



Department
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Food & Rural Affairs

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Animal Health and Welfare Board for England 'Call for views on strengthening the TB eradication programme and new ways of working'

A Summary of Responses

December 2012

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www.defra.gov.uk/ahwbe/work/bovinetb/

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Part I – Background

The Animal Health and Welfare Board for England (AHWBE) bring together independent people with relevant experience and senior Government officials. The AHWBE makes direct recommendations to Defra Ministers on strategic policy affecting the health and welfare of kept animals in England including farm animals, horses and pets (excluding the welfare of zoo and circus animals). The AHWBE's role is to advise Ministers on strategic animal health and welfare matters. The TB Eradication Advisory Group for England (TBEAG) is a sub-group of the AHWBE. TBEAG advises on the development and implementation of the strategy for eradicating bovine tuberculosis (TB).

The AHWBE decided that it was the right time to challenge Government, the livestock industry and the veterinary profession to build on the current approach to TB eradication and ensure that everything possible was being done to eradicate the disease, whilst making sure that the programme of measures was financially sustainable. To begin to address these issues the AHWBE launched an informal stakeholder engagement entitled "Call for views on strengthening the TB eradication programme and new ways of working" to seek comments, suggestions and alternate options from a wide range of people and particularly from those affected by the impacts of the disease. A key aim was to gather evidence that reflected personal experience and practical knowledge of the disease to identify innovative solutions towards more effective control of TB.

The engagement ran for six weeks from 10 September to 19 October 2012. It set out ideas and possible options to address a number of challenges facing the industry and Government in tackling TB. The aim was to establish a dialogue with affected and interested stakeholders on several strategic issues including different approaches to tackling TB, delivery of TB testing, reactor removal and compensation, advice and support, and insurance. The AHWBE hoped to create more shared ownership in looking at some difficult issues particularly relating to the effectiveness of the current way of doing things and budget pressures. Feedback on the informal dialogue approach, particularly from the workshops, was mostly positive.

How responses were handled

Defra's TB Programme co-ordinated and ran the activities which were: a 6-week period for written submissions, four open regional workshops and a 5-week online forum hosted by Farmers Weekly. Over 600 people responded or came along to the workshops. People were asked to consider the ideas and possible options contained in the 'Call for views' document which was sent to stakeholders, published on the internet and distributed at the workshops. The document can be found on the AHWBE webpage at: www.defra.gov.uk/ahwbe/work/bovinetb/.

Defra established a dedicated mailbox for electronic submissions and written replies were accepted. Four regional workshops were held during which people's responses were captured verbatim and transcribed to a report template. The workshop comments were sorted into cluster headings within each 'theme' and each workshop activity was reported in full, with 'Word for Word' reports sent to all attendees in November 2012. Farmers Weekly hosted an online survey looking at the ideas in a different way, namely a much shorter

question format to encourage participation. For this reason, the written responses and workshop contributions have been summarised together in Part II, and the online survey results summarised separately in Part III.

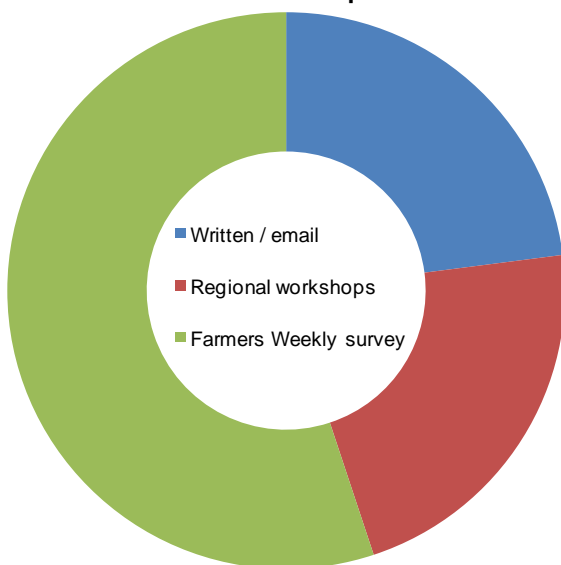
AHWBE accepted responses that answered at least some of the questions in the ‘Call for Views’ document. Each response was considered in its own right and on its own merit. Whilst it is possible that one person could have submitted more than one reply, which might influence the numbers of responses to a given question, this had no bearing on the consideration of each individual piece of feedback. The fact that a single suggestion is made more than once does not make it more or less likely to influence policy. Responses expressing opinions focused only on the Government’s current wildlife control policy were noted but not included in the summary of responses because the dialogue had a wide-ranging remit looking at the full range of tools to deal with the disease, new ways of working and how roles and responsibilities could be shared.

There were 611 responses in total, with 134 people attending the workshops, 336 completing the online survey and 141 written submissions. The respondents came from a wide range of backgrounds, sectors and professions including beef and dairy farmers, farming organisations, breed societies, cattle health advisors, veterinary practices and professional bodies, commercial companies, wildlife groups and community land trusts, Local Authorities, advice groups and rural support networks, non-bovine and camelid societies and keepers, and members of the public.

