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RISK

By Jason Blair

Trouble with Angel Flights

The pressure is on to complete the mission, but should it be?

Imagine yourself with a flight planned for the morning that will take you from Michigan to Texas and back in the same day. You expect icing along the route, but you're flying a known-icing-equipped aircraft; however, it won't climb above the weather. There will be thunderstorms along the route that you hope will be out of the way before you get to that section of the route. After the stop in Texas, your return trip is going to bring you back to a different place in Michigan that was experiencing a snowstorm at the time of your original departure—in fact, 12 to 16 inches of snow, but you're hoping this will have passed by the time you'll arrive at that airport about 16 hours later. Even if the snow has stopped, though, the forecasts are calling for winds of 20 to 30 knots and ceilings near ILS minimums with more icing conditions.

» "It's okay to say no. For any reason. Even if it's just that you're too tired to do the flight, say no. If the airplane has an equipment problem...say no."

HOW TO COME TO TERMS WITH THE PERCEIVED PRESSURE AND MAKE SMART DECISIONS

Most pilots will say no-go, as there are too many potential factors to go wrong and too long of a flying day.

What if you've volunteered to pick up a young woman who recently had her leg amputated due to cancer who's being discharged from the hospital that day with no place to go and she really just wants to get home. Would this change your go, no-go decision? It shouldn't. I found myself in this exact situation recently. I made the hard decision not to go.

Pilots around the country volunteer their aircraft and themselves to organizations that provide coordination of travel for wounded warriors, patients traveling to or from medical treatments, or even pets in need of new homes.

We regularly discuss the need to say "no" to a flight for family travel or business travel if the conditions aren't within our personally set safety limits, but outside of the air ambulance industry, we rarely discuss what additional limitations should be considered when flying medical or other mission-focused flying.

Many pilots who voluntarily fly for public benefit flying organizations have no minimum operating guidelines other than what the FAA prescribes and no pilot background screening, and aren't subject to any currency requirements beyond FAA minimums. Organizations pair patients needing "a flight" with a "willing and available" pilot. For many flights, the consideration of what the best aircraft, equipment, weather and pilot would be for the flight isn't a deciding factor.

Flight service providers such as airlines and charter operations are considered to be "holding out" their services to the unknowing public for compensation. As such, they're subject to additional FAA scrutiny, minimums and operational considerations (including crew flight hour limitations). These minimums are there to protect the public.

Pilots flying for public benefit flying organizations aren't subject to these rules because they're not operating "for hire." However, in a sense, are they not also holding out flight transport services to the general public?

Some public benefit flying organizations have safeguards such as minimum experience levels, only allowing pilots with instrument or greater ratings and certificates to volunteer, or in a few cases, require two crew for every flight. Each is a good idea, but few go any further. Even fewer have "dispatch" control over flights to ensure that the pilot executing the flight has considered weather factors, ensures they will operate within weight and balance, or even has the requisite instrument or VFR FAA currency requirements met. The nonprofits typically cite a fear of "liability" if they're exercising a dispatch oversight role on the pilots who volunteer. The go, no-go decision is solely based on whether or not the pilot "thinks" he or she can complete the flight.

There's a pressure to "complete the mission" for the pilots of these flights. It's easy to cancel a flight for fun to grab a burger on a Saturday afternoon. It's not easy to cancel a flight for a 5-year-old girl who needs to get to her next cancer treatment.

The professional air ambulance industry has learned some lessons the hard way, and publically, when it comes to the pressures of flying patients for medical care. Pilots have felt the pressure "to complete the mission," many times at all costs, pushing weather minimums, aircraft capabilities or pilot skills. Changes have been made resulting in more structured operations. One interesting policy is that the pilot is typically told nothing about the patient he or she will be transporting. This takes away the temptation to push the limits to transport a patient that's critically injured and would die without the flight when they might have said no if the patient was stable and wasn't in critical need of the air ambulance transport.

While the passengers of public benefit flights aren't typically in immediate life-or-death danger, telling a pilot it's a middle-aged guy who's going for a routine checkup is more likely to result in a rescheduled flight

when conditions aren't optimal than telling the same pilot that his passenger is a 9-year-old boy in need of lifesaving cancer treatment.

No pilot really undertakes a flight thinking that something bad is going to happen. Every flight has some inherent risk, and things can break, unforecast weather may develop, etc. But that's different than undertaking a flight with identified risks beyond normal operations or cascading risk factors. If you can identify a likely problem before leaving, it's time to rethink whether you should be going.

Doctors are doing all they can to improve these patients' medical conditions; it won't help if pilots undertake a risky flight that causes those medical conditions to be made worse in an accident.

