Boeing 767-336, G-BNWM

AAIB Bulletin No: 6/97 Ref: EW/G96/12/1 Category: 1.1

Aircraft Type and Registration: Boeing 767-336, G-BNWM

No & Type of Engines: 2 Rolls-Royce RB211-524H turbofan engines

Year of Manufacture: 1991

Date & Time (UTC): 6 December 1996 at about 0322 hrs

Location: Over North Atlantic Ocean, approx. position 56°N 40°W

Type of Flight: Public Transport

Persons on Board: Crew - 11 - Passengers - 155

Injuries: Crew - None - Passengers - None

Nature of Damage: None

Commander's Licence: Airline Transport Pilot's Licence

Commander's Age: 52 years

Commander's Flying Experience: 13,184 hours (of which 4,424 were on type)

Last 90 days - 198 hours

Last 28 days - 64 hours

Information Source: Air Safety Report submitted by the operator and further

enquiries by AAIB

The crew had operated the outboundsector from London Gatwick to Pittsburgh (USA) during the dayof 4 December, arriving at about 2040 hrs (1540 hrs local time). The rest period in Pittsburgh was in excess of 24 hours, duringwhich the First Officer (F/O) consumed only a light diet. Hefelt rested and fit to operate the return sector.

The aircraft departed from Pittsburghat 2332 hrs (1832 hrs local time, 5 December) on the return sector Gatwick. The aircraft was equipped for Extended Range TwinEngine Operations (ETOPS) over water with a 180 minute en routediversion validation and all of the relevant aircraft systemswere serviceable. The planned flight time was 6 hours 54 minutesand an additional four tonnes of fuel was being carried in viewof the forecast fog expected at Gatwick at the planned arrivaltime. The nominated en route alternates (ERAs) on the FlightPlan were Halifax (Nova Scotia, Canada), Keflavik (Iceland) andParis CDG (France). The Flight Plan primary landing alternateairfield was Prestwick and the secondary alternate Paris CDG. The handling pilot for the cruise phase was the F/O and the rightautopilot and the autothrottle systems were engaged.

During the flight, the F/O beganto feel some discomfort and took two tablets of what he believedwere normal strength Paracetamol type painkillers at about 0200hrs. He then consumed a light meal. About 20 minutes later,he began to feel light headed and nauseous. He excused himselffrom the flight deck and went to the toilet. He collapsed inthe toilet, but came round a few minutes later. On returningto the flight deck, he informed the commander of his situation. The nausea and sickness continued so he lay down in a comfortable position on the floor of the flight deck, where he remained forsome considerable time. Aid was administered by the cabin staff. The F/O and the commander had consumed different menu items inaccordance with the operator's normal practice and the commanderconsidered that the F/O's sickness was due the consumption ofthe meal.

The aircraft passed the waypoints'STEAM' at 0205 hrs, 55°N/50°W at 0240 hrs and 56°N/40°Wat 0322 hrs. The ETOPS Progress Chart for the flight showedthat the ETOPS ERA changed from Halifax to Keflavik at 0257 hrs. The weather conditions at both of these alternates were goodthroughout the relevant periods of the flight. The commanderstated that he elected to continue the flight towards the UK ashe considered it safer than a diversion as it was night time andthe alternate landing sites would have been unfamiliar. The aircraftwas performing normally and the flight continued uneventfullytowards the UK. Communications with Oceanic ATC were conducted as normal using the HF radio. The commander elected not to informATC of the incapacitation at this stage as he considered thatthere was little assistance they could offer.

The commander monitored the weatheras the flight continued. A record of the weather at several majorUK airports at 0450 hrs was recorded on the flight log. Fog wasbeing reported at Gatwick and an RVR for Runway 26L of 450 metreswas annotated on the flight log along with the METAR information. Manchester and Glasgow were also reporting fog. London Heathrowwas reporting a visibility of 3,000 metres in mist with overcastcloud base 400 feet. Prestwick, Belfast, Shannon and Dublin allhad good weather conditions with visibilities in excess of 10km.