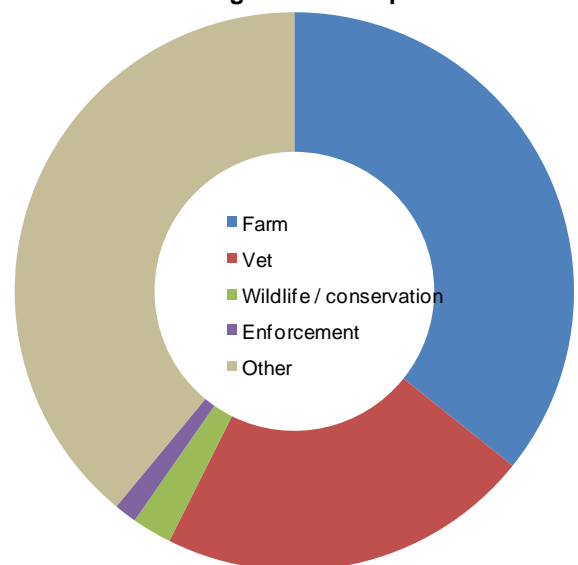
The breakdown of respondents by sector or profession is:

- Farmers, farming organisations and related bodies: 36%
- Vets (Veterinarians, veterinary practices and veterinary professional bodies): 22%
- Wildlife and conservation groups: 2%
- Trading Standards and inspectors: 1%
- Other including commercial companies and members of the public: 39%

Format of valid responses



Sector / background of respondents



A list of the organisations that responded is at Annex A. The major farming and veterinary bodies submitted detailed responses while noting that at this early stage their feedback may not reflect definitive or future policy positions. This reflected the AHWBE aims described in the 'Call for views' document, which described the engagement as the start of a process of gathering information to inform its decision making and provide context to its recommendations to Defra Ministers.

The summary of responses draws on the range of views received, and is not intended to capture the majority view. The responses have not been weighted in terms of sector, profession or geographical location, although regional differences in approach will be discussed. It should be noted that the results of this relatively small-scale dialogue are qualitative, providing views that are indicative rather than representative of majority public opinion. Responses were drawn from a self-selecting sample and this should be borne in mind when reading the report.

What this rich body of complex data can provide is an in-depth understanding of stakeholders' views, knowledge and personal experience of dealing with the disease. This detailed, practical feedback will help in future policy development.

Part II – Written and workshop responses to the possible options

The responses have been grouped under theme headings and summarised from the range of submissions. Apart from those responses which requested confidentiality, the full responses can be viewed on request from the Defra Library: see page 2 for details. The five 'themes' group together the strategic issues outlined in the 'Call for views' document around which the workshop activities were organised.

1. Different approaches to tackling bovine TB

This theme grouped several questions together looking at different ways of dealing with TB, particularly whether approaches should be adapted depending on the disease risk of an area and reducing the transmission routes between animals and across TB risk boundaries. The issue of seeking to gain Officially TB Free (OTF) status, whereby a country or region is designated OTF if the herd incidence levels are very low was also raised. The responses were wide-ranging and included ideas not limited to the questions posed below. These have been captured under a separate heading.

a. What are your views on the measures outlined in the 'Call for Views' document, such as different approaches to surveillance and control in epidemiologically different areas?

A consensus emerged showing strong support for improving TB testing; both the efficacy of the TB skin test itself and ensuring tests were conducted consistently to assured quality standards. There was some support for carrying out more types of testing while reducing other types, to support disease control while tailoring approaches depending on area- or

herd- disease risks. For instance, some suggestions were for more annual surveillance, pre-movement testing (PrMT) and post-movement testing (PoMT) but less tracing and contiguous testing, with no testing for animals if moving to slaughter, either directly or indirectly. There was some support for 'risk-based, targeted testing' to make best use of resources, such as reducing testing in finishing units, but carrying out more tests on breeding or 'flying herds'.

There were several calls for a reduced testing regime for farms with high, assessable biosecurity standards 'in return for' reduced or zero compensation for reactor animals. Other ideas included compulsory camelid testing and movement rules, plus increased sheep/goat testing particularly for large flocks/herds, and to test and cull infected deer.

Several vet responses suggested extending the 'short interval test' period in high incidence areas and/or large closed herds, which would help reduce costs and reduce the number of 'false positives'. Some felt that inconclusive TB reactor animals should be re-classified as TB reactors in high risk herds, and be treated accordingly. There were calls for improvements to handling facilities, and to fund innovations such as teams with high quality mobile handling facilities and trained staff to support faster, accurate and less stressful testing for farmers, vets and cattle. Many responses felt that there should be improvements to the Animal Health and Veterinary Laboratory (AHVLA)'s turnaround of test results.

Some called for mandatory whole herd slaughter in low incidence areas to clear infection quicker and reduce the time period of undetected infection, while some pointed out that for some farmers this would threaten the viability of their business.

There were lots of ideas around more and better use of 'risk', both on-farm and when trading, to help tackle the problem by changing attitudes to the disease. For example, farms could be 'risk rated' depending on herd disease incidence, biosecurity standards and stocking practices: a 'low' risk rating would attract incentives, and 'high' risk rating would result in closer monitoring and restrictions. There were many calls to incentivise farmers to encourage risk-based trading and give them the tools and data to do it. There was a consensus that much more information when selling, either at markets or private sales, should be available and should cover testing history and status, plus herd origin and movement history. There were many calls to link up existing systems, databases and schemes: including electronic identification for cattle with a national bovine database linked to the Cattle Tracing System (CTS) and SAM (AHLVA's IT system), mandatory test data on cattle passports, bringing in 'TB Health Certificates', and linking membership of disease status schemes such as Cattle Health Certification Standards (CHeCS) to CTS/SAM. Other similar ideas were to embed TB standards and controls in independently verifiable 'Herd Health Plans' and 'earned recognition' schemes.

Some responses proposed developing 'risk pathways' for cattle trading, introducing 'closed systems' or developing more integrated breeding-finishing partnerships. Others proposed restricting stock purchases from herds with the same or lower risk status than the buyer. Several respondents put forward the idea of limiting the movements an animal can make overall during its lifetime and the number going through markets. There were calls to move away from the 'dealer culture' and to define dealers and agents properly.

