

British Gliding Association

Medical Fitness Validation and Procedures

Introduction

At the Executive Committee meeting held on 4th September 2002, the BGA Executive approved new medical fitness requirements and procedures for glider pilots. The BGA has decided to align the medical documentation for glider pilots with the requirements for the new UK National Private Pilots Licence (NPPL) and other air sports. These will be **mandatory from 1st March 2003 and ultimately affect ALL glider pilots.**

A summary of the new requirements is given in the attached sheet, headed "BGA Medical Requirements" and dated 16th September 2002. Documents are available from the CAA web page under the NPPL. Further guidance is provided by "Guidance Notes on the Medical Fitness Required for Glider Pilots" by Dr Peter Saundby, the Medical Adviser to the BGA. Copies of these are available from the BGA Office or by download from the BGA web site (www.gliding.co.uk)

This briefing document gives the background to these new medical fitness requirements and procedures and answers some common questions. It is intended for general guidance only and must not be considered as the definitive statement on BGA medical requirements for any individual.

It is important to distinguish between medical standards, medical procedure(s), and requirements. A medical standard is a quantifiable level of adverse pathology. A medical procedure is an action to measure or verify a medical standard. A requirement is the definition of the standard or procedure necessary to validate medical fitness to fly.

Why Is There a Need for New Validation Procedures?

In the UK the control of gliding has been exercised by the BGA since 1931. Gliding has not, and still is not regulated by law through the CAA, other than in areas where gliding interfaces with other aviation activities. However the recent creation, by the European Commission, of the European Aviation Safety Agency (EASA) to regulate all aspects of civil aviation, including certain sporting and recreational aviation including gliding, has placed a focus on various safety-related aspects. In General Aviation, medical factors cause some 5% of serious accidents.

In 1967, following a fatal accident, a pilot medical declaration was introduced by the BGA. Since then accidents in UK gliding arising from medical causes have been comparable with other areas of aviation. Glider pilots are personally responsible to be fit to fly, but for those with a known disease, or when responsible for others in the air, endorsement of a medical declaration was required. Two standards of fitness were utilised, corresponding to a private road driver and the then UK CAA Private Pilots Licence standard.

The NPPL has adopted the BGA's proven system with only minor changes. The old UK CAA PPL standard had been raised by the Joint Aviation Authority (JAA) to higher and needless levels, so the CAA proposed the use of the Driving and Vehicle Licensing Agency (DVLA) Group 2 (professional) driver standard. This allows a few gliding instructors to fly who would previously have been restricted, but the BGA will retain the age limit on instructors. A key new requirement is the need for an endorsement from the General Practitioner (GP) before flying solo and before

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prescribed birthdays. This arises not from the NPPL but from an Air Accident Investigation Branch (AAIB) recommendation following a suicide by the pilot of a powered aircraft on his first solo flight.

Neither the NPPL, nor the old BGA medical declaration complies with the International Civil Aviation Organisation (ICAO) rules. The medical fitness requirement for holding an ICAO recognised glider pilot licence is a JAA Class 2 (private pilots) medical certificate.

The BGA believes that by taking this small step now, together with moves with the other member Associations of the Royal Aero Club in relation to EASA, it is positioning itself, on behalf of UK glider pilots, to demonstrate competence in establishing the medical fitness of pilots.

The potential risks to third parties, in a world that is becoming ever more litigious, mean that the BGA and its member clubs have to act responsibly. The current system, whereby a pilot's self declaration could exist for life, with no renewal required or medical endorsement enforced, did not exhibit the validity which the public might reasonably expect.

What Are the Medical Standards?

The medical standards follow the DVLA requirements, and these change from time to time because of advances in medical knowledge or treatment. For all solo glider pilots it is DVLA Group 1 (private drivers) and for instructors DVLA Group 2 (professional drivers – previously labelled Heavy Goods Vehicles and Public Service Vehicles). There is also an age limitation for instructors. As now, Instructors aged 70 or over, or limited by disease, are restricted and may not fly with pupils who could not land the aircraft safely.

