PE1804/V

Anonymous submission of 16 November 2020

Firstly, and very importantly, I would like to state than I am completely in favour of modernising Air Traffic Services in the Highlands and Islands BUT not to the point of a Remote Surveillance Centre in Inverness. This whole idea was suggested, promoted and ultimately signed off by a small group of senior HIA management and finally the HIA Board based on what, I believe, amounts to guesswork by a firm of consultants. NONE of these personnel have any experience of UK Civil, Non-Radar Air Traffic services. The very fact that they chose the riskiest, most expensive option, I believe, sums up this lack of knowledge!! Controlled Airspace (CAS) would offer some increase in safety; a surveillance feed would definitely increase safety (all that is needed is Tower based Surveillance feed to enhance ATCO spatial awareness, something which has been a mitigating factor in EVERY airborne safety report over the last 9+years but which has still not been rolled out to outlying airports) but a remote centre offers NO INCREASE IN SAFETY, indeed it could be argued that connectivity/Weather related issues would reduce safety.

Remote towers have been rolled out in Scandinavia to very small airfields with c1400 aircraft movements/year (similar to numbers flying in to the smaller North Islands of Orkney) on single runways; Kirkwall has c14000 movements/year on cross runways, Sumburgh has 3 runways for increased Helicopter movements. It has been suggested that HIA airfields would all be reduced to single runway operations which would again reduce safety in crosswind conditions, and cancel some flights, for smaller Inter-island LIFELINE services.

HIA have, I believe, a very poor history in managing past projects. Self-righting rescue craft that needed half the available Airfield Fire Service (AFS) to launch/recover for use in water that is generally <6ft deep; Fire appliances purchased from France & Spain with in-built faults; Control tower voice switches rolled out with known faults and most importantly the Inverness Surveillance Approach – this has rarely managed to be sufficiently staffed to allow it's full operational hours to be provided. On that note, another deciding factor for the ATMS is "Recruitment & Retention" (again based on consultant report which I believe to be misleading. When HIA management were confronted with more accurate figures the report was brushed off as "water under the bridge, Let's move on"). It has been proved that LOCAL recruitment leads to long term staffing, HIA have completely ignored this over the years and that is why there is a turnover of staff at outlying airfields (they never advertised in local papers/websites etc).

HIA operates 11 airfields, the Island based ones are certainly "LIFELINES" and available 24Hr for Hospital flights. I believe that HIA should not be taking a huge gamble to be at the cutting edge of Technology. Wait 5+years and maybe think about this idea when there is PROVEN technology at much reduced costs; the very idea that HIA think they have the ability/knowledge to fulfil this strategy AND sell their expertise on to others fills me with fear.

Finally, Staffing. The vast majority of ATS staff are completely against this strategy and unwilling to uproot their families from the relative peace/safety of Island life to the much busier environment of Inverness-shire. There will be a large economic loss

to the Islands, not just from HIA salaries but also from the families second jobs etc. This has been a good test for the much-heralded Islands Bill. Sadly, it has fallen at the first hurdle with HIA paying scant attention to the Island Impact Assessment they have graciously offered to undertake, in their own words it will make no difference to whether the ATMS continues apace or halts for further evaluation.

I believe that the Committee should listen to the ATS staff. They have the expertise to understand the flaws and request HIA have a cooling off period where the ATMS can be scrutinised by Parliament selected experts instead of believing everything they are told by HIA MD.