should confirm said capacity / configuration (from ABCX Airways Ops Control Centre [insert contact details here.........................]) and then subtract * xx to provide an approximation of the maximum size of the HAT which can be actually boarded on that particular aircraft If a larger sized HAT than this is imperative, request *CMC Crisis Director* to authorise deployment of a *second* GO Team aircraft and / or other, appropriate method(s) of transportation * The number xx has been derived from the anticipated number of airline staff required to deploy by air with the GO Team - *<u>not</u>* including HAT personnel A further consideration is the *<u>actual</u> passenger load on board the accident aircraft itself* e.g. if only 50 passengers are carried (even if this might be on board a wide body aircraft with a seating capacity of e.g. 550 PAX) - the size of a deployed HAT would be commensurately (considerably) smaller than if the flight had been full	
13	Are sufficient numbers of *foreign language speakers* (appropriate languages) included in the HAT? If not, arrange for this to be done (this will not always be possible and must *<u>not</u>* delay departure of GO Team) Note - at this point in time it might be necessary to make an 'educated guess' as to which languages might be required. This can be refined as more details of the PAX load become available with time	

CMC Checklist - HAT Controller / continued

14	Maintain an on-going record of which HAT elements are *expected* to deploy, in what numbers, to where, when etc. e.g. going to GO Team departure airport; accident flight's departure / arrival airport(s) etc. (Reminder: Don't forget to also include deploying (but not as part of the GO Team) HAT members with duties e.g. at / near airline HQ; conducting meet'n'greet services at wherever (e.g. local airports, railway and bus stations etc); providing support / welfare services in / at the homes of persons involved in some valid way etc.)
15	Ensure GHC updates you (and continues to update you) **with the total number of *actual* HAT** (with names etc.) reporting for travel on the GO Aircraft (e.g. for latter circumstance, HAT would probably have been directed to make their own way to the departure airport) etc.
	*Note to Reader: Despite the statement (documented at the top of page **101**) that these checklists are based on a GO Team deploying **by air** - checklist item **16** below does, in fact, provide very limited guidance, for the situation where a GO Team **might** need to deploy via **surface** transport*
16	*Scenario 1* - accident occurs on-airport or ***very*** close by
	If a GO Team deploys via *ground* transport - airline CMC staff will liaise with 'whoever' as to how the GO Team (including the HAT element) gains access (on arrival and as appropriate) to the accident airport + associated airport (emergency / crisis etc.) reception centres etc. (including airside access where necessary).This will primarily be managed (from the accident airline's viewpoint) by CMC Crisis Controllers (i.e. ***not*** by the HAT Controller). The outcome is to be communicated (by whatever appropriate means and without delay) to the deployed 'Leader GO Team' - for further distribution within his / her team (including the deployed HAT)
	Scenario 2 - Adapt above guidance where 'same' scenario accident occurs 'off-airport'
	Re all of the above, the assigned CMC Crisis Controllers shall keep the Crisis Director and other CMC staff (including CHC) regularly updated re the developing situation
	Notes - 1. It is possible that local Police etc. will have closed down all surface (road / rail etc.) access to the accident airport / local location. 2 - It is also possible that Police may effectively 'close down' mobile phone networks in the approximate vicinity of the accident location (in order to retain unrestricted mobile etc. phone access for emergency services only)

Oversight of Initial & On-going HAT Assignments, Numbers required etc.

17	Manage HAT numbers activated / deployed as per actual circumstances 'on the day' e.g. if you think you might have too many HAT reporting for the GO Team / to the accident location etc. - stand some down or reassign them. Also see again this checklist - item 12)
	Note: Re the number of persons (air victims) on- board the accident flight (plus ground victims - if any) ………*one* HAT member is *ideally* assigned to *one* single passenger (i.e. travelling alone) or *one* single family passenger *group*. If not possible, a single HAT member can be assigned to up to 3 single passengers / family groups, unless exceptional circumstances 'on the day' require that his ratio be increased even further. Similar principle applies to any ground victims

CMC Checklist - HAT Controller / continued

18	a. Establish / check if the ABCX Airways HAT might be required to work with other (i.e. non-ABCX Airways) HATs / similar e.g. partner / alliance airlines; mutual emergency aid partners; contracted 3rd party (commercial) providers etc. If so, obtain appropriate contact details and establish communications with your counterpart(s)	
	Note 1 - If ABCX Airways *has* contracted outsourced HAT services from a 3rd party commercial provider (in addition to having its *own* [ABCX Airways] HAT) - decide (consult with Crisis Director etc. and make the decision *now*) on whether or not to activate this 3rd party HAT. Note that it is likely that it will have already been *alerted* (check with them) but a decision now needs to be made as to whether or not to *activate* them	
	Note 2 - The above 3rd party HAT option might be crucial if the accident has occurred in a country where legal etc. requirements mandate that the 'accident airline' must provide a '*geographically local*' HAT within *a very short time-frame* e.g. as in the USA ....AND / OR in circumstances when it might take a long time for the airline's own HAT to arrive at its destination - and the '3rd party' is able to get an element of its own HAT there significantly sooner	
	b. Agree with any other responding HAT type agencies (if any) the associated working relationships, integration plans etc. - noting that the ABCX Airways HAT should typically take the lead for an accident involving an ABCX Airways aircraft operating on an ABCX Airways flight number	
	Insert / cross refer to appropriate contact information re all of the above here (e.g. for third party HAT suppliers; code-share / alliance partners etc.)	
	....	
19	*Deliberately Blank*	
20	Commence (as per actual circumstances 'on the day' and in conjunction with other, appropriate CMC staff) the planning necessary to possibly provide HAT members to escort FR (typically <u>*not*</u> located local to accident site's general geographical area) choosing to travel (typically as arranged, paid for, facilitated etc. by the accident airline) to / as near as appropriate to the accident location - together with associated matters such as 'see-off' / 'meet & greet' + 'crew and check-in staff briefings' + 'special handling requests' (e.g. ground transport [to / from airports], seating upgrades on aircraft used, meals, provision for children) etc.	
	Note: It has been assumed above that any transportation required will be mainly by air. This may not be the situation in reality	
21	Consider the need to deploy (as appropriate / practical) HAT to support death notifications to next of kin - in conjunction with appropriate authorities etc. - and always with consideration of appropriate law, regulation, best practice, custom, culture, religion etc.	
22	Consider the need to deploy (as appropriate / practical) HAT to support FR remaining in 'their local community' (i.e. at home etc. [typically <u>*non-local*</u> to the accident site] and *not* taking the offer of transport to / near to accident location. Such 'local community' could be located just about anywhere in the world! - having significant implications for associated HAT deployments)	

Provide Overall Leadership, Guidance, Co-ordination and Communication to / with deployed HATs

23	Continue to provide (and continue to provide) a central point of leadership, co-ordination, communication, guidance, support, trouble-shooting etc. to the HAT as a whole, and to deployed HAT Co-ordinators, Team Leaders etc. in particular	
	Note - much of the above will be handled 'on-site' (at / near to accident location; wherever) by the deployed HAT 'management' team. However, the ultimate responsibility is yours!	
24	As required, provide / confirm information *as known to you* (**and update regularly**) to deployed HAT management team(s) etc. regarding e.g. *victim status* (dead, injured, uninjured, missing, not known) and *location* (reception centre, hospital, hotel, mortuary, continuing journey, unknown etc.); latest airline *press releases*, policy decisions on *financial support to victims and their FR*; policy decisions on *transporting FR* to the general area of the accident location; policy decisions on *permitting visits to actual accident location* by FR - and how this is to be accomplished; policy decisions (possibly in the longer term) on *memorials and monuments* etc.	

All HAT Deployments - wherever they might be

25	Work with CD, other CMC Managers, ABCX Airways CSUs, Leader GO Team, GO Team Humanitarian Manager, GHC & deputy, GO Team Ops Support & Admin Manager, deployed third party mental health specialist(s), Country / Area / Regional airline managers, Controller-LACC, Local tour operator resort / area manager, Whoever etc. - to satisfactorily manage and resolve all issues (insofar as is possible) associated with (**NB: below list is far from being exhaustive** [think outside of the box!]):	
	- HAT involvement with setup and / or manning and / or operation of CRC (A) - HAT involvement with setup and / or manning and / or operation of SRC (A) - HAT involvement with setup and / or manning and / or operation of FRRC(s) - HAT involvement with local hospitals - HAT involvement with local mortuaries / undertakers etc. - HAT involvement with setup; manning; operating of 're-uniting activities' - HAT involvement with setup and / or manning and / or operation of CRC (L) - HAT involvement with setup and / or manning and / or operation of SRC (L) - HAT involvement with setup and / or manning and / or operation of HAC(s) - HAT involvement with setup and / or manning and / or operation of JFSOC - HAT involvement with FR visits to (or near to) accident location - HAT involvement with 'other (non-ABCX Airways) HATs and equivalent teams' - HAT involvement with contracted 3rd party 'mental health specialists / experts' - HAT involvement with DVI and Personal Effects Recovery operations - HAT involvement with all appropriate types & levels of government / officialdom - HAT involvement with memorial services, monuments etc. - Anything else appropriate to actual circumstances 'on the day'	

Humanitarian (Family) Assistance Centre - (HAC / FAC)

26	Work with Leader GO Team, GO Team Humanitarian Manager, GHC & deputy GHC, GO Team Ops Support & Admin Manager, deployed 3rd party mental health specialist(s), Country / Area / Regional airline managers, Controller-LACC, Local tour operator resort / area manager, whoever etc. ....to satisfactorily manage, resolve etc. all issues (insofar as is possible) associated with the following:

- Will (or has) a HAC be (been) set up - if so, when? Note - a HAC **will** typically be established unless extraordinary circumstances dictate otherwise

- Who will set up & pay for HAC? Note - this is typically (but not always e.g. as in UK) an airline responsibility

- Where will HAC be located / set up? (In what facilities and where e.g. hotel(s), church halls, gymnasiums, local authority rest centres, public buildings, schools, sports arenas etc.)

- Who will lead HAC operations? (e. g. the 'local authorities [possibly including military; police etc.], GO Team Humanitarian Manager, GHC, etc.)

- Who will man the HAC? (e. g. airline HAT, other HATs / equivalents, staff supplied by 'local government authorities', volunteer / faith groups, military / paramilitary / police etc.)

- How will HAC be operated (i.e. what is the concept of HAC operations if we [the accident airline and / or its reps] are running the HAC? **If not**, what **is** the 'concept of operation' of the organisation charged with this responsibility)?

  Concept of operation = who/what/where/when/why/how/how much/how many??? etc.

- *For HAC operations in UK* - ensure that appropriate co-ordination takes place with the appropriate / accountable 'local government authority' - for eventual transfer of HAC (airline) operations to HAC (local government authority) operations

  Note 1 - where possible try to pass existing airline HAC operations on to the local authority as a 'going concern' - including on-going use of the airline HAT if required

  Note 2 - this bullet point entry assumes that the accident airline will establish its HAC significantly earlier than will be possible by the responsible UK local government authority (which is a very reasonable assumption [depending upon the airline involved])

- *For HAC (FAC) operations in USA* - ensure compliance with appropriate requirements as per associated US legal / regulatory stipulations

- For HAC (FAC) operations *anywhere else* - ensure compliance with appropriate requirements as per associated (local) legal, regulatory, best practice etc. stipulations (if any)

- Anything else as appropriate to actual circumstances 'on the day'

27	Continue to provide top level management of and direction to any deployed ABCX Airways HAT	
28	Continue to provide expert support, advice etc. to CMC, deployed HAT and anyone else as appropriate - re all matters related to the airline's humanitarian assistance operations	
29	Double check next and on-going 24H 'CMC - HAT Controller' shifts have been planned for - if not, take associated action to ensure that this is accomplished without delay	
30	*Continue* to provide / confirm information *as known to you* (**and update regularly**) to deployed HAT management teams etc. regarding e.g. *victim status* (dead, injured, uninjured, missing, not known) and *location* (reception centre, hospital, hotel, mortuary, continuing journey, unknown etc.); latest airline *press releases*, policy decisions on *financial support to victims and their FR*; policy decisions on *transporting FR* to the general area of the accident location; policy decisions on *permitting visits to actual accident location* by FR – and how this is to be accomplished; policy decisions (possibly in the longer term) on *memorials and monuments* etc.	
31	Ensure HAT logistics and financial needs have been / are adequately and expeditiously sourced and provided. Do this in conjunction with CMC GO Team Support desk, CMC Finance desk etc.	
32	Oversee overall welfare of deployed HAT - and also the welfare of their families at home / wherever (as applicable for latter)	
33	Ensure that all appropriate elements of the HAT maintain: ▪ A (precise but nonetheless clear and accurate) record of events ▪ Adequate records of expenditure and expenses etc. + obtain / retain receipts as required ▪ Work time-sheets completed and maintained up to date ▪ etc.	
34	Provide reasonably regular information updates to HAT members (if any) not currently involved directly in the crisis response	
35	Prepare and retain appropriate notes etc. for any inputs you might wish to make (when the crisis etc. is eventually resolved / terminated) to eventual 'what could we have done better' type meetings / activities etc.	
36	Anything else - as required	
END of CHECKLIST		

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Appendix **B2 / 2** - <mark>EXAMPLE ONLY</mark>

Post Stand-down - Follow Up / Hot & Cold Feedback / Lessons Learned / Action Points etc.

Note - it is expected that the **lead** for the below checklist actions will be the airline's HAT Manager (or Crisis Response Planning Manager if there is no HAT Manager). Leader GO Team, Humanitarian Manager, CMC HAT Controllers; deployed GHC / deputy GHC and all deployed HAT team leaders / subordinate managers etc. should also attend and contribute

1	After the airline has terminated its main humanitarian assistance effort, will selected HAT members be required to _continue_ to work with accident victims and / or their FR - both in the nearer and / or longer term futures? If so, this needs to be planned for resourced and managed - and an eventual 'exit strategy' agreed	
2	Arrange 'defusing' meetings for all HAT involved in the response - but only if requested	
3	Liaise with senior management to schedule an adequate rest period for all involved HAT	
4	Schedule and hold (ASAP) a semi-formal 'hot wash up' meeting(s) for all involved. Ensure feedback comments / findings are noted / recorded - and tentative action points decided and allocated accordingly	
5	Schedule and hold (without undue delay) a formal 'cold wash up' meeting(s) for all involved. Ensure feedback comments / findings are noted / recorded (including any carried forward from the hot wash up meeting[s]) - and action points decided and allocated accordingly	
6	Monitor 'follow-through' on action points from checklist item 5. above - so as to ensure timely compliance (by those so assigned) with same	
7	Complete an appropriate report for senior management	
8	Ensure HAT are recognised and rewarded accordingly	
9	Check team members are well and settling back to work without undue problems. (Also recommend that HAT members discuss / share their deployment / involvement experiences with their line managers and colleagues [subject to confidentiality issues])	
10	Remain aware and communicate details of all proposed _future_ memorial services, dedications (and similar) and ensure the provision of adequate and appropriate airline involvement with same, until such time as the final point of an agreed exit strategy has been reached	
	END of CHECKLIST	

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Appendix **B3** - EXAMPLE ONLY

Typical Checklist for *GO Team deployed*:

GO Team / Humanitarian Assistance (Team) **Co-ordinator (GHC)**

After being Alerted and / or whilst En-route to Departure Airport / 'Wherever'

	TASK	☑ ?
1	*Reminder - up to this point you should have received the initial **RED Alert** message - and then been contacted by the on-call 'CMC HAT Controller - CHC' and 'offered' the position of **GO Team / HAT Co-ordinator - GHC**, which (as you are now carrying out this checklist) you will have accepted!* Request and note down full contact details for the CHC:	
2	Consult (separate document) 'GO Team - Quick Reference Guide (QRG)' to *broadly* remind you what to expect next - and, thereafter, up until arrival at or near to accident location Reminder - QRG is a *green* coloured credit card sized (fold out) document issued to *all* HAT members & also included (starting page xx) of the HAT Handbook Ensure that you have or will obtain sufficient copies of the 'HAT *Handbook*' and all HAT *checklists* for all possible / feasible locations to which the HAT might be deployed on arrival at / near to etc. accident location. (Ask CHC to assist in this if you think necessary). Sufficient hard and soft copies of same <u>are</u> carried in the airline GO Kit. However, consider that the GO Kit may *not* always be deployed (e.g. accident at airport co-located or close to airline HQ)	

