Tel: (876) 929-3552
(876) 960-3948
(876) 960-4742

E-mail: aisjamaica@jcaa.gov.jm

Address: 4 Winchester Road,
Kingston 10
Jamaica, W.I.

AMHS: MKJKYNYX
AFS: MKJKYAYX
Comm: CIVAV JAMAICA

Jamaica Civil Aviation Authority
AERONAUTICAL INFORMATION SERVICES
4 Winchester Road,
Kingston 10.
Jamaica, W.I.

AIC

A13/25

10 November 2025

ADMINISTRATIVE
(White)

OPERATIONAL PROTOCOLS FOR HURRICANE MELISSA RELIEF OPERATIONS

1. DOCUMENTS

The following information/documents are required for Humanitarian Relief Operations:

i) The date and estimated arrival time for each flight

ii) A complete list of all items as well as quantities to be transported. This information is required by the Office of Disaster Preparedness and Emergency Management for the co-ordination of all relief effort/support.

iii) The supporting aircraft documents listed below:
- a) Air Operator Certificate
- b) Operations Specification - Sections A003 - Aircraft Authorization, B050 -Authorized areas En-route operations, D085- Aircraft listing. The digital signature page **must be included**.
- c) Certificate of Registration
- d) Certificate of Airworthiness
- e) Noise Certificate
- f) Radio Station Licence
- g) Certificate of Insurance

iv) A letter addressed to the JCAA confirming that the airline will follow the security procedures of its designated local handling agent, that is, the handling agent selected by the operator to assist with airport operations. Kindly revise the security letter submitted.

Please note that, items (i), (ii), (iii) and (iv) above must be submitted via email to erlicensing@jcaa.gov.jm .

Item (ii) should be copied to donationcoordinationjamaica@odpem.org.jm. That is, a complete list of all items as well as quantities to be transported.

2. GENERAL INFORMATION

i) Ground handling arrangements must be made prior to the flight operations to Jamaica.

ii) Normal commercial carriers bringing relief supplies as **donation** must communicate the packing list to the ODPEM at donationcoordinationjamaica@odpem.org.jm with the Jamaica Civil Aviation Authority in copy at erlicensing@jcaa.gov.jm.

iii) On receipt of the compliant application by the JCAA, permits will be granted within one hour.

iv) Expect slotting rules to be applied at the airports to streamline efficient arrival, offloading and departure. This will be managed by the airport operators.

v) Relief cargo flights are asked to send additional empty cargo pallets to allow for faster turn-around. Contact your respective ground handling agent for specific details of requirements.

vi) Flight plans are to be filed at minimum one (1) hour prior to departure from point of origin. **Flight Plans must contain the Flight Authorisation Number issued by the Jamaica Civil Aviation Authority, erlicensing@jcaa.gov.jm**

vii) All humanitarian aid/supplies must be consigned to the Office of Disaster Preparedness and Emergency Management. ODPEM contact information:-

- Commander Alvin Gayle agayle@odpem.org.jm
- Sophia Mitchell smitchell@odpem.org.jm

donationCoordinationJamaica@odpem.org.jm

Section three (3) addresses Military operations; section four (4) outlines professional registration for short term volunteers for medical and nursing professionals; and section five (5) highlights requirements for special service dogs.

3. MILITARY

i) All relief/aid helicopter operators will fall under the control of the military - The Jamaica Defence Force (JDF) once they land in Jamaica.

ii) Coordination with the Jamaica Defence Force JDF, is required for all relief/aid helicopter operations.