Ideas on dealing with different disease risks included allowing farmers and vets to manage the disease locally by cutting out government and developing private vet-led 'local area management programs' based on 'local knowledge and expertise'.

There were several quite detailed responses on how each 'TB risk area' (high, low and the edge) should have its own tailored approach, setting out a clear framework for each area to define the disease risk while ensuring farm businesses are able to operate in a financially viable way.

b. How can Government and industry ensure that TB is not being spread between cattle and into areas where there is currently a low incidence of the disease?

Many responses offered views on the 'edge area', the area at risk of TB incursion lying between the high and low incidence areas. There was consensus that action should be taken in this area to help stop the spread of the disease north- and eastwards from the high incidence area. Some responses proposed variations on creating a 'firewall' or 'protection zone' by using natural boundaries and vaccinating badgers, and argued that maximum resources should be focused in this area.

Other ideas on stopping disease spread ranged from mandatory PrMT and PoMT when moving cattle from high to low incidence areas to more risk-based testing approaches such as adapting the test requirements depending on the destination and type of animal. For instance, heifers moving from 'high risk herds' to live/for breeding purposes should be tested more rigorously than clear tested animals moving to licensed finishing units or to slaughter.

Some responses reiterated the need for strict controls by bringing in stronger enforcement of biosecurity standards, prosecuting those who break cattle control rules and publicising cases, introducing fixed penalties and automatic reductions in farm subsidy payments

Other ideas focused on enhancing epidemiological investigations into the sources and transmission routes of TB, and better assessments of the time period of undetected infection in herds. A number of suggestions related to TB-free farms in the high incidence areas, looking at how they operate including trading, biosecurity and husbandry practices – and what can be learnt from their experience.

Comments on wider issues such as raising awareness were put forward, including the need to identify properly and communicate the 'edge area' clearly to help farmers better understand the 'mixed risk' of these counties, and having an 'open exchange of ideas' of how to best manage risk in the affected areas.

c. Should we be working towards OTF status for regions of England over the next few years?

There was a wide variety of responses on seeking regional OTF status, informed but not wholly defined by the location of the respondent. For instance, some responses from the low incidence area stated that while OTF regional status could benefit some farmers in their area, they also acknowledged that it would risk creating a 'two tier market'. Farmers in OTF areas could see an increase in price and land premiums, while those in non-OTF areas could be disadvantaged by conversely lower prices, and additionally would be stigmatised by being seen to operate in a 'dirty' or 'infected' area.

Some felt that while OTF status was 'good in principle' it would be problematic on a practical level, and should only be pursued when the disease incidence levels had reduced

and/or when wildlife control was in place. There were concerns around who would fund enforcement.

Those who felt it could be a positive move stated that strict controls would be needed including a complete ban on all livestock movements from non-OTF to OTF areas. Some felt that achieving OTF status could act as an incentive to other areas, although the definition of precisely what OTF status means and what would be needed to achieve it should be better and more widely understood.

There were calls to incentivise farms to breed their own replacements and operate closed herds, particularly to establish specialised heifer and youngstock rearing units in OTF areas.

Establishing dedicated farmer groups was suggested, as close regional-level working was seen as vital to the success of reaching OTF status. Several variations were put forward including regional or county TB eradication boards.

d. Other ideas on different approaches

Some other ideas put forward were to reduce the amount of maize grown (a forage crop attractive to badgers) by paying farmers to stop growing it for a set period of 3-5 years and to raise awareness of how cattle nutrition, particularly mineral and trace element deficiency, can potentially affect disease susceptibility.

Many farmer and veterinary responses covered wildlife control including calls to lift the Badger Protection Act with legal safeguards against badger baiting provided by the Wildlife Countryside Act, to license farmers to deal with wildlife control locally, to allow the use of the polymerase chain reaction (PCR) test to identify infected setts, look at using oral contraceptive for wildlife control, and for industry-funded badger vaccination in low incidence areas. There were several calls to re-introduce the 'clean ring' badger culling policy around new TB outbreaks and to bring back the national roadkill badger postmortem survey which would help assess the extent of TB in wildlife. More involvement of wildlife groups in discussions about wider TB issues to create a shared understanding of the problem was also proposed.

There were many responses urging for more funding and much faster progress on cattle vaccine development, and to look at other ways round the EU legal issue such as introducing a register of vaccinated herds and only permitting trade between these herds.

Strong support was shown for funding and developing more research and development (R&D) into areas such as TB links with other animal diseases, the extent of TB in wildlife carriers, developing and deploying different and better TB diagnostic tests, and the role of genetic immunity.

Strong support was shown for the use of Rural Development Programme for England (RDPE) funds for capital grants for biosecurity work and project grants for farmer education. Some suggested streamlining the AHVLA and British Cattle Movement Service (BCMS) roles to achieve cost savings.

2. TB Testing: responsibility and choice

This theme asked for views on farmers arranging and paying for testing, and alternative ideas on rebalancing roles and responsibilities. Overall, there was strong support and a positive reaction to allowing farmers more freedom to arrange their TB tests and who they can use to carry out the tests, although mostly negative reactions to the possible options of paying - or being charged - for tests. There were some alternative proposals on costs, and the British Veterinary Association (BVA) and British Cattle Veterinary Association (BCVA) submitted a joint proposal called 'TB Plus', looking at reforming veterinary services delivered by AHVLA. Responses to the first three questions in this theme have been grouped together, with alternate options summarised separately.

a. Do you have any thoughts on approaches such as farmers arranging testing or charging for testing?

b. Do you have suggestions on how these approaches could be improved?

c. Can you supply any information on the possible impacts of these approaches?