3	Report ASAP and as directed by CHC i.e.
	
	   ▪ Direct to GO Team * departure airport *OR*
	   ▪ GO Team Ground transport assembly point
	
	* If GO Team is to deploy by *air*, do *not* start travelling until the departure airport has been confirmed to you by the CHC (unless [exceptionally] choice of departure airport is *100%* 'obvious')
	
	Note - Ensure that you have a fully charged (turned on) mobile / smartphone (MP) etc. and that you forward its 'number' etc. to CHC and *your* ** deputy GHC without delay. Your MP should be fully charged, capable of making / taking international calls and be email / text capable. Also take appropriate battery charging equipment, cables and international / car etc. adaptor sockets. Also ensure that you have the MP / smartphone etc. contact details for your ** deputy GHC
	
	** Ask CHC to provide you with full contact details of your deputy GHC - if you do not already have them. Also ask CHC to pass on to deputy GHC the same 'telephone related etc.' info as per the 'note' further above - and get him / her to action same
	
	Any problems? - Request CHC to 'troubleshoot / rectify' - until such time as you can do so yourself	

Checklist - GHC /continued

4	Note: Your primary duty is to 'take charge' of the main airline HAT deploying in support of the accident - and to also act as the key (GO Team HAT) liaison person with the CHC. Make sure that you have 'pen and paper' etc. readily available as a lot of vital information will soon be 'coming your way'!	
5	Obtain from CHC details (name, full contact details etc.) **of appointed:** ▪ Your Deputy GHC (if you do not already have them) ▪ GO Team - Humanitarian Manager ▪ GO Team - Ops Support & Admin Manager ▪ GO Team - (HAT) Team Leaders (leave this until later if necessary - but don't forget!) ▪ GO Team - 3rd party 'mental health' specialist(s) (as appropriate)	
6	*If* time & circumstances *comfortably* permit, ask CHC (at airline HQ CMC) if he / she requires you to report to him / her for a face to face briefing Note - this will generally only be possible where the GO Team departure airport is at or close to airline HQ (which it typically [but not always] will be) *and* in circumstances where 'so doing' would not delay departure of the GO Team flight (with you on board). Request associated transport be provided for you - if so required	
7	*Deliberately Blank*	

On arrival at GO Team's Departure Airport

| 8 | * *Check-in immediately* **BUT** (for now) *remain landside* in the close vicinity of the designated GO Team check-in desk(s) (This is necessary so that you can then action checklist items 9 to 11 just below)

* *Unless by so doing you will unnecessarily delay the departure of the GO Aircraft / Team*.

Note - if GO Team check-in desk(s) is / are not already clearly 'signposted' as such, try to get the airport / equivalent staff responsible to correct this e.g. physical signposting / pennants etc. at appropriate entrance doors *and* check-in desks; via Airport's Flight Information Display System (FIDS) messages; via Airport's PA System announcements etc.

Reminder - GO Team should be checking-in with *hand baggage only* as per SOP (i.e. **NO** *hold* baggage). Arrange for airport check-in staff to manage this accordingly such that those checking-in with *hold* baggage, are (exceptionally) still permitted to board, but such baggage will need to go into the GO aircraft's luggage hold (provided latter does not delay GO Team departure) | |
| 9 | Where possible (e.g. as they check-in - if not already done [ask the duty manager at the appropriate airport check-in desks]), *identify* (as they *do* check-in) *and make contact with those listed in checklist item 5 further above*. (Obtain and record their full contact details [if you do not already have them], ensure that they have yours - and then 'request' that they [with the exception of deputy GHC if available] continue the check-in process and then proceed to the GO Team flight's departure gate - without delay) | |

Checklist - GHC /continued

10	Start obtaining / compiling / combining / correlating etc. the *provisional* (deploying) *HAT name list* as provided by CHC / whoever etc. + also as per the 'already checked-in' list (Get airport staff / other reporting HAT staff etc. to help you as required). Continue until you eventually have the (deploying) HAT list as completely as possible - at least for now	
11	*Establish contact with your deputy GHC* and: ▪ Brief him / her on 'situation' circumstances etc. insofar as you know them ▪ Ensure that he / she has a copy of the HAT Handbook and deputy GHC's checklist ▪ Ensure he / she checks in but (for now) remains at the GO Team check-in desk(s) ▪ Direct him / her to continue the task of assisting / troubleshooting all consequently arriving HAT, 3rd party HAT support staff etc. through the check-in process ▪ Direct him / her to brief such HAT members etc. to proceed *immediately* to GO Team flight's departure gate / location - after check-in ▪ Hand over responsibility for completing checklist item 10 above ▪ Direct him / her to be at the designated GO Team departure gate / location in good time to board the GO Team flight	
12	Subject to matters being adequately addressed as per checklist items 9 - 11 above, *check in & proceed immediately* to assigned GO Team flight's departure gate / location	
13	Identify / make contact with those listed in checklist item 5. above - if not already done	
14	Make a list of all HAT members already at / arriving at departure gate & pass the latest versions + ongoing updates to CHC at regular intervals (By all & any means possible. Get airport staff / other HAT members etc. at the gate to help you with this)	
15	a. *Identify HAT 'Team Leaders'* (TL) present & obtain full contact details for each (All TL mobile / smart phones etc. [complete with chargers; international adaptors etc.) are capable of making / taking international calls; are email, data etc. capable) b. Brief TLs and assign each to an appropriate portion (sub-team) of the remainder of the HAT members (present and / or as they arrive at the departure gate). TLs will thereafter act in a supervisory and welfare role for said (assigned) teams, typically for the duration of the deployment. Record team details (get help with this from TLs etc.) and arrange for them to be forwarded to CHC ASAP (e.g. via airport staff present etc.) c. Where appropriate (they should already have them), issue HAT Handbook & checklists to each TL. (Do this later if not possible now) d. Repeat (as required) checklist items 15 a. to c. above for subsequently arriving TLs – and keep CHC updated	
16	When complete HAT has arrived at the departure gate (or just before boarding commences) - *finalise HAT list* (all members present) and arrange for *details to be forwarded to CHC* ASAP. (Hard copies also to Leader GO Team, GO Team Humanitarian Manager, GO Team Ops Support & Admin Manager, yourself and your deputy - and to each TL. Get airport staff present to assist in the printing etc. However, do not let this delay GO Team departure [it can be done later if necessary])	

Checklist - GHC /continued

17	Identify, make contact with and provide a short briefing to any contracted 3rd party (mental health etc. specialists) staff deploying with the GO Team (if any). Obtain their full contact details (if not already done) and also arrange for forwarding of same to CHC	
18	Time permitting, provide a short brief to the HAT members present (use Gate PA if available). Otherwise, provide the briefing ASAP after take-off (Note - seek permission from Leader GO Team (LGT) to do this and, if LGT is intending to brief the whole GO Team, do not conduct your own HAT brief until LGT's briefing has been completed)	
19	When boarding commences supervise the process (with your deputy and TLs) for the HAT insofar as possible. Ensure that no *HAT* member sits in designated (reserved) seats near the front of the cabin *except* for yourself, your deputy and the person in charge of the contracted third party mental health team. (Obtain these designated seat numbers from the GO Team Ops Support & Admin Manager)	
20	Board the flight, take your designated seat and update CHC as required	

During the GO Team Flight

21	Depending on flight duration & as time / circumstances permit, provide regular update briefings to the HAT on the latest situation concerning the developing crisis, as briefed to you by e.g. LGT etc. (e.g. LGT might be getting updates via GO aircraft's communications; on-board telephone system[s] etc.)	
22	If / as time & circumstances permit - *make provisional assignments* of Team Leaders and their teams (+ 3rd party personnel appropriate) *to expected* / *anticipated duties* after arrival at appropriate destination etc. Use below list as an initial guide: Note - you may need to adjust your current team compositions to achieve this. The more immediate tasks are shown in bold font. *List is not exhaustive* (change/add to it as required) ▪ **HAT involvement** with setup and / or manning and / or operation of **CRC (A)** ▪ **HAT involvement** with setup and / or manning and / or operation of **SRC (A)** ▪ **HAT** involvement with setup and / or manning and / or operation of **FRRC** ▪ **HAT** involvement with setup and / or manning and / or operation of '**re-uniting centre**(s)' ▪ **HAT** involvement with **local hospitals** ▪ **HAT** involvement with **local mortuaries / undertakers etc.** ▪ **HAT** involvement with setup and / or manning and / or operation of **HAC / FAC** ▪ HAT involvement with setup and / or manning and / or operation of CRC (L) ▪ HAT involvement with setup and / or manning and / or operation of SRC (L) ▪ HAT involvement with setup and / or manning and / or operation of JFSOC ▪ Contracted 3rd party 'mental health specialist / expert' involvement ▪ Anything else as required by actual circumstances 'on the day'	
23	As appropriate (+ in conjunction with airline medical staff etc. on board) supervise issue and taking of any required medication(s) (e.g. anti-malaria drugs) for the on board HAT	
24	If / as time & circumstances permit, advise HAT to obtain as much rest as possible, particularly on a long-haul flight	

Checklist - GHC /continued

Upon Arrival at / near / as near as is practicable to Accident Location

25	Where possible, practicable and as directed, leave the aircraft in company with other (selected) GO Team managers - for a local * briefing(s). Remainder of HAT and 3rd party personnel to remain on board (under supervision of deputy GHC) and await your return	
	* Note - briefings may typically include (In no particular order. List is not exhaustive):	
	o Disembarkation + Customs / Immigration / Quarantine (CIQ / Port Health) procedures	
	o Collection of GO Kit Procedure	
	o Further (onward) transport arrangements (as required)	
	o Latest crisis situation briefing	
	o Update on potential crisis response duties and assignments	
	o Logistics (transport; food & lodging; finance; equipment; facilities etc.)	
	o Medical & welfare	
	o Security situation, 'dos and don'ts' etc.	
	o Local liaison and support resources available etc.	
	It may be that the 'situation on the ground / on the day' dictates that there will be no briefings etc. available - in which case LGT will decide an appropriate course of action to take	

Note - the remainder of this checklist assumes that the associated accident has occurred ***on or very near an airport*** (not necessarily the GO Team's destination airport) and that some form of local, supporting infrastructure (e.g. airport, ground handling operator, government [all departments and levels], local NGOs, logistics [including transport and accommodation etc.], security etc.) will be available

Again, this may not be the case 'for real' and you and the deployed HAT / 3rd party mental health team must be prepared to 'get on with it' (whatever '***it***' turns out to be) - under the overall guidance of the GO Team Humanitarian Manager who, in turn, complies with requirements initiated by LGT etc.

A reminder here that you and your teams must be prepared to operate under the most basic of living and working conditions, as required (but always, of course, subject to any overriding personal health, safety, security and other welfare etc. type concerns)

26	On return to GO aircraft (possibly following any briefing from LGT) ***provide a HAT specific briefing*** to your teams	
27	***Disembark*** the HAT + '3rd party specialist (mental health) team' as briefed (by whoever) and clear immigration, health, customs etc. Customs clear and collect HAT GO Kit and any other HAT kit, baggage etc. which had been loaded in the GO aircraft's baggage hold	

Checklist - GHC /continued

| 28 | From this point on - HAT & 3rd party 'mental health specialist' etc. duties, locations etc. will be dictated by actual circumstances 'on the ground / on the day' and, as such, are not possible to reliably document herein. However, the following list can be used as a guide (Reminder: You [GHC & deputy] will be supervising all of this on behalf of the 'Humanitarian Manager'. **IMPORTANT**: *The following list is far from being exhaustive*!) | |

28	From this point on - HAT & 3rd party 'mental health specialist' etc. duties, locations etc. will be dictated by actual circumstances 'on the ground / on the day' and, as such, are not possible to reliably document herein. However, the following list can be used as a guide (Reminder: You [GHC & deputy] will be supervising all of this on behalf of the 'Humanitarian Manager'. **IMPORTANT**: *The following list is far from being exhaustive*!) ▪ Ensure HAT performs its primary duties, as briefed ▪ Ensure HAT performs other assigned duties (within competence and if safe so to do) ▪ Use the list in checklist item 22 further above to guide deployment & utilisation of your teams for an **ON**-airport (or very near to airport) accident / situation ▪ Same as bullet point just above - but now re an **OFF**-airport accident / situation ▪ Ensure your teams are briefed; have a 'leader'; have adequate comms; have checklists & stationery; are suitably attired (including PPE as required); display appropriate ID; have taken appropriate medication; stay safe etc. ▪ Carry out and / or delegate any 'risk assessment(s)' as required. Ensure resulting conclusions / recommendations are followed by all concerned. Regularly review and update same (as required) ▪ Establish (as required / appropriate) and maintain contact / liaison with Controller LACC (ABCX Airways local Station Manager / airline rep / equivalent person) ▪ Become reasonably familiar with local laws, rules, regulations, culture, customs, sensitivities etc. Ensure that they are practised / respected by your teams ▪ Always look to the welfare (in all of its aspects) of your teams. This includes rosters (typically 12 hour [sometimes longer] shifts); accommodation, transport, food & rest; security; medical (general *and* mental / emotional); health & safety; operational comms; personal comms (e.g. with 'home' etc.); finance / money etc. (company and personal); etc. ▪ Provide regular HAT SITREPs to all concerned ▪ Attend local briefings as required ▪ Integrate your HAT with any other HAT(s) / equivalent(s) present - as required. Be prepared to take 'notional' charge of overall co-ordination etc. of same ▪ Ensure HAT expenditure is tracked & recorded (via deployed Finance CSU personnel) ▪ Arrange HAT personnel rotation (if possible and in conjunction with CHC) for longer duration HAT deployments ▪ Anything else as required (there will typically be lots more!)	
29	On imminent completion of task, oversee (in conjunction with CHC) all preparations for ceasing the HAT element of the operation and for its return 'home' Be mindful that some elements of the HAT operation might continue for many months (or even longer) after the main deployment ceases. As such, take care not to give the impression that HAT involvement with victims and their loved ones is necessarily terminated at this point. All of this is, of course, 'as appropriate' to actual circumstances 'on the day'	
30	When / as required, participate in hot and cold wash-up (feedback) debriefing meetings, along with your deputy GHC and appropriate Team Leaders	
	End of Checklist	

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Appendix **B4.1**

Typical Checklist for *GO Team deployed*:

GO Team / **Deputy** Humanitarian Assistance (Team) Co-ordinator (Deputy GHC)

Task Specific Checklist:

	TASK	☑ ?
1		
2		
3		
4		
5		
6		
7	etc.	

Note - this 'blank' checklist has been included here to remind the 'reader / potential planner / potential user' that it must be fully prepared / completed, if it is intended (as it must be) for use in a 'real' humanitarian assistance type emergency response operation

Appendix **B4.2**

EXAMPLE ONLY

Typical Checklist for *GO Team deployed*:

GO Team / (Humanitarian Assistance Team / HAT) - **Team Leaders** (TL)

Generic Checklist - Applicable to *all* HAT TLs

	TASK	☑ ?
1		
2		
3		
4		
5		
6		
7	etc.	

Note - this 'blank' checklist has been included here to remind the 'reader / potential planner / potential user' that it must be fully prepared / completed, if it is intended (as it must be) for use in a 'real' humanitarian assistance type emergency response operation

Appendix **B4.3**

Typical Checklist for *GO Team deployed*:

GO Team / (Humanitarian Assistance Team / HAT) - **CRC (A)** - Assigned **Team Leader** (TL)

Task Specific Checklist for **appointed** HAT TL:

	TASK	☑ ?
1		
2		
3		
4		
5		
6		
7	etc.	

Note - this 'blank' checklist has been included here to remind the 'reader / potential planner / potential user' that it must be fully prepared / completed, if it is intended (as it must be) for use in a 'real' humanitarian assistance type emergency response operation

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Appendix **B4.4**

Terms of Reference

HAT Team Leader - (Uninjured Passenger) **Survivor Reception Centre** (Airside) - SRC (A)

Function: To provide all uninjured (and / or non-hospitalised) survivors (not including crew) with an initial holding and processing facility / function - typically located within the airside part of the associated airport

Location: TBA

Note - for the airline's main base / hub airport - the location of the SRC (A) should be ascertained and inserted above. For all other airline stations, the local Station Manager (or local airline representative e.g. GHA) shall ensure (and also accounting for the requirements of the local **airport** emergency response plan) that an SRC (A) is provided / available and details documented in the airline's ERP for each such Station

Responsibilities - Use your assigned HAT to:

- Provide all and any humanitarian, welfare & material aid necessary to uninjured survivors e.g. psychological first aid (defusing); minor first aid; catering (including for infants); clothing; blankets; toiletries; communications; etc.
- Complete 'uninjured survivor' documentation using appropriate forms. Distribute completed forms as required - ensuring that the airline always retains a copy
- Ensure that all completed forms are passed on ASAP to airline HQ (CMC ECC desk)
- Identify a suitable system to segregate 'processed' from 'unprocessed' uninjured survivors e.g. wrist label, tags, stickers, physical segregation etc.
- Provide regular 'information briefings' to uninjured survivors e.g. status / location of missing travel companions; when release from SRC (A) can be expected, reuniting arrangements etc.
- Facilitate access to 'faith' (religious and similar) representatives - as required
- Facilitate the release of uninjured survivors from the SRC(A)
- Where possible, arrange for the immediate reunion of uninjured survivor and their associated FR at the *on-airport* reuniting area.(Note: the *off-airport* reuniting area will be used for longer term reconciliations)
- Liaise with authorities regarding the release of uninjured survivors' baggage (as appropriate)
- Ascertain & pass on to GHC the onward travel arrangements (if any) for uninjured survivors
- Offer transportation to and accommodation at the SRC (L) for uninjured survivors until onward transportation can be arranged and / or until uninjured survivors feel that they are able to travel again. Pass requirements on to GHC
- Where uninjured survivors live locally and do not wish to go to the airline provided SRC(L), co-ordinate with GHC for suitable transportation and escort to residence/accommodation
- Maintain a log of events throughout
- Look out for the 'health and welfare' of your team throughout

Note - similar terms of reference (as above) and checklist (as below) are used for the (different) HAT Team Leader + Team deployed to the separate '*Uninjured Crew Survivor Reception Centre Airside - CRC (A)*'

EXAMPLE ONLY Checklist (Task Specific Checklist for appointed Team Leader)

SRC (A) - Assigned **HAT Team Leader**

	TASK	☑ ?
1	Receive task briefing from GHC / deputy GHC	
2	Collect your assigned HAT and (in turn) brief them	
3	Arrange transport and proceed to *SRC (A)* with your team. All to take necessary ID (passes & permits [including * *airside* pass - as SRC ({A}) is typically an airport, airside location!], airline ID, HAT ID etc.); equipment (e.g. comms equipment with charging kit; spare batteries; megaphone etc.); clothing (e.g. identifying tabards; armbands etc.); paperwork (passenger manifest copies; contact lists, checklists, required forms [Victim Record Cards etc.], log-sheets); etc. * The provision of **Airside** passes / permits and similar **must** have **already** been **addressed** <u>before</u> going airside. Senior GO Team management are responsible for ensuring that this has been accomplished with the right 'people' (Airport Police / Security / Immigration etc.) at the right time	
4	Identify SRC (A) person-in-charge; explain why you and team are there; obtain 'permission' to carry out your responsibilities as per this checklists *OR* to assist as required and in accordance with the directions of this person, as appropriate Note - the reminder of this checklist assumes that such permission has been given	
5	Set up & man a "reception point" for uninjured survivors as they arrive at the SRC (A)	
6	Implement a 'segregating' system to assist in identifying those 'processed' from those 'still waiting to be processed'	
7	As uninjured survivors arrive and pass through the reception point, direct your team to: ▪ Meet & greet as appropriate & distribute 'SRC (A) information leaflets' ▪ Act as the initial liaison point between uninjured survivors and the airline ▪ Use training and experience to facilitate the provision of all and any humanitarian, welfare & material aid required - e.g. psychological first aid (defusing); *minor* medical first aid; catering (including for infants); clothing; blankets; toiletries; communications; etc. ▪ Encourage & facilitate uninjured survivors to undergo a 'vital signs' medical examination (e.g. some might be in shock; have unknown smoke inhalation injury etc.) ▪ Assist uninjured survivors to complete appropriate forms and ensure that completed forms are passed on to you (Team Leader) without delay ▪ Manage the SRC (A) 'processing segregation' system ▪ Provide regular briefings to uninjured survivors e.g. status & location (except death) of missing travel companions; when can they expect to leave the SRC (A); are associated FR already at (in another part of) the airport or on the way; how will they be reunited with such FR / whomever etc. ▪ Facilitate access to 'faith' (religious & equivalent) type reps - as required	

SRC (A) - Assigned HAT Team Leader - continued

7	Checklist item 7 continued	
	▪ Facilitate uninjured survivor contact (but not physical reuniting at this stage) **with** associated FR (particularly 'meeter & greeter' type FR)	
	▪ Record and pass on information re uninjured survivors' future intentions	
	▪ Record and pass on information which will assist with future baggage etc. reconciliation (as appropriate)	
	▪ Escort uninjured survivors (_**when** cleared to leave SRC [A]_) to the airport reuniting facility (as appropriate) and facilitate reuniting process to extent permitted	
	▪ Act as directed concerning 'what happens next?' e.g. escort uninjured survivors to airport check-in for onwards or return home flights; escort '***local*** resident' uninjured survivors to their local homes / accommodation; escort uninjured survivors to the SRC (L) hotel / facility if they choose the airline's offer of temporarily accommodating them there / escort uninjured survivors to hospitals, mortuaries etc. as appropriate e.g. for reuniting with injured and / or deceased respectively.............and so on	
	▪ Maintain a very brief log of events re your response - together with any 'bullet point' ideas on how things might be improved 'next time'	
	▪ Advise you (TL) when they consider that their particular assignment is complete	
	▪ Ensure they request & receive appropriate PFA / peer support if so required / otherwise recommended	
	Throughout the above, request TL etc. intervention as required to 'trouble-shoot' problems beyond your ability to resolve. Also try to enable uninjured survivors to have as much control as possible / practicable over choices & actions. ***The difficulty of so doing is acknowledged here***	
8	Manage and 'troubleshoot' (where necessary) all of the above	
9	Provide regular SITREPs to GHC / deputy GHC	
10	Note any outstanding / unresolved issues and ensure that you either deal with them yourself and / or escalate them as appropriate	
11	At all times look out for the welfare and wellbeing of your assigned HAT	
12	Maintain a reasonably detailed log of events throughout	
13	Maintain a 'bullet point' list of things which might be done better in future	
14	Report completion of assignment to GHC / deputy GHC	
15	Return with your team to your local premises / accommodation / wherever	
16	Review again all aspects of your team's welfare and wellbeing- including provision of peer support / PFA - and higher intervention (e.g. from contracted third party mental health specialists) if considered necessary. Ensure that you do the same for yourself	
17	Prepare a report of the assignment and pass on to GHC / deputy GHC in due course	
	END of CHECKLIST	

Appendix **B4.5**

EXAMPLE ONLY

Typical Checklist for *GO Team deployed*:

GO Team / (Humanitarian Assistance Team / HAT) - **FRRC** - Assigned **Team Leader** (TL)

Task Specific Checklist for *appointed* Team Leader:

	TASK	☑ ?
1		
2		
3		
4		
5		
6		
7	etc.	

Note 1 - this 'blank' checklist has been included here to remind the 'reader / potential planner / potential user' that it must be fully prepared / completed, if it is intended (as it must be) for use in a 'real' humanitarian assistance type emergency response operation

Note 2 - it is possible that two (possibly [rarely] more) FRRCs will need to be set up and manned - i.e. one at the airport of *departure* of the accident flight and another at the *destination* airport (& possibly at other [additional] airports too - e.g. as might be the case for multi-sector schedules [e.g. airports A to B to C])

Appendix **B4.6**

EXAMPLE ONLY

Typical Checklist for *GO Team deployed*:

GO Team / (Humanitarian Assistance Team / HAT) - **Re-uniting Area**(s) - Assigned **Team Leader** (TL)

Task Specific Checklist for *appointed* TL:

	TASK	☑ ?
1		
2		
3		
4		
5		
6		
7	etc.	

Note - this 'blank' checklist has been included here to remind the 'reader / potential planner / potential user' that it must be fully prepared / completed, if it is intended (as it must be) for use in a 'real' humanitarian assistance type emergency response operation

Appendix **B4.7**

EXAMPLE ONLY

Typical Checklist for *GO Team deployed*:

GO Team / (Humanitarian Assistance Team / HAT) - **Hospital 1** - Assigned *deputy* Team Leader (TL)

Task Specific Checklist for *appointed* TL:

	TASK	☑ ?
1		
2		
3		
4		
5		
6		
7	etc.	

Hospital 2 - Assigned *deputy* **Team Leader** (TL)

Task Specific Checklist etc:

	TASK	☑ ?
1		
2		
3		
4		
5		
6		
7	etc.	

Hospital 3 etc. - Assigned *deputy* **Team Leader** (TL)

Task Specific Checklist etc:

	TASK	☑ ?
1		
2		
3		
4		
5		
6		
7	etc.	

Note - these 'blank' checklists has been included here to remind the 'reader / potential planner / potential user' that it must be fully prepared / completed, if it is intended (as it must be) for use in a 'real' humanitarian assistance type emergency response operation

Appendix **B4.8**

Typical Checklist for *GO Team deployed*:

GO Team / (Humanitarian Assistance Team / HAT) - **Mortuary 1** - Assigned *deputy* **Team Leader** (TL)

Task Specific Checklist for *appointed* TL:

	TASK	☑ ?
1		
2		
3		
4		
5		
6		
7	etc.	

Mortuary 2 - Assigned *deputy* **Team Leader** (TL)

Task Specific Checklist etc:

	TASK	☑ ?
1		
2		
3		
4		
5		
6		
7	etc.	

Mortuary 3 etc. - Assigned *deputy* **Team Leader** (TL)

Task Specific Checklist etc:

	TASK	☑ ?
1		
2		
3		
4		
5		
6		
7	etc.	

Note - these 'blank' checklist has been included here to remind the 'reader / potential planner / potential user' that it must be fully prepared / completed, if it is intended (as it must be) for use in a 'real' humanitarian assistance type emergency response operation

Appendix **B4.9**

EXAMPLE ONLY

Typical Checklist for *GO Team deployed*:

GO Team / (Humanitarian Assistance Team / HAT) - **CRC (L)** - Assigned **Team Leader** (TL)

Task Specific Checklist for *appointed* TL:

	TASK	☑ ?
1		
2		
3		
4		
5		
6		
7	etc.	

Note - this 'blank' checklist has been included here to remind the 'reader / potential planner / potential user' that it must be fully prepared / completed, if it is intended (as it must be) for use in a 'real' humanitarian assistance type emergency response operation

Appendix **B4.10**

Typical Checklist for *GO Team deployed*:

GO Team / (Humanitarian Assistance Team / HAT) - **SRC (L)** - Assigned **Team Leader** (TL)

Task Specific Checklist for *appointed* TL:

	TASK	☑ ?
1		
2		
3		
4		
5		
6		
7	etc.	

Note - this 'blank' checklist has been included here to remind the 'reader / potential planner / potential user' that it must be fully prepared / completed, if it is intended (as it must be) for use in a 'real' humanitarian assistance type emergency response operation

Appendix **B4.11**

Typical Checklist for *GO Team deployed*:

GO Team / (Humanitarian Assistance Team / HAT) - **HAC** (FAC) - Assigned **Team Leader** (TL)

Task Specific Checklist for *appointed* TL:

	TASK	☑ ?
1		
2		
3		
4		
5		
6		
7	etc.	

Note - this 'blank' checklist has been included here to remind the 'reader / potential planner / potential user' that it must be fully prepared / completed, if it is intended (as it must be) for use in a 'real' humanitarian assistance type emergency response operation

Appendix **B4.12**

EXAMPLE ONLY

Typical Checklist for *GO Team deployed*:

GO Team / (Humanitarian Assistance Team / HAT) - **JFSOC** - Assigned Deputy **Team Leader** (TL)

Task Specific Checklist *for appointed underline deputy* TL:

	TASK	☑ ?
1		
2		
3		
4		
5		
6		
7	etc.	

Note 1 - this 'blank' checklist has been included here to remind the 'reader / potential planner / potential user' that it must be fully prepared / completed, if it is intended (as it must be) for use in a 'real' humanitarian assistance type emergency response operation

Note 2 - The *JFSOC* concept is currently *only* used in the USA and a small number of other countries

Where there is no country requirement to establish and operate a JFSOC (or such requirement simply does not exist / is not possible [think 'developing' countries' as one example of where this might apply]) all appropriate / impacted airlines are advised to 'lobby' with such countries etc. for same to be internally established or (failing this) similarly lobby for the 'airline' itself to be permitted to locally set-up and operate (in such countries) its own JFSOC *equivalent* facility / service

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Sample (typical example) **Leaflet for use in Humanitarian Assistance Team Recruitment**

Ideally, all of the information provided in this appendix C should fit onto a single A4 sized document, printed back to back and folded (in the right places) by a professional printing company. Adequate budget should be provided for this

Leaflets can be distributed via various means - including distribution during induction training for airline new joiners; displayed at 'reception desks, waiting rooms & recreational areas' around airline premises; electronically available via company intranet; via HAT volunteers etc.

ABCX Airways - (Airline) Humanitarian Assistance Team

DO YOU WANT TO BECOME A 'HUMANITARIAN ASSISTANCE TEAM' VOLUNTEER?

Are you interested in?

- ♥ Personal development & recognition
- ♥ Helping others (including colleagues) in need - at time of crisis
- ♥ Personal satisfaction in helping others in general
- ♥ Doing something 'out of the ordinary'
- ♥ Being part of a great team

…………………… then please continue reading:

WHAT IS AN AIRLINE HUMANITARIAN ASSISTANCE TEAM?

The ABCX Airways Humanitarian Assistance Team (or 'HAT') typically comprises *trained volunteers* recruited from all parts of the airline (and parent / subordinate / associate company [companies] too, if appropriate)

Its *primary objective* is the provision of basic humanitarian assistance services to victims of *major air accidents* involving ABCX Airways and / or a partner airline. Such service provision also extends to the family, relatives & friends of air accident victims - regardless or not of whether the latter survive the accident

As an ABCX Airways related air accidents can potentially occur absolutely anywhere in the world, at any time - the HAT is expected to be able to provide timely assistance on a 24H, world-wide basis

Secondary HAT objectives include:

- Providing humanitarian assistance services to victims of other types of crisis involving the airline
- Assisting the airline with humanitarian aspects of Business Continuity / Recovery type issues
- * Assisting work colleagues (including other HAT members) with personal crisis matters

* Note: This service is otherwise widely known as '*peer support*' and is provided by the HAT at a *basic* level. Where a deeper level of support is required, *professional* mental health services are required. Some airlines provide for the latter by permanently establishing a specialist department, often known as an 'employee assistance centre', which typically has ready and rapid access to such professional services

HERE ARE SOME OF THE TYPICAL PERSONAL QUALITIES REQUIRED OF A HAT VOLUNTEER

- Compassionate
- Committed
- Enjoy working with people
- Good team member / player
- Able to work well under pressure and stress
- Flexible
- Tactful
- Diligent
- Patient
- Determined
- Discrete
- Physically & mentally 'fit' - to a reasonable degree

Note - HAT volunteers should typically be capable of potential deployments away from home & work for fairly long periods (typically up to two weeks & possibly longer) - sometimes under fairly harsh personal & environmental circumstances. This not only requires a strong personal commitment but also positive support from the volunteer's work (line) manager(s) and, where appropriate - family, relatives and friends

A small number of volunteers are *also* required for HAT related crisis *support and administration* duties at or near airline HQ / home base, at airports located in the country where the airline is main-based etc.

I WANT TO VOLUNTEER BUT AM NOT SURE IF I WOULD BE 'SUITABLE'?

In general, all those volunteering for the HAT will be permitted to undergo the initial training process. Once this is completed a review will take place to ensure that, insofar as possible, the volunteer is happy with the HAT and vice versa. If so, further training, exercising etc. can take place

It is ABCX Airways policy that Line Managers encourage existing and potential HAT volunteers within their departments / business units - unless there is an overriding, identified department / business unit commitment anticipated at time of major crisis, which is manpower critical

Furthermore, if you have already been assigned a significant (non-HAT related) crisis response duty as part of the overall ABCX Airways emergency / crisis response plan, you should typically not volunteer for the HAT

WHAT TRAINING WILL I RECEIVE?

The airline will provide both initial and recurrent training for all HAT volunteers. Training will be delivered via a mix of classroom, e-learning and self-study

Initial training typically takes two full days and includes theory and practical work. Recurrent training involves up to one or two full day's commitment annually

Opportunities exist within the HAT for advancement to 'team leader', 'team manager' and similar supervisory posts. Appropriate further training will be provided for those taking up such assignments

PAYMENT

HAT volunteers are unpaid

However, and in general, all *reasonable* expenses will be reimbursed when associated with HAT duties - including training commitments. More details will be provided during training

Additionally, a number of *incentives* may be run by the airline from time to time - aimed at encouraging new volunteers and retaining trained volunteers

I HAVE READ & UNDERSTOOD THE ABOVE & WANT TO VOLUNTEER - **WHAT SHOULD I DO NOW?**

You can either fill out the application form available from …………………………….or via the airline intranet at ……………………….

Alternatively, please telephone …………………… or ……………………during office hours

A current schedule for HAT training courses can be found at …………………………….

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Appendix **D** - to CRPM Part 1 (ERP) / Volume **3** Guideline

Additional (general & informal) **Information** concerning the HAT

The following information is provided in the *hope* that some (if not most) of it will be useful to 'those that need it most'

It comprises an *informal* collection (**in no particular order**) of various pieces, from various sources - which should provide a better understanding of *some* areas and issues potentially confronting a deployed HAT - particularly re a catastrophic aircraft accident (aviation disaster) type scenario

Some of the information is original - and some taken from other, existing documents / websites etc. Inevitably there is some overlap / degree of repetition

Some of the information is believed to be already available within the 'public domain'. Furthermore, this document has been produced specifically for training / teaching purposes. Consequently, the author / owner of this document (the one you are now reading) believes that any associated copyright has not been unlawfully (or even ethically) breached. However, if any person, entity etc. has cause to disagree - please contact the author / owner accordingly at:

info@aviation-erp.com

Potential HAT Duties, Tasks + Some General Info / Considerations

- Provide for the *welfare* (in all of its appropriate forms - as applicable) of *aircraft accident* * *victims* (including the deceased)

  * Reminder - the concept of 'victims' as used above includes 'air victims' & 'ground victims' - but does **not** include 'family, relatives and friends'. Victim 'status' relates to being 'alive / dead / injured / uninjured / missing / circumstances not known'

- Provide for the *welfare* (in all of its appropriate forms - as applicable) of '*others*' considered to have been adversely affected (in some 'valid' way) by the adverse consequences of a major aircraft accident e.g. typically including (list is not exhaustive)

  - Family, relatives & friends (FR) *associated* with accident victims - in some 'valid' way
  - Responding / involved airline staff (including HAT members themselves) and equivalents
  - Other airline employees - as appropriate
  - Other (non-airline) crisis responders & similar etc. - as appropriate

- Provide (arrange for) '*Psychological First Aid*' (PFA) / '*CISM Defusing*' to all who might need it - but only when potential 'recipient(s)' ask for and /or agree to the provision of same

- Identify need for and recommend / facilitate / arrange *further* (advanced / expert) *psycho-social intervention*, as appropriate

- Identify need for and recommend / facilitate / arrange *further assistance outside the scope of what can be provided by an airline HAT* e.g. appropriate government etc. (all levels) services

- Where appropriate & able so to do - *assist colleagues* (e.g. [non-HAT] airline & airport etc. staff) at airport(s), wherever etc. - *with humanitarian assistance related type duties* re 'local' management of the emergency / crisis

- Assist in establishing / manning / operating a **H**umanitarian (Family) **A**ssistance **C**entre

- *Obtain* FR / next of kin (NOK) etc. *contact details* from surviving accident victims / other available sources and *pass on same* (without delay) *to airline's CMC* and / or *Emergency Call / Contact / Information Centre* and / or wherever else such information might be required / best used

- *Obtain* & *pass on* (to appropriate / authorised parties needing same) *other essential information* provided by surviving victims and / or associated FR and / or others

- *Assist surviving victims to make contact* with associated FR & vice versa etc.

- *Visit / support injured victims* (and any accompanying FR etc.) *in hospital*(s) / wherever

- *Visit / support uninjured victims* (and any accompanying FR etc.) *in mortuaries* / wherever

- *Visit* (or contact by telephone etc. if visit not practicable) *and support associated FR at their homes* (wherever) - e.g. if not using the direct services of any operating HAC / equivalent facility (also being 'over and above' any services provided separately by [but in conjunction with] the accident airline's emergency call / contact / info centre)

- *Assist* with *re-uniting process* of e.g. accident victims with their associated FR

- *Assist* with *travel, accommodation, finance & similar* arrangements as made e.g. for surviving victims and / or associated FR etc.

- *Assist in ensuring that accident victims and / or associated FR are regularly briefed* on the latest available information / situation re the accident and its aftermath - including those FR who choose to remain 'at home' (wherever home might be)

- When surviving accident victims and / or associated FR are provided with available information (particularly sensitive info) regarding the accident - *do everything possible to ensure that they receive the details <u>before</u> they are released into the public domain*

  Where the information is of a *personal* nature, the associated *permission* of such victims / FR (as appropriate) should be obtained <u>before</u> such release. (Note: It is *more likely than not* that in many parts of the world the requirements of *this* bullet-pointed para will be practically impossible to meet - for various reasons not expanded further upon here. In particular, this concerns the totally unacceptable consequences / impacts of associated data protection type matters)

- *Arrange for procurement and distribution of personal and 'commissary' type items* etc. (at airline expense) to meet the immediate needs of surviving accident victims and / or associated FR, in accordance with company guidelines (e.g. clothing & footwear; personal hygiene items; sustenance [food and drink]; permitted medications etc.)

- *Assist* (when so directed) with gathering of *ante-mortem information & materials* from FR etc.

- *Consult and support* surviving victims and / or associated FR *regarding return of mortal* (human) *remains*

- *Consult and support* surviving victims and / or associated FR *regarding personal effects* and their return

- *Represent the airline* (with airline permission) *at memorial services & funerals* - if so requested by surviving victims and / or associated FR

- *Consult* (with airline permission) with surviving victims and / or FR (re their 'inputs / requirements' etc.) concerning the *construction and inscription of* / *on any physical memorial* / *monument* etc. which the airline may erect (on behalf of such victims / FR etc.) in memory of deceased victims

- *Keep an accurate written log and appropriate records / reports re all consultations and decisions made with families and of any actions taken - plus any other significant events* (including details of associated expenditure)

Above list not exhaustive - there are potentially many more HAT related duties / tasks required

Q & A

Some Typical Guidelines for 'Handling' the Media

	Action	☑ ?
1.	Avoid situations where you might be 'forced' to talk to the media. Particularly avoid being **'door-stepped'** (i.e. where the media surround and confront you with 'demands' for information; statements etc. This typically occurs e.g. when walking from car to office - and vice versa BUT .... It can also happen at your home; at the HAT / JFSOC etc!)	
2.	Before being 'forced' into any action as per checklist item **3** below, try to contact and take direction / instruction on dealing with the media - from **1)** appropriate airline HQ management (i.e. typically from Corporate Communications and / or Public Relations) and / or **2)** the appropriate (airline) Country / PR Manager etc. (if there is one?) or **3)** (exceptionally and as a last resort) the local PR Agency engaged by the airline (if any?) *(Follow any instructions given exactly & provide regular feedback 'to whoever needs it' on local media situation, until such time as the airline GO Team's PR experts can relieve you locally)*	
3.	If you are 'forced' to deal with the media and it has not been possible to take direction / instruction as per **2** above, (for whatever reason), the most appropriate senior manager available might wish to use / adapt the following 'script' for guidance: (**NB**: no one except this senior manager should speak to the media except as described further below): *'...................Please contact the airline for formal comment on this matter. However, what I can say is that it is standard airline practice to activate its Crisis Management Centre immediately at times such as this. This Centre is expected to widely publish contact information specifically for media use - as soon as possible,* *Obviously our first priority here locally is to look after the well-being of all those involved - both passengers & crew - together with any associated families, relatives & friends - insofar as we are able to. Our thoughts at this moment are with all such persons. Thank you ....'* **DO _NOT_ TAKE ANY QUESTIONS** For any other staff similarly confronted by the media, simply state something like: *'................. I am unable to comment on this matter. Please wait for formal comment directly from ABCX Airways HQ ....'* (IMPORTANT - **Never use the term 'no comment'**)	
4.	Be prepared to read out press releases / statements to the media (in English and / or the local language[s]) - as provided and directed by airline HQ etc.	
5.	On arrival of airline GO Team, a senior, appropriately experienced *local* (airline rep) manager should be assigned to assist the ABCX Airways Crisis Communications sub-team (part of the GO Team) in all matters re *local* dealings with the media	
6.	Any *unwanted /uninvited* intrusion on victims' and / or associated FRs' privacy by the media should be reported to the GO Team HAT Co-ordinator immediately (via your Team Leader if available). In extremis - report the event directly to the local law enforcement agency /police / security	
	End	

Looking after those Adversely Affected

Physical / *Psychological Reactions* of those *affected* by a *Major Aircraft Accident* etc.

A catastrophic aircraft accident (aviation disaster) is a major, traumatic event which can adversely affect accident victims physically (in body) and / or psychosocially (in mind and behaviour). The same generally applies (to a degree and with regards to the psychosocial impacts) to family, relatives & friends (FR) **associated** with such aircraft accident victims - and may also affect associated ***crisis responders*** (including HAT members) themselves

In the immediate / shorter term aftermaths of such a situation, victims and / or associated FR may be in a completely 'surreal' environment, dealing with circumstances beyond their experience & control - and thus possibly dependent (wholly or partially) on the accident airline and others - for the provision of care, assistance, information etc. - together with other forms of welfare / support - as appropriate

The following deals with some of the reactions** and / or **symptoms** (of e.g. surviving victims and their associated FR) **which you** (the HAT or similar responder) **might come across, in such circumstances

HAT members need to be aware of the reactions and emotions which * surviving accident victims and / or associated FR may be experiencing. However, it is important to remember that HAT members are not mental health professionals and it is, therefore, ***not for the HAT to diagnose or provide advice on someone's state of health - mental or otherwise***. Also remember that everyone reacts differently

* Note - always bear in mind that because of the work they do, HAT members themselves (and similar crisis responders) may also be subject to similar reactions and emotions

Whilst working with surviving victims and / or associated FR it is possible that you (HAT member) may encounter situations which are beyond your ability / capability to handle. If so, seek assistance from your team leader and / or any specialist responders (e.g. physical or mental health specialists) present - as soon as possible

The following are just *some* of the *physical signs / symptoms* of mental stress / trauma:

- increased heart rate and blood pressure
- shortness of breath
- nausea
- diarrhoea
- cool, clammy skin
- trembling / shakes
- headaches
- weakness
- tingling or heaviness in arms or legs
- lack of physical coordination
- fainting or dizziness
- appetite change

Some examples of the general *cognitive* processes which may also typically become present under mental stress / trauma include:

- memory problems
- disorientation
- difficulty comprehending / mental confusion
- unable to prioritise
- loss of objectivity

Some examples of general *behavioural* responses to mental stress / trauma include:

- Difficulty in communicating
- Withdrawal
- Hyperactivity
- Emotional display (anger / violence, crying) etc.
- Increased use of alcohol, tobacco, medication / drugs (legal or otherwise) etc.

More *specific* mental health problems which **_may_** (repeat - 'may') present themselves following a major traumatic event include (starts on next page):

Acute Stress Reaction

Acute stress reaction - *ASR* ('psychological / mental shock') is a condition which might arise in response to a traumatic event. *(It should not be confused with the unrelated [physical] circulatory / bloodstream condition of 'shock')*

The onset of ASR is typically associated with specific physiological reactions in the brain's 'sympathetic' nervous system, via the release of adrenaline (and to a lesser extent noradrenaline) from glands in the brain. In other words - the well-known '*fight* or *flight*' response
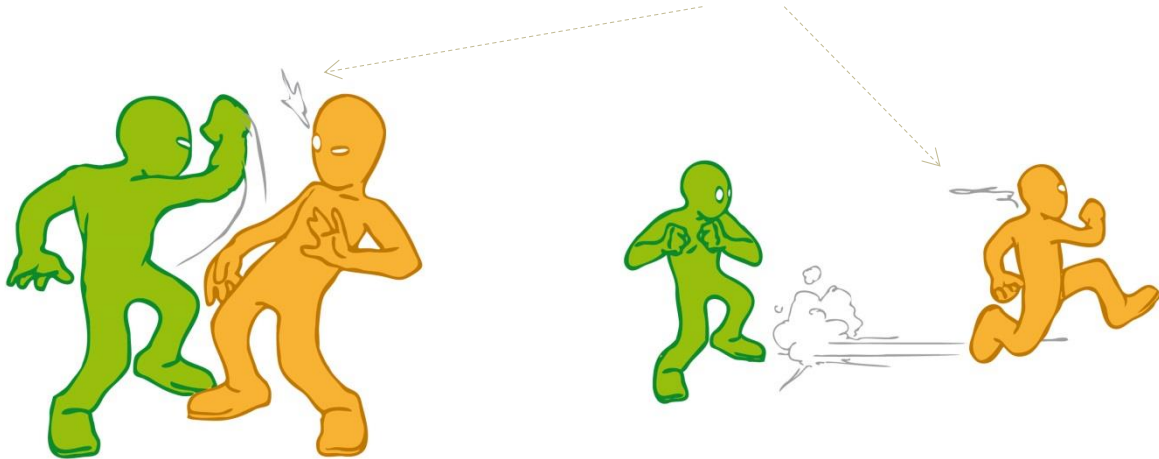
Causes

ASR (if it occurs) is typically the emotional (mental) consequence of a traumatic event in which a person experiences and / or witnesses something which causes disturbing and / or unexpected fear, stress and (possibly) physical pain. It is a (less extreme) variation of '*Acute / Associated Stress Disorder*' (ASD) and, at a more intense level - of '*Post-Traumatic Stress Disorder*' (PTSD)

Symptoms

ASR symptoms show significant variation but typically include an initial state of 'daze / confusion' - accompanied by some constriction of the 'field of consciousness', 'narrowing of attention', 'inability to comprehend stimuli', 'disorientation' etc.

