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Questionnaire for countries applying for an AHS free status and feedback from the evaluation of AHS applications

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The AHS questionnaire

Chapter 12.1. "AHS Code Chapter" Set the requirements for an AHS free status



Chapter 1.7.

"AHS questionnaire"

To document compliance with the requirements of Chapter 12.1.

All applications for an AHS free status must follow the « AHS questionnaire »

CHAPTER 1.7.

APPLICATION FOR OFFICIAL RECOGNITION BY THE OIE OF FREE STATUS FOR AFRICAN HORSE SICKNESS

Article 1.7.1.

Country free from infection with African horse sickness virus

The following information should be provided by OIE Member Countries to support applications for official recognition of status as a country free from *infection* with African horse sickness (AHS) virus in accordance with Chapter 12.1. of the *Terrestrial Code*.

The dossier provided to the OIE should address concisely all the topics under the headings provided to describe the actual situation in the country and the procedures currently applied, explaining how these comply with the *Terrestrial Code*.

The terminology defined in the OIE *Terrestrial Code* and *Terrestrial Manual* should be referred to and used in compiling the dossier.

National legislation, regulations and *Veterinary Authority* directives may be referred to and annexed as appropriate in one of the OIE official languages. Weblinks to supporting documents in one of the official languages of the OIE may also be provided, where they exist.

Role of the questionnaire

- To assist Member Countries
- To assist experts
- To give more transparency to the evaluation process
- To standardise the evaluation among countries

Available at the OIE website

Home	e About us	Scientific expertise	Solidarity	Animal health in the Work	d Standard Setting					
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		+ Suspension/Reinstatement		WAHIS-Wild Interface		Aqu Con Ad I				
	The World Animal Health Information System	+ Disease cards		World Animal Health						
	> WAHIS-Wild Interface			The OIE-WAHIS project	t					
		+ Questionnaire for AHS free status		Official disease status						
	World Animal Health	+ Form for annual reconfirmation		Official recognition polic	y FMD					
	The OIE-WAHIS project			and procedures	Rinderpest					
	 Official disease status 	In accordance with the OIE procedu			BSE					
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	 Rinderpest 	A Member Country wishing to be of			status					
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AHS questionnaire

Free country/zone

- 1. Introduction
- 2. Veterinary system
- 3. AHS eradication
- 4. AHS diagnosis
- 5. AHS surveillance
- 6. AHS prevention
- 7. Control measures and contingency planning for AHS
- 8. Recovery of free status



AHS questionnaire Common shortcomings overall

- Information not directly relevant to equids or to AHS
- Not all questions of the questionnaire answered
- Lack of supporting information or documentation to substantiate the statements made





Provide evidence to substantiate any statement made in an application for official recognition of disease freedom

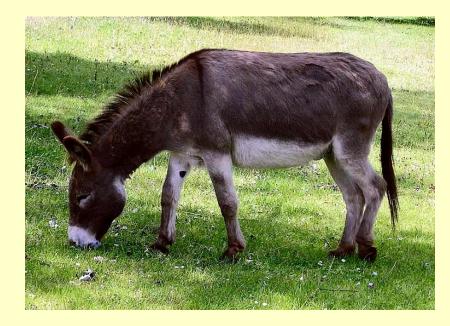
Section 1: Introduction Set the context

Geographical factors

- Relevant to AHS introduction and spread
- Boundaries, countries sharing common borders
- Digitalised, geo-referenced map (<u>MUST</u> FOR ZONAL APPROACH!!)
- Population of domestic equids
 - Distribution
 - Equine sectors
- Wild equids

Introduction Common shortcomings

- /!\ Equids ≠ horses!!
- Lack of information on donkeys, mules, zebras, etc
- Lack on information on wildlife (captive wild, wild, feral)





Section 2: Veterinary system

- Legislation
 - In relation to AHS
- Veterinary Services
 - Capability (provisions of Ch. 3.1. and 3.2. of *Terrestrial Code*)
 - How supervise and control all AHS-related activities
- Role of different categories of stakeholders
 - AHS surveillance and control
 - Training and awareness programmes on AHS
- Animal identification system, movement control, traceability

Veterinary system Common shortcomings

- Lack of clarity: provide a concise summary of the important points on legislation, <u>relevant for an AHS</u> <u>free status</u>, with cross-reference to Annexes
- Lack of specific information on AHS awareness activities (target groups, material, frequency)



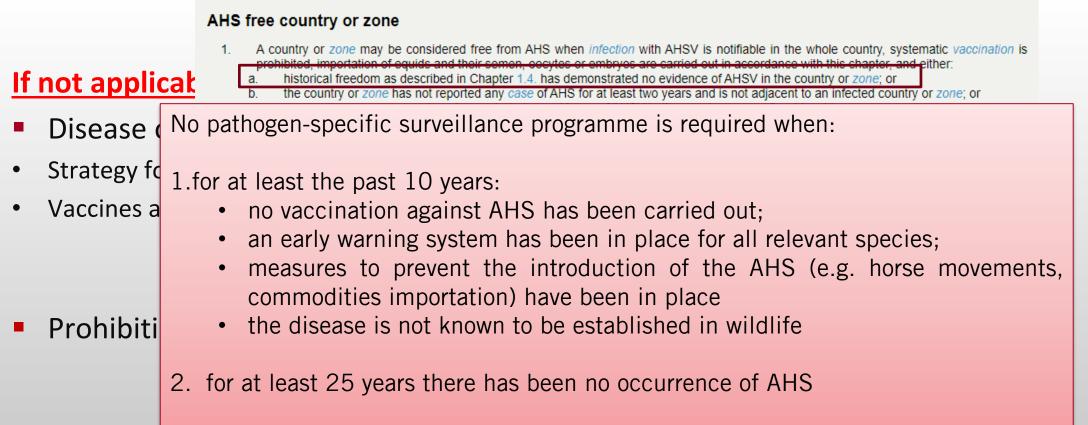
- Lack of description on identification system and traceability (i.e. for all equids)
- Important information (such as legal basis of disease notifiability and the prohibition of AHS vaccination)

Section 3: AHS eradication

Eligible to apply based on historical freedom?

 Demonstrate that the requirements stipulated in Chapter 1.4. of the *Terrestrial Code* are applicable

Article 12.1.2.



AHS eradication Common shortcomings

Lack of consistency with WAHIS (disease situation and control measures)

Type for freedom for which the country apply not specified

 Lack of information on since when vaccination has been prohibited and how the prohibition has been enforced and monitored (+ regulatory instrument)

Section 4: AHS diagnosis

- Laboratory diagnosis for AHS in the country
 - List of laboratories approved by Competent Authority
 - Type of tests undertaken
 - Accreditation, quality management systems
 - Regular submission of samples?
 - Inter-laboratory validations tests (ring trials)

International laboratory diagnosis for AHS

- Name(s)
- Arrangements in place
- Logistics for shipping samples
- Timeframe for reporting results

AHS diagnosis Common shortcomings

- Information should focus on <u>AHS</u> diagnosis (!!)
- For AHS laboratory in the country:

Lack of information on participation in inter-laboratory proficiency testing and results

• For international AHS laboratory:

Lack of information on existing arrangements/agreements with another competent laboratory/OIE Reference Laboratory

Section 5: AHS surveillance

Clinical surveillance

- Criteria for raising a suspicion
- Procedure to notify (by whom and to whom)
- Penalties for failure of reporting
- Number of suspicions reported, testing methods, differential diagnosis

• Other type of surveillance (serological, virological, sentinel, vector surveillance)

- Official status of neighboring countries
- Justification of the surveillance design (risk areas)
- Detailed results

AHS surveillance Common shortcomings

- Lack of information demonstrating that the clinical surveillance implemented is sensitive over <u>all</u> <u>the territory</u> (suspicions reported, awareness, trainings)
- Lack of demonstration of an effective detection system for <u>all equids</u>, including wildlife
- Lack of consideration of the <u>official</u> AHS status of neighboring countries/zones
- Lack of detail on the surveillance design
 - Justification of the design chosen: risks identified, vector distribution
 - Number and type of samples, sample selection, etc.

Section 6: AHS Prevention

Coordination with neighboring countries

Country should not be penalised due to the situation in a neighbouring country... **However,** Risk assessment and implementation of appropriate measures should be in place accordingly

- Import control procedures
 - Ports, airports and land crossings (map)
 - Import requirements
 - Regulations (countries from which imports are authorized)
 - Actions taken on detection of illegal imports
 - Statistics on imports

AHS Prevention Common shortcomings

 Lack of information on import requirements for <u>all relevant commodities</u>: (equids (=not horses!), semen, oocytes, embryos, equine derived (by-)products, veterinary medicinal products

Lack of consideration of the AHS <u>official</u> status of exporting countries

 Lack of <u>detailed AHS specific</u> import requirements to allow the assessment of compliance with recommendations of Chapter 12.1.

Section 7: Control measures and contingency planning

- Procedures regarding suspected or confirmed cases of AHS
- Steps that would be taken in the event of an AHS outbreak
 - Sampling and testing procedures
 - Control measures
 - Procedures used to confirm successful control
 - Compensation

AHS Control measures and contingency planning Common shortcomings

- Lack of specific measures for AHS and of contingency plan specifically for AHS
- Lack of supporting documentation
- Lack of supporting regulatory framework
- Lack of consistency with WAHIS

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Conclusion

To prepare a robust application for an AHS free status



- Dedicate team, time and funds
- Involve all relevant services & stakeholders
- Put yourself in the experts' shoes
- Provide documented evidence (not only statements)
- Be CLEAR and CONCISE





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Thank you for your attention

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