



Department
for Environment
Food & Rural Affairs

Contingency plan for exotic notifiable diseases of animals in England

Including foot and mouth disease,
avian influenza, Newcastle disease
and all other exotic notifiable diseases
of animals

Updated October 2024

Presented to Parliament pursuant to Section 14A
of the Animal Health Act 1981 (as amended by
Section 18 of the Animal Health Act 2002)



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Plant Health
Agency

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Any enquiries regarding this publication should be sent to us at

Animal and Plant Health Agency

Contingency Planning Team

Seacole Building

2 Marsham Street

London SW1P 4DF

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Contents

Part A	1
Ministerial foreword	1
Introduction	3
About this plan	3
Legal background.....	4
Principles of disease control	7
Strategy and priorities	7
Access to the countryside	7
Disease control strategies	7
International controls and trade implications	8
Suspicion and confirmation	10
Suspicion of disease	10
Animal, premises and area restrictions	10
Confirmation of disease.....	16
Changes to movement controls.....	19
Enforcement.....	21
Command, control, and communication (C3) structures	21
Strategic	25
Strategic / Tactical - National Disease Control Centre (NDCC).....	25
APHA Senior leadership operational meeting	38
Tactical / operational - Central Disease Control Centre (CDCC).....	38
Operational - Forward Operations Base (FOB)	41
Operational partners, other government departments and stakeholders	42
Groups and committees	49
Cabinet Office Briefing Rooms (COBR)	49
National Security Council (NSC)	50

Science Advisory Council – Exotic Disease subcommittee (SAC-ED)	51
Scientific Advisory Group for Emergencies (SAGE)	52
Defra Executive Committee (ExCo).....	52
Animal Disease Policy Group (ADPG)	53
Communications meeting.....	53
Strategic stocktake	54
National Experts Group (NEG).....	54
Outbreak Advisory Group (OAG)	55
Core groups	55
Stakeholder meetings.....	56
Bird-table meetings	56
Management teleconferences	57
Battle rhythm	57
Timing for battle rhythm.....	58
Operations and logistics	60
Contracts, framework agreements and finance	60
Depopulation (culling).....	60
Disposal policy and arrangements	62
Valuation and compensation	64
Cleansing and disinfection	65
Vaccination.....	67
Restoration of disease freedom and recovery	74
WOAH terrestrial animal disease code.....	74
Regionalisation (or zoning).....	74
Compartmentalisation	75
Restocking	75
Scaling down – debriefing and lessons identified	76

Restoration of normal operations and recovery	77
Part B – Emergency preparedness	79
Introduction	79
Working in partnership – awareness and responsibility sharing	79
Pathways for introduction of disease	80
Readiness and resilience	82
Defra emergency preparedness	82
APHA emergency planning and operational instructions	83
Local emergency planning	84
Operational instructions	85
Training	85
Exercises	87
Assurance	89
Equipment and stores	89
Staff resourcing and finance	91
Annex – Summary for animal keepers	93
Introduction	93
Vigilance and biosecurity	93
Animal keeper responsibilities	94
Actions if disease is suspected or confirmed	95
On suspicion	95
On confirmation	96
Movement controls and licences	98
Licensing	98
Welfare moves	99
Regionalisation	99
Communications	99

Depopulation..... 100

Valuation and compensation 100

Cleansing and disinfection 101

Compartmentalisation 101

Restocking 102

Vaccination..... 102

Trade, import and export..... 103

Glossary 105

Part A

Ministerial foreword

This government places great importance on animal health and welfare and it is vital that we, collectively, are as prepared as we possibly can be to minimise the damage that can be caused by animal disease. This plan addresses exotic animal diseases, not usually present in the UK, such as foot and mouth disease, African swine fever, and rabies.

Outbreaks of such diseases can cause suffering to animals, damage businesses, jeopardise international trade, disrupt the food supply chain, and result in significant costs to industry and the taxpayer. Exotic animal diseases that can pass to humans, can also have a significant impact on human health and public health resources.

Exotic diseases do not respect borders and can arrive in the UK through multiple routes, whether through wildlife such as wild bird migration or human-mediated means such as trade. In recent years the UK has faced outbreaks of highly pathogenic avian influenza and cases of bluetongue. We face persistent threat from the spread of African swine fever in western Europe and more recently with epizootic haemorrhagic disease moving northward within France.

In England, the Department for Environment, Food and Rural Affairs (Defra) is the lead department for tackling notifiable exotic animal disease. The operational response is led by the Animal and Plant Health Agency (APHA) in partnership with a wide range of people and organisations who are similarly committed to minimising the damage caused by exotic animal disease. These include animal keepers, local communities, local resilience forums, local authorities, trading standards, industry stakeholders, Border Force, Police, and experts in the scientific, veterinary, and epidemiological professions.

This exotic disease contingency plan sets out how we will respond in the event of an exotic disease outbreak. It sets out our intent to control, and where possible, to seek to eradicate exotic disease and regain disease free status, whilst protecting the health and safety of the public and those tackling the outbreak. Vigilance, preparedness, and readiness to respond is at the heart of our collaborative work. It is vital that we:

- understand the nature of the risk posed by exotic disease to our animals, our food supply, our rural communities, and the wider economy.

- prevent incursion of exotic disease into the UK and where that is not possible, work to quickly detect and prevent further disease spread.
- monitor threats and heighten vigilance by using a wide range of global intelligence, international monitoring, and UK horizon scanning, surveillance, and reporting mechanisms, and
- are prepared to respond swiftly and decisively when exotic disease is detected taking prompt, decisive and effective action to stamp it out.

The plan is underpinned by disease specific control strategies, guidance on biosecurity, animal gatherings, animal movement rules, controls on animal by-products and animal identification and traceability systems. This plan is one piece of the wider resilience jigsaw, with close planning and cooperation across central and local government, other agencies, and our local resilience communities.

The plan is set out in three sections:

- Part A – How government will respond to and manage an outbreak including the command, control, and communication structures, and disease control principles.
- Part B – How government prepares to respond to exotic disease outbreaks.
- Annex – A summary for animal keepers so they can prepare. This highlights their responsibilities, good practice, and actions government will take in the event of an outbreak.

Defra has considerable experience in preventing and managing outbreaks of varying severity and impact. However, our ability to mitigate animal health risks is a 'whole of society' endeavour. Government, veterinary professionals, the farming sector, other animal sector advocacy groups and anyone who keeps animals, whether as a pet, a hobby or commercially, have an important role to play in preventing outbreaks and responding to disease. All play a role in the effective implementation of this plan to protect animal welfare and to support growth. In considering this plan, due regard has been had to the Environmental Principles Policy Statement.