At 0539 hrs, the aircraft was transferred to the control of London ATCC Area Control, VHF frequency 133.6 MHz, while at FL350 on course to 'GIBSO' reporting point. The flightwas cleared from 'GIBSO' on a 'WILLO 1D' Standard Arrival Routetowards Gatwick. The commander did not inform ATC of the medicalincapacitation at this stage, but at 0544 hrs he requested permission to leave the frequency for a few minutes in order to call companyoperations. This permission was granted by the controller. Medicalassistance on arrival at Gatwick was then requested on the companyfrequency. The aircraft passed Strumble VOR at 0547 hrs and the commander returned to the Area Control frequency at 0550 hrs. A touchdown RVR of 800 metres at Gatwick was broadcast by the controller at this time, but no reference was made as to the runwayin use. Descent clearance was issued at 0556 hrs and the initial descent was commenced at 0559 hrs.

The F/O still felt light headed, but returned to his seat during the latter stages of the descent. The Cabin Service Director occupied the supernumerary seat inorder to offer assistance to the commander and to tend to the F/O. The F/O played no active part in the approach, althoughcertain aspects of the weather and type of approach had been discussed with the commander.

The flight was transferred to twoother control sectors as it descended. At 0608 hrs, it was requested to reduce to holding speed and to route direct towards 'HOLLY' for sequencing. 'HOLLY' is the entry point of the holding fixfor Gatwick for aircraft arriving from the west. The controllerinformed the commander that the aircraft was number five in the landing sequence. On transfer to Terminal Control, Gatwick IntermediateDirector, frequency 126.825 MHz at 0612 hrs, the commander checked in with the passing and cleared flight levels and informed the controller that

the aircraft was a "Boeing 767, with theinformation". This was a reference to having copiedthe ATIS information for Gatwick broadcast on VHF frequency 121.025MHz. It is normal practice for crews to report the particularcode letter associated with the ATIS broadcast, in order that the controller may confirm that the latest update has been obtained. In this case, the code letter was not transmitted by the commander. The controller therefore replied that the current ATIS informationwas 'C' and that the QNH was 1019 mb. At this stage, the commanderadvised ATC that there was a medical emergency on board "whichhappens to be the First Officer, so it would be appreciated ifwe didn't have to go round the hold and if you could give us someassistance coming in". The controller did not respondto this request directly, but continued to vector a precedingaircraft onto the ILS for Runway 08R. The fact that Runway 08Rwas being used was mentioned three times during transmissionsbetween ATC and the preceding aircraft. The Boeing 767 was thentransferred to the Gatwick Final Director at 0614 hrs, frequency118.95 MHz.

On transfer, the Boeing 767 was headingnorth and descending to 4,000 feet. The controller stated thatthe aircraft had 23 nm to touchdown and enquired as to whetherthe aircraft would be "*OK to handle a Cat 3*". The commander responded by asking if the visibility was still600 metres. He was informed that the RVRs had increased to 1,300metres touchdown and greater than 1,500 metres for mid point andstop end, with a cloud report of overcast below 100 feet. The commander replied that he was intending to make an approach underthose conditions. The commander reported that his speed was 230kt and the controller turned the aircraft right onto a heading of 050°. Further descent was instructed down to 3,000 feeton the QNH 1019 mb.

At 0615 hrs, the controller advisedthat the aircraft had 3 nm to run to the localiser. At this stage, the commander enquired if the Runway in use was 08R. He was informed that this was correct and confirmed that it had 3 nm to run to the localiser and 15 nm to touchdown. The commander apologisedas he had understood it to be Runway 26L in use and requesteda "delaying tactic". A left orbit was given, to roll out on a heading of 050°. The aircraft was about to fly outside regulated airspace during the orbit so the controller equested that the descent be stopped at 4,000 feet. He alsoasked if the commander was flying the aircraft by himself, towhich the reply was in the affirmative. The aircraft was levelled off at 4,000 feet and the speed was reduced in order to configure for the approach. This gave the commander the necessary time to reprogram the Flight Management System (FMS) and to set upthe appropriate navigation aids for the approach.

The ILS at Gatwick radiates on the same frequency (110.9 MHz) for both Runways 26L and 08R, althoughoung one system is active at any given time. However, when Runway26L is in use (inbound course 262°M) the morse identifier transmitted from the facility is 'I-WW' and when Runway 08R is use (inbound course 082°M) the identifier transmitted is 'I-GG'.

