Commission Implementing Regulation (EU) 2019/27 of 19 December 2018 amending Regulation (EU) No 1178/2011 laying down technical requirements and administrative procedures related to civil aviation aircrew pursuant to Regulation (EU) 2018/1139 of the European Parliament and of the Council (Text with EEA relevance)

COMMISSION IMPLEMENTING REGULATION (EU) 2019/27

of 19 December 2018

amending Regulation (EU) No 1178/2011 laying down technical requirements and administrative procedures related to civil aviation aircrew pursuant to Regulation (EU) 2018/1139 of the European Parliament and of the Council

(Text with EEA relevance)

THE EUROPEAN COMMISSION,

Having regard to the Treaty on the Functioning of the European Union,

Having regard to Regulation (EU) 2018/1139 of the European Parliament and of the Council of 4 July 2018 on common rules in the field of civil aviation and establishing a European Union Aviation Safety Agency, and amending Regulations (EC) No 2111/2005, (EC) No 1008/2008, (EU) No 996/2010, (EU) No 376/2014 and Directives 2014/30/EU and 2014/53/EU of the European Parliament and of the Council, and repealing Regulation (EC) No 552/2004 and (EC) No 216/2008 of the European Parliament and of the Council and Council Regulation (EEC) No 3922/91[(1)], and in particular Article 23(1), Article 27(1), Article 62(14) and (15), Article 72(5) and Article 74(8) thereof,

Whereas:

(1) Commission Regulation (EU) No 1178/2011[(2)] lays down detailed rules for certain pilots' licences and for the conversion of national pilots' licences and of national flight engineers' licences into pilots' licences, as well as the conditions for the acceptance of licences from third countries. It also sets out rules for pilots' medical certificates, the conditions for the conversion of national medical certificates and the certification of aero-medical examiners and it includes provisions on medical fitness of the cabin crew.

(2) The implementation of Regulation (EU) No 1178/2011 revealed that certain of its provisions contain editorial errors or are ambiguous. This leads to implementation problems and to problems in maintaining a uniform level of civil aviation safety in all Member States. Those provisions should therefore be clarified and corrected.

(3) During standardisation visits conducted by the European Union Aviation Safety Agency (‘the Agency’) and meetings of the medical expert group hosted by the Agency, several loopholes were identified in Annex IV to Regulation (EU) No 1178/2011 that could potentially have safety implications and that should therefore be addressed.

Changes to legislation: *There are currently no known outstanding effects for the Commission Implementing Regulation (EU) 2019/27. (See end of Document for details)*

(4) Following the accident of the Germanwings Flight 9525, the Germanwings Task Force led by the Agency identified a number of safety risks and issued six recommendations to mitigate those risks[(3)]. Four of those recommendations, namely recommendation 2 'Mental health assessment of flight crew', recommendation 3 'Prevention of misuse of alcohol and other psychoactive substances by the flight crew', recommendation 4'Training, oversight and network of AMEs' and recommendation 5 'Creation of a European aero-medical data repository', concern amendments to the rules on aircrew medical certification of Regulation (EU) No 1178/2011. It is appropriate to now act upon those four recommendations.

(5) The provisions of Regulation (EU) No 1178/2011 regarding medical requirements and aero-medical examination should be aligned with the relevant provisions of Commission Regulation (EU) 2015/340[(4)].

(6) The Agency submitted draft implementing rules to the European Commission together with its Opinion 09/2016.

(7) The measures provided for in this Regulation are in accordance with the opinion of the Committee established by Article 127 of Regulation (EU) 2018/1139,

HAS ADOPTED THIS REGULATION:

Article 1

Regulation (EU) No 1178/2011 is amended as follows:

(1) in Article 2, the following points (22a), (22b) and (22c) are inserted:

(22a) "ARO.RAMP" means the Subpart RAMP of Annex II to the Regulation on Air Operations;

(22b) "Automatically validated" means the acceptance, without formalities, by an ICAO contracting State listed in the ICAO attachment of a flight crew licence issued by a State in accordance with Annex 1 to the Chicago Convention;

(22c) "ICAO attachment" means an attachment to an automatically validated flight crew licence issued in accordance with Annex 1 to the Chicago Convention, which is mentioned under item XIII of the flight crew licence.;

(2) Annex IV is amended in accordance with Annex I to this Regulation;

(3) Annex VI is amended in accordance with Annex II to this Regulation.

Article 2

This Regulation shall enter into force on the twentieth day following that of its publication in the *Official Journal of the European Union*.

This Regulation shall be binding in its entirety and directly applicable in all Member States.

***Changes to legislation:** There are currently no known outstanding effects for the Commission Implementing Regulation (EU) 2019/27. (See end of Document for details)*

Done at Brussels, 19 December 2018.

For the Commission

The President

Jean-Claude JUNCKER

Changes to legislation: *There are currently no known outstanding effects for the Commission Implementing Regulation (EU) 2019/27. (See end of Document for details)*

ANNEX I

Annex IV to Regulation (EU) No 1178/2011 is amended as follows:

(1) Subparts A and B are replaced by the following:

SUBPART A ***GENERAL REQUIREMENTS***

SECTION 1

General

MED.A.001 Competent authority

For the purpose of this Annex (Part-MED), the competent authority shall be:

(a) for aero-medical centres (AeMCs):

(1) the authority designated by the Member State, where the AeMC has its principal place of business;

(2) the Agency, if the AeMC is located in a third country;

(b) for aero-medical examiners (AMEs):

(1) the authority designated by the Member State where the AME has its principal place of practice;

(2) if the principal place of practice of an AME is located in a third country, the authority designated by the Member State to which the AME applies for the issue of the AME certificate;

(c) for general medical practitioners (GMPs), the authority designated by the Member State to which the GMP notify their activity;

(d) for occupational health medical practitioners (OHMPs) assessing the medical fitness of cabin crew, the authority designated by the Member State to which the OHMP notify their activity.

MED.A.005 Scope

This Annex (Part-MED) establishes the requirements for:

(a) the issuance, validity, revalidation and renewal of the medical certificate required for exercising the privileges of a pilot licence or of a student pilot;

(b) the medical fitness of cabin crew;

(c) the certification of AMEs;

(d) the qualification of GMPs and OHMPs.

MED.A.010 Definitions

For the purpose of this Annex (Part-MED), the following definitions shall apply:

— "limitation" means a condition placed on the medical certificate or cabin crew medical report that shall be complied with whilst exercising the privileges of the licence or cabin crew attestation;

***Changes to legislation:** There are currently no known outstanding effects for the Commission Implementing Regulation (EU) 2019/27. (See end of Document for details)*

— "aero-medical examination" means an inspection, palpation, percussion, auscultation or any other means of investigation for determining the medical fitness to exercise the privileges of the licence, or to carry out cabin crew safety duties;

— "aero-medical assessment" means the conclusion on the medical fitness of an applicant based on the evaluation of the applicant as required in this Annex (Part-MED) and further examinations and medical tests as clinically indicated;

— "significant" means a degree of a medical condition, the effect of which would prevent the safe exercise of the privileges of the licence or of the cabin crew safety duties;

— "applicant" means a person applying for, or being the holder of, a medical certificate who undergoes an aero-medical assessment of fitness to exercise the privileges of the licence, or to carry out cabin crew safety duties;

— "medical history" means a narrative or record of past diseases, injuries, treatments or other medical facts, including unfit assessment(s) or limitation of a medical certificate, that are or may be relevant to an applicant's current state of health and aero-medical fitness;

— "licensing authority" means the competent authority of the Member State that issued the licence, or to which a person applies for the issuance of a licence, or, when a person has not yet applied for a licence, the competent authority as determined in accordance with FCL.001 of Annex I (Part-FCL);

— "colour safe" means the ability of an applicant to readily distinguish the colours used in air navigation and to correctly identify aviation coloured lights;

— "investigation" means the assessment of a suspected pathological condition of an applicant by means of examinations and tests in order to verify the presence or absence of a medical condition;

— "accredited medical conclusion" means the conclusion reached by one or more medical experts acceptable to the licensing authority, on the basis of objective and non-discriminatory criteria, for the purposes of the case concerned, in consultation with flight operations or other experts as necessary, for which an operational risk assessment may be appropriate;

— "misuse of substances" means the use of one or more psychoactive substances by aircrew in a way that, alternatively or jointly:

(a) constitutes a direct hazard to the user or endangers the lives, health or welfare of others;

(b) causes or worsens an occupational, social, mental or physical problem or disorder;

— "psychoactive substances" means alcohol, opioids, cannabinoids, sedatives and hypnotics, cocaine, other psychostimulants, hallucinogens, and volatile solvents, with the exception of caffeine and tobacco;

— "refractive error" means the deviation from emmetropia measured in dioptres in the most ametropic meridian, measured by standard methods.

MED.A.015 Medical confidentiality

All persons involved in aero-medical examinations, assessments and certification shall ensure that medical confidentiality is respected at all times.