Baroness Hayman of Ullock - Parliamentary Under Secretary of State for Biosecurity, Animal Health and Welfare

Introduction

About this plan

- A1. This document describes how the government will manage an outbreak or incident of exotic notifiable disease of animals including poultry in England. Exotic diseases are those which are not normally present in the country. This plan will be invoked for diseases in kept animals (including companion animals and pets). The principles will also be followed for certain diseases in wild animals, for example with specific strains of avian influenza (AI) in wild birds.
- A2. This plan does not describe the response to endemic reportable or notifiable diseases, for which a separate plan exists (Contingency Plan for Managing Certain Animal-Related Endemic and Notifiable Zoonotic Disease Incidents in England).
- A3. By law, all keepers of animals must report any signs or suspicion of notifiable diseases to the Animal and Plant Health Agency (APHA). We have published a [list of these diseases](#).
- A4. This plan explains the role that all parties involved have in preparing for, preventing, responding to and recovering from outbreaks of exotic notifiable disease in animals. This plan should be read by those involved in exotic disease readiness and response in England and those who will be affected by an outbreak of exotic notifiable disease. Due regard has been given to the Environmental Principles Policy Statement.
- A5. In England, Defra are the lead government department for responding to outbreaks of exotic animal disease and APHA are the primary delivery agents. The department's Secretary of State (SoS) and ministers have overall responsibility for and oversight of the outbreak response. The relevant Defra minister will be involved in strategic decision making, working closely with the UK Chief Veterinary Officer (UK CVO) and senior officials. They may chair Cabinet Office Briefing Room (COBR) meetings and provide briefing to the Environment, Food and Rural Affairs (EFRA) select committee.
- A6. Scotland, Wales, and Northern Ireland also maintain contingency plans, though Northern Ireland is considered a separate epidemiological area for disease purposes. The [UK contingency plan for exotic notifiable diseases of animals](#) explains how the administrations work together in responding to an

outbreak at a UK level. Taken together, these plans and the published disease control strategies for specific exotic diseases meet the UK's obligations to our international trading partners and the World Organisation for Animal Health (WOAH).

- A7. Anyone who keeps an animal for any purpose, whether as a pet, a hobby or commercially, has a responsibility to ensure best practice in preventing disease, ensuring the welfare of animals in their care and managing suspect and confirmed outbreaks. Stakeholder organisations also have a vital role in recovery at local and national level from a disease outbreak and its wider consequences. This includes working with government and others to maintain good trade relations. The response to a disease outbreak does not end as soon as disease is eradicated; we all need to think about recovery including restoration of trade and impact on the local community from the start of an outbreak.
- A8. The [Animal Health and Welfare Board for England \(AHWBE\)](#) have reviewed this contingency plan. The board is the principal source of departmental advice to Defra on all strategic health and welfare matters relating to all kept animals in England. The board's responsibilities include a review of the contingency plans for dealing with new outbreaks on an annual basis or as circumstances require.
- A9. This plan is presented in three sections: Part A sets out the arrangements for response, outlining the structures and responsibilities during an outbreak. Part B provides details of ongoing emergency preparedness work. The annex provides a summary of points from parts A and B for animal keepers and its contents also form the text for the web page on gov.uk.
- A10. Where this plan requires an activity to be carried out on a farm or public setting, government will do so in accordance with relevant public health guidance in place at that time.

Legal background

- A11. The UK is required in law to manage outbreaks of exotic notifiable diseases in animals. In England, section 14A of the Animal Health Act 1981, as amended by the Animal Health Act 2002, sets out the procedure for doing this. The Animal Health Act requires a review of the contingency plan at least once a

year and revision of the plan if appropriate. Defra have sought comments from organisations and people representative of those that have an interest in the arrangements described in the plan. This contingency plan and the control strategies for specific diseases which complement it, deliver these legal requirements.

- A12. At 11pm on 31 December 2020, the UK's transitional arrangement with the European Union (EU) ended.
- A13. The [European Union \(Withdrawal\) Act 2018](#) (the 'EUWA') as amended converted directly applicable EU legislation (in particular, certain EU Directives, Regulations and Decisions) as they stood at the end of the transition period (11pm on 31 December 2020) into domestic law. It preserves legislation previously made in the UK to implement EU obligations.
- A14. The legislation generally has the same effect that it had before the end of the transition, unless or until it is changed by Parliament. Some have been amended by statutory instruments (SIs) made under the EUWA. This is because the EUWA created powers to make secondary legislation to correct deficiencies in 'retained EU law' to ensure that the legislation worked properly at the end of transition.
- A15. At the end of transition, the UK-EU [UK/EU and EAEC: Trade and Cooperation Agreement \[TS No.8/2021\]](#) came into effect. The Agreement includes a sanitary and phytosanitary (SPS) chapter that ensures that the UK and the EU can maintain fully independent rules to protect animal health, preserving each party's right to independently regulate whilst avoiding unjustified barriers to trade. It includes commitments on regionalisation, which enables UK and EU trade to continue from disease free regions, and rapid notification of outbreaks. It provides the possibility of cooperation on the concept of compartmentalisation. This will help the UK to move quickly to protect their animals during disease outbreaks, while minimising the impacts on trade.
- A16. The SPS chapter includes commitments on notifications, where the UK and EU need to promptly notify one another of significant SPS risks and issues. These include the emergence of a new animal disease, and a significant change to disease status. Emergency measures may be introduced without prior notification, should either the UK or EU consider there is a serious risk to

human or animal life or health. Appropriate solutions for consignments in transit must be considered.

- A17. The SPS Chapter establishes a Trade Specialised Committee on Sanitary and Phytosanitary measures, which is responsible for supervising the implementation and operation of the Chapter. The Committee can decide:
- a. on further zoning procedures, considering any relevant World Trade Organisation (WTO) SPS Agreement and WOH standards, guidelines or recommendations; and
 - b. on what constitutes a 'significant' change in disease status.
- A18. The SPS chapter ensures our biosecurity is protected when trading with the EU. It provides a strong basis for working closely with the EU to minimise the trade risks to animal health, including through robust procedures to prevent and manage disease outbreaks.
- A19. For agri-food, the Windsor Framework established the Northern Ireland Retail Movement Scheme (NIRMS), a new way to move pre-packed retail goods from Great Britain into Northern Ireland, whereby eligible goods can move based on a single General Certificate with a reduced physical inspection regime.
- A20. The UK is proud of its world-leading food, health and animal welfare standards. We will safeguard our ability to maintain high environmental, animal welfare and food standards in new trade agreements.