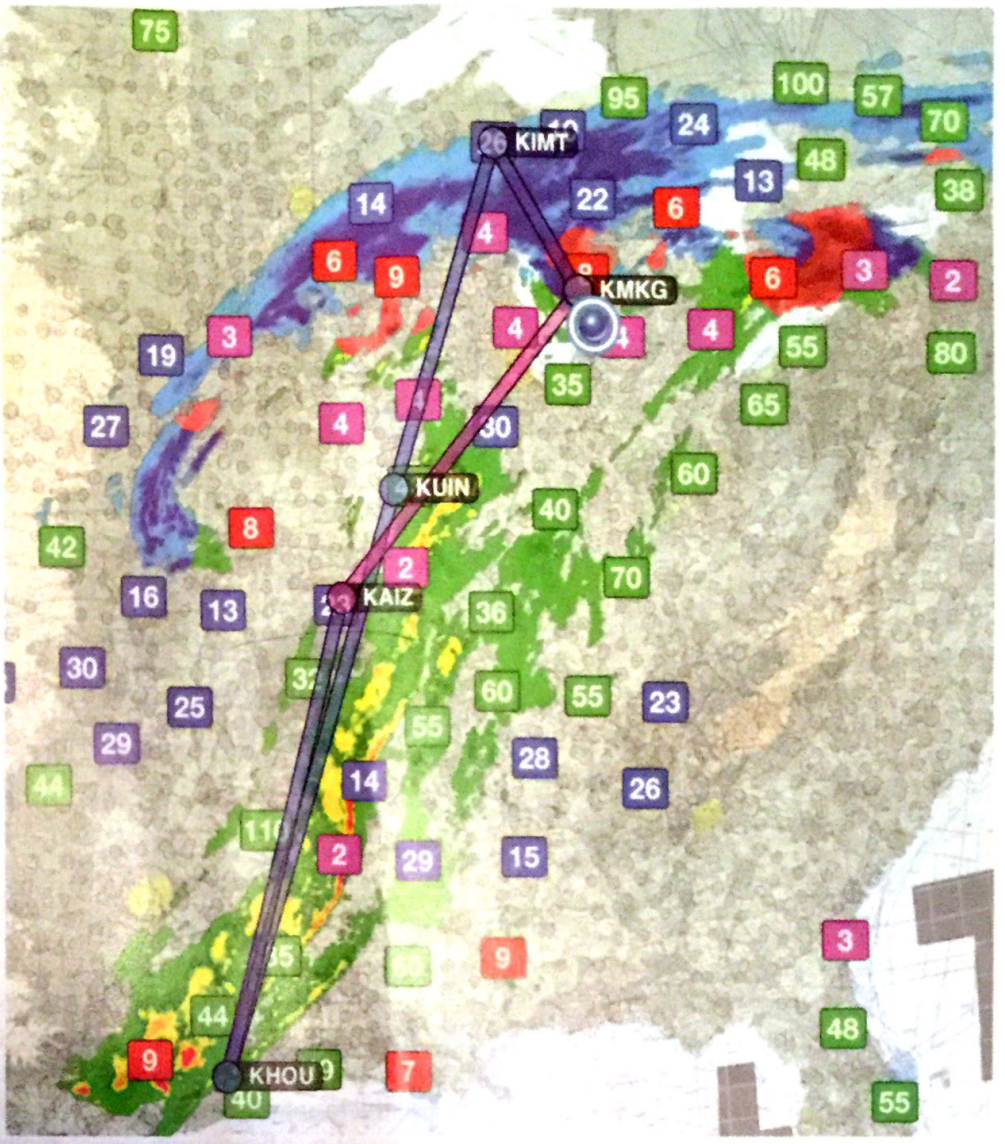
For public benefit flying efforts, there are a few things worth considering:

These are not emergencies. Volunteer flying should never be "critical EMS transport." If it is, you shouldn't be doing the flight. That's the job of a professional air ambulance service.

Set maximum flight duty time limitations. The commercial flight environment has set maximum daily flight duty times for a reason: Safety. Just because you can "legally" fly beyond commercial flight duty time requirements doesn't mean you should. Breaking a flight into two days can be a risk-mitigation option.

Flight risk analysis tools can help decision-making. The FAA has tools available, and many corporate operators have established "flight risk analysis" tools that can be used to fully consider specific flight risks. Things that may not normally be considered, such as flying to unfamiliar airports, flying with unfamiliar crew, and operating with greater load weights or high-altitude operations, are just a few examples of things that increase risk and are common in public benefit flying. In many cases, a hard "no-go" point value is set, and even if the pilot "thinks" he or she can get it done, the flight isn't allowed to go.

Get a second opinion. I have a few friends I call when I'm considering more challenging flights. Don't tell your friends anything about a patient or your opinions. Just tell them the aircraft equipment and the route of the flight. A non-invested pilot will be more readily willing to say no-go than one with the pressures of mission completion.



For pilots who volunteer their aircraft and themselves to organizations that provide travel coordination, often there are few FAA safeguards in place. When dangerous weather conditions are forecast along a flight plan, pilots must weigh potential factors and make the go, no-go decision. And it's okay to say no.

Rescheduling is okay. Just because the patient had an appointment on Tuesday doesn't mean he or she can't reschedule that appointment. Most medical offices will work with the patient to reschedule if you tell them the rescheduling is to make the transport to the appointment safer.

It's okay to say no. For any reason. Even if it's just that you're too tired to do the flight, say no. If the aircraft has an equipment problem (even if you don't need it for that particular flight), say no.

It's time we have a more thorough discussion about some of the operational factors of public benefit flying in the United States. If we don't ask tough questions about how we conduct these flights and address the potential safety discussions, we may be one fatal tragedy away from standards being forced upon us, or even the elimination of our ability to offer public benefit flights. **PP**

Jason Blair is a single and multi-engine instructor and FAA Designated Pilot Examiner with 4,900 hours total time and 2,850 hours instruction given. In his role as Examiner, over 900 pilot certificates have been issued. Jason actively works within the general aviation industry and flies volunteer missions.