Descent to 3,000 feet followed oncethe aircraft had become established on the Localiser for Runway 08Rand a normal glidepath capture occurred. The Digital Flight DataRecorder (DFDR) indicated that all three autopilot systems wereengaged for the coupled approach and an uneventful autoland ensuedat 0625 hrs. The surface wind was from 030° less than 5kt and all RVRs were in excess of 1,500 metres. The commanderindicated that the runway had become visible at 200 feet aboveground level. The aircraft remained on Gatwick Director frequencyuntil after landing, when it was transferred to the Gatwick GroundControl frequency.

After landing, the aircraft taxied a North Terminal parking stand where the passengers deplaned normally. After the passengers had disembarked, the First Officerwas able to walk to the waiting ambulance which took him to the Port Health Authority centre. He was examined by doctors and transport was arranged to take him home some six hours later, once he had recovered.

Provision of weather information

In order to ascertain why the commanderwas under the impression that Runway 26L was in use, the recordswere obtained from the Met Office (for the METAR information)and from Gatwick ATC (for the ATIS broadcasts).

The runway in use at Gatwick changedfrom Runway 26L to Runway 08R at 0514 hrs. ATIS information 'A'at 0500 hrs gave Runway 26L in use. Subsequent ATIS broadcastsfrom 0520 hrs onwards all gave Runway 08R. The ATIS broadcastsrelevant to the time of the approach were:

From 0520 hrs, Information 'B', Runway08R, ATC Low Visibility Procedures (LVPs) in force, 0515 hrsweather, surface wind 020°/4 kt, visibility 400 metres, Fog,Overcast below 100 feet, temperature +2°C, dew point +1°C,QNH 1018 mb.

From 0550 hrs, Information 'C', Runway08R, ATC LVPs in force, 0545 hrs weather, surface wind 020°/3kt, visibility 600 metres, Fog, Overcast below 100 feet, temperature+2°C, dew point +2°C, QNH 1019 mb.

From 0620 hrs, Information 'D', Runway08R, ATC LVPs in force, 0615 hrs weather, surface wind 020°/2kt, visibility 800 metres, Fog, Overcast below 100 feet, temperature+2°C, dew point +1°C, QNH 1019 mb.

All of these broadcasts were terminated with the instruction for all aircraft to acknowledge the relevant information letter to ATC on first contact with Gatwick.

Records of the METAR observations for Gatwick indicated that an RVR was being quoted for Runway26L on observations up to and including the 0520 hrs METAR. Therelevant METARs were as follows:

0520 Z, 020°/4 kt, visibility400 metres, RVR Runway 26L in excess of 1,500 metres, Fog, Overcastbelow 100 feet, temperature +2°C, dew point +1°C, QNH1018 mb, becoming visibility 800 metres.

0550 Z, 020°/3 kt, visibility600 metres, RVR Runway 08R 900 metres, Fog, Overcast below 100feet, temperature +2°C, dew point +2°C, QNH 1019 mb, becoming visibility 1,000 metres.

The data used for the VOLMET broadcastsis taken from the METAR information. Therefore, the Gatwick Runway26L RVR was being broadcast on the VOLMET facility until about0555 hrs, even though the runway in use had changed to Runway08R at 0514 hrs.

Data from the three runway transmissometersat Gatwick indicated that at the time of the runway change the RVR at the eastern end of the airfield was significantly worsethan that at the western end. The touchdown RVR for Runway 08Rthen fell below 1,500 metres from 0538 hrs until 0632 hrs. The worst recorded values were 800 metres around 0550 hrs.

The METAR for London Heathrow at0620 hrs gave the surface wind as 320°/2 kt, visibility 3,500 metresin mist, cloud - few at 700 feet, scattered at 900 feet, with TEMPO of broken cloud at 800 feet.

Medical Aspects

The First Officer had taken two tabletsof what he believed was a proprietary brand of painkiller. Furtherinvestigation indicated that the tablets were of the co-codamoltype, which contained a mixture of codeine phosphate and paracetamol. Proprietary brands contain 8 mg of codeine phosphate with 500 mgof paracetamol. A stronger tablet, normally available by prescriptiononly, contains 30 mg codeine phosphate with 500 mg paracetamol. Packets of such tablets normally carry the following wording "Warning. May cause drowsiness. If affected do not driveor operate machinery. Avoid alcoholic drink."

In this case, the First Officer didnot have the packaging available. It was the first occasion thathe had tried this type of analgesic and was unaware of its sideeffects.

Codeine phosphate is an opiate whichmay cause sedation and dizziness and is considered by the CAAMedical Division to be incompatible with flying duties.

The CAA published an updated AeronauticalInformation Circular (AIC) on the subject of Medication, Alcoholand Flying (AIC 114/1996 - Pink 128) on 3 December 1996. The circular details some possible effects of various medications and their adverse effects on pilot performance. The First Officerwas not aware of this circular (or its earlier edition AIC 16/1993- Pink 73) or its contents until this investigation.

The circular notes that if there is any change in the medication or dosage, however slight, theeffect should be observed by the pilot on the ground prior toflying. The pilot is also advised not to take any medicines beforeor during flight unless their effects on the individual's bodyare completely familiar. If there is any doubt at all, then aDoctor experienced in Aviation Medicine should be consulted.

The operator receives copies of the AICs in its Technical Administration area. These are then forwarded to all the relevant departments for information. The content of the AICs is then disseminated to crews in the form of various information notices.

The following extracts are takenfrom current Flight Crew Orders regarding the use of medication:

"Many drugs lower operational efficiency and impair judgement and reaction time....

Commonly prescribed drugs in the classes listed below may have a prolonged effect on performance:

- a) anti-histamines...., anti-motionsickness tablets or medicines prescribed for allergic conditions;
- b) sleeping tablets or sedatives;
- c) tranquillisers;
- d) stimulants used to preventdrowsiness and to curb appetite when reducing weight;
- e) analgesics;
- f) antibiotics, cortisone, steroids and similar preparations;
- g) drugs for the control of highblood pressure.

Many preparations are marketedcontaining a combination of medicines. Sedatives and alcoholaggravate the effects of each other, and may be dangerous if takenat the same time...."

Flight Crew Actions followingan Incapacitation

The operator publishes a series of Flight Crew Orders, which form part of the company Operations Manual. The Order dealing with Injury or Illness, to Crew, On Board the Aircraft contains the following extracts:

"Any Crew member feelingunwell in the air should immediately say so. Any apparent incapacityin a fellow crew member should be investigated without delay.

In the event of injury or illness of a Crew member in flight, it is the Captain's responsibility to decide if an immediate landing is to be made. In the event of a Crew member, or a number of Crew members indicating symptoms of food poisoning the Captain should, when considering diversion, take into account the possibility of a common cause producing further Crew incapacitation.

Under these circumstances an intermediatelanding can be considered an emergency and route and aerodromeexperience requirements will not apply.

If due to incapacitation of a Flight Crew member the crew complement is reduced below theminimum complement for the aircraft a PAN call must be made."

The Boeing 757/767 Flying Manualcontains a Non Normal Procedure in the event of a crew incapacitation. The following are relevant extracts:

" The remaining pilot mustassume or maintain control.

Establish a safe flight profileand engage the autopilot.

Obtain crew assistance.....

Inform ATC.

Arrange medical assistance onarrival.

Brief a cabin crew member toassist as required.....

Complete the approach and landingusing the autopilot as much as possible.

A partially incapacitated pilotshould not be allowed to participate in the subsequent operation of the aircraft as judgement may be impaired.

After landing, obtain immediatemedical assistance.....

On an ETOPS sector, the pilotin command must decide whether to continue the flight, returnto an airfield behind or divert to an alternate en-route. Inmaking this decision, consider all relevant operational factors, including:-

weather conditions at the chosenairfield,

the reduction in flight time whichwould be achieved by diverting,

the workload involved in conducting diversion single-handed,

familiarity with the alternate,

the condition of the incapacitatedpilot,

availability of medical facilities.

In reaching these decisions theoverall safety of the remainder of the flight is paramount. "

Aircraft Equipment and OperationalLimitations

The aircraft is certificated foroperation by a minimum of two pilots.

The aircraft is equipped with ElectronicFlight Instrument System (EFIS) displays. A pictorial map ofthe route being flown is normally displayed on the ElectronicHorizontal Situation Indicator (EHSI) and this is a valuable aidto geographic orientation and situational awareness.

The company operating minima fora Category 1 ILS approach to Gatwick Runway 08R (threshold elevation 195 feet amsl) are 400 feet Decision Altitude and a minimum RVR of 550 metres. The minima for a Category 2 autoland are DecisionHeight 100 feet (Radio Altimeter, RA) and a minimum RVR of 300 metres. The minima for a Category 3 approach are either NoDecision Height, 14 feet RA or 50 feet RA with minimum RVR of 75 metres, 75 metres or 200 metres respectively, depending on the aircraft technical serviceability status and the airportILS/runway facilities being appropriate.

There is no derogation in the eventof a pilot incapacitation. The Flight Crew Orders also allowFirst Officers to complete the autoland sequence in the eventof a Captain's incapacitation once the approach has been commenced.

The weather conditions at Gatwickdid not fall below Category 1 limits during the period relevant to the approach of this aircraft.

Other cases of crew incapacitation

The CAA Safety Department databasewas found to contain 49 cases of in-flight crew incapacitationreported during the past five years during public transport flights. Of these, 31 cases occurred on aircraft operated by two pilotsonly. Of the overall total cases, 27 were reported as involving some form of incapacitation resulting from nausea or a gastricupset.

Multi-crew operations

The purpose of multi-crew flightdecks is to distribute the routine tasks in an orderly and efficientmanner, to operate with as great a safety awareness as possibleand to ensure that, in the event of one pilot being incapacitated, the remaining crew member(s) may safely complete a successful approach and landing. This may involve a diversion to an alternatelanding airfield if the

circumstances warrant such action. Pilotincapacitation exercises are included periodically during simulatorinitial and recurrent training sessions.

The ethos of monitoring and cooperationis built in to all current flight deck procedures and Crew ResourceManagement training is intended to ensure that all flight deckcrew are fully involved in all aspects of the safe handling and operation of the aircraft. The effect of the incapacitation of a flight deck crew member obviously depends on the particular crew complement being carried and whether any substitution ofcrew duties is possible, as in the case of two pilots plus a flightengineer or on a route requiring the use of a 'heavy' crew.

Potentially, the most serious situationarises when an incapacitation occurs on a two pilot flight deck. The remaining pilot is left in a non normal and unusual situation. In such cases, the workload is increased and at the same timethere is little or no backup monitoring of safety critical items. Errors may be induced as a result of the increased task loadingat a time when there is no backstop to trap them and prevent aserious situation developing. Cabin staff are given some trainingin providing assistance in the when required, such as readingchecklist items, but not in the specialist tasks of monitoringflight profiles, setting of flight instruments or operation of aircraft systems.

There is currently no requirement for any instrument approach weather minima increment to be applied in the event of a pilot incapacitation. The use of the autopilot for an approach in these situations is preferable, but the task of monitoring the aircraft systems and the assessment of the visual cues of the runway and approach lighting still exists. Such human monitoring is an implied requirement where Category 2 and Category 3 operations are conducted, by virtue of the list of serviceable equipment required prior to the commencement of such an approach. There is currently no prohibition of this type of operation in the event of enforced single pilot operation.

The conduct of instrument approaches down to normal operating minima in situations where the aircraftis being operated by less than the optimum number of flight deckcrew is an anomaly.

Safety Recommendations

97-14The CAA should conduct a safety assessment of the current proceduresused by UK AOC holders in respect of aircrew actions in the eventof a pilot incapacitation for various types of multicrewaircraft. This assessment should consider a requirement for theformulation of a specific diversion criteria dependant upon theroute being flown. Consideration should also be given to a requirementfor the prohibition of instrument approaches in weather conditionsworse than current Category 1 approach minima and also to a requirementfor a suitable increment to current Category 1 ILS or non-precisionapproach minima, in terms of cloud ceiling and visibility, wherethis is deemed to be necessary.

97-15British Airways PLC, Flight Operations Department should ensure that all relevant flight safety information contained in CAA AeronauticalInformation Circulars is widely disseminated to crews as soonas it becomes available and with maximum effect. The companyshould consider the use of appropriate articles in company aircrewnewsletters in order to aid awareness in this area.