Principles of disease control

Strategy and priorities

A21. If a notifiable exotic disease is confirmed in England, Defra will act swiftly and decisively, in partnership with operational partners and stakeholders, aiming to:

- eradicate the disease and regain disease free status.
- protect the health and safety of the public and those directly involved in controlling the outbreak.
- minimise the burden on the taxpayer and public as well as the economic impact of the outbreak on industry.

A22. Within its disease control objective, Defra will endeavour to:

- keep to a minimum the number of animals that die or need to be humanely destroyed either for disease control purposes or to safeguard animal welfare.
- Balance adverse impacts on animal welfare, the rural and wider economy, the public, rural communities and the environment.

Access to the countryside

A23. In the event of a disease outbreak, we aim to retain access to the countryside where possible, subject to ongoing risk assessments. The risk of disease being spread between groups of animals on separate farms by those seeking recreational access to the countryside is very small and can be reduced further by avoiding direct contact with animals.

A24. Government will ensure clear advice is available to ensure the public are aware of any areas not accessible.

Disease control strategies

A25. This contingency plan cannot provide everything that people need to know in relation to specific diseases. As well as familiarising yourself with this plan,

you should read the relevant disease control strategies for the exotic notifiable diseases of animals that are of most concern. These are:

- [Notifiable Avian Disease Control Strategy for Great Britain](#)
- [Foot and Mouth Disease Control Strategy for Great Britain](#)
- [Rabies Disease Control Strategy for Great Britain](#)
- [Bluetongue Great Britain Disease Control Strategy](#)
- [Disease Control Strategy for African and Classical Swine Fever in Great Britain](#)
- [African Horse Sickness Control Strategy](#)
- [Lumpy Skin Disease Control Strategy for Great Britain](#)

A26. These control strategies were developed with the relevant stakeholders. For diseases where there is no published control strategy, legislative powers enable the principles of this plan to be applied to eradicate any outbreak.

International controls and trade implications

A27. In the event of a disease outbreak or incident and depending on the disease, the UK may lose its WOAHP international disease-free status. This may result in some countries no longer accepting animals or their products from the UK. Export certificates may need to be withdrawn while conditions to allow trade to continue are reached with the importing countries.

A28. Government and stakeholders will need to work closely, from the start of an outbreak and possibly during the suspicion stage, on communicating with trading partners to minimise the impact on trade. This will continue throughout the outbreak. Trade restrictions can remain in place for a long time, even after the disease has been tackled and disease-free status has been re-established.

A29. The [UK/EU and EAEC: Trade and Cooperation Agreement \[TS No.8/2021\]](#) sets out the conditions under which trade with the EU can continue during an outbreak. The SPS Chapter sets out that both the UK and EU have agreed the concept of zoning including disease-free areas and areas of low disease prevalence, applicable to the trade between the UK and EU. This should be carried out in accordance with the WTO SPS Agreement, including the

guidelines to further the practical implementation of Article 6 of the SPS Agreement (WTO/SPS Committee Decision G/SPS/48) and the relevant recommendations, standards and guidelines of the WOAAH.

- A30. When establishing or maintaining zones, factors such as geographical location, ecosystems, epidemiological surveillance and the effectiveness of SPS controls should be considered.
- A31. The TCA provides the opportunity for the UK and the EU to agree to cooperate on the concept of compartmentalisation, as set out in Chapters 4.4 and 4.5 of the WOAAH Terrestrial Animal Health Code.
- A32. The UK and EU have committed to recognising the disease-free areas which were in place at the end of the transition period.
- A33. There are other commitments, including:
- to cooperate to maintain confidence in the procedures for the establishment of disease-free areas and areas of low disease prevalence, with the aim to minimise trade disruption.
 - to expedite the recognition of the disease status when the status has been recovered after an outbreak.
 - that either party can request additional guarantees for the imports of live animals and animal products, appropriate to the agreed disease status.

Suspicion and confirmation

Suspicion of disease

- A34. There is a legal duty on any person who suspects that an animal may have a notifiable disease to report their suspicion to the APHA using the Defra rural services helpline on 03000 200 301, which is open 24/7. If the report leads APHA to suspect disease may be present, an investigation will be carried out by a Veterinary Inspector (VI).
- A35. The premises where disease is suspected will be placed under restrictions prohibiting any movement on or off. The investigating vet will examine the animals at the premises and in consultation with the Veterinary Exotic Notifiable Diseases Unit (VENDU), decide on further action. This could mean notifiable disease can be ruled out and restrictions removed, or if notifiable disease cannot be ruled out, samples may be taken for laboratory testing. The premises will remain under restrictions and a process of ongoing monitoring will continue until disease is either ruled out or confirmed.
- A36. Notification of suspicion of disease within government follows a standard procedure. Initial notification is the responsibility of the VENDU duty Veterinary Adviser (VA). Ministers and selected officials from across Defra, the devolved governments and other government departments (OGDs) will be notified.
- A37. The keeper of the affected animals will be kept informed of progress with the disease investigations. When suspicion of disease arises, officials will decide if there is sufficient concern to alert relevant stakeholders and to keep them informed of developments.

Animal, premises and area restrictions

Overview

- A38. When a report of suspected disease is received, APHA will assess the call and, if appropriate, launch an official investigation and put in place temporary statutory restrictions on behalf of the minister. Depending on the disease concerned, these restrictions may apply to the whole premises or to individual animals. This will usually include a ban on the movement of susceptible

animals on and off the suspect premises and may include restrictions on anything that is liable to transmit disease, such as meat, products, equipment, vehicles, manure, for example.

- A39. These restrictions are notified orally and confirmed in writing on arrival. A VI then undertakes a veterinary inquiry which involves a clinical examination of the animals and an inspection of production records. If disease cannot be ruled out the VI will take samples for laboratory testing. In certain circumstances sampling may involve humanely destroying the animal.
- A40. Restrictions will remain in place until the official investigations are complete and exotic notifiable disease is ruled out.
- A41. The aim of the restrictions is to prevent the spread of disease. There will inevitably be some disruption to normal business patterns for those affected by restrictions and there will be some impact on normal business processes.
- A42. During the suspicion phase, in consultation with relevant ministers, a temporary control zone (TCZ) may also be declared around the premises under suspicion. This is particularly relevant for diseases such as foot and mouth disease (FMD), bluetongue (BTV), avian influenza (AI), classical swine fever (CSF), African swine fever (ASF) and African horse sickness (AHS).
- A43. If disease is confirmed, the primary objective is to prevent the spread of disease by:
- taking action on the infected premises (IP) and other premises (contact premises) where disease is most likely to have spread from and to, for example where there have been recent animal or other movements between premises.
 - imposing wider area-based controls as required by EU and national legislation, including risk-assessed animal movement controls and controls on animal products. In the case of FMD, Great Britain (GB) administrations will impose national movement restrictions on susceptible animals.
 - restricting activities that might increase the risk of spread. For example, there might be a ban on hunting or shooting.
 - considering banning gatherings of animals including shows or markets
 - considering export bans
 - considering compulsory housing of animals

- investigating the origin of the disease and determining whether there has been further spread of disease from that source.
- completing other surveillance to investigate possible further spread of disease.
- considering vaccination to prevent further spread of disease.