MILITARY (cont'd)

iii) On first arrival to Jamaica, all relief helicopter operators must contact the JDF using the following:

Air Operations Centre	876 926 812 –9 Ext 2055/2034	
Lt. Col. Morton Stewart	876 839 0089	
Major Jamel Sterling	876 399 4892	email: maccaoc@gmail.com

iv) The JDF has primacy of the airspace designated for search and rescue and relief operations.

v) The JCAA will provide the list of helicopters authorized to operate in Jamaica and update as approvals are granted.

vi) Permits issued will have the requirement for contact with the JDF AOC on first arrival.

vii) All arriving relief Helicopters must report to the JDF AOC for the safety operational brief **BEFORE** first Mission.

viii) Confirmation of JDF briefing will be provided to the JCAA by the JDF.

ix) Operators before departure shall advise ATC that they have received the JDF Briefing.

x) All relief helicopter operators must provide a daily mission plan in the morning and a completed mission at the end of day to the JDF.

xi) All domestic operations must yield to the JDF operations as instructed by the JDF AOC.

xii) Failure to comply with JDF stand down request **may** result in removal of authorization to operate within Jamaica.

4. PROFESSIONAL REGISTRATION FOR SHORT TERM VOLUNTEERS FOR MEDICAL AND NURSING PROFESSIONALS

All doctors, dentists, pharmacists, nurses, dieticians, radiographers, medical Technologists, Speech, Occupational and Physical Therapists, Dental hygienists and technicians, must be registered with their respective councils before practicing their profession in Jamaica, even if for a day.

Councils
Medical Council of Jamaica
Pharmacy Council of Jamaica
Nursing Council of Jamaica
Dental Council of Jamaica
Council of Professions Supplement to Medicine

No Council will give this special registration unless they are confident that the period of volunteer service is recommended by the Ministry of Health & Wellness. The process will be facilitated if the applicants complete the application form and submit along with the required credentials to the Ministry of Health & Wellness Emergency Operations Centre.

The following are the requirements of the Medical and Nursing Councils and must be submitted along with 2 recent photographs or valid picture ID (Passport or Driver's license):

Nursing Council

1. Short term Volunteer Form - attached
2. Certified copy of Certificate/ Diploma from School of Nursing
3. Certified Copy of Current license
4. Letter of reference from Nursing Supervisor

Medical Council

1. Short Term Volunteer Form - attached
2. Form A (from the Medical Act) - attached
3. Certified copies of academic degree(s)
4. Certified copy of current Registration or License;

Special registration from the Councils will specify period of registration, place of work and supervisor. Applications and credentials are to be submitted to *karen.shaw@moh.gov.jm*.

5. SPECIAL SERVICE DOGS

Each dog **must** satisfy the following minimum requirements for entry to Jamaica:-

i) In general good health with no evidence of external parasites or wounds.
ii) Be examined within 48 hours of export and found to be in good health, physically sound, free of any evidence of infectious disease and cleared as fit for travel.
iii) Travel with its handler to Jamaica
iv) Be microchipped with an ISO-compatible microchip prior to arrival
v) Vaccinated with an appropriate inactivated vaccine within the last 12 months in the case of annual rabies vaccination preparations or within the last 36 months in the case of three-year rabies vaccine preparations
vi) have a post-rabies vaccination FAVN titre greater than 0.5IU/ml.

vii) Be treated for parasites as below:

a) **Heartworm:** prevention to be administered at the manufacturer's recommended dose
b) within seven (7) days prior to the date of arrival.

SPECIAL SERVICE DOGS (cont'd)

viii) Other Internal parasites and external parasites: approved pharmaceuticals to be administered within seventy-two (72) hours prior to date of arrival

ix) In addition to Rabies, each dog must have been vaccinated against Leptospirosis, Distemper, Adenovirus, Parainfluenza and Parvovirus on an annual basis**.**

x) En-route to Jamaica, the dog should not have contact with any other dogs in any other country.

xi) **At least 24 hours' notice of arrival of the dog must be given to the Director of the Veterinary Services Division, 193 Old Hope Road, Kingston 6. Sophia.ramlal@moa.gov.jm simone.martin@moa.gov.jm; vsdpermits@moa.gov.jm**. Health records on each dog is to be provided in the notification.

SPECIAL SERVICE DOGS - ON ARRIVAL/ WHILE IN JAMAICA

i) In lieu of being held at the Veterinary Quarantine Facility in Kingston, the dogs will be assigned to the ODPEM/JDF at designated location(s) as agreed by the ODPEM/JDF and the Director of Veterinary Services, Jamaica.

ii) Health checks on each dog may be carried out by an official veterinarian of the Veterinary Services Division

iii) There should be **no** contact by the dog with any native animal until further advised by the Veterinary Services Division

iv) In areas outside of the agreed locations and where there might be stray animals, an official veterinarian must be notified and may be assigned to accompany the dog and handler.

v) The handler of each dog must have at all times appropriate garbage bags or other relevant equipment to collect excrements from the dogs. Proper disposal of excrements must take place.

vi) Where the dog develop health concerns/issues the Veterinary Services Division must be advised and reserves the right to authorize re-exportation and clinical interventions in the national interest.

<u>WHERE DOGS FAIL TO MEET THE MINIMUM STANDARDS THE DIRECTOR OF VETERINARY SERVICES RESERVES TO RIGHT TO AUTHORIZE DENIAL OR ENTRY, REPATRIATION OR QUARANTINE.</u>

This supersedes AIC A12/25 dated November 6, 2025

FORMS

PROFESSIONAL REGISTRATION FOR SHORT TERM VOLUNTEERS

All doctors, Dentists, Pharmacists, Nurses, Dietitians, Radiographers, Optometrists, Medical Technologists, Speech, Occupational and Physical Therapists must be registered with their respective Councils before practicing their professions in Jamaica, even if for a day. (Also needing registration are Dental Hygienists and Technicians).

Medical Council
37 Windsor Avenue
Kingston 10
Tel: 978-8538

Dental Council
50 Half Way Tree Road
Kingston 5
Tel: 317-8643

Nursing Council
50 Half Way Tree Road
Kingston 5
Tel: 929-5118

Council of Professions Supplement to Medicine
50 Half Way Tree Road
Kingston 5
Tel: 754-8341

Pharmacy Council
91 Dumbarton Avenue
Kingston 10
Tel: 926-2637

Jamaica Optometric Association
York Plaza
1 ½ Hagley Park Road, Kingston 10
Tel: 929-8656

No council will give this "special" registration unless they are confident that the period of volunteer service is recommended by both the Local Health Authority and the respective head of the department at the Ministry of Health. The whole process will be facilitated if the form is completely filled out and signed (by applicant, team sponsor, local and head office authorities) and sent with credentials and application forms to the respective Council as above.

A registration or processing fee is charged.
The Local Health Authority is the Medical Officer (Health).

SHORT TERM VOLUNTEER

_____
_____
_____
Applicant's Address
Date: _____

REGISTRAR

_____ COUNCIL OF JAMAICA

I _____ apply for a special registration

As a _____ in order to volunteer my service
Profession

For the period_____at_____
Dates (Specific) ***Facility/Location***

In the (civil) Parish of _____

My Local Contact Person is:

Name: _____
Address: _____
Telephone: _____
_____
Sponsor's Signature

I recommend the above

Signature | Position (Local Health Authority) | Date

Signature | Position (National Health Authority) | Date

FORM A

THE MEDICAL ACT, 1976

APPLICATION FOR REGISTRATION AS A MEDICAL PRACTITIONER

To the Medical Council

Name of Applicant _____

Date of Applicant _____

Address of Applicant

_____

_____ Tel No. _____

Date of Birth of Applicant _____ Sex: M _____ F_____

Qualifications of Applicant _____

Where were Qualifications obtained?

_____

_____

_____

Signature of applicant

Note*

1. Full Registration – Original Degree Certificate
2. Certified Photostat or certified copies of academic certificates of diplomas;
3. Certificate of Registration or License;
4. Certificate of Good Standing with registering body or valid License;
5. Names and addresses of two (2) medical referees;
6. Passport size photograph.

TO BE COMPLETED BY THE REGISTRAR

Date of registration or refusal _____

Registration No. _____

Reason for refusal if refused _____

_____

_____

Signature of Registrar

N.B. Form may be copied, not typed over.
A PERSONAL INTERVIEW IS REQUIRED FOR FULL REGISTRATION.