

The small technical

By Eileen Senger

Everyone knows it, everyone fears it: the “small technical problem”. The reason why we controllers fear it is because most of the time it is not what it is claimed to be: small. It grows. With every transmission we get more details that require action.

A very important factor during these situations is pilot-controller communication. In a technical emergency the pilots are usually so busy troubleshooting and working checklists that communication with ATC is some way down their priority list. I was once allowed to witness a flight simulator emergency training session for the annual pilot check, and it was very impressive to see the workload they were confronted with.



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orities as well as possibly deal with the violation of active military airspace. In the case of an emergency descent it is more reaction than action, but it has to be coordinated, sooner or later.

Usually, “small technical problems” aren't small technical problems. Pilots seem to have a tendency to play down the significance of the problematic situation they find themselves in, God knows why. Whenever I hear those key words, I go to red alert. I make sure no aircraft is passing right underneath that other aircraft. I pick up my pen and blank sheet of paper. I pick up the telephone without dialling. Because 95% of the time the next transmission of that aircraft will be “...request immediate descent”, “...request diversion to XXXX” or sometimes a very technical description of the once small problem that now requires a lot of questions and explanations back and forth for

a non-pilot to understand.. And of course to be able to communicate it to the next unit so that they understand as well.

Over the years I have also got the feeling that pilots try to avoid having to declare an emergency for as long as possible. The trouble is that without emergency status, it becomes rather difficult to coordinate good direct tracks or arrange priority landing, and no transit through active military areas is possible.

Probably all of us have witnessed a situation where we look in disbelief at our colleague with the “did he really say that?”- question mark on our face. “Radar, we have a woman giving birth

They have a plane to fly plus have to go through all the paper work. Plus communicate with their crew and ATC. But we can only help if we know what is going on, if we get proper information and know their intentions. Then we can coordinate, in serious emergencies even two controllers in parallel on the phone to different units, to find shortcuts and set pri-



problem . . .

on board, do you have any tips or maybe a doctor you could call?" – "Eh..." I guess there is no training for such situations. All one can do is use common sense. No, we don't have a doctor hanging around the operations room for situations like this. ATC cannot solve every problem. But how about a diversion to get mother and child on the ground as quickly as possible?

And after the situation is over? After these few very intensive minutes have passed and the aircraft is handed over to the next unit, the mind starts spinning. We take a deep breath and try to understand what has just happened to us. Some of us are able to continue working on the position, some need a break and some need professional help. Luckily, nowadays CISM is widespread in ATC and it is generally accepted that people need help and that

help should be provided promptly. A change of culture has taken place and it is not considered a weakness anymore to admit problems and to ask to be relieved and supported by CISM peers.

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But what about the men and women on the other side, on the flight deck? First of all, they experience a greater range of abnormal situations than we do as controllers. A TCAS RA may look very serious to us, to them it may be

just following another procedure (unless the other plane gets so close that they can see it and judge it). Then again, the death of a person onboard seems abstract to us, to them it may be shattering.

They cannot just unplug the headset and get relieved, they first have to complete their flight and land their plane. A long-haul flight may have to continue as planned to destination, sometimes for many more hours. There may be operational pressure not to disrupt the schedule with a diversion even if the pilots consider themselves unfit to continue their duty after touchdown.

But their minds must sometimes be spinning as well! They must suffer from critical incident stress every now and then just like controllers do. They can chat a bit with the colleague next to them about it but when one of them is hit by a reaction to heavy stress, there is not much one can do. All of us who have witnessed a colleague having to go through this know how much this affects even the observer.

Still, when I tried to find out from the web if airlines have CISM programmes at their companies, I found nothing. In Germany there is the "Stiftung Mayday", an independent foundation which provides support to pilots and their relatives in difficult situations. Interestingly though, they state that the majority of their interventions were the consequence not of airborne situations or emergencies but of people passing away during their time on board. Some German airlines like Lufthansa or TUIfly cooperate with them. This organisation provides CISM to anyone calling their hotline, but they have a response time for first contact (usually via telephone) of up to six hours. Logistically it makes quite a difference to have a CISM peer present in an air traffic operations room or at major centres, not to mention in smaller units or even abroad. But this cannot be done when working with a team of volunteers in their free time. I must say that I had expected that at least the big airlines would have such a programme in place at their main hubs. Maybe the shift in awareness and attitude towards critical incident stress that struck ATC in Europe after the Überlingen midair collision still has to take place in the flying industry.