A44. The control strategies and legislation set out the policies relating to the types of zones for different diseases and the minimum sizes and duration of those zones.

Individual animal restrictions

A45. For some diseases, restrictions are placed on individual animals to restrict their movement pending the outcome of further tests.

Premises restrictions

A46. APHA will place restrictions on the premises to prohibit the movement of animals susceptible to the disease onto and off the premises.

A47. Depending on the disease concerned, the movement of people, non-susceptible animals, animal products, feed and fodder, vehicles, manure and anything else potentially contaminated with infectious material, off and onto the premises may also be restricted. Movements may be permitted under licence subject to a veterinary risk assessment completed by APHA and suitable biosecurity procedures being met.

A48. The rules concerning the premises will be set out in the notice served on the occupier. Any licence will specify conditions permitting movements onto and off the premises or restricted place. The occupier of the premises is responsible for ensuring the restrictions are observed.

A49. Public rights of way (footpaths, bridleways, for example), or land open to the public on this IP which present a risk of disease spread may be closed.

Area restrictions

A50. In any exotic notifiable disease outbreak or incident, there will initially be a degree of uncertainty about the origin of the disease, how long it has been present and how far it may have spread. Because of this uncertainty, area restrictions are imposed for many diseases to stop the movement of susceptible animals into, from and within the restricted area.

A51. During the suspicion phase of certain diseases, a temporary control zone (TCZ) or temporary movement restriction zone (TMRZ) may be declared around the premises under suspicion.

Alert system to indicate disease status

A52. There is a standard alert system to describe the current status of a specific disease outbreak or incident of exotic notifiable disease of animals.

Alert status

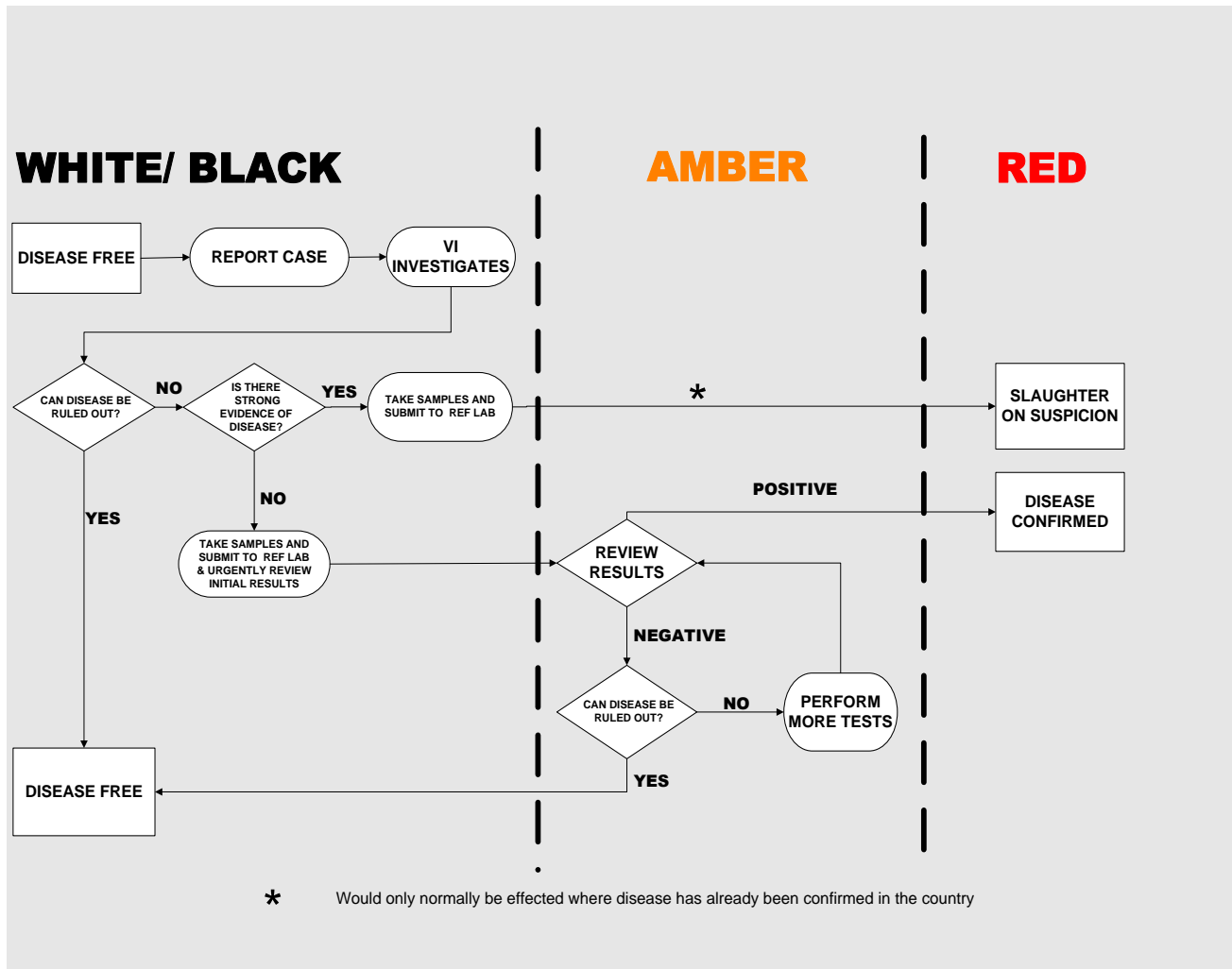
White alert, this indicates that the disease is not present or suspected in the UK and will be the state of alert under normal circumstances.

Black alert, this indicates that the risk of disease is higher than normal. For example, disease may be suspected or confirmed in a nearby EU member state. This would warrant a higher level of vigilance. The decision to raise the state of alert from white to black will be taken by the UK Chief Veterinary Officer (UK CVO).

Amber alert, this indicates that there is a strong suspicion of the presence of the disease on a particular premise based on clinical picture, following a veterinary inquiry. Samples may have been submitted for laboratory analysis. Government laboratories may identify an exotic notifiable disease as part of routine surveillance, in which case there could be an immediate move to amber alert stage.

Red alert, this indicates that disease has been confirmed or that an operational response has been initiated.