Full details of the standards are available on the DVLA web site at:

www.dvla.gov.uk/at_a_glance/aag_contents.htm

The major change (from 1st March 2003) over the current requirements for medical declaration is that solo glider pilots **must** obtain an endorsement from their GP to their own declaration of fitness to fly. This is to confirm the honesty of the declaration and so the GP needs access to the pilot's medical record. It does not change the standard of fitness required.

How Long Does a Declaration Remain Valid?

From 1st March 2003 a glider pilot must declare and obtain a GP endorsement of fitness to fly before first flying solo. This declaration will remain valid until age 45, at which time a new declaration must be made. Declarations must then be renewed (with a GP endorsement) at ages 45, 50, 55, 60, and 65, and then annually. While not specified, it is recommended that declarations be renewed in the month before they expire. A renewal is also required before a pilot flies after a serious illness.

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Are There Any Transitional Arrangements?

Existing declarations remain valid until the pilot reaches the birthday at which a renewal is required under the new rules. For example, a pilot aged 17 would not need to comply with the new rules until reaching the age of 45; a pilot aged 52 need not comply until 55; etc (subject to any intervening serious illness). Individual pilots with specific medical limitations are unaffected. These pilots will continue to be managed, in terms of fitness to fly, on an individual, case-by-case, basis.

What about Ab-Initio Pilots?

Pre solo and trial lesson pupils continue to self declare, as at present. However, clubs and students should note that a self-declaration to at least DVLA Group 1 **with the GP's endorsement** is required **before** the first solo flight can be undertaken, with effect from 1st March 2003.

What about Instructors?

As at present, Instructors (in gliders) must certify to DVLA Group 2 standards and have this declaration endorsed by a GP. Renewals are at the same frequency as for solo pilots above. The CAA has not yet considered any revisions to the medical standard for powered aircraft NPPL instructors. Professional gliding instructors are still required to hold a JAA Class 2 medical certificate under CAA rules.

If an instructor cannot meet DVLA Group 2 standards, but can meet DVLA Group 1 standards, or is aged 70 or over, and subject to the consent of the Senior Regional Examiner, that instructor can continue as a Restricted Instructor. Restricted instructors may exercise ground duties and undertake advanced flying instruction where the pupil pilot could reasonably be expected to make a successful landing following any incapacity in the air of the instructor.

A gliding Instructor who wishes to continue unrestricted instructing after reaching age 70 must hold a JAA Class 2 medical certificate, as at present. Instructors who cannot meet these standards but who wish to continue instructing can do so under a restricted instructor rating. The restricted instructor rating requires DVLA Group 1 standards to be met (and endorsed by a GP).

Is my Club Free to Set its Own Standards or Requirements?

BGA member clubs remain free to impose any additional medical requirements at their discretion over the minimum BGA standards or requirements above. When indicated, specific requirements may be placed on individual pilots. Clubs have a duty to take action should they suspect that the physical or mental condition of a member gives rise to concerns. Clubs may implement the procedures described in this document prior to 1st March 2003 if they so wish.

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What are the Administrative Implications for Gliding Clubs?

Clubs have a duty to assist their members to comply with these rules and to maintain appropriate records and documentation.

This is critical to ensure the continuing safety of gliding. There may also be insurance implications if members are shown not to have met the required medical standard or have failed to provide the necessary declaration supported by the GP's endorsement.

Clubs should ensure that they have a means of tracking members' ages and medical certification. The individual member is responsible for ensuring that he or she is certified as fit to fly in accordance with the requirements of the British Gliding Association. The club may adopt such means as it deems sufficient or necessary to bring such requirements to the notice of members and may keep a record of medical declarations by members but the club is not ultimately responsible for a pilot's compliance with medical requirements and standards for fitness to fly.

The BGA is considering making various tools – probably software based, but possibly using some form of card index – available to those clubs whose existing systems are unable to handle this new requirement.

Clubs should ensure that all pupil pilots are made aware of the medical standards, requirements, and procedures before training commences and that steps are taken to ensure that medical certification is achieved before a first solo flight.

These notes are intended for general guidance only and must not be considered as the definitive statement on BGA medical requirements for any individual. For these, see the document "Guidance Notes on the Medical Fitness Required for Glider Pilots" by Dr Peter Saundby.

Barry Rolfe

Secretary
British Gliding Association

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