

GF-TADS for Europe Fifth Meeting of the Regional Steering Committee (RSC5)

AFSCA, Brussels October 8-9 2013

Implementation of the RSC4 Recommendation No. 2 on Enhancing prevention and control of priority diseases in Europe

Completed On-going Pending or not completed

THE GF-TADS FOR EUROPE STEERING COMMITTEE DECIDES THAT

1. The list of priority diseases for Europe be	Since the RSC4, 7 priorities diseases in Europe:			
revised to include Brucellosis ¹ .	HPAI; FMD; PPR; ASF; CSF; rabies; and			
	Brucellosis;			
	(+ Rindeprest and VS)			

THE GF-TADS FOR EUROPE STEERING COMMITTEE RECOMMENDS THAT THE GF-TADS 5-YEAR ACTION PLAN BE IMPLEMENTED; IN PARTICULAR THAT:

1. FMD – The European countries				
(i) be urged to participate in the next FAO-OIE		20 countries of Europe participated in the		
Global Conference on FMD;		conference (9 non EU Member Countries).		
(ii) dedicate funds to implement the Global		To date, no specific budget for the GF-TADs		
Strategy on FMD, once adopted;		activities, including FMD (the Bangkok conference		
		was not a pledging conference).		
		To date, on-going FMD activities = mostly FMD		
		roadmap meetings, on OIE and FAO budgets, or		
		with partners (EuFMD)		
		Next global conference (Africa; date?)		
(iii) implement the Global Strategy on FMD; in	i) implement the Global Strategy on FMD; in West Eurasia FMD Roadmap (9 countries			
particular, in countries where the situation is		Europe): → see <u>annex1</u>		
endemic, countries move at least one stage				
up along the PCP pathway within the next 5		In 2013 (October):		
years; engagement into the FMD West		4 countries in PCP FMD Stage 1		
Eurasia roadmap under the GF-TADs	ap under the GF-TADs 3 countries in PCP FMD Stage 2			
umbrella will be crucial to achieve this and		(2 countries not assessed, probably in Stage 1)		

¹ RSC4 Recommendations on Brucellosis (see point 7) are particularly developed as a result of this new inclusion.

countries are encouraged to carry out assessment (self or external procedure) of their PCP stage; (iv) being in compliance with FMD PCP stage 3 consider asking for official endorsement of their National FMD Control Programme by the OIE.	NA	In 2014: 5 countries (Kaz, Taj, Turkm, Aze, Georg) are expected to be PCP Stage 2; 1 country in Stage 3 (Arm) No country in FMD PCP Stage 3
2. <u>ASF</u> –		
(i) The European countries be fully prepared to address ASF should the disease expand in the region. In particular, countries should develop ASF contingency plans and compensation schemes together with the main stakeholders involved (farmers and small holders);		The EU is well prepared to take immediate emergency measures at EU, national and local level should an ASF outbreak occur. Contingency plans (mandatory according to EU legislation, Council Directive 2002/60/EC) and compensation schemes (national schemes and EU veterinary fund) for ASF are in place in all 28 EU Member States. In addition, there is a network of National Reference Laboratories on ASF, coordinated by an EU Referance Laboratory (Valledeolmos, Spain). In September 2013, a meeting on contingency planning has taken place at the European Commission's FVO in Grange to share best practice among the experts of the EU Member
		States and the European Commission. On OIE website (simulation exercices): 2012: - Belarus (Jan) - Romania (March 2012)(OIE listed diseases)
		2013: - Lithuania (Jan) - Slovakia (Sept) - Czech Republic (Sept) - Poland (Sept) - Romania (Oct)
		On OIE Website (contingency plans): Example of contingency plans for ASF from: Australian and Spain.
		Nota been: No indication for other countries; nor on compensation schemes nor on participative approaches → questionnaire?
(ii) Regional meetings – for at-risk countries in particular - be organized in 2012 under the GF-TADs umbrella to improve information exchange and collaboration among countries and provide technical guidance on point (i);		2 regional meetings on ASF organized in 2012 and 2013 under the GF-TADs umbrella (<u>FAO/Budapest December 2012</u> and <u>TAIEX/Vilnius September 2013</u>).
training tools developed within the ASF Risk programme be promoted and used for this purpose;		Tools produced under the EU ASF risk programme promoted during these meetings; training tools available at: http://sanidadanimal.info/cursos/asf/
(iii) OIE, FAO and EU continue to closely monitor the epidemiological situation and		Russia - FAO and Pokrov institute (Russia) developed a produced a Paper on 'African Swine

promote surveys in the Region to improve knowledge on the role of small holders and wildlife in the epidemiology of the disease, as well as of ticks;		Fever in the Russian Federation (2007-2012): epidemiological overview and implications for the region' (available at: http://www.fao.org/docrep/018/aq240e/aq240e.pdf) Sardinia - Currently, ASF is present in Sardinia (Italy) and EU co-financed eradication programmes are in place.
		Other EU MS - the EU coordinates and co- finances the ASF prevention activities in Member States at risk (Estonia, Lithuania, Latvia and Poland), including measures at the borders with affected countries, and as regards monitoring.
(iv) OIE, FAO and EC engage with the Russian authorities to assist them if requested, notably through the support of the FAO-OIE CMC-AH and/or the EU Emergency team;	NA	No request received from the Russian authorities for CMC-AH or EU Emergency Vet Team missions Support to any country of the region (Belarus 2010)
(v)The OIE establish an Office in Moscow and that this office be involved in supporting ASF control efforts in Europe.		OIE Representation in Moscow since March 2013, headed by Dr K. Lukauskas: http://www.oie.int/forthe-media/press-releases/detail/article/oie-opens-a-new-office-in-moscow-russia/
PPR – (i) lessons be learnt from the EC/ PPR project in Turkey, including communication issues, and be used in other countries in the region;		Work in progress
 (ii) as often as possible, support to PPR prevention and control activities be combined with FMD activities, along the lines of the output 3 of the FAO-OIE FMD Global Strategy; 		Work in progress
(iii) FAO and OIE establish a GF TADS PPR Working Group as already recommended by the GSC and further explore the need to develop a Global Strategy for the control of PPR to help the control of PPR in the region and worldwide;		Global GF-TADs PPR WG established since 2012 in charge of (i) Developing OIE-FAO Global Strategy for the control of PPR (ii) Developing monitoring tools ('PCP'-like PPR tool) (iii) Organizing a Global Event (end of 2014, location tbd)
		Seventh meeting of the WG held in September 2013 in FAO HQ / ROme.
(iv) PPR be added to the list of diseases with an OIE official disease status recognition pathway.		In May 2013, the General Assembly of OIE Delegates added PPR (and CSF) to the list of diseases for which Member Countries can apply for official recognition of their disease free status (chapters 1.6 and 14.8 of the OIE TAHC) → Status 'free country of zone' (without vaccination (historically free procedure), first status granted in May 2014.
4. <u>CSF</u> –		Also the General Assembly adopted the provisions (chapter 1.6) on the endorsement by the OIE of an official control programme for PPR.

Actions already engaged to control classical	TAIEX regional seminar on ASF and CSF (Vilnius,
swine fever in Europe, in particular by the EU in the Western Balkans and the Black Sea	September 2013).
sub-regions and also throughout Europe	Remark: in May 2013, CSF added to the list of
concerning wild boars, be continued in the light	diseases for which Member Countries can apply
of their success and be extended to other	for official recognition of their disease free status
countries.	To official recognition of their disease free status
5. Rabies –	
(i) The European countries commit to	At least 110 Member Countries are considered
implement actions as recommended by the	endemically infected with rabies; only in 161
OIE Global Conference on Rabies in Korea	Member Countries is rabies a notifiable disease in
(Republic of), September 2011; in particular,	dogs.
rabies should be made a notifiable disease	As of October 2013, 2 countries in Europe do not
both in domestic and wildlife populations in all	have rabies as a notifiable disease in dogs.
European countries;	
	The OIE Global conference (Seoul / Korea,
	September 2011) recommended that 'all governments consider rabies control as a high
	priority and ensure that national legislation
	provides for rabies to be a notifiable disease'
	(Recommendations).
	OIE regional seminars of OIE National Focal
	Points for (i) Animal Disease Notification and (ii)
	Wildlife have increased countries' knowledge of
	and reporting on their rabies situation; next OIE FP
	seminars = March 2014 (WAHIS basic), October 2014 (WAHIS Advanced); April 2014 (wildlife)
	2014 (WAI IIS Advanced), April 2014 (Wildlife)
	Remark: Regional elimination of human rabies
	transmitted by dogs has been outlined by Latin
	American countries for 2015 and south-east Asia for 2020.
(ii) Intersectoral collaboration between animal	On the occasion of World Rabies Day, the Food &
and human health authorities be reinforced,	Agriculture Organization (FAO), the World
using rabies as a flag ship disease to	Organization for Animal Health (OIE) and the World Health Organization (WHO) have issued a
implement the One Health agenda;	joint statement showing intersectoral commitment
	to defeating one of the world's deadliest diseases.
	The European Commission in collaboration with
	the ECDC and EFSA is organising, via the TAIEX
	instrument, a multi-beneficiary and multi-regional
	workshop on on regional policies to control rabies in the Southern Mediterranean, targeting both
	competent public health and veterinary authorities
	in the Mediterranean countries in a "one health"
	approach. The workshop will take place in mid-
	October 2014 in Paris with the participation of
	speakers from FAO, OIE and WHO as well as the
	Pasteur institute and the EU Reference laboratory
	for rabies.
(iii) Management of stray dog population be	On World Rabies Day, FAO, OIE and WHO recall
implemented in accordance with the OIE	that Rabies programmes need to incorporate free-
standard on stray dog population management	roaming and street dogs with options for dog
(chapter 7.7 of the OIE Terrestrial Animal Health Code).	population management.
6. HPAI –	
v. <u>/ 11 / 11</u>	

European countries remain fully committed to the prevention and control of HPAI despite the absence of outbreaks in 2011 (with the exception of one outbreak in Israel), given that the situation remains of great concern in Asia and nearby Egypt.	HPAI despite the 2011 (with the srael), given that concern in Asia Countries remain vigilant: Fexercices for HPAI in: Romania (March 2012) Croatia (March 2013) Turkey (October 2013)		
		The EU is well prepared to take immediate emergency measures at EU, national and local level should an HPAI or H5/H7 LPAI outbreak occur. Contingency plans (mandatory according to EU legislation) and compensation schemes (national schemes and EU veterinary fund) for HPAI and H5/H7 LPAI are in place in all 28 EU Member States.	
7. Brucellosis -		Countries report to MALIIC / MALIID: in 2040:	
(i) The precise brucellosis sanitary situation of all European countries be assessed based on WAHIS;		Countries report to WAHIS / WAHID: in 2012: - 18 countries reported Bruc. Abortus - 15 countries reported Bruc. melitensis - 12 countries reported Bruc.ovis - 5 countries reported Bruc. suis	
(ii) Countries in the region, where the precise		FAO provided technical assistance in national	
situation with respect to Brucellosis in cattle		sero-survey studies under GCP projects to	
and small ruminants is not precisely known,		determine the prevalence of the brucellosis	
be encouraged and assisted to conduct		livestock (Armenia and Tajikistan)	
surveys to determine the prevalence of brucellosis in their livestock;			
(iii) Critical control points for brucellosis		Critical control points for brucellosis control have	
control, in particular to stop further spread in		been assessed under the TCP and GCP but follow	
the animal population and to limit risks to		up actions from countries are expected	
animal caretakers and consumers, be		, i	
assessed;			
(iv) Veterinary Services be supported to		FAO provided technical assistance in development	
initiate or intensify their brucellosis control and		and implementation of brucellosis control	
veterinary public health related activities		strategies/action plans for Armenia, Georgia,	
including the initiation of further development		Kazakhstan, Tajikistan	
of indispensable support systems, in particular animal identification and registration systems;		<u>Remark</u> : Post OIE laboratory Twinning regional workshop on animal brucellosis for Central Asia,	
animal identification and registration systems,		turkey, Nov 2011 (Azerbaijan, Georgia, Kyrgyz	
		Republic, Tajikistan, Turkey, and Uzbekistan)	
		(recommandations)	
(v) Quality of vaccines and sub-regional		Quality of vaccines and sub-regional	
harmonisation of vaccination policies be		harmonisation of vaccination policies were	
carefully considered;		discussed during FAO regional workshopheld in	
		Turkey, 9-11 April, 2013	
(vi) Cooperation between national laboratories		OIE Laboratory twinning programme on	
and FAO and OIE Reference Laboratories be		Brucellosis:	
increased and national laboratories be		- UK (parent); turkey (candidate) →	
supported to develop their capabilities regarding brucellosis diagnostics and serology		completed - Italy / USA (parent); Kazakhstan	
by using, among others, the Laboratory		(candidate) → started on April 2013	
and the state of t		(Janaidato) / Jiantou Jii Apili 2010	

Twinning programme of the OIE:	
(vii) Intersectoral collaboration between animal health and human health authorities be reinforced under the One Health agenda.	On-going Brucellosis proficiency testing programme in Central Asia, coordinated by PCVI and AHVLA. Results of this programme will be used to target training and guidance to improve diagnostic capacity and compliance with OIE Standards including on the choice of diagnostic kits and testing methods with respect to the OIE Diagnostic Manual FAO regional workshop with participation of OIE and WHO brucellosis control in Central Asia and Eastern Europe, Izmir, Turkey, 9-11 April, 2013
Territoroed drider the one ricality agenda.	Lastern Europe, Izmir, Turkey, 5 11 April, 2010
8. Rinderpest -	
(i) All European countries respond to the FAO-OIE questionnaire on Rinderpest virus sequestration;	Xxx countries in Europe responded to the questionaire
(ii). FAO and OIE analyse the responses to the questionnaire and propose appropriate activities	 Following adoption of the new OIE code chapter on rinderpest, all OIE member Countries will be required to report to OIE annually on stocks of RPV in their country (before end of November 2013); for this purpose, OIE has developed a secure on-line reporting system, and member countries are strongly encouraged to use this. OIE Delegates should report if they do not have RPV as well as reporting if they do not. (the system is due to be up and running by the end of October 2013). FAO and OIE established a stragety to reduce the number of holding facilities for rinderpest virus containing materials world-wide Countries currently holding rindpest virus containing materials may contact FAO and OIE to assist in virus destruction or sequestration to approved facilities
9. Reinforcement of VS -	sequestration to approved facilities
(i) Countries that have not yet requested an OIE PVS evaluation and/or a Gap Analysis mission consider doing so, on a voluntary basis;	New OIE PVS evaluation missions: - Serbia (March 2013) - Turkmenistan (April 2013) → total in Europe: 16 New PVS Gap Analysis missions - None; 2 requests → total in Europe: 6 (+ 2)
	OIE PVS self-evaluations in Belgium and France (2012/2013)
(ii) In accordance with the results of previously conducted OIE PVS evaluation and/or Gap Analysis missions, countries consider to engage into the 'treatment phase' of the OIE PVS Pathway, by requesting legislation missions and twinning programme	New OIE PVS legislation missions - None; 1 mission pending → total in Europe: 2 (+ 1) remark: none for aquatic AH services New OIE twinning programmes:

(laboratories, Veterinary Statutory Bodies, veterinary education establishments) to the OIE, on a voluntary basis; (iii) the reinforcement of VS in the region be supported through the OIE PVS Follow Up missions, upon countries request, on a voluntary basis; (iv) Donors and technical agencies be asked	- laboratory: Kazakhstan / Brucellosis (UK-USA) →total in Europe: 3 projects completed (Russia/AI and ND; Russia/ASF; Turkey/Bruc-; 3 projects on going (Turkey/Rabies, Turkey/WNF; Kaz/Brucellosis) Out of the 16 OIE PVS evaluation missions, 1 (Kaz) was a Follow Up mission
to finance programmes to implement the activities resulting from the OIE PVS Pathway outcomes.	
10. Others -	
(i) All stakeholders in the region consider implementing relevant activities under the GF-TADs umbrella and therefore ask the RSC for their "labelling" via the regional secretariat;	3 events labelized under the GF-TADs in Europe: - FAO regional meeting on ASF (Budapest; Dec 2012); - 4th meeting of the West Eurasia FMD roadmap (Baku; April 2013) - TAIEX seminar on ASF / CSF (Vilnius; September 2013)
	'labelizable' events in the pipeline: - TAIEX regional workshop on rabies (Paris, October 2013) - FAO-OIE training course on ASF epidemiology and diagnosis, Perugia, Italy, 11-15 November 2013
(ii) The GF-TADs Steering Committee for Europe maintain close relations with the GF-TADs Steering Committees for the Middle-East and Africa in particular, and collaborate as appropriate with Regional Specialised Organisations (RSOs) and Regional Support Units (RSUs) of those regions to prevent and control priority diseases for Europe present in neighbouring regions;	 REMESA invited to the RSC5 Close collaboration with the GF-TADs Steering Committees for the Middle-East on FMD (West Eurasia Roadmap) Multi-Regional activities (TAIEX regional workshop on rabies in Paris, October 2013)
(iii) In the context of the current epidemiological knowledge regarding infection with Schmallenberg virus in Europe, trade restrictions not be imposed to countries notifying the disease, and monitoring of the infection be continued and enhanced, as well as research and cooperation;	Work in progress
(iv) European countries ensure a close cooperation and exchange of information between the relevant competent authorities involved in border controls, including customs services, in order to reduce illegal movement of animals and animal products.	Work in progress

Annex 1 – PCP stage Progress (SG3 → SG4)

	2010	2012 (March 2012)	2013 (April 2013)	Progress
Kazakhstan	1	1	1*	⇒?
Kyrgyzstan	0	1	1	=
Tajikistan	1	1	1	=
Turkmenistan	0	1	Х	?
Uzbekistan	0	1	X	?
Anatolia (Turkey)	2	2	2**	⇒?
Armenia	2	2	2**	⇒?
Azerbaijan	2	2	2**	⇒?
Georgia	1	1	1*	⇒?

^{*} Countries likely to be upgraded to PCP Stage 2 if they provide their Control Plan (CP1)

** Countries likely to be downgraded to PCP Stage 1 if they do not provide their Control Plan (CP1)