Figure A – Actions performed between white and red status



CVO case conference

A53. On suspicion of disease there may be a series of case conferences to discuss emerging issues. The four Chief Veterinary Officers from the UK, policy and veterinary officials from each administration would normally attend and will consider whether circumstances warrant triggering an amber teleconference. The case conference is organised by the UK CVO's office, which also supplies the secretariat. Where a conference is required outside of normal office hours and at weekends the secretariat function is carried out by the Exotic Disease Policy Response Team (EDPRT).

Amber teleconference

A54. If suspicion of disease is strong because of emerging laboratory results or a deteriorating clinical picture, an amber teleconference is held. Its purpose is to inform the attendees of the situation, assess the risk and agree on next steps.

- A55. The amber telephone conference is organised by Defra's EDPRT. The teleconference is chaired by the CVO or Deputy CVO (DCVO) for the territory in which disease is suspected and follows a standard agenda. Participants include the CVOs of the devolved governments and senior officials from Defra, Scottish Government (SG), the Welsh Government (WG), Department of Agriculture, Environment and Rural Affairs (DAERA), APHA, the relevant UK reference laboratory for the disease under investigation, the local APHA managers for the affected area and relevant representatives from OGDs and health agencies.
- A56. During the teleconference the relevant CVO may negate disease, decide there is sufficient evidence to confirm disease (raising the alert status to red and invoking the response component of this plan) or specify what further evidence, such as test results, will be needed. In England this is the responsibility of the UK CVO or UK DCVO. In Scotland, Wales, and Northern Ireland this is the respective country CVO or deputy. They will also agree plans for future actions and communications based on the emerging situation at this teleconference.
- A57. If a veterinary risk assessment indicates an unacceptable risk in waiting for laboratory test results which could contribute to onward disease spread, the relevant CVO or DCVO may take the decision to slaughter animals on suspicion of disease (raising the alert status to Red and invoking the response component of this plan) without waiting for the results of laboratory investigations.
- A58. Ministers will be kept informed of the progress and outcome of the amber teleconference.

Notifications

- A59. At the suspicion phase there are several important communications actions. These are taken to ensure accurate information is distributed as appropriate and that in the event of a move to a red alert, adequate communications resources are available to support operations.
- A60. If, following the amber teleconference, the level of suspicion is considered sufficient to warrant further action but disease is not confirmed at that stage, officials will take responsibility for notifying others, including the affected animal keeper, stakeholder organisations (including National Farmers Union

(NFU) and the British Veterinary Association (BVA)) and operational partners (such as Local Authorities (LAs), police forces, Environment Agency (EA), UK Health Security Agency (UKHSA), for example. If, following these initial notifications, a full disease control operation is likely to commence APHA will place policy and operational functions on alert and may put in place some outbreak response structures.

- A61. Following the amber teleconference, a record of the meeting will be circulated by the EDPRT to relevant operational partners who did not attend the amber teleconference. These could include the COBR Unit (Cabinet Office), Department for Levelling Up, Housing & Communities Resilience and Recovery Directorate (DLUHC RED), EA, UKHSA, Department of Health and Social Care (DHSC), Food Standards Agency (FSA), National Police Chiefs' Council (NPCC) and Ministry of Defence (MoD).

Confirmation of disease

- A62. During the amber teleconference, the relevant CVO may, on balance of the evidence, decide to confirm disease (raising the alert status to red and invoking the response component of this plan). In England this decision is the responsibility of the UK CVO or UK DCVO. In Scotland, Wales and Northern Ireland this is the respective country CVO. Ministers will be immediately notified of the CVO's decision to confirm disease.
- A63. In the event of a red alert, there are additional actions and notifications to be undertaken by officials, including the establishment of proportional elements of the disease control structures.

Notifications

- A64. APHA will notify the affected animal keeper, local operational partners (LAs, police forces, EA, UKHSA, for example) and local stakeholders including the regional director, within the appropriate regional office of the NFU and veterinary practices. Defra will inform national stakeholder organisations.
- A65. APHA will also make arrangements to notify other animal keepers, occupiers of business premises, utility companies, local operational partners and stakeholders within affected zones and an alert will be sent to keepers who have subscribed to the service - [APHA disease alert service](#). Social media

posts directing people to GOV.UK, GOV.SCOT or GOV.WALES for the latest disease related information and guidance will also be released.

- A66. The head of Outbreak Coordination Group (OCG) will notify representative associations for haulage, rendering and incineration industries and all areas within APHA.
- A67. The EDPRT will ensure the Member of Parliament (MP) for the affected constituency is also informed.
- A68. The UK CVO has the responsibility for notifying the European Commission (EC) and the WOA of an outbreak of exotic notifiable disease within any part of the UK.

Communications

- A69. For each outbreak or incident of exotic notifiable disease of animals, it is important that there are effective, timely and accurate communications with the affected premises, stakeholders, farmers, and animal keepers, the public and the media. Appropriate communications tools will be used to assist in reducing the impact and spread of disease and to provide accurate, timely updates on the latest situation.
- A70. Information is gathered on the disease outbreak to coordinate Defra and central government information, identify issues of interest and to provide accurate and timely information on the outbreak for ministers, the media, senior officials, helplines, and all staff dealing directly with the public and for publication via the website.
- A71. Defra will inform relevant stakeholders at national level of the presence of disease and progress of the outbreak. Government may also use these channels to target messaging.
- A72. One of the main methods of communication with animal keepers is via a mass-messaging system, using data held by APHA, Improve International and the Royal College of Veterinary Surgeons (RCVS). This system allows a combination of SMS and email messages to be sent to livestock keepers and veterinary practices. Social media posts directing people to GOV.UK, GOV.SCOT and GOV.WALES for the latest disease related information and guidance will be released. APHA will also liaise with the relevant animal stakeholder groups to disseminate information to members. Information packs

may also be distributed to livestock premises within protection zones (PZs) and surveillance zones (SZs) set up to control livestock diseases.

- A73. All animal keepers and pet owners should visit GOV.UK for the latest situation and advice.
- A74. A daily communications meeting is held at the National Disease Control Centre (NDCC) (including representatives from Defra and other departments as appropriate) to identify and agree relevant points to make for internal and external communications.

Further cases

- A75. Once disease has been confirmed, further positive cases are confirmed through CVO Disease Confirmation Teleconferences or, in an extensive and ongoing outbreak, further delegated to the NDCC. Further amber teleconferences may be held where disease is suspected in a new territory.