Many responses stated that the Government should continue to test as it is a statutory duty and TB is a public health matter, but offered the view that Government use of lay testers should be increased to help reduce costs. Ideas included vet practices training and employing lay testers on a contract basis. Some respondents stated that farmers should pay because TB tests were an 'associated business cost'.

There was overwhelming support for enhancing the existing relationship between farmers and private vets, for several reasons: local vets had the local knowledge and expertise, were seen as a 'trusted source of advice' on disease management, and offered a holistic approach to whole herd health planning as they were familiar with the farm. There was concern that local veterinary knowledge and local working relationships would be lost if testing contracts went to large organisations.

Many responses highlighted the potential negative impacts of farmers bearing more of the cost of TB testing. These included adding to farmers' existing heavy cost burden and - particularly if they have a TB breakdown - leading to, or exacerbating, a perception of unfairness thus risking an increase in non-compliance. Some felt that increased costs would make some types of business, such as tenant or pedigree farms, financially unviable. There were many calls for more farmer input to policy areas if cost sharing was introduced, and in particular there were predictions that there would be resistance to any introduction of test charges or paying if farmers were not able to 'control the source'. Some questioned what would happen in bad debt cases if farmers were paying for tests, pointing out that if Government had to step in either legally or administratively, any cost savings would be sharply reduced. Some responses mentioned that there could potentially be some pressure on private vets to 'look the other way', and that there could be conflicts of interest. Many respondents emphasised the importance of ensuring consistent, high standards of testing and questioned how AHLVA would maintain appropriate oversight of enlarged private testing.

Several responses looked at potential positive impacts of farmers paying or being charged for tests. For example, providing more choice to farmers may drive market efficiencies and open up competition. Some felt that it could also incentivise farmers to improve their cattle

handling facilities and biosecurity standards. Allowing more choice was generally welcomed as long as standards were maintained. There was some indication that, if offered more flexibility about testing times, farmers would be more willing to pay for routine testing while Government continued to pay for breakdown testing.

Some other suggestions included widening the test window to 13 months and allowing in general much greater flexibility around the timing of TB tests. Others stated that the use of the gamma-interferon test should be increased to help clear infection from herds quicker. Other pointed out that guaranteeing national coverage of vet practices offering TB testing would be an essential prerequisite in order to have a truly 'open market'.

There was wide support for greater overall flexibility and encouraging compliance, for example Official Veterinarians (OVs) – private vets who undertake work for government - should be able to issue a 'clear notice' lifting restrictions on the test date itself, and farm subsidy payments should be reduced for overdue TB tests.

d. Do you have any alternative suggestions for how we might rebalance the roles and responsibilities of Government, vets and farmers in relation to testing?

Other ways of giving farmers more choice while starting to look at sharing costs were put forward. One idea involved setting up a voucher scheme whereby farmers would be reimbursed by AHVLA upon submission of results of tests which they had arranged with an approved private supplier, and reducing the voucher subsidy over a number of years. Other alternate options included farmers contributing more to paying for tests but at different percentage rates dependent on the type of test and Government paying farmers a flat rate of 50 pence per animal for example, and allowing the farmer to then arrange and negotiate with private suppliers. There was a suggestion that OVs should pay for mandatory annual refresher training from AHLVA and there was a call to strengthen existing enforcement partnerships.

There were calls for more involvement of the whole supply chain in the TB testing process as it was felt that the industry could not continue to absorb more costs on its own, and for farmers to set up co-operatives to create a better negotiating position with private suppliers.

Other suggestions included giving money to farmers to 'control TB on their farm' - in the event of a TB breakdown the farmer would pick up the costs - and charging farmers for overdue TB tests.

Some ideas were similar to those put forward under the first theme, including reduced testing in finishing units using the subsequent savings to fund more annual testing in other areas, and linking the testing regime to the biosecurity or risk status of farms, with those farms accepting losses in slaughterhouse cases. Using different diagnostic tests for cheaper testing of large herds, rewarding farmers for good handling facilities and manpower levels on test days were also mentioned. It was also felt that more Approved Finishing Units (AFUs) should be encouraged by removing regular testing for housed units.

There was some support for an industry-wide levy ('managed transparently') so farmers would contribute more, but on an equitable basis with everyone sharing the burden.

3. Reactor removal, salvage and compensation

This theme asked for views on different approaches to removing TB reactors, the potential to maximise returns from salvage and the impacts of reducing compensation. Responses to the first three questions in this theme have been grouped together, with alternate options summarised separately.

a. Do you have any thoughts on these approaches such as reducing compensation or greater responsibility for farmers to remove reactors and negotiate salvage terms?

b. Do you have suggestions on how these approaches could be improved?

c. Can you supply any information on the possible impacts of these approaches?

There was general agreement that TB reactor removal should be quicker and that farmers should have more control over how, when and to where they can take these animals. There was some indication that farmers may be prepared to bear more of the costs of haulage if it meant they could get their reactors off farm faster and 'book in their reactors' at the slaughterhouse on the test day, or at the latest one working day after the test. There were several comments that it could lead to improved cash flow.

Some felt that negative impacts could be an increase in the distance reactor animals travelled thus increasing disease risks and transport costs, and it may incentivise fraudulent behaviour. Concerns were raised about funding a sufficient number of meat inspectors if more slaughterhouses were to take TB reactors.

Some improvements to existing process were put forward, such as enhancing current mechanisms such as 'live-ring selling' and large-volume reactor collection by markets. Several respondents pointed out that Government would have to allow reactors to remain on farm while farmers negotiated the maximum salvage return but that this would pose increase disease risks if the animals were not adequately isolated. Conversely, keeping the current reactor removal deadline would put the farmer in a 'forced situation' when it came to negotiating power, therefore there would have to be more flexibility.

Many respondents felt that individual farmers would be in a weak position when it came to negotiating acceptable salvage prices for reactor animals and that larger organisations, whether government or independent bodies, would always have more chance of maximising returns. Some also thought that the Government currently received 'fair value' from salvage receipts, and that no change was needed. Some pointed out that not everyone is skilled at negotiation, which again may disadvantage individual farmers.

Some felt there were opportunities to get the whole supply chain involved and to look at adapting existing relationships between market operators and slaughterhouses. Several suggested that if more slaughterhouses took TB reactor animals, this would lead to shorter removal times and would stimulate competition benefiting the farmer. There were a range of views on what negotiating salvage may mean for slaughterhouses. Some thought that it would open up opportunities for smaller, local slaughterhouses while others held that most slaughterhouses were unwilling to take reactor animals and could not see this changing. Some saw the question of the market impact on slaughterhouses as an 'unknown factor' needing further investigation.

Concerns were put forward regarding consumer perception around 'reactor meat' in the food chain, leading to supermarket resistance and the potential for negative publicity. Other issues raised included farmer vulnerability to price volatility on top of existing cost pressures, and the fact that reactors are often not culled in prime condition thus any salvage returns would not reflect the true value of the animal.

There was consensus that salvage negotiation could be inequitable as some farmers or sectors would benefit while others would lose out, and would be impractical for certain sectors such as pedigree and dairy.

Many respondents opposed cutting compensation, and in particular highlighted how this would be received by farmers and livestock keepers, many of whom in the high incidence areas are already struggling with heavy testing costs and would see this as an unfair burden. There were concerns that this was 'purely a cost-cutting exercise', and strong opinion that any reduction to compensation would 'lose the goodwill of cattle keepers'. Some pointed out that it is a statutory duty to test for notifiable diseases, and therefore Government should legally recompense for any losses incurred. Many responses mentioned that any plans to reduce compensation should wait until farmers can undertake local wildlife control. For instance, while some agreed with the principle of a percentage reduction in compensation rates similar to New Zealand and Spain, they pointed out that both those countries allowed - and 'encouraged' - wildlife control.

There was some indication that reducing compensation would lead to an increase in non-compliance. Several responses stated that current compensation levels do not cover consequential losses or reflect the true value of pedigree animals, and that further reductions would 'alienate farmers'.

There were a range of comments looking at possible positive impacts of changing compensation levels, which included incentivising farmer responsibility for improving herd health planning and changes to farming practices to reduce disease risk. Some felt that some sort of assurance or 'underpin' in helping them maximise salvage returns could help offset any reduction on compensation, allowing farmers to seek best price while providing a 'safety net'. Some pointed to similar changes in the meat industry where 'significant changes in responsibility...worked well', and asking what could be learnt from this example.

Several responses mentioned that any reduction should be on a sliding timescale to allow businesses to plan and re-organise, and that transparency about how compensation was calculated should be a guiding principle.

Some responses called for a 'complete reform' of AHVLA as it should be a prerequisite for Government 'to understand its own costs' before looking to pass these on to industry.

d. Do you have any alternative suggestions for how we might rebalance the roles and responsibilities of Government and industry in relation to reactor removal, compensation and salvage?

Alternative ideas on reactor removal and salvage negotiation included setting up an independent body for this part of the disease control 'chain' to bring economies of scale and to create a strong bargaining position on behalf of farmers who, as individuals, have less negotiating power than a group. There was one suggestion for AHVLA-run slaughterhouses.

Another suggestion involved slaughterhouses publishing their reactor salvage payment rates, creating a 'league table' thereby giving farmers sufficient market information to increase their negotiating power. Others called for 'electronic auctions for TB reactors'.

While there were no clear cut alternative ideas on salvage negotiation, many felt that some form of 'underpin' – whether a varying level of top-up payment dependent on certain factors, or assured compensation percentage – would give farmers more confidence to 'market their reactors direct to slaughterhouses' thus achieving better returns. Some mentioned that reactors under medication should be allowed to be kept on-farm until the drug withdrawal period elapsed, allowing the salvage price to reflect 'clean meat value'.

Alternative ideas on compensation changes ranged from a £2 charge per cattle passport to pay for reactors, using modulation funds to provide compensation, and limiting compensation to animals that have only had limited movements over their lifetime.

As suggested in other sections, many responses looked at 'linking' options to help bring about changes in attitude and behaviours. For instance, there were many suggestions to link compensation to biosecurity standards or schemes such as CHeCS, and using Veterinary Improvement Notices (used in Wales) as a scoring tool to assess standards linked to compensation levels. Or, linking a reduced testing regime for 'high standard' farms with zero compensation for subsequent slaughterhouse cases. In these situations, the business would shoulder more of the breakdown risk but save on test costs.

Other proposals included zero compensation for cattle which had not been tested under the rules, and bought-in cattle ('caveat emptor') and cutting compensation using the money saved to fund a cohort of vets working solely on TB issues.

Some responses argued that the current rules governing reactor removal and compensation should apply to non-bovine farmed animals as well.

4. Advice, support and disease investigation

This theme asked for views on what advice and guidance people need and who should deliver it, the role of different organisations in different circumstances, and who should be responsible for disease investigation and monitoring standards. There was strong support for enhancing the role of private vets and, as mentioned earlier, the joint BVA-BCVA response included a proposal called 'TB Plus' looking at private vets undertaking work currently delivered by AHLVA. The responses to some of the questions in this theme have been combined below.

a. What advice, guidance and support about dealing with TB do you need or want?

b. Who would you like to deliver any support to you?

There was strong support for local private vets leading or being much more integrated into advice and support programs, including preventative work such as designing and monitoring on-farm disease strategies with the farmer. Many responses said that vets with local knowledge were best placed to give guidance. Other responses said that anyone with 'vested interests', namely those who could potentially profit from other services delivered, should not act in an advisory capacity and that 'independence is key'.

Several suggestions called for more financial and business planning advice, particularly after breakdowns as the need for practical support was most acute in this situation. Farmers needed practical support on how to operate effectively under restrictions, and to understand better what they could do to become 'disease-free' as soon as possible

Many responses mentioned more publically available information on the local disease situation, 'giving farmers the tools' to assess risk in their local area and at local markets, and driving 'more meaningful on-farm advice'. There were calls to resolve data protection issues to allow more local disease information to be shared. Some felt that livestock markets could play a more pivotal role in sharing advice and information, and that Local Authorities could play a bigger role in this area if sufficiently funded.

In areas which started to see a rise in TB incidence, some responses felt that Government should contact those in the area informing them of the local situation, allowing farmers to adapt to changing local disease risks. Additionally, when changes were brought in which could impact adversely on the 'viable operation of the farm', it was seen as important to explain why such measures were necessary and what overall benefit they would bring.

A consensus emerged on the importance of co-ordinating advice whoever delivered it, and making sure it was not contradictory with other sources.

There were many mentions of developing existing programs such as 'My Healthy Herd'. Some called for more farmer education to increase their confidence in testing procedures, particularly explaining why positive TB tests could result in 'non-visible lesion' cases.

c. Should different organisations deliver support in different circumstances?

There were calls to roll out dedicated support programs such as the South West TB Farm Advisory Service (SWTBFAS) nationally, as many respondents felt the individual, tailored and practical support offered by the SWTBFAS was effective. There were some opposing views in the South West questioning the money spent on SWTBFAS.

Several responses highlighted the need to ensure TB advice was evidence-based and independently delivered, and called for streamlining of different information sources.

Other ideas included more local, bespoke advice services such as 'TB Champions', accredited local vets offering consistent advice who could also mentor 'at-risk' farms. There were calls for 'regional eradication boards' to be set up linking stakeholders and drawn from those with knowledge of, or affected by, TB who could provide education and support.

One detailed response looked at producing more 'creative and wide-ranging' educational resources, and to utilise existing websites and existing relationships better. For example, when vets visited farms they could help disseminate Government updates on rule changes and give out information products such as free DVDs and leaflets. Further ideas included launching an internet-based television channel dedicated to TB issues.

There were many responses mentioning the need for better public awareness of TB including explaining clearly the rationale for wildlife control, plus the feasibility and practical issues of cattle and badger vaccination. Some asked for advice to farmers on how to deal with questions from the public.

d. Who do you think should give advice to farmers after a breakdown?

Many responses said local vets should 'be part of the solution' and play the biggest role in post-TB breakdown support, including case management. In stressful situations for farming families, it was felt the existing trust and relationship between vets and farmers could offer emotional support as well as practical help. Vets also offered advice on other areas of animal health and farm practices, and could therefore offer a more joined-up approach to supporting farmers in addressing disease risks. Closer working between AHVLA vets and OVs was highlighted as an area for improvement, to ensure a coherent and unified approach in breakdown cases. Some felt that OVs should play the greater role, taking 'charge of the outbreak' and the post-breakdown monitoring period.

Some felt that farmers could share their own experiences more, particularly those who had been badly affected by the disease. One suggestion was to set up farmer networks which could help advise, and also to invite wildlife groups to network meetings to discuss issues such as epidemiology, and to start 'sharing the problem'.

e. Is this sort of advice best provided by AHVLA, vets, voluntary organisations (e.g. Farm Crisis Network) or someone else?

There were many calls for improvements to AHVLA paperwork as duplicate or incorrect letters could add to the stress of a breakdown and leave people 'in the dark' when letters did not arrive. People mentioned feeling 'left in limbo' although this was less in the South West. Conversely some also mentioned that they considered the advice from AHVLA was good and that they preferred using AHLVA for advice.

There were positive views offered on the existing support services such as Farm Crisis Network and SWTBFAS, although the importance of practical support was emphasised particularly in breakdown cases. Most people felt the farm visits undertaken by SWTBFAS were very useful, and could be used as a model for future RDPE-funded advice programs.

Using RDPE funds was a common theme: 'the support we need is financial, not words'. Many suggestions were received regarding using RDPE funding for practical support. Some called for a 'Defra-funded on-farm consultancy' to both reduce disease risk and help improve farm incomes.

There positive were mentions of the National Farmers Union (NFU) regional and county bodies as offering a 'good service' and playing a 'key role' in advice, and offering emotional/social support. Some felt that levy bodies such as DairyCo and EBLEX (part of the Agricultural and Horticultural Development Board) could play a greater role.

f. Who should be responsible for investigating disease and monitoring the implementation of measures?

Some felt that private vets should monitor measures introduced after TB breakdowns as well as assessing improvements to on-farm standards as they had the most appropriate local knowledge. Building on the suggestions above, some called for private vets to lead case management in a breakdown, complete the Disease Report Form and mentor the farm throughout the situation.

Conversely, there were calls for disease investigation and post-breakdown management to be kept under government control because TB was a notifiable disease. There were also calls for England to develop a model based on the Welsh Veterinary Improvement Notices as an evaluation tool and to help farmers undertake their own risk assessments.

5. Protecting farm businesses: insurance

This theme asked for views on the potential for an insurance-type scheme and whether people would be prepared to participate in such a scheme. Respondents largely felt that while the option of livestock disease insurance should be explored, the current barriers to provision would make it impractical. The responses to the two questions in this theme have been combined.

a. What potential do you think there is for an insurance type scheme to help farmers meet any additional costs?

b. Would you be interested in participating in a scheme such as this?

There was consensus that two key items would currently stop an insurance-type scheme being practicable: prohibitive premiums and proscriptive exclusions for those who had or had had a TB breakdown. These would largely affect those in the high incidence area where insurance cover was probably needed the most, although they may also affect those in 'at risk' areas. It was felt that premium levels even in low incidence areas would 'cancel out potential gains' from insuring top-ups to the table valuations.

Other barriers mentioned were problems quantifying risk because of disparate data systems and having confidence in insurers' valuations. Some farmers felt that as they could not currently manage some disease risks, particularly the on-farm risk of wildlife infection sources, it would be an 'unfair cost burden'. Many responses mentioned the need for an equitable scheme, namely one that did not unfairly discriminate or exclude based on sector, location or disease history.

There was fairly broad agreement that insurance or insurance-type products should be researched, while noting the current limitations: 'nice idea, but impractical', 'a weak option'. Some ideas put forward included the Government underwriting risk thus allowing commercial insurance providers to step in and develop a scheme, and a compulsory national Government-provided scheme based on a levy payable by all livestock keepers (some mentioned payable by all landowners to share responsibility). Caveats to suggestions about Government playing a large role in provision included: costly to set-up, over-complex administration, and an increase in on-farm inspections. There were calls for cost-benefit analyses to be undertaken and published.

There were some suggestions and comments on the potential benefits, such as higher payments for certain sectors (e.g. pedigree), the possibility of having consequential losses included in any 'TB cover', and linking insurance provision to independently assessed biosecurity standards. Some respondents thought insurance could help reduce the stress of TB breakdowns, as farmers would know their costs were covered.

Many responses felt TB insurance was something to look at once the disease was more 'under control' and incidence levels had reduced significantly. One response mentioned that

the insurance industry had already ‘delivered a clear signal’ that it would not increase its exposure to risk in this market until TB levels were dropping. Other farmers said they would ‘be prepared to consider insurance when we are getting on top of TB’.

Others suggested looking at existing livestock disease insurance provision for Foot and Mouth Disease (FMD) and Salmonella and seeing how those schemes operated. Some proposed bringing in insurance as a ‘statutory requirement if running a farm business’.

Alternative ideas included bringing in a mandatory levy on cattle sales to fund a national insurance scheme, linking insurance to compliance as well as biosecurity standards, and involving vets in risk mitigation to help with ‘acceptable’ premium levels.

Part III – Responses to the Farmers Weekly survey

There were 336 anonymous responses to the online survey hosted by Farmers Weekly Interactive. Of these 26% (89) were from farmers and 19% (63) were from vets. The majority (184) were from respondents from a diverse range of other backgrounds mostly not related to livestock keeping. Many expressed support for cattle and badger vaccination, and opposition to badger culling. Suggestions for tightening controls included improving biosecurity, tightening cattle movement controls and testing, tougher penalties for rule-breaking, reduced intensification of farming, and cattle and badger vaccination.

Key messages from farmers and vets

The key messages from farmers and vets (45% of the total submissions) are organised by the questions as they appeared in the survey. Many farmers and vets also expressed views on wildlife control policy.

1. What measures do you want to see in place to reduce the spread of TB?

Responses cited testing improvements, including accuracy and frequency of testing, as measures for reducing the spread of TB. Specific suggestions included introducing an annual or two-year cattle testing programme for the whole of England. Reforming PrMT and PoMT was also mentioned. Tighter restrictions on some cattle movements were considered necessary, particularly when moving cattle into low incidence areas. PrMT prior to herd dispersals and compulsory testing and movement reporting of camelids were also proposed. Some vets proposed tighter movement controls within high incidence areas and better education of farmers when sourcing cattle. Better communication with livestock keepers included publishing detailed rules for setting parish testing intervals, informing farmers of local risks and encouraging state and private vets to work more closely at the outset of a new breakdown. Other measures proposed included quicker removal of reactors, more work on biosecurity and separating cattle from wildlife, better husbandry of cattle, controlling the mixing of stock on ‘sole occupancy sites’, and a move towards regionalisation in dealing with the disease.

2. How much responsibility should the Government have for TB testing and compensation?

Opinion was divided over the level of responsibility government should have for compensation and testing. Reasons why government should bear all responsibility were: the wildlife vector remains unresolved, their 'inaction has brought us to the current situation', TB is a zoonosis and therefore a public health and food security issue, and testing is a legal obligation so it should be totally funded by the government. A caveat to 'full government responsibility' was situations where 'reckless' movements had been undertaken. Some said that there should be more incentives for farmers and they should be compensated for good practices. Some responses said that government should be responsible for R&D and epidemiology, ensuring enforcement, inspection and legal compliance, ensuring that there are enough vets to carry out testing, investing in vaccination, and putting resource into monitoring vet performance. Some responses indicated that industry could pay varying levels of contributions towards testing, conceding to 'more' or 'joint' responsibility for testing. A minority of responses stated that compensation should not be paid, with a vet response stating that insurance should be mandatory. Another response suggested compensation should be offered at 50% of the full amount.

3. What could Government and Industry do to crack down on practices that risk the spread of TB?

Responses said that trading and movement controls should be strengthened in certain areas, including ensuring that all cattle movements were recorded, reducing farm-to-farm sales through auction marts, extra checks of movement records and high fines for non-compliance in high-risk areas, tighter controls of movements between high and low risk areas, no linked holdings in high risk areas, and reducing the time allowed for moving cattle after a PrMT to 30 days. Some responses said that accuracy and consistency of testing should be improved and the issue of camelids, outdoor pigs and sheep should be taken more seriously. Some said that education and communication could encourage better practices, enabling farmers to make informed decisions about purchasing cattle from high risk areas and improve farm biosecurity. Incentives and penalties should also be used, including heavy penalties for 'flouting rules' and better compensation values for those with excellent biosecurity. The disposal of TB-infected milk should also be given greater consideration, including stopping the disposal into slurry tanks and feeding "waste" milk to calves was also mentioned.

4. If you could make one change to the way in which TB is current managed by the government, what would it be?

Responses said that changes and improvements could be made to the testing regime, including introducing annual or two yearly testing for all herds and improving testing sensitivity. Further suggestions included immediate re-tests for doubtful cases, reducing the number of days between tests and reduced shut down periods, PrMT of all livestock and allowing farmers to arrange tests with their own vets. Tighter movement controls and more information for farmers on the cattle they were purchasing should be introduced to protect 'clean areas'. PoMT and regionalisation could also be introduced. The management of TB could also be reassessed, including ensuring devolved governments adopt a consistent

approach, establishing a dedicated agency or an industry-run board to deal exclusively with TB and increasing local control of TB and risk assessments. Introducing cattle vaccination, more efficient removal of reactors and compensating farmers for consequential losses were also mentioned.

5. How much responsibility should industry have for TB testing and compensation?

Opinion was divided over the level of responsibility industry should have for compensation and testing. Some said that industry should hold responsibility for abiding by current rules, ensuring testing is carried out effectively and safely (with adequate handling facilities), applying good stock husbandry and effective biosecurity. Some indicated that industry was already bearing the cost of the 'labour-intensive testing system' and as Government 'imposes' this system of TB control, it should pay for the costs. Some responses suggested that false positives should receive higher compensation from Government and compensation should reflect loss of income. However, where there were 'poor practices' farmers should, for example, not receive compensation and incur fines for not keeping up to date with their testing. Increased responsibility would be considered if industry could take more control over TB control/policies and control of disease in wildlife. Testing could be better and more efficiently co-ordinated between local vets and farmers. Where some sharing of costs was considered acceptable, suggestions included industry paying for routine testing, PrMT and animals going to shows. Some responses suggested that industry needed to take more responsibility for TB control because 'illness' was a 'business risk'.

Part IV – The way forward

AHWBE will consider the output from the 'Call for views' before advising Defra Ministers on possible changes to strategic policy on TB eradication in England. This engagement represents an important step in establishing greater dialogue and collaborative working between Government, the livestock industry and the veterinary profession on TB. Continuing with the dialogue is important and future activities will aim to build on the strengthened working relationships which have developed.

Annex A: List of respondent organisations (written and/or attendee)

- Animal Health and Veterinary Laboratories Agency
- Alnorthumbria Veterinary Practice Limited
- Animal Welfare Group
- Association of Meat Inspectors
- AVS Hayle
- Biosure (UK) Limited
- Blackbrook Longhorns
- British Alpaca Society
- British Meat Processors Association (BMPA)
- Broughton Veterinary Group
- British Veterinary Association-British Cattle Veterinary Association: joint response
- Central Association of Agricultural Valuers
- Camlas Vets
- Country Land and Business Association
- Cliffe Veterinary Group Ltd
- Cornwall Veterinary Association
- Dairy Co
- Dairy Crest Forum
- Dairy UK
- EC Straiton & Partners
- Falco K9 Academy UK
- Family Farmers' Association
- Farm Crisis Network
- Four Crosses Vets
- George Veterinary Group
- Humane Society International/UK
- IDEXX Laboratories
- Institute of Agricultural Medicine and Rehabilitation (AGMED) Study Centre
- Jersey Cattle Society
- Kingsway Veterinary Group
- Livestock Auctioneers Association Limited
- Lambert Leonard & May Vets
- Local Authority Trading Standards
- Longbridge Veterinary Services
- Marches Veterinary Group
- MV Diagnostics Ltd
- National Beef Association
- National Farmers Union
- Pelyn Vets
- Penbode Vets
- Royal Agricultural Societies: Fellow
- R W M Consulting Ltd
- Rare Breeds Survival Trust

- Royal College of Veterinary Surgeons Council: member
- Riverside Veterinary Centre
- Royal Society: Life Fellow
- Royal Veterinary College (members response)
- Secret World Wildlife Rescue
- Shires Veterinary Practice
- Shropshire Farm Vets
- Shropshire Wildlife Trust
- Soil Association
- South Devon Herd Book Society
- South West TB Farm Advisory Service
- St David's Farm Practice Ltd
- Stapeley Veterinary Practice Ltd
- Starnes & Gatward Vets
- Sustainable Food Trust
- Swale Vets
- T W Thorne & Son
- TB Eradication Advisory Group
- Tenant Farmers Association
- The Alpaca Stud
- The Goat Veterinary Society
- The Green Veterinary Surgery
- The Livestock Partnership
- Three Rivers Vet Group
- University of Liverpool - Farm Animal Practice
- VetCo
- Veterinary Livestock Services
- Westover Vets
- Westpoint Veterinary Group
- White Lodge Veterinary Clinic
- Women's Food and Farming Union
- Wright and Morten Veterinary Surgeons
- Wyre Community Land Trust
- XL Farmcare