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By Electronic Transmission

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Our Reference: S20-0003
Your Ref: F16/2247

Dear Gerard,

Re: Post Implementation Review of “Two in the Cockpit” Policy

I refer to your letter to AIPA dated 23 May 2016 and thank you for the opportunity to provide feedback on the “Two in the Cockpit” (Flight Deck Security) Policy and Procedures.

The “Two in the Cockpit” issue requires a broader approach and has been remitted to the Australian Airline Pilots’ Association (**AusALPA**) for response. AusALPA consists of the Australian and International Pilots’ Association (**AIPA**) and the Australian Federation of Air Pilots (**AFAP**), and represents more than 5,000 professional pilots within Australia on safety and technical matters. AusALPA is also an active member of the global pilot body, the International Federation of Airline Pilots’ Association (**IFALPA**), which represents over 100,000 airline pilots internationally.

Introduction

AusALPA recognises that the swift political action of the Minister to invoke the “cooperative” introduction of the “Two in the Cockpit (2ITC)” rule undoubtedly achieved its intended purpose – restoring public faith in air transport in Australia. However, AusALPA considers that imposing this 2ITC obligation without any proper risk assessment has led to numerous unintended safety and security consequences.

We consider that the 12-month post-implementation review is essential because the introduced risks far outweigh any likely mitigation that the imposed procedures could ever have achieved.

Mitigating the Original Risk

The 2ITC rule requires that at all times two authorised persons must be on the flight deck of aircraft with 50 or more seats. This rule was introduced to manage the obvious occasions that arise where one of the two operating pilots need to leave the flight deck and the existing design of the hardened cockpit door precludes access by authorised, legitimate crew members in the event of an incident involving a locked door.

The Pilot Associations were not involved in implementing the 2ITC procedures, therefore, we have no insight into what risks were actually considered. Unfortunately, the lack of detail allowed differing views on the policy's intent, resulting in some taking the view that the 'authorised person' was in the cockpit to prevent a pilot having a mental health episode from physically endangering the aircraft. The complexities of flight situational analysis, aircraft and human response times, physical restraints among many factors make this proposition unworkable.

The presumed intent and what was most widely understood by pilots, is that the 'authorised person' was in the cockpit to ensure a returning flight crew member could not be denied access to the cockpit. Successful implementation of that mitigator requires knowledge of all security related access procedures and the system features as well as the physical capability to intervene.

Unintended Escalation of Risk

AusALPA supports any initiative that enhances safety and security, provided that a thorough risk assessment is conducted prior to the implementation of any new procedure. This must involve widely based expert consultation, including the very people responsible for ensuring the safety of the aircraft once in flight, to ensure that there are no unintended consequences. That process did not occur.

Our members have provided feedback on both perceptual and actual consequential events of the introduction of the 2ITC rule. AusALPA, therefore, considers that a range of unintended consequences have been introduced that have disproportionately increased system risk well beyond that which existed before the Germanwings incident. Some of those escalated risks relate to:

- a. increased amount of time the cockpit is unlocked elevates the cockpit security threat;
- b. increased exposure to a potential workplace injury for the pilot and/or the 'authorised person' as a consequence of that person's lack of familiarity with the cockpit environment;
- c. increased exposure to a continuing distraction from the presence of the minimally qualified 'authorised person';
- d. potential for unexpected behavioural outcomes in the event of non-normal or emergency events to which the 'authorised person' has never been exposed;
- e. increased exposure to incorrect or inadvertent system operation by the 'authorised person' particularly where that person does not properly comprehend their intended role;

- f. behavioural changes by flight crew to minimise the need to leave the cockpit, resulting in nutritional and hydration issues as well as elevated risks of DVT and other sedentary complications; and
- g. increased and prolonged exposure to a person in the cockpit who, with the exception of other flight crew members, is not required to be medically or psychologically examined and is not normally a target group for enhanced security screening.

Correctly Addressing Pilot Mental Health Issues

The underlying issue behind the Germanwings incident, and the one focused on by the *Bureau d'Enquêtes et d'Analyses pour la sécurité de l'aviation civile* (BEA) Final Report on the Germanwings crash is one of adequate medical identification of pilots with mental health issues and ongoing management of such cases.

This should be complemented by the establishment of peer groups and other measures, as further highlighted in the recommendations of the BEA. It is essential that mental health issues are treated in a non-punitive manner within a culture that supports treatment and recovery, such that pilots are comfortable seeking treatment and disclosing health issues. This requires a mature approach between the regulator, employers, medical personnel, pilot representatives and the pilots themselves.

Another fundamental recommendation by the BEA relates to the financial and social security ramifications for pilots in the event of a possible loss of license and income. The risk of economic ruin is a large negative influence against disclosure of concerns by the individual or their family. The BEA report recommends operators instigate measures to mitigate socio-economic risks should a pilot lose a licence due to medical reasons.

AusALPA fully endorses these recommendations. It should be noted that there is already a very mature network of support services made available to Australian pilots by their airlines and via peer-support groups through the associations that comprise AusALPA. It should also be noted the BEA accident report does not recommend 2ITC procedures.

Other Issues

The 2ITC policy was arguably appropriate as an immediate reaction to mitigating a possibly emerging but not yet fully understood risk to flight safety. However, it was a policy outcome at odds with typical ICAO and foreign regulators' (including CASA's) approach to rulemaking following incidents that demonstrate the need for regulatory intervention. More detailed inter-agency effort is needed to justify such an intervention and, if found necessary, to determine the most appropriate means of implementation.

European Aviation Safety Authority (EASA) Review

On 27 Mar 2015 EASA issued Safety Information Bulletin (SIB) 2015-4, recommending operators implement the 2ITC rule. That agency has reviewed this position including conducting industry-wide consultation during Jan-Mar 2016 (Reference A). The Agency has since decided to modify SIB 2015-4, in that it will no longer mandate 2ITC but rather recommend operators implement a performance-based approach.

This position by EASA is consistent with that of the European Cockpit Association detailed at Reference B.

Summary of AusALPA's Position on "Two in the Cockpit" Policy

1. The 2ITC policy was a useful, immediate action to re-establish public confidence immediately following the Germanwings incident, however no risk assessment was done prior to implementation;
2. On review, the 2ITC policy has introduced a range of unintended consequences and risks to safety and security of the aircraft;
3. The 2ITC policy does not adequately address the core pilot mental health issues that were the basis of the Germanwings incident. Furthermore, the policy does not deal with a mental health-affected pilot who remains in the locked cockpit with his pilot colleague and acts nefariously;
4. AusALPA fully supports initiatives in the BEA report to identify and manage instances of pilots' mental health issues, including (but not limited to) medical examinations, airline and professional association support services and other methods to mitigate socio-economic impact for affected pilots.

Recommendation

A transparent and formal risk assessment must be led by CASA and attended by airline operators and professional pilot associations with the objective to crystallise what risks exist and what mitigation is actually necessary. The confusion and unintended consequences created by the original policy imposition must be removed by a cooperatively determined statement that provides the source for policy analysis and reassessment, industry wide consistency in procedural development, training and implementation.

Yours sincerely,



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