Controls and restrictions in the PZ and SZ

- A76. On confirmation of most exotic notifiable diseases, government policy is to impose a protection zone (PZ), surrounded by a larger surveillance zone (SZ) around the IP. Controls within the PZ are more stringent than those within the SZ to reflect the increased risk of transmission of disease.
- A77. Other types of control zone may be declared, but they all serve a similar purpose to control the spread of disease.
- A78. In general, controls are primarily focused on the movement of animals since, for most diseases, this is the most common method of spreading disease. Legislation may include controls on vehicles, fomites (anything that may physically carry the disease agent), meat, animal products (including meat products, eggs, hides and in some cases milk and milk products derived from animals in the zones), germinal products (including semen, oocytes, and embryos), manure and on the carcasses of animals.
- A79. Animal keepers within the control zones may be required to carry out additional biosecurity measures. All animal keepers must be especially vigilant for any signs of disease and report any suspicion of disease immediately to APHA.

- A80. APHA will carry out surveillance when the zones are in place. This may involve clinical inspection, examination and possibly sampling for laboratory testing in the areas to identify affected animals and demonstrate that disease has not spread.
- A81. In extensive outbreaks or incidents, where a large number of PZ and SZ areas may be declared, the areas may overlap to form a very large PZ and SZ. This may increase the time needed to carry out the required surveillance to allow restrictions to be relaxed and demonstrate absence of disease.
- A82. If the area covered by disease control zone in England would overlap the border into Scotland or Wales, the affected administration will consider whether to declare zones covering the remaining area. In most situations the zones and restrictions will be implemented on both sides of the border.
- A83. When restrictions are imposed, government will monitor their impact on rural communities and the wider rural economy.

Changes to movement controls

Licensing

- A84. As investigations into an outbreak or incident progress, it will become clearer where the risks of disease spread lie.
- A85. Depending on the circumstances, and subject to veterinary risk assessments and statutory requirements, the government may grant exemptions to controls for specific limited individual activities using licences. These licences set out the criteria and conditions that must be met before, during or after the activity. It is essential that businesses and keepers comply with restrictions and all conditions if exemptions are permitted through licenses in order to minimise the risk of onward spread of undisclosed disease.
- A86. Specific licences will normally allow a one-off movement or activity and will be subject to strict conditions to minimise the risk to disease control. Conditions may include requirements for veterinary inspection, cleansing and disinfection (C&D), health monitoring and record keeping that must be complied with before, during or after the movement or activity. Licence applications can take several days to assess and, depending on the outcome of the assessment, may not always be granted.

- A87. We will publish general licences applicable in England on GOV.UK which will be made available as the disease situation becomes clearer. General licences will cover low risk activities as determined by a veterinary risk assessment that do not need to be applied for on an individual basis but will have conditions that must be adhered to before, during and after the licenced activity.
- A88. Government will keep stakeholders and animal keepers informed of the disease situation. Government will also publish information about the likely timing of changes to restrictions within zones. Control strategies and legislation already set out the minimum duration of zones and controls within them.
- A89. Each UK administration operates its own licensing regime to take account of the country's disease situation and the administrations legislative requirements. The four UK administrations will work closely to provide a coherent approach to licensing across UK borders.
- A90. Places which handle animals, animal products and waste can present a risk of spread of disease. They may need separate approval in order to ensure they operate good and effective processes to mitigate the spread of disease. This is detailed in the relevant control strategy and can include disease control approval of the operation of slaughterhouses, meat plants, hatcheries, egg packing, laboratories, and other places.

Welfare moves

- A91. It is important that all animal keepers have business continuity plans in place to deal with sudden or prolonged movement restrictions, because pressures on accommodation can arise quickly. This applies to farmed animals and domestic pets but is especially challenging in the pig and poultry sectors. The animal keeper is responsible for the welfare of their animals. Where there is suffering due to overcrowding the keeper may have to humanely destroy those animals; no compensation will be paid for any animals humanely destroyed as a result. In exceptional circumstances, consideration will be given to arranging disposal (at the cost of the keeper) where this is likely to be problematic. Further information on movement restrictions can be found in the disease specific control strategies (see pages 5 & 6).
- A92. Immediately after the imposition of movement controls, consideration will be given to making licences available to permit certain essential movements for

welfare purposes (for example dairy cow movements for milking, movements to permit treatment by veterinary surgeons), subject to assessment of the risk. Strict conditions will apply to these licences ensuring such moves take place under suitable biosecurity arrangements. APHA will respond to requests for welfare moves in a timely fashion with decisions and licensed moves explained in a clear and transparent manner.

Enforcement

A93. Local Authorities in England enforce disease control legislation, including movement restrictions, compliance with additional measures such as bans on gatherings and licensing conditions. In the event of non-compliance, Local Authorities have various enforcement options ranging from advice to prosecution. Penalty notices may also be offered as an alternative to prosecution or when other options have been considered an insufficient deterrent.

Command, control, and communication (C3) structures

A94. On confirmation of an exotic notifiable disease of animals or where a decision has been taken to undertake pre-emptive disease control activities, clear command, control, and communication structures are put in place to direct, coordinate and support a timely, effective, and optimum disease control response.

A95. Defra is the lead government department for exotic notifiable disease outbreaks in England. Together with its executive agencies, it is directly responsible for the delivery of both the local and national disease control response.

A96. Three levels of command will be established, operating at a **strategic**, **tactical**, or **operational** level. Flexibility and proportionality in the delivery of the response is important. For a small outbreak it may not be necessary to establish all the formal structures required for a major outbreak. Most of the activities and functions delivered through the response structures will still need to be delivered, but there may be variations in the way that they are delivered.

- A97. In the event of concurrent disease outbreaks or incidents, the structure may be adapted to consolidate duplicated functions. This will be based on the scale and severity of the emergencies and the response required.
- A98. Figure B shows how structures interrelate with wider UK response structures at a UK ministerial and strategic level. Figure C sets out the command structure applicable to an outbreak in England from the NDCC level. If an outbreak affects another administration, their emergency response command structures also apply, with the Defra command structure functioning to ensure UK-level coordination and that international obligations are met.