The above might be accompanied by further withdrawal from the surrounding situation (to the extent of being what might be termed a 'dissociative stupor') and / or by any / all of agitation; over-activity; anxiety; impaired judgement; confusion; detachment; depression etc

Signs of panic anxiety / attack (rapid pulse, sweating, flushing) may also be present and another (more extreme) symptom relates to 'experiencing' the causal traumatic event (e.g. via thoughts and / or dreams and / or flashbacks)

Symptoms might appear relatively quickly following an associated stressful stimulus / event - and often disappear gradually over the next few days. Partial or complete amnesia of the episode may occur. If, however, symptoms last for more than a month or so, then the person *might* be suffering from the more 'intense' *ASD* or even 'more intense' *PTSD*

Anxiety / Generalized Anxiety Disorder (GAD)

GAD can occur at intervals during an individual's everyday life - but is more likely to occur (and increase in severity) after a significantly traumatic event. It is estimated that up to 30% of the latter will suffer from a greater or lesser level of GAD at some time during the 12 months post event. GAD symptoms can (and often do) overlap with those of depression, typically presenting (for both) as:

- Panic attacks
- Feelings of being unable to cope with what is happening
- Depression
- Feeling tense / nervous
- Fidgeting

For HAC (FAC) Managers and / or HAT Team Leaders and / or Line Managers - it is important to be aware of GAD, as associated symptoms may become apparent in impacted persons (e.g. the HAT) - including after they have resumed a 'normal' work regime following e.g. a particularly traumatic deployment

GAD treatment typically involves counselling and support. Use of appropriate * *'coping mechanisms'* may also help. It (GAD) typically subsides with time, support and an understanding personal environment (family and friends, work management / colleagues / peers etc.). The need for 'Medical / Mental Health' intervention is relatively rare

* Note - psychological coping mechanisms might be described as the sum total of ways in which we deal with minor to major *mental* stress and trauma. Some of these mechanisms take place unconsciously; others are 'learned behaviour' and still others are skills we might consciously master (and thus which can be taught) in order to reduce stress or other intense emotional problems, such as depression. Not all coping mechanisms are equally beneficial and some might even be detrimental!

The body / brain has an internal (unconscious) set of coping mechanisms when encountering stress. This includes the *fight / flight* reaction already mentioned further above. The onset of mental illness itself may be a form of an unconscious, coping mechanism

We also learn coping mechanisms as we progress through life. Some people tend toward coping mechanisms which are helpful, whilst others may choose those which might potentially cause more problems. For example, persons using psychological stress as a reason e.g. to exercise - are using a *healthy* coping mechanism. Persons turning to e.g. *alcohol, drugs*, *eating disorders, workaholic behaviour* etc. - are using coping mechanisms which can be both *dangerous* and *unhealthy*

Both children and adults can benefit by *learning* coping mechanisms from mental health professionals & similar, especially when they are suffering from mental illness and / or have turned to unhealthy forms of dealing with stress

In this sense, coping mechanisms are a set of practiced and learned behaviours which help us better respond to stress. We may not always be able to control the amount of adrenaline that pumps through our bodies in stressful situations, but many therapists believe that we can learn to control the associated reactions to it

'Learned' coping mechanisms in the therapeutic sense can involve meditation, cognitive behavioural therapy and recognition of the body's inappropriate response to stress. They can result in fewer incidences of panic, inappropriate anger and / or turning to unhelpful behaviour

Post-Traumatic Stress Disorder (PTSD)

Simply hearing news of a very traumatic event(s) can leave a lasting psychological effect. However, if a person is ***actually present / directly involved*** during / with such an event, it is possible that he / she will become extremely distressed and may suffer (associated) deep *emotional* injury. There is no doubt that such associated reactions can seriously hamper and interfere with a person's life

Related to the above, PTSD covers a *range* of symptoms which ***may*** develop in response to someone experiencing a major traumatic event which is outside of 'normal' human experience. It is often a considerably delayed response post the event concerned occurring

PTSD diagnosis recognises that there are events and experiences beyond our control, filling us with fear or horror, potentially leading to extremely disturbing, psychological / psychosocial symptoms and behaviour respectively

PTSD - Associated Symptoms and Behaviour

If a person encounters a major traumatic event / experience etc. he / she may simply feel emotionally numb to begin with and stronger feelings may not emerge for some time. Sooner or later (possibly months or even years later) the person *may* develop adverse emotional and physical reactions and changes in behaviour, which ***might*** include some of the following (in no particular order and the list is not exhaustive):

- reliving aspects of the trauma / vivid flashbacks (feeling that the trauma is happening all over again)
- intrusive thoughts and images
- nightmares
- intense distress at real or symbolic reminders of the trauma
- avoiding or repressing memories
- keeping busy
- avoiding situations which remind one of the trauma
- feeling detached, cut off and emotionally numb
- being unable to express affection
- feeling like there's no point in planning for the future
- being easily upset and / or angry / irritable and / or aggressive
- lack of concentration
- extreme alertness & thus disturbed sleep
- panic response to anything to do with the related trauma event
- being easily startled
- sever anxiety and / or phobia and / or depression
- dissociative disorder
- suicidal

Many of the above are typical reactions (for anyone) to a major traumatic event - such symptoms usually disappearing in a relatively short period of time - but if they last for longer than about a month and / or they are extreme, a diagnosis of PTSD may be appropriate

In general, counselling and support are the most beneficial forms of therapy for PTSD - but in serious cases, psychotherapy and prescribing of appropriate drugs might be appropriate

Reminder - the HAT does not diagnose or 'treat' victims and associated FR who might be suffering from behavioural mental disorders - this can only be done by qualified clinicians. However, the HAT *can and should* be alert to typical symptoms and should advise the victim to seek assistance from professionals - in cases which they feel might be appropriate

Depression

Although clinical depression is caused by a chemical imbalance within the brain, traumatic events can trigger it / make it worse. As an example, in the case of death of a 'loved one', depression symptoms (in grievers) may start to present soon after the event - but are more likely to show themselves later in the grieving process

Depression can be diagnosed as mild, moderate or severe - the severity typically depending on the individual, rather than the situation. *Depression should be diagnosed and treated by a professional clinician*

HAT members should be aware of the associated symptoms so that they might be able to better advise the 'sufferer' to seek appropriate professional advice

Symptoms include:

- Early morning waking
- Loss of appetite
- Loss of libido (sexual drive)
- Feelings of guilt on a regular basis
- Inability to function on a 'normal' basis
- Tearful on a regular basis
- Feelings of dread

In more severe cases:

- Decrease in level of personal hygiene
- Coping dependency on e.g. drugs, alcohol, smoking etc.
- Aggression

Note - depression cannot typically be 'treated' by use of 'counselling and support' alone. Appropriate drug treatment (anti-depressants and similar) is usually prescribed by an appropriate professional

Adjustment Disorder (AD)

Although not a true mental health disorder it is worth knowing about AD

AD can occur as a result of common, life-changing events such as marriage, divorce, bereavement, redundancy or even something like moving house. It can and does, however, become more pronounced in conjunction with psychological trauma - and may need intervention to support and strengthen individual coping mechanisms

Whilst clinical depression can be associated with grieving - 'AD' may be present when the associated *'life-changing'* situation is 'mourned' - in much the same way as that of the *'personal loss'* type scenario

The two disorders are typically treated in different ways and mental health professionals can be particularly helpful in identifying either disorder and how then to best support the associated recovery

AD symptoms include:

- Panic attacks
- Inability to sleep - including early morning waking
- Lack of appetite
- General worry
- Inability to cope with everyday situations

AD is usually a 'normal' side effect of everyday realities - typically *not* requiring 'professional' intervention. Recovery typically requires time and use of appropriate coping mechanisms

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It may have been noted by many lay-person readers (i.e. non-medical / mental health specialists) that the above *symptoms* for the various 'post trauma' mental health type problems listed on pages 144 - 150 (there are many more that have *not* been so listed!) tend to merge into a rather 'confusing mass' - which can start to look just about the same for all of the associated problems - and thus might make it difficult to work out 'who might be suffering from what'

This is precisely why layperson trained HAT members (and equivalents) should *not* attempt to diagnose and / or treat such conditions themselves, apart from the application of '*psychological first aid - PFA*' etc. where deemed necessary / if so agreed by the recipient

However, 'diagnosing' is very different from *recognising* that some type of post traumatic behavioural problem exists - and it *is* a primary HAT role to try to recognise same and, if so recognised (or suspected), recommend / facilitate specialist investigation / intervention without delay

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Working with Surviving Victims

Image by Justin Metz - for Newsweek

An aircraft accident typically occurs with little or no warning. In such circumstances *surviving* (* uninjured) victims (in the immediate aftermath) are probably lacking the 'personal' support structure which they might otherwise have had in more 'normal' times (e.g. at home / in familiar surroundings) - i.e. they may (probably will) be well outside their 'comfort zones'

(* The injured will also need to deal with this [sooner or later] of course)

Victims are obviously unable to *pre*-prepare for such a situation, consequently it typically leaves them dependent on the accident airline (and others) to satisfy their *initial* basic needs post-crisis, including those related to safety and security, mental health / trauma, information acquisition etc.

Responders' (including the HAT) recognition and understanding of such needs, and how they might be fulfilled, can assist in preventing / mitigating such ** 'secondary assault' / further trauma

** *Secondary Assault* can occur when someone has already been through a major traumatic event (*'primary assault' on their mental well-being*) and then suffers further 'mental damage' in the shorter term afterwards - e.g. someone who (*almost always unintentionally*) *says* and / or *does* something which exacerbates the primary assault problem

An airline's immediate & shorter term humanitarian care, assistance and support operations (post crisis) - can positively contribute to victims' rate of recovery from associated mental trauma

(Of course, similar to the above [primary and secondary mental assault] also applies to others - particularly family, relatives and friends [FR] of associated accident victims - and even crisis responders [including HAT members] themselves)

Needs of Surviving Victims

The *initial, basic needs* which might typically need addressing in the immediate to shorter term aftermath of a major crisis event typically include (list is not exhaustive):

- Security and shelter
- Appropriate medical treatment
- Communication (especially with loved ones) & information
- Sustenance (food and drink)
- Psychological help (First Aid) - if needed and requested / accepted
- Personal hygiene facilities e.g. toilets / washrooms / showers
- Adequate and clean clothing
- Other forms of 'welfare' as appropriate ....etc.

Once the above have been / are being met, victims might typically begin to think more about the aircraft accident related events (being the subject matter which we are interested in here of course) which have involved them e.g. it is common to run through associated events in their minds, over and over again. They might also e.g. mentally re-run the (probably traumatic) imagery, sounds, smells etc. experienced; make up their own, 'mental picture' of what has happened to them etc.

Furthermore, there will typically be a need to talk about the accident (possibly going over it again and again) and ask associated questions (some of which might appear inconsequential)

* It is important to try to answer such questions where feasible. If you (HAT member) are unable so to do (for whatever reason), try to engage someone who can e.g. maybe a member of any Emergency Services present; maybe an appropriate airline 'expert' such as a member of flight-crew, cabin crew, aircraft engineer; maybe a medical (physical and / or mental health) specialist; maybe an appropriate, religious representative etc.

* Missing parts of the 'what happened' jigsaw can lead to further mental trauma, as can thoughts of e.g. "*what if*.................." / "*if only*...................." etc.

Care should be taken that any information which *is* provided is accurate, honest and open - to the greatest extent permissible / practicable / available / advisable. Also speculation and the apportionment of blame etc. should be avoided

As per the above, there will almost certainly be constraints on what *can* be communicated (e.g. concerning identification of fatalities; re the cause of the accident etc.) for all sorts of reasons. Thus HAT input (if any) on such matters should be carefully considered and managed and, where appropriate, specialist advice sought and acted upon, via the HAT management structure

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Once the *initial* (basic) needs of *surviving victims* have been met, they will thereafter typically require *similar types* of ongoing support and assistance *as might already be being provided* (separately up to this point) to any *associated FR* - see the information starting on the *next* page for more details - and apply it accordingly, but now in a 'surviving victim' context, *in addition to* the 'FR' context, as aforementioned

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HAT - Working with Associated Family, Relatives & Friends (FR)

General

For * associated FR the 'aftermath' of a major aircraft accident might be difficult to deal with - particularly as some (possibly many) will feel 'powerless' as to what they might need to do 'next'

* Reminder 1- by definition, associated FR would **not** have been travelling on board the accident aircraft - **nor** can they be classified as '*ground victims*'

Reminder 2 - from hereon, where the words '*Family, Relatives and Friends - FR*' are used, they also apply (if in context) to *surviving accident victims* - where applicable / appropriate

During real / actual post-crisis interviews in the past, FR (in general) have indicated that their most important concern is the receiving of timely, accurate and on-going *information* concerning the status / whereabouts etc. of those they are enquiring / concerned about

It is thus important that genuine 'associated' FR are informed and updated to the greatest degree practicable / possible / advisable in the circumstances etc. - e.g. via contact from / with the airline's emergency call / contact / info centre; via one on one family briefings at the HAC / by telephone / by video conference etc.; via formal 'all persons' HAC briefings (again, using telephone / video conferencing etc. for FR unable to attend the HAC) etc.

Ongoing / latest crisis related information should be briefed to the HAT (in general) e.g. by Team Leaders, via face to face briefings and / or briefing notes etc. - all of which should be updated and re-briefed / passed on again - as soon as possible after new information becomes available. Team Leaders etc. will advise their teams whether or not such updates can be passed on immediately to those being assisted e.g. it might have been decided (for good reason) to release the updated info at a HAC briefing instead - so that all present and affected can learn about it *at the same time*

Remember that as a HAT member you should provide only the information which you have been authorised to give. Also take care not to promise anything which cannot be delivered

Be careful when speaking about the accident to colleagues etc. in circumstances where FR (and anyone else for that matter) might be able to overhear. Similar applies when in a 'public place'

You should let FR you are assisting / supporting know if you are going to be out of contact for a (significant) period of time and ensure (via your team leader) that a temporary replacement be provided. If there is a need to change HAT members for any reason (temporary or permanent), the assigned FR should ideally be 'introduced' to the replacement HAT member by the departing HAT member. The latter must also remember to update and pass on (to the replacement person) all appropriate information and paperwork concerning the assigned FR

When working / interacting with FR some simple considerations (a few for now - more will be provided later herein) typically include:

- ▪ Do position yourself either at eye level or below the FR i.e. try not to look down on them
- ▪ Do not minimalize / trivialise the situation
- ▪ Do re-assure them that you will do everything possible to help
- ▪ Do refer to any deceased person(s) by name - if known

As with accident victims, there is a natural process which associated FR might typically experience when coming to terms with 'what has happened' - and beginning to 'move on'. This is why one often experiences e.g. FR wanting to know in great detail how a loved one died (which is perfectly normal in the circumstances). Honest, accurate and timely answers should be provided where practicable / possible

It is also advisable to answer only what is being asked i.e. do not volunteer further information - especially if it might be damaging. A typical example of the latter might be:

A husband (associated FR) asks you (HAT member) "…………. was my wife (deceased accident victim) still wearing her wedding ring………….?"

When you subsequently check with the Pathologist / Police / whoever, they confirm that the body was burned beyond recognition (but positive ID had been confirmed using dental records) - and that the wedding ring was still attached to the bone of the finger

Your eventual answer to the husband might simply be "yes, she was still wearing her wedding ring".

It would almost certainly not be helpful to volunteer the additional information you were given re the state of the body - unless it is specifically asked for - and, even then, specialist advice should be taken before responding

In certain situations, friends / acquaintances etc. of bereaved FR may come and ask you for advice in how to deal with / help etc. their friends (bereaved FR) who are 'hurting' etc. Some things you might suggest (as appropriate) include:

- Don't worry about what to say - just being there shows that you care
- Just listen where appropriate - and also know that there can be a time for silence
- Avoid telling them *'how to feel'* or *'what to do'*
- Help with practicalities - prepare meals, care for children, do some washing and ironing etc.
- Maintain reasonably regular contact, especially after the first couple of months (when it might appear to the FR concerned that 'support' is e.g. being withdrawn / lessened - as he / she might be perceived as e.g. 'getting on with life' again. Whilst the latter might be true, it is important to maintain support / help - albeit [possibly] at a gradually reducing level)
- Avoid clichés and easy answers. Where appropriate don't e.g. tell them they will *'get better'* or *'it will get easier with time'* etc.
- Avoid reminding the FR concerned about the benefits of what they still have remaining to them (such as close family members other than the deceased). All they might want to think about in the shorter term might be their loss

Viewing of Body / Human Remains

Where such viewing is permitted / possible - the HAT member supporting the associated FR must always liaise (typically via the associated HAT Team Leader) with the appropriate, professional personnel on the procedure to be followed - and then assist the family to understand and follow that procedure accordingly

HAT members are typically not expected to accompany the associated FR at the viewing (although they can if they so wish, providing that they have the necessary permissions / approvals etc. required). Regardless, the associated HAT member should ensure that an appropriate professional person always accompanies associated FR during such viewings

Where professional / expert advice is received recommending that 'remains should ***not*** be viewed' - then a suitably qualified and experienced person(s) should be asked to explain to associated FR why the viewing is not possible / recommended) and (if the FR still insist on viewing ***and*** this is then permitted) explain what to expect - and then attend the viewing with them. Generally speaking the associated HAT member should ***not*** attend (even if permitted / invited) in order that they (themselves) are not exposed to unnecessary mental trauma

Dealing with Bereavement

HAT members may have to comfort and support victims and / or associated FR experiencing bereavement. Dealing with grieving can be emotionally draining for all concerned. People react 'differently' whilst grieving - some typical examples include:

- Talking about their feelings
- Having unanswered questions
- Being silent and / or not wanting to talk openly
- Shock and / or numbness
- Assigning blame
- Disbelief / denial - e.g. carrying on as though nothing has happened
- Focus attention on the facts / details by asking lots of questions
- Imagine that they can still see / hear the person they have lost
- Guilt e.g. as in feeling that they could have prevented the death etc.
- Anger at the world in general e.g. at themselves, at a specific person (including the supporting HAT member), at the accident airline, at God (or equivalent) - or even at the person(s) who has died
- Anxiety about coping without the person they have lost
- Difficulty sleeping, mood swings, depression, loss of appetite, lack of concentration, exhaustion
- May want to return home ASAP - especially if alone (no accompanying FR)

There is no magic formula to take away the pain of grief, but by listening carefully - appropriate care can be arranged / provided via a range of practical and supporting 'coping mechanisms'

A few (of many) more things to remember when dealing with a grieving person 'face to face':

- Acknowledge the bereaved person's loss
- Listen carefully to what he / she / they have to say
- Don't change the subject when he / she / they want to talk about their loss
- Avoid saying 'I know how you feel'; "time heals" etc.
- Avoid talking e.g. about your own bereavements, even if you have experienced a similar loss
- Concentrate on providing / facilitating useful information, support, services etc. - which the bereaved person(s) may not feel well enough to deal with themselves

HAT - Working with Children

Some general considerations when working directly with children (especially younger children) include:

- Do not leave them unattended while waiting for a parent, family member, guardian etc.
- Offer them similar type choices you might offer an adult **BUT** - make appropriate adjustments, including accounting for child's age, maturity, health (physical & mental) etc.
- Look at and speak directly to them - positioning yourself at their level
- Encourage them to speak - but do not press for details
- Provide the younger ones with toys and / or crayons and colouring books etc. (they may express themselves / describe the incident through drawing pictures; via play etc.)

Some common reactions in children include:

- Fearfulness (especially at night)
- Nightmares and sleep problems
- Anxiety (especially when separated from 'family')
- "Babyish" or attention seeking etc. behaviour (naughtiness, tantrums etc.)
- Clingy, dependent etc. type behaviour
- Bed-wetting
- Aches and pains (real and / or otherwise)
- Carrying on as though nothing untoward had happened

Don't forget the specific needs of adolescents and the 'particular' problems typically associated with teenagers - as appropriate

Where necessary, do not hesitate to ask for additional support, including that provided by associated 'professionals'. Do this via your Team Leader

HAT - Dealing with Threats of Violence / Suicide and similar

The nature of a catastrophic aircraft accident (aviation disaster) is such that it *might* lead to some surviving victims and / or associated FR feeling 'out of control' - for whatever reason(s). Whilst associated violence (manifested in any of its forms) is typically rare, it can occur. It is absolutely **NOT** the HAT member's role to intercede in violent situations

If a victim, associated FR etc. becomes (or looks like becoming) *violent*, associated HAT member(s) should withdraw from the situation / location immediately (or as soon as it seems safe to do so) and report circumstances to the nearest Police / Security official (however that might most quickly be achieved). The associated HAT Team Leader must also be advised without delay

Apart from what is written above, 'dealing with violence' is beyond the scope of <u>this</u> guideline document. An appropriate internet search should provide some reasonably relevant information on the subject…………… and it should also be adequately addressed during HAT training and exercising

If a victim or associated FR whom you are working with threatens (or is suspected of considering) *suicide*, an appropriate medical / mental health professional(s) should be informed immediately. Also inform the associated HAT Team Leader without delay

Provided that you (yourself) feel certain that you are personally not in any danger - ensure (where possible / feasible) that the person concerned is not left alone until professional assistance is in place

This subject (suicide) should also be adequately addressed during HAT training and exercising

The information found at the end of the following link might also be found helpful (Whilst it comes from a UK based organisation, its content typically applies universally):

support-someone-who-feels-suicidal-2017.pdf (mind.org.uk)

HAT - Other Situations

Whilst it is not possible to catalogue all situations which a HAT member may experience, some of the more common situations have already been covered above

It is important to remember that you (HAT member) will have had limited training and exercising opportunities within an airline context - and may thus experience situations which you believe to be beyond your ability and / or experience to handle / cope with. In such situations report the circumstances to your HAT Team Leader without delay

Know your limits and respect them!

Further General Information / Considerations

Support for Responders *(i.e. Airline & 'Airline Associated' Third Party Responders)*

General

The traumatic, psychological effects (re responding to a major aircraft accident) on airline (including the HAT itself) and associated third party responders should not be underestimated, as they can be both serious and long term, depending on roles, exposure and the individuals involved. The most common effects which might occur have already been described further above in the contexts of 'surviving accident victims and associated FR of same'. They may apply similarly to responders

All airline staff (whether deployed or at home base and whether directly or indirectly involved in a crisis response) should have easy & rapid access to appropriate mental health specialist support - both during and after a major (potentially mental health trauma inducing) incident in which they have participated in some way. Same should be extended to any third party responders engaged by the airline, where conditions & circumstances so require / permit

Airline crisis responders (+ any airline engaged third party responders also) might typically be 'assessed' by a * dedicated (specialist) 'on-site' mental health team(s). Such assessments should be carried out periodically throughout the duration of the crisis response itself and before staff leave the deployment to return to home base / home. Similar longer term (home- based) support should also be available - if deemed necessary and / or if so requested

> * Note - such specialist mental health teams can be provided (contracted) directly by the airline - and can also be provided by *local* emergency response services / authorities - the latter two usually being part of any government and / or local government response. Such airline engaged third party teams often deploy as an integral part of an airline's 'GO Team'

One of the roles of such a dedicated mental health team(s) is to regularly assess responders and make decisions on suitability to continue working (either temporarily or permanently) if psychological etc. related 'damage' to the individual is likely or has already occurred

> Note - As already discussed, such airline engaged mental health team(s) *also engage with accident victims and / or associated FR,* if requested so to do by appropriate responders e.g. the HAT - or at their own discretion

Not all individuals will suffer from all / any of the emotional disorders already mentioned further above, depending e.g. on own 'makeup' & coping mechanisms; the support network(s) which might be available to them etc.

Some airlines have their own 'employee assistance centres' or equivalents - which can provide / arrange for appropriate 'emotional' support (if needed) once airline responders etc. (including the HAT) are back in the 'normal' workplace environment. They form part of the longer term re-adjustment to 'normality'

Peer Support

Peer support (within an airline emergency response context) typically relates to initiatives whereby *certain* airline colleagues provide each other with humanitarian assistance type support, on a reciprocal and / or 'donor' basis

Typically, members of an airline's 'peer support team' are fully trained and exercised members (i.e. a sub-group) of the overarching airline HAT - the main difference being that the peer support element is typically (but not always - as will be noted a little further below) made up of *flight crew*, *cabin crew* and (more rarely) other groups such as *aircraft engineers*

The intention is that whilst the main (non-peer support) element of a HAT will provide 'humanitarian assistance services' during major crisis to passengers, ground victims and their associated families, relatives and friends etc. - the peer support element will do likewise for involved crew and their associated families, relatives and friends - pilot on pilot; cabin crew on cabin crew etc.

Furthermore, and by default, **all HAT members** (regardless of their 'normal business' roles and responsibilities) **are also each other's 'peers'**. Consequently, it is quite usual (and encouraged) for HAT members to * defuse (provide peer support to) each other where necessary / possible. Even if it is simply chatting to each other about the day's 'events' over a cup of tea or coffee - this is effective defusing (psychological first aid) at its simplest!

> * Note - the term '*defusing*' as used herein is synonymous with '*psychological first aid*'

HAT Skills

Communication

As a HAT member, much of your time will be spent communicating with victims and / or associated FR - to both impart and take information - and to ascertain their requirements. The environment in which you will be interacting may not be ideal e.g. it could be an area which is noisy / has no privacy, is uncomfortable / chaotic etc.

Remember, victims and / or associated FR will be experiencing a wide range of emotions which might add to the difficulty of communicating effectively. You need to be sympathetic, whilst also maintaining a focus on determining their needs and providing them with the necessary information, assistance and support

Goals of HAT Communication

The goals of HAT communication are to (list is not exhaustive):

- Help victims and / or associated FR to understand what has happened to them and what needs to be accomplished in the immediate & shorter term aftermaths
- Assist victims and / or associated FR in expressing themselves in matters pertaining to the crisis and events surrounding it, so that appropriate assistance can be provided
- Help victims and / or associated FR to express what is most important to them in the shorter term, including help with the questions they may have concerning the accident (e.g. information about associated loved ones') - and 'what will happen next?'
- Help victims and / or associated FR understand their options concerning the future planning which might need to take place e.g. re their potential longer term needs

Communication Tips

The 'attitude' with which you interact with victims and / or associated FR can play a major role in whether you are perceived as helping (or otherwise) to facilitate 'what is required / needed'. You need to be continually aware of this factor and act on it accordingly

There are also some simple communication considerations which are essential to ensuring that victims & associated FR do not experience what is known as 'secondary assault' e.g. avoid saying:

- "We cannot control the weather"
- "Equipment failures happen"
- "Things could have been worse"
- "You are lucky to be alive"
- "At least no one died"
- "At least you have insurance"
- "These things happen"
- "Maybe it's for the best"
- "Time heals all wounds"
- etc.

To better achieve what you are setting out to do, *plan ahead for what you wish to accomplish*, including acquisition of the information you need in order to be of best assistance

Having some appropriate, pre-planned questions & answers - together with typical information which victims and / or associated FR might require when making their own decisions, will help guide the discussion. Some suggested considerations (in no particular order and being far from exhaustive) which might assist you include:

- Be aware of and account for (insofar as is practicable / possible) cultural, religious etc. differences

- Start conversations by showing that you care e.g. acknowledge the situation and follow by expressing your sadness about things such as personal loss, the situation etc. For example:

  "Hello Mr and Mrs Jones. My name is …………… I am part of the ABCX Airways Humanitarian Assistance team. Firstly, on behalf of the entire airline, may I express our deep sorrow at the loss of your daughter, Ruth"

- There may be a reluctance to accept assistance. To start, try *diplomatically* mentioning some of the things that you / the airline might have already done for them and then move the conversation toward suggestions of other things which might be available

  For example, *"I am here to help you in any way that I can. Let's see - I have already arranged your travel and hotel accommodation - are there any (other) family members I could contact for you?"*

- Help the person(s) you are speaking with to continue communicating by use of encouragement - using expressions such as "Uh huh" or "Yes, go on" and gestures such as nodding your head etc. - when appropriate

- Be patient. Allow those you are speaking with to establish the conversation flow /pace

- Be supportive

- Be receptive to needs, concerns and thoughts

- If you are not sure of what was said or intended - ask for clarification

- Be honest - even a small misrepresentation of facts or situation can destroy a relationship

- Only say what you know to be factual - do not speculate

- Only promise what you know can actually be delivered

- Try to recognise any behavioural problems which may be present

- Use appropriate words and expressions during discussions. Some examples include:

  o Used the 'loved one's' name i.e. do not use terms such as 'victim', 'survivor', 'deceased' etc.

  o Use the word "transport" instead of "ship" or "aircraft" when discussing the movement of human remains. "Ship" or "aircraft" can imply the moving of cargo

- o Use the word "remains" instead of "body" (Use of the word 'body' might imply that remains are intact - which might not be so)

- o Use similar terminology to that used by the associated FR. If they say "crash" - then call it a crash. However, take care if using the word 'accident' (especially if circumstances indicate that the airline might be at fault). Similar applies to using the word 'incident' - which might carry the risk of minimalizing the situation

- Ask if it is okay to go ahead with any course(s) of action which might have been discussed (ideally which the surviving victim(s) and / or associated FR have decided for themselves). Allowing them to make such decisions could give them back some of the control which they *might* have lost

- Use a speaking voice and volume appropriate to your location, the situation, background noise etc.

- Ask open-ended questions and carefully pace your part of the conversation. Stressful situations tend to make us want to rush. Listen carefully and if necessary, repeat back what has been said, to clarify your understanding. Examples include:

  - o "Is there anything that you would rather not do that I can do instead?"
  - o "What concerns do you have at the moment?"
  - o "What can I get you to eat or drink?"
  - o etc.

- Do not become over-friendly or casual. Be respectful at all times

- Do not become unduly defensive (of yourself; the airline and / or its personnel etc.)

- Do not discuss blame or fault

- Avoid using airline jargon

- Do not interrupt when others are speaking

- Do not discuss similar experiences which might have happened to you

- Do not compare the situation being discussed with situations being experienced by other families

- Do not disagree - rather, look for things that you can agree on. This may be a good time to just nod your head and, at an appropriate time, move on to another aspect of the discussion

- Never start with a "NO". If you are unsure if you can provide something that has been asked for, explain that you will 'check with your manager'. Come back with something like - *"What we can do is................"* It may not be exactly what was requested, but it avoids saying 'NO'

- Do not lose your focus

- Do not show signs of impatience, lack of judgement etc.

- Resist the temptation to complete sentences for those you are speaking with

- Allow others to do most of the talking

- Do not be afraid of silence - especially from those you are assisting

Listening Skills

Listening skills are essential when dealing with an emotionally charged situation. Such skills will help you build rapport and credibility with victims and / or associated FR. Some considerations include:

- Prepare adequately

- Understand that people under stress may have difficulty communicating

- Listen carefully - focus on the feelings and meanings behind the words being said. Try to make sense of the basic message being sent. This may require you interpreting what you hear and asking for confirmation that your interpretation is correct

- Again, listen more than you talk and keep interruptions to a minimum, commensurate with what you are trying to achieve

- Again, learn to be comfortable with silence

- Use 'reflective' listening by repeating (at times) what the victim / associated FR is saying

- Summarise briefly (from time to time) what you are hearing and ask the victim / associated FR if what you have summarised is what they meant

- Do not anticipate or assume that you know what will be said

- Do not allow yourself to be distracted - stay focused on the task

- Do not judge what you have heard

Body Language

The body language you use with a victim(s) and / or associated FR should be appropriate to how they are reacting at the time. Consider your tone of voice, eye contact, expression and physical body movements - no matter how brief the contact. Considerations include:

- Use facial expressions consistent with the message you are trying to deliver

- Maintain frequent and direct eye contact - but do not 'stare'

- Avoid standing where possible. Try to sit or kneel down - and try to position yourself so as to be at or below the eye level of those you are communicating with. If you do have to stand, avoid putting your hands on your hips or folding your arms across your chest

- Provide adequate 'personal space' between yourself and those you are assisting. Associated 'Custom, Culture, Religion' etc. might be a consideration here

- Do not slouch and / or appear too relaxed and informal

- Make sure your mobile / smart phone is switched to silent / vibrate mode. If you receive a call do not answer until the circumstances are appropriate (unless you have good reason to think otherwise)

- Take care not to check your watch etc. too much - and when you do, make it as discrete as possible

- Mirror the same type of body language as the person(s) you are talking with, if appropriate (but do not 'overdo' it)

Cultural Issues (see also information provided - starting on next page)

Cultural norms differ widely around the world. As a guide - consider use of something like the following:

"I am not familiar with your customs and culture and I do not wish to offend you. Please tell me how I should address and behave with you and your family?"

AND / OR

"Please forgive me if there is anything I do which might offend you. If this happens it will not be deliberate - but please do not hesitate to tell me so that I can avoid this in future"

Do not be offended if victims and / or associated FR take you at your word and criticise your behaviour

Religious and Cultural Considerations following a Major Aircraft Accident *(with fatalities)*

How different religions and cultures deal with mental trauma e.g. following death of a 'loved one' - is so varied that is very difficult for any airline to provide credible and comprehensive information and advice on the matter. Regional and local 'customs / practices etc.' add to the difficulty

A major factor (and major headache) in this area is that airlines (particularly major, international passenger carriers) carry millions of passengers of many different nationalities - and thus of many different customs, cultures and religion (and no religion at all for some of course)

For airline accidents involving many fatalities, the airline will possibly need to consider a host of differing religious and cultural considerations - including ways of dealing with the formalities of death and 'how to behave' accordingly (mourning; funerals / cremation; flowers [or not]; dress; gender etc.)

Geo/political considerations might also need to be considered e.g. in a number of countries it is 'normal' for authorities to immediately release (to the world) the names of those on board the accident flight - whether dead, injured, uninjured etc. - regardless of whether or not associated FR have already been advised of the same information. It is also possible that disturbing images related to the accident might be freely published via the 'world wide web' etc. without thought or semblance of 'humanity'

An airline might consider basing the religious, cultural etc. elements of its own response on *facts* and / or via consultation with 'those that might know' e.g. embassies, consulates, faith organisations etc.

Some (a small number of) airlines have produced guidelines on how to be aware of and deal with the various political, cultural, religious & similar aspects which can apply worldwide - following a major aircraft accident (& similar) with mass fatalities. Most of these airlines would probably be willing to share this information with others. A search on the internet might also provide related information on the matter

Note: The above para also appears on page 167

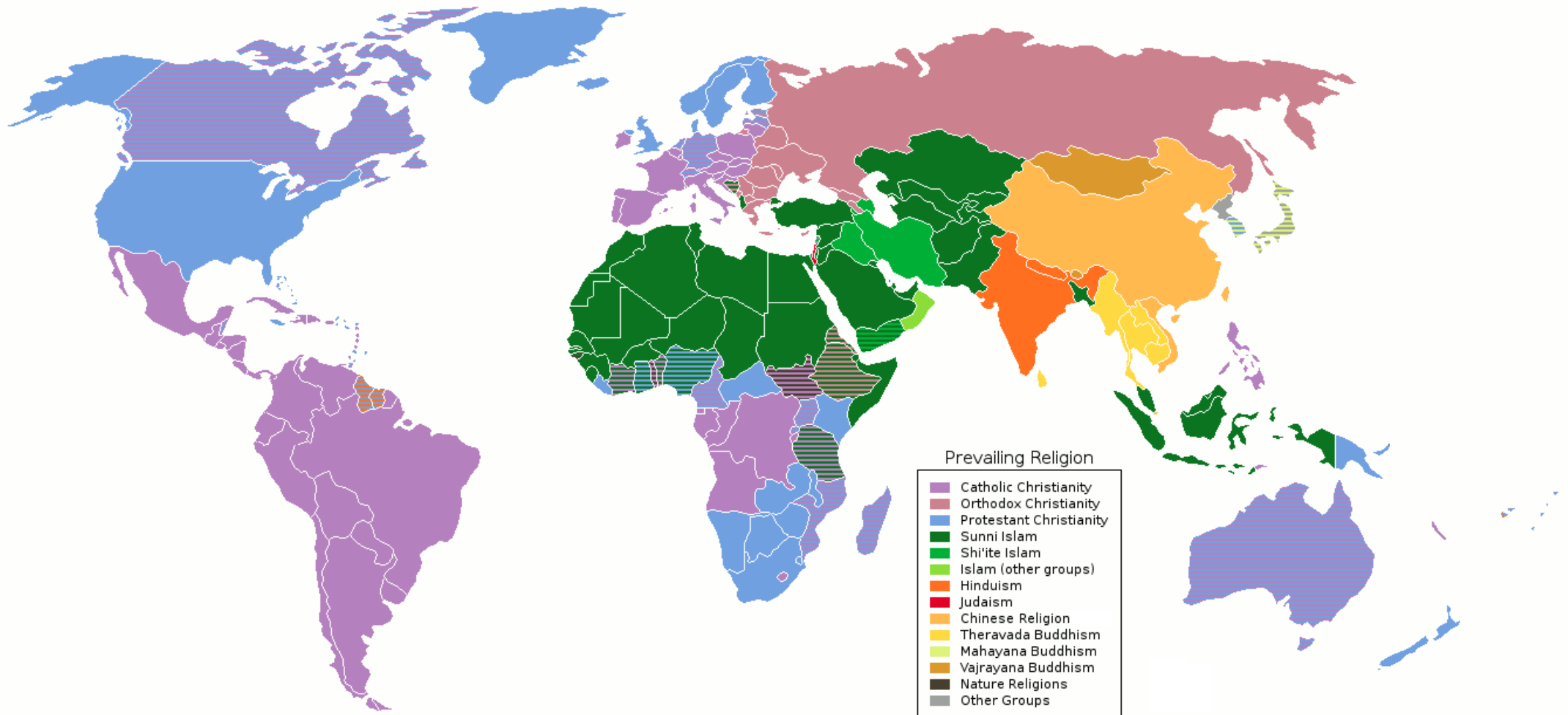*Religion* / *Faith etc.* (Diagram Source - Wikipedia)

Depending on the *main* (majority of) religions / faiths etc. involved - early, appropriate, associated and specialist involvement (following a major aircraft accident) might be helpful - for both the spiritual and physical wellbeing / welfare of associated accident victims and / or their FR......... and possibly responders also. Most 'authorities' are expected to encourage the involvement of same and airlines should plan on doing likewise

If no religion(s) is (are) prevalent amongst those that had been on board the accident flight (ground victims too, if appropriate), a multi-faith response *might* be more appropriate?

See diagram next page:

Prevailing Religion

- Catholic Christianity
- Orthodox Christianity
- Protestant Christianity
- Sunni Islam
- Shi'ite Islam
- Islam (other groups)
- Hinduism
- Judaism
- Chinese Religion
- Theravada Buddhism
- Mahayana Buddhism
- Vajrayana Buddhism
- Nature Religions
- Other Groups

Culture and *Custom* etc

Similar to religious / faith beliefs - an airline 'appreciation' should be available / made of associated cultural background(s) and 'local' custom(s) - prior to (pre-planning) and during (actual HAT) operations i.e. as they relate to those who had been on board the 'accident' flight plus ground victims (if any) and associated FR of all victims

Such appreciation and an associated 'knowledge / sensitivity' of same amongst responders (including the HAT) can create (within those receiving associated assistance etc.) a better sense of ease and comfort via some degree of associated familiarity with those helping them - whilst also demonstrating an element of empathy which could create / enhance a positive working relationship

'*Culture*' is a term which can have (numerous) different meanings. Some examples include:

- An integrated pattern of human knowledge, belief and behaviour which depends upon the capacity for symbolic thought and social learning
- A set of shared attitudes, values, goals, practices etc. characterising an institution, organisation, group, people (ethnic or otherwise) etc.
- The ideas, *customs*, social behaviour etc. of a particular people and / or society
- A way of life, typically referring to the general customs and beliefs of a particular group of people, at a particular point in historical time

Similarly, '*custom*' might be considered to be (note use of the words 'habit(s) / habitual'):

- Habitual practice / the usual way of acting in given circumstances
- Collective habits, usages, convention etc.
- Practices which have been so long established that they have become more like a 'law'
- Group pattern of habitual activity usually passed on from one generation to another
- All of the above taken collectively

Cultural norms typically extend to:

- Eating practices & food preferences
- Dress
- Etiquette
- Language
- Ethnicity
- Perceptions of death, dying and the afterlife - including 'mourning'

Some (a small number of) airlines have produced guidelines on how to be aware of and deal with the various political, cultural, religious & similar aspects which can apply worldwide - following a major aircraft accident (& similar) with mass fatalities. Most of these airlines would probably be willing to share this information with others

Note: The above para also appears on page 165

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HAT - Some Practical Arrangements

Handovers

If it proves necessary for a HAT member to 'return home' (or otherwise cease HAT duties) whilst still working with a victim(s) and / or associated FR - that person should introduce the replacement HAT member (combined with a reasonable hand over period) - before saying his / her own farewells

All associated and appropriate records, logs, notes & similar which might have been made, pertaining to said victim(s) and / or associated FR, must be passed on to the replacement person and he / she be provided with an adequate handover brief

Financial Assistance for Victims and / or Associated FR

Financial Assistance (e.g. immediate economic needs payments) for those affected (and so entitled) will typically be organised by the airline and / or the airline's insurers. Appropriate details will be provided to HAT members via Team Leaders

If a request for financial assistance is made to a HAT member directly, nothing must be promised. Respond by saying something like *'........the matter will be looked into and a response provided ASAP.........'* - then pass the situation on to your Team Leader

Transportation of Associated FR to (or as close as possible / practicable to) the Accident Location

The accident airline might be expected to transport associated FR (who wish so to do) to the general area of the accident, in order for them (associated FR) e.g. to be re-united with associated surviving victims; to be re-united with associated deceased victims (if appropriate and possible) and / or to enable visits to be made to the accident site itself - where this is practicable, possible and 'desirable'

> Reminder: In some situations there will be no 'accessible' victims or even an identifiable accident location e.g. Germanwings Flight 9525 and Malaysian Airlines Flight 370 respectively

Accident site visits, in particular, will be a very important consideration for many associated FR of the deceased, particularly if no remains / viewable remains are found. Such visits can also assist in coping with grief

If assigned to such a task, the associated HAT member should be advised as to how many associated FR will be visiting the accident site and briefed on his / her specific role(s), responsibilities etc. associated with said visit. The appropriate Team Leaders will provide associated support - including provision of the necessary PPE, if so required

HAT members may also be involved here as part of the 'meet & greet' process at the various airports (and similar) which might be involved in the transportation process

Transportation to (or as near as practicable to) the accident site will typically be arranged / co-ordinated etc. via the airline HQ's Crisis Management Centre, using the most expedient and convenient methods of transportation available, including air travel. Should associated FR not wish to fly (where this is the preferred method of transport), this will be respected and, where reasonably practicable / possible, an alternative method of travel sought and provided

CRPM Part 1 (ERP) / Volume 3 - Airline Humanitarian Assistance Team Ops - 2021 (Reviewed 2023)   168

When *Victims* and / or *Associated* FR '*Return* *Home*'

FR etc. will typically find themselves subject to * differing / varying 'outcomes' and thus 'timescales' with regards to an associated, catastrophic (aviation disaster) aircraft accident:

* For example, a victim (i.e. as associated with any particular FR individual and / or group) might be any of dead, injured, uninjured, missing or details 'not known'. If dead, are they 'whole', in parts (and for the latter, how big are the parts) and so on

Accordingly it may not be possible for HAT members assigned to FR to be able to assist with all pending issues, before the end of their associated assignments. Accordingly, "disengagement meetings" should be planned for and conducted, covering issues such as "This is where we've been, what we've achieved and what is still to be done" etc.

It may be the case that surviving victims and / or associated FR retain (or plans to retain) legal counsel (legal advice provided by solicitors / lawyers). Should an assigned HAT member become aware of this, details should be taken if so permitted and passed on to the associated Team Leader

Bear in mind that it is likely that the accident airline might continue to provide certain on-going support & assistance to those that have returned to their homes etc. (and also those who remained in their homes etc.) - but a time will come when same will ultimately be withdrawn (albeit months or possibly even some years in the future). Senior airline management will make this decision

When it's *Time* to *End* *Contact*

Ending a relationship with a surviving victim and /or associated FR etc. with whom a HAT member has been working (possibly for some considerable time) may be difficult for all concerned. However, there comes a time when it is in their (FR etc.) own best interests that they begin dealing with the 'situation' without specific HAT support

'Expectations' of the above should have already been set at the beginning of and during any particular HAT assignment

When ending contact with a victim and / or associated FR - he / she / they should be informed of the reasons and, if appropriate, the next steps anticipated in the on-going support process explained e.g. typically handover to appropriate 3rd parties (e.g. medical staff / personnel [general and mental health etc.]) - usually provided at one or other level of government etc. - of the country in which they reside / are citizens of etc.

With the exception of contact by any HAT element which might be managing on-going / follow-up liaison and communication - the individual HAT member's contact with victims and / or associated FR will normally end at this point

Generally speaking HAT members are advised to not provide personal contact details to surviving victims and / or associated FR. Reluctance to 'let go' is likely and something that HAT members need to be prepared for

HAT - Looking after Yourself

General

Formal 'crisis defusing' (Psychological First Aid) and de-briefing sessions will be arranged during your activation, should same be needed. In such circumstances you will most likely be attended to by a trained counsellor / de-fuser retained / arranged by the airline. You are the best person to decide if such assistance is needed - however your team leader and HAT colleagues will also be looking out for you in this respect - as you will be doing for them (Peer Support - remember?)

As already mentioned earlier, more *informal* defusing can be obtained by simply sharing your experiences, thoughts and feelings with other HAT members - at a convenient time / place (e.g. usually over a coffee or tea at the end of a shift). The main focus of these sessions is to normalise any adverse emotions and feelings felt - but where the need for more formal assistance is not required

A free, airline provided 24-hour telephone help-line should always be available to you (with a professional counsellor / de-fuser at the other end) should you wish to talk to someone in confidence

The Return Home

The initial return home can provoke many feelings. You may find you experience some or all of the following:

- Disappointing reunion (with family; colleagues etc.)
- Isolation
- Impatience with trivialities
- Mood swings
- Flashbacks
- Lack of communication
- Some form of 'rejection' from work colleagues as they might e.g. think that your HAT deployment has been *'something of a holiday'* - whilst they carried your workload in your absence etc.

Considerations which might help you here include:

- Recognise that your family, partner, friends and colleagues may not understand and / or may not wish to talk about your experience
- Remember that you are normal and are experiencing an expected, temporary response to an abnormal event. Healing from any injury (including mental trauma) takes time. You may or may not want to explain this to those referred to in the bullet point immediately above
- Physical exercise may help
- Be responsible with respect to use of alcohol, tobacco, medication, drugs etc.
- Ensure you take rest when required and eat regular meals
- Use your own 'personal support system' - such as your family and friends, pets, religion, hobby, sports etc.
- Use your airline line managers and HAT / airline employee assistance resources / support system - as available for the latter (note that many airlines do not have the latter capability at time of writing)

HAT - On a Final Note

HAT activities mean that members might be placed in potentially distressing and uncomfortable (but hopefully never dangerous) conditions

When an individual agrees to undertake HAT training and duties - it is important that he / she fully understands the nature of what is being committed to i.e. a personal commitment to the HAT is effectively being 'promised' - and the individual should be made fully aware that such promise should not be lightly given (or taken back)

However, If an individual wishes to withdraw from HAT duties *for whatever reason* (and there will be many valid and honourable reasons why this might be done) - he / she should be able to do so without question

Research by appropriate experts / professionals shows that responders gain a great deal from their experiences in undertaking HAT duties, not least a sense of satisfaction at having done the right thing at the right time - and having eased someone's suffering, if by only a little

Appendix **E** - to CRPM Part 1 (ERP) / Volume **3** Guideline

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Appendix **F** - to CRPM Part 1 (ERP) / Volume **3** Guideline

IN THE EVENT OF DISASTER - **FAMILY ASSISTANCE PROGRAMMES**

Copy of an article taken (*with permission*) from 'Aviation Security International' magazine - published August 2011 - authored by Sue Warner-Bean

Appendix **F** is provided for information only. However, the article is useful for clearly and simply setting the scene for humanitarian (family) assistance team operations, as related to a catastrophic aircraft accident (aviation disaster) type scenario

IN THE EVENT OF DISASTER

Family Assistance Programmes

*Airlines must prepare for disasters. Accordingly, what should the key elements of any associated disaster preparedness programme include - e.g. **how might such key elements** (potentially) **best 'benefit' the involved airline, passengers / crew / ground victims** (if any for latter)…………**together with the family, relatives and friends etc.** (of all such passengers / crew etc.)?*

Sue Warner-Bean discusses………………………………

Fifteen years ago (1996), stories abounded of airlines' ill-treatment of survivors and their (not directly involved i.e. not on board the accident flight) families after the loss of an aircraft: no access to information; notification messages left on answering machines; personal effects discarded; unidentified remains buried without notice etc.

None of it was intentional; accidents were (and are) rare, and the post-crash emphasis at the time was predominately on determining cause and preventing future tragedies. There were no industry regulations, guidance papers or ICAO documents outlining the basic tenets of family and survivor assistance - and airlines were left to make it up for themselves

Whilst such stories can still be found today (2011), there has been progress. Many airlines, some governments and most insurers recognise the necessity of providing immediate, coordinated and compassionate assistance to those most affected by aviation tragedies. After all, at the end of the day, it is the human toll of same that is most devastating. Planes can be replaced. Loved ones cannot

Rationale and Expectations

For airlines, having a strong family (humanitarian) assistance programme is more than an ethical and moral obligation - it is also an operational necessity; a growing expectation of the public, stakeholders, lawyers, insurers and - in some cases - a legal requirement

This 10th anniversary year of the 11 Sep 2001 attacks is also the fifteenth anniversary of the USA's *Aviation Disaster Family Assistance Act* of *1996*. This landmark law was the result of intense lobbying by crash survivors and victims' families (including families of Pan Am 103), who then partnered with airline and government reps to develop recommendations and, ultimately, legislation for air disaster response. It required the creation of a federal (USA) plan, as well as individual airline plans, assigning responsibilities for various 'accident victim / families' assistance tasks

Similar laws, regulation, best practice etc. (with varying levels of service / detail) have subsequently been enacted in Brazil, Australia, South Korea and China. Most recently, Article 21 of European Union Reg 996/2010 requires member states (and all airlines operating in their territory) to have civil aviation accident emergency plans which include "assistance to the victims of civil aviation accidents and their relatives" - although the exact nature of that assistance is not well-defined

Some direction is provided in ICAO Circular 285-AN/166, 'Guidance on Assistance to Aircraft Accident Victims and their Families', but in the absence of detailed national plans, it is still incumbent on the airlines to define the standards

So what is required for a family assistance programme, and how can it benefit both victims and the airline?

> At the most basic level, aviation disaster family assistance is simple: if it were your family member on the affected aircraft, how would you want to be treated?

In the immediate aftermath, most would say they want timely and accurate notification, access to resources and all relevant information and the identification and return of loved ones and their belongings. They would want acknowledgement, answers, apologies, accountability, counselling and compensation. And they would certainly want their needs to be met with urgency, efficiency, equity and compassion

In words such needs might seem deceptively simple. Meeting them, however, is a complex and resource-intensive process – requiring a well-crafted and rehearsed plan, trained staff, adequate resources, coordination with authorities and insurers and support from senior management

It's been said that "when you've seen one accident, you've seen one accident" Although there are no "typical" accidents, there are generally three phases to the family assistance response:

- *initial contact*
- *on-site operations*
- *long-term support*

A closer look at each can help shed light on both families' concerns and the airline's response requirements.

First Phase: Initial Contact (0 - 48 hours) (**1**)

Contacting the relatives of passengers and crew is the crucial first step in family assistance and is also critical for the airline and authorities. Families will help in identifying hospitalised and deceased victims - and in criminal events, may provide valuable information to the investigation

The initial contact with the family is to confirm that the event has happened and advise whether or not the loved one's name appears on the emergency flight's manifest (passenger list). In the words of one family member, "it is the call (or conversation) that changes everything" and must be handled with sensitivity and by trained personnel

There are several, typical scenarios here, some in the airlines' control, some not. Families may hear about the event through the media (including social media), from co-workers or friends, or, as we learned during the 11th September 2001 hijackings, from the passengers themselves via 'on-board' phone and text messages. In all such instances family members are likely to attempt to reach the airline immediately - for confirmation and additional information

Other families may be at associated airport arrivals or departure areas and will need to be gathered together in a 'private' room / space etc. to await and receive information. Still others may be unaware of the disaster until they are located and advised by the airline and / or authorities

National law will dictate whether initial notification is conducted by the police or the airline. In either case it must be done quickly and compassionately and the airline must be prepared to field an extremely high volume of incoming telephone calls (e.g. 100,000 + calls / 24 hours in extremis) for the first 24-36 (2) hours post crisis - by immediately establishing a Telephone Enquiry Centre (TEC) with a toll-free (free phone) number(s)

The TEC will assist in filtering enquiries to identify callers who have a 'valid' relationship to those on board the aircraft involved. Those who are likely "matches" are referred for confirmation and notification by a trained airline team member and / or by the 'authorities'

Complicating factors in this process include passenger manifest accuracy, language, cultural differences, data tracking (including identifying which family members are at which airports), information on survivors' status and whereabouts, sufficient telephone capacity etc. The conversations will be emotionally difficult and staff must be prepared to respond to needs and requests

Smaller airlines may not have the resources to perform this function effectively and may need to rely on assistance from codeshare and alliance partners - or qualified / specialist (3rd party) vendors

Phase Two: Site Operations (1-21 days) (3)

Once families receive initial notification they often wish to travel to the accident location. They go there to be with surviving loved ones or to bring home those who perished. They typically want access to information about the victim, their belongings, the crash site, the sequence of events and a myriad of other issues. They may also need to visit the site for cultural or religious reasons

It is the airline's responsibility to make these arrangements and to have the procedures, staff and financial resources in place to do so

To accommodate families, a *Family Assistance Centre (FAC)* is established by the airline at a suitable location near the crash site (if possible), often in a hotel(s) with a large meeting space(s) (4). The FAC is essentially a gathering place for families, where they can receive regular information updates from the airline and authorities etc. - and also where their immediate and short-term needs can be met

FAC operations are complex and challenging organisationally, logistically, administratively and psychologically. Airlines must be prepared to locate and secure suitable facilities immediately, as they will be competing with the media and others for hotels etc.

At the FAC security, regularly scheduled briefings and an array of basic services (food, child care, counselling, communications, badging, basic medical care, financial assistance, etc.) are crucial. The airline should also assign trained staff representatives, ideally two per each family unit. These *'Special Assistance Team' (SAT) members will provide critical support and serve as a link between airline and families during the second phase of response

* More correctly entitled 'Humanitarian Assistance Team' (HAT) - as at 2021

Generally speaking, airlines should anticipate 4 to 6 family members at the FAC per person on board the aircraft. The exact number depends on factors such as the accident location, size of families and the airline's own policy for family travel. When possible the airline's own SAT, logistics and administrative staff should be lodged away from the FAC - so that duty rotations and rest times can be more easily established and managed

Scheduled events and daily milestones will help to create a sense of process at the FAC and will be helpful to families and staff alike. Informational briefings should be conducted twice daily or more often as needed, with updates on search and rescue or recovery, the victim identification process (including the procedures for ante-mortem interviews), the investigation, the recovery of personal belongings, possible site visits (5), group memorial services and any other relevant information

These are conducted by the airline and / or by the authorities, depending on national law, custom and culture etc. - and should include spokespeople from each of the represented organisations. For the airline, the spokesperson should be a senior executive able to convey the company's sorrow and genuine concern for family and survivor needs

Not all families choose to travel to the accident location - and those who remain at home must be given the same information and consideration as those at the FAC, including assignment of SAT members and access to briefings by conference call or private webcast

The FAC will eventually shut down. When that happens is typically determined by how quickly victims can be identified and whether families are confident that they will continue to have access to information and support

If the victim identification process is relatively quick (e.g. a matter of days or weeks, rather than months), families may wait locally so that they can return home with their loved ones' remains. If the process is lengthier (typically due to the condition of remains), families will likely return home - where they should be regularly updated on progress and developments

As with the first phase of the response, complications include language and cultural differences, data management and sufficient staff. Additionally, much will depend on effective coordination with local and national authorities - and in some locations a significant amount of cash (not just credit cards) will almost certainly be required. Again, smaller air carriers may need the assistance of marketing partners and / or vendors to respond effectively

The FAC meets important needs for family members and, despite its challenges - it is also valuable for the airline. It centralises communications, resources and support and provides a means to providing consistent, accurate and credible information to families. Having families present aids in the victim identification process and many families have said that they draw support from being with others in similar circumstances. At its best, the FAC is a practical and tangible demonstration of the airline's concern for affected families

Phase Three: Long-Term Support (one month to one year and beyond) (**6**)

The first two phases of response can be described as acute; the third is chronic. It demands fewer airline resources but no less attention. Accordingly, a post-response organisation should be established at the airline to manage on-going family assistance concerns. This provides continuity of care for families and survivors and ensures consistency, co-ordination and communication between affected airline departments and staff

Some of the focus in this phase is on previously-discussed needs e.g. identification and repatriation of remains; burials and funerals; return of personal belongings (a complex and potentially lengthy process best-suited to specialist 3rd party assistance); on-going questions about the investigation and circumstances of the crash etc.

But other issues also come to the fore - financial assistance and claim settlement (dictated in part by the Montreal Convention); counselling and psychological support; commemoration of anniversaries; construction of a monument etc.

It is natural, then, that in this phase airline responsibilities typically transition to risk managers, claims managers and insurers, with continued involvement by the airline's emergency response manager and, perhaps, by small elements of the SAT from time to time

Lawsuits are another inevitability of phase three and lawyers will have a significant role. Where a criminal act is involved, many families will typically seek 'truth and justice' (see Daniele Klein's excellent article on **UTA Flight 772** - Aviation Security International [April 2011]) - [starts page 16]

Memorial to UTA Flight 772 (Crash Site – Sahara Desert)

Conclusions

In time, the tragedy will become an event of the past: claims will be resolved, anniversaries commemorated, a monument built and the event relegated to the airline's (and world's) collective memory

For families it is different. A woman who lost her 22 year old daughter in a crash said that 'it is like an amputation - one learns to compensate, but a part of you is always missing'. How families begin that process of "compensating" depends on a number of factors, including how the airline responds

Preparation is the key. Ensure senior management understand and support the emergency response programme. Conduct a gap analysis. Select and train staff, including TEC and SAT members. Negotiate mutual aid agreements and contract with 3rd party vendors if necessary. Meet with insurers (family assistance type issues are typically included in coverage and funds might also be available for training and development). Write & refine procedures. Arrange financial resources. Develop critical relationships. It's been said that 'the worst first call is when you need something most'. And practice

When tragedy strikes your airline, its passengers and families - you can never be completely ready, but it's the right thing to do - and it's smart business to be prepared

1. Times are estimates for planning purposes only and will vary based on circumstances

2. Some airlines have reported up to 40,000 calls + to the TEC in the first 24 hours. Past accidents have shown that many enquiries may come from families of employees, particularly crew. A "phone home" policy can reduce TEC volumes by as much as a third. (When they learn about an accident, unaffected employees should immediately advise their own families that they were not involved)

3. Length of site operations can vary widely based on circumstances. While 2-3 weeks is average, two airlines surveyed advised that their Family Assistance Centres remained operational for 60 days

4. In rare instances the airline may establish two or more family assistance centres. Air France 447 was a mid-ocean accident with a large number of French and Brazilian citizens on board. There was no way to establish a family assistance centre near the site, so FACs were set up at the origin (Rio de Janeiro) and destination (Paris)

5. A site visit is typically a one-time coordinated effort between the investigative authority and the airline. It should be accomplished after human remains and belongings have been removed from the wreckage. Investigative and recovery work is (typically) temporarily halted whilst the visit is being conducted

Families who wish to see the crash site, accompanied by mental health counsellors, are brought to a secure area some distance from the wreckage where they can leave remembrances, observe religious rites or simply grieve. If the crash location is not accessible, suitable alternatives such as a fly-over / visit by ship etc. may be considered

6. Times are estimates for planning purposes only and will vary based on circumstances

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Sue Warner-Bean is an aviation disaster planning consultant - focusing on the assessment of company emergency response plans and the development of family assistance programmes. She can be contacted via email at:

ERPlanning@warner-bean.com

Appendix **G** - to CRPM Part 1 (ERP) / Volume **3** Guideline

Some Further Reading:

IDEAL HAT SIZE - A CALCULATION METHODOLOGY

Follow the below link:

http://www.aviationemergencyresponseplan.com/information/

Scroll down the displayed webpage until you come to the information article entitled:

* Information Article - **Calculate Optimum Size** for an airline Humanitarian Assistance Team

Click on the article to open and read it

Appendix **H** - to CRPM Part 1 (ERP) / Volume **3** Guideline

DISASTER VICTIM IDENTIFICATION & PERSONAL EFFECTS RECOVERY OPS

Follow the below link:

http://www.aviationemergencyresponseplan.com/information/

Scroll down the displayed webpage until you come to the information article entitled:

* Information Article - **Disaster Victim Identification** (DVI) & Personal Effects Recovery (PEs) Operations

Click on the article to open and read it

Appendix **J** - to CRPM Part 1 (ERP) / Volume **3** Guideline

What Happens Next?

Follow the below link:

http://www.aviationemergencyresponseplan.com/information/

Scroll down the displayed webpage until you come to the information article entitled:

* Information Article - Guidance for Victims & their Families following a Catastrophic Aircraft Accident i.e. **'What Happens Next'**

Click on the article to open and read it

Appendix **K** - to CRPM Part 1 (ERP) / Volume **3** Guideline

'Next of Kin' / 'Closest Relative' / 'Emergency Contact Person'

Follow the below link:

http://www.aviationemergencyresponseplan.com/information/

Scroll down the displayed webpage until you come to the information article entitled:

* Information Article - Major Air Accident - **'Next of Kin' / 'Closest Relative' / 'Emergency Contact Person'**

Click on the article to open and read it

Appendix **L** - to CRPM Part 1 (ERP) / Volume **3** Guideline

'PSYCHOLOGICAL FIRST AID'

Follow the below link:

http://www.aviationemergencyresponseplan.com/information/

Scroll down the displayed webpage until you come to the information article entitled:

* Information Article - Providing '**Psychological First Aid**'- Air Accident Type Situation

Click on the article to open and read it

Appendix **M** - to CRPM Part 1 (ERP) / Volume **3** Guideline

AVIATION DISASTER RESPONSE - **ACCOUNTING ADEQUATELY** for **RELIGION, CULTURE & CUSTOM**

Follow the below link:

http://www.aviationemergencyresponseplan.com/information/

Scroll down the displayed webpage until you come to the information article entitled:

* Information Article - '**Religion, Culture & Custom considerations**' ....etc.

Click on the article to open and read it

Appendix **N** - to CRPM Part 1 (ERP) / Volume **3** Guideline

AVIATION DISASTER RESPONSE - **DATA PROTECTION ASPECTS**

Follow the below link:

http://www.aviationemergencyresponseplan.com/information/

Scroll down the displayed webpage until you come to the information article entitled:

* Information Article - '**Data Protection Aspects of Airline Emergency Response Ops**' ……………etc.

Click on the article to open and read it

Appendix **P** - to CRPM Part 1 (ERP) / Volume **3** Guideline

AVIATION DISASTER RESPONSE - ***AIRPORT*** **HUMANITARIAN** (FAMILY) **ASSISTANCE OPERATIONS**

Follow the below link:

http://www.trb.org/Main/Blurbs/175605.aspx

When the associated webpage opens, click on 'View this PDF' and then follow the subsequent instructions (i.e. 'download as a guest')

Appendix **Q** - to CRPM Part 1 (ERP) / Volume **3** Guideline

AVIATION DISASTER RESPONSE - **Some Further Reading**

Follow the below link:

https://www.kingcounty.gov/depts/health/emergency-preparedness/preparedness-plans/~/media/depts/health/emergency-preparedness/documents/Mass-Fatality-and-Family-Assistance-Operations-Response-Plan.ashx

Note: Whilst the info found at the end of the above link is not related directly to aviation - it is, nevertheless, ***highly recommended*** reading for those interested in all aspects of how to plan for and operate a Family (Humanitarian) Assistance Centre in general - albeit USA oriented