Figure B Command, control and communication structures in Great Britain

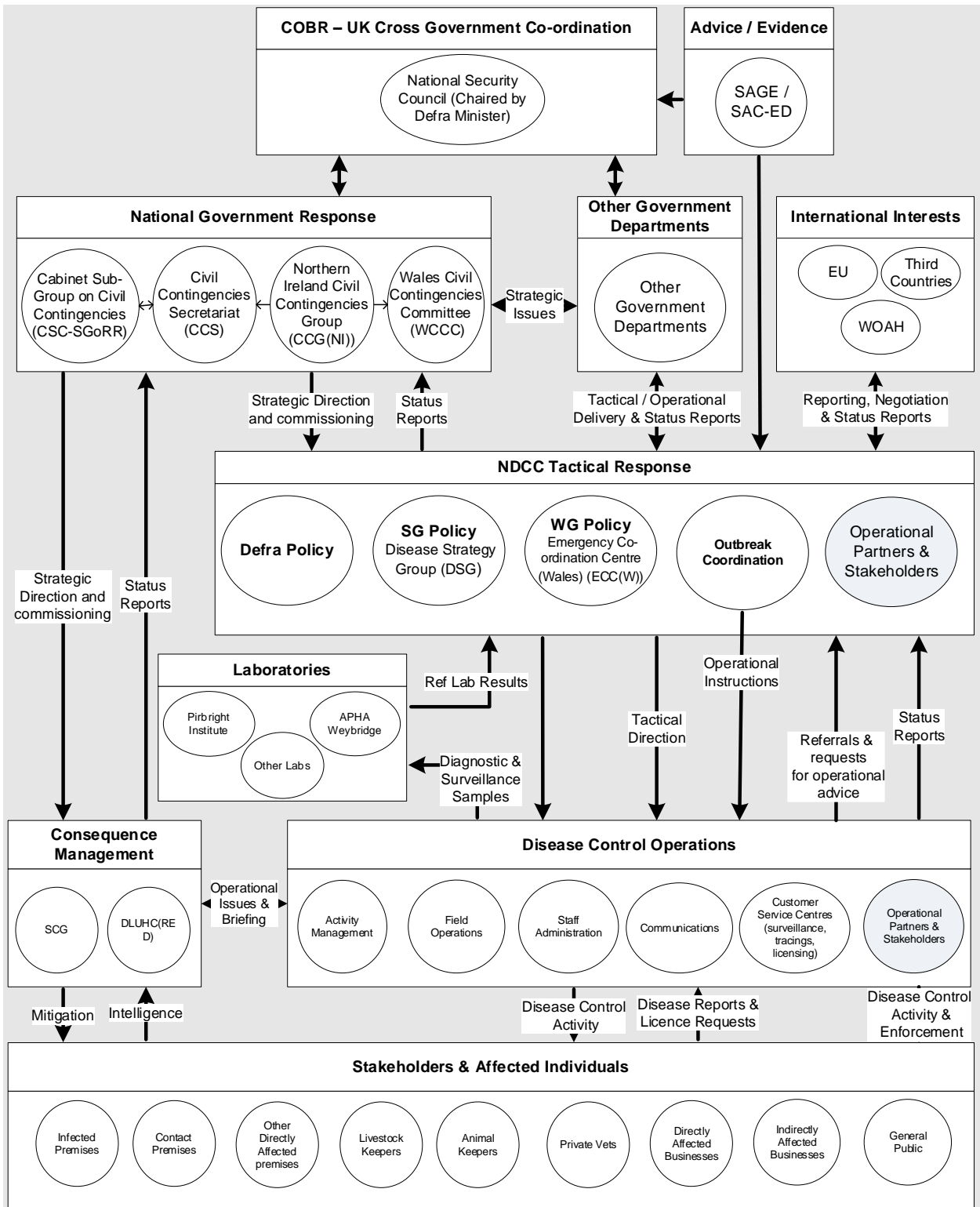
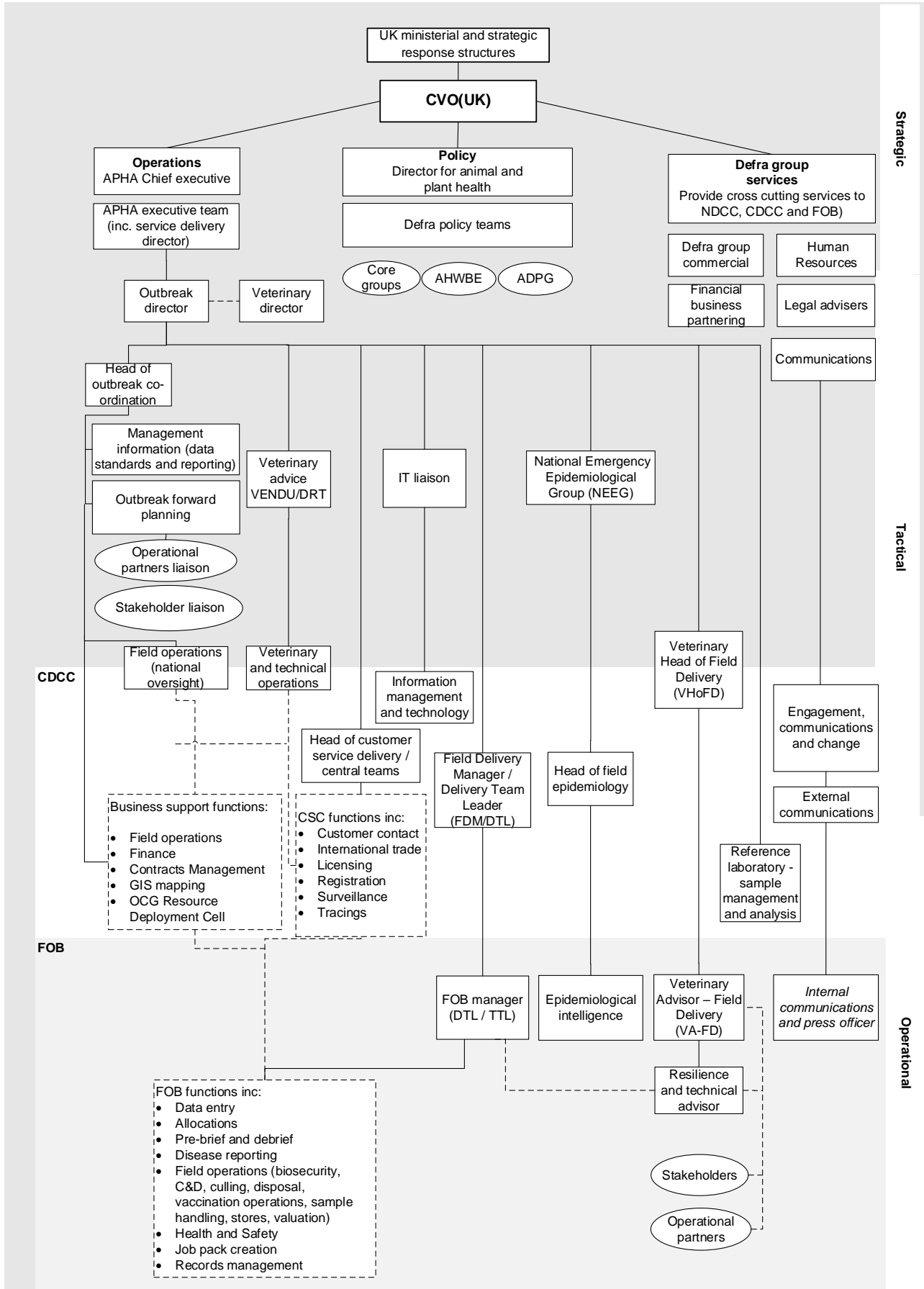


Figure C – Tactical and operational command structures



Strategic

Defra ministers

- A99. In England, Defra's Secretary of State (SoS) has overall responsibility for the response. Direct involvement of the SoS will be dependent on the scale and circumstances of the outbreak. Certain responsibilities may be delegated to other Defra ministers. The SoS may be required to brief Parliament, the Cabinet and No. 10 about current risks and disease control measures. Where the disease occurs in other UK territories, the minister for the affected territory will assume that responsibility.
- A100. The relevant Defra minister will be directly involved in the outbreak response. If considered necessary, the minister may attend meetings of the Defra Executive Committee (ExCo) and the NDCC bird table. The minister will respond to Parliamentary questions concerning the disease outbreak and may be required to chair Cabinet Office Briefing Room (COBR) meetings if sitting. The minister may also brief the Environment, Food and Rural Affairs (EFRA) select committee.
- A101. Defra ministers may also be required to brief the media, although the UK CVO will normally be Defra's main media spokesperson.

Defra Permanent Secretary

- A102. The Permanent Secretary has responsibility for departmental decision making as the accounting officer for Defra. They decide if the outbreak merits an extraordinary meeting of the Defra ExCo and, if necessary, trigger through COBR Unit the protocols set out in the Central Memorandum of Understanding on Mutual Aid and the Redeployment of Human Resources.
- A103. The Permanent Secretary works with the SoS and the appropriate Defra director general to ensure that No.10 is appropriately engaged and informed and horizon scan for wider government issues.

Strategic / Tactical - National Disease Control Centre (NDCC)

- A104. The NDCC brings together strategic and tactical level functions in close collaboration to ensure a timely, effective, and optimum response. Policy

functions are provided by core Defra and operations functions by APHA and other partners. The main responsibilities are:

- Policy teams:
 - to develop, determine and interpret policy within the legislative and wider strategic framework.
 - to advise ministers and other strategic decision makers
 - to work in partnership with stakeholders
- Operations:
 - to engage with teams across the NDCC, Central Disease Control Centre (CDCC) and Forward Operations Base (FOB) teams as well as operational partners and stakeholders to coordinate the outbreak response and provide tactical advice.
- Defra group services:
 - to provide specialist support and advice across the Defra family

A105. A framework for decision making during outbreaks has been established which is clear, transparent, timely and auditable and adheres to the principle of subsidiarity (the organising principle that matters ought to be handled by the smallest, lowest, or least centralised authority).

A106. The main functions that are available to the NDCC, as outlined in Figure C, are described below.

Defra Chief Veterinary Officer UK (UK CVO)

A107. The UK CVO is also the CVO for England and confirms presence of disease in England. The UK CVO:

- leads the NDCC, working closely with Defra directors and the chief executive of APHA, taking account of risk and evidence and issues such as impact on stakeholders, public acceptability, and practicality of delivery.
- acts as Defra's main spokesperson on the outbreak and the disease control policies deployed, provides challenge to veterinary (and scientific) advice given to inform outbreak decision making and is ultimately responsible for veterinary advice to ministers and senior officials.

- represents the UK in international veterinary fora and is responsible for liaison with the European Commission and the WOAHA.

Defra Deputy Chief Veterinary Officer UK (UK DCVO)

A108. The UK DCVO:

- deputises for the full range of UK CVO duties as necessary.
- undertakes horizon scanning for tactical risks and issues.
- attends stakeholder meetings as necessary.
- leads science, international affairs, market access and veterinary trade facilitation teams.
- makes recommendations to the Animal Disease Policy Group (ADPG).

Defra director general for food, farming and biosecurity

A109. The Defra director general for food, farming, and biosecurity:

- has overall responsibility for the disease response and is the principal policy adviser to ministers on an outbreak.
- provides strategic leadership and direction, ensuring all issues - policy, veterinary, scientific, and operational - are properly considered.
- provides direction on reprioritising work within Defra, if necessary, to ensure resources are made available for the outbreak effort.
- is responsible for resolving issues where it has not been possible to agree policy position.

Defra director for animal and plant health and welfare

A110. The Defra director for animal and plant health and welfare:

- owns the policy for animal disease control and leads the policy response at the strategic level.
- ensures the response is aligned with Defra's animal health and welfare strategy and that all the relevant policies are considered.
- sets the overall objectives for the outbreak in conjunction with the UK CVO and the APHA chief executive and undertakes horizon scanning for strategic issues and shape of future policy.
- chairs ADPG

Defra director for Agri-Food

A111. The Defra director for agri-food leads on food policy and, working with other Defra teams and arms-length bodies, supporting the re-establishment of international trade.

Defra Chief Scientific Adviser (CSA)

A112. The Defra CSA:

- provides challenge to scientific advice provided to Defra and ADPG and accountable for challenges to all scientific advice on disease outbreaks to ministers.
- communicates with Government's Chief Scientific Advisor (GCSA) and strategic bodies such as the NCS and mobilises and receives advice from the Science Advisory Council - Exotic Disease sub-committee (SAC-ED)
- considers activation of government's Scientific Advisory Group for Emergencies (SAGE) in consultation with the UK CVO, COBR Unit and GCSA
- represents science and Defra at high level meetings, public fora and communicates with the media on science underpinning Defra matters.
- undertakes horizon scanning for strategic science issues.
- attends media briefings, stakeholder group meetings and other meetings as necessary and provides regular briefing to the GCSA.

Defra outbreak policy deputy director

A113. The Defra outbreak policy deputy director:

- leads on developing and interpreting disease control and movement policy and delivering the policy response at tactical level. They ensure advice, recommendations and briefing is provided to ministers and others on tactical aspects of the outbreak, including exit strategy.
- ensures the AHWBE is informed when disease is confirmed and briefed as the outbreak develops and that stakeholders are informed at national level when disease controls are put in place, disease is confirmed, and policy decisions are taken during an outbreak.

- works in partnership with other parts of the disease response, stakeholders, and devolved governments to identify risks and issues which may impact on the disease control objectives.
- ensures appropriate zones, movement and other necessary control measures are implemented within the relevant legislative framework and provides advice on a return to normal movements' policy during the recovery phase and advice on identification of animals.

Defra Exotic Disease Policy Response Team (EDPRT)

A114. The Defra EDPRT:

- supports the exotic disease policy lead and strategic policy officials in delivering all of their functions.
- manages a disease-free status programme providing historical timelines.
- communicates exit strategies.
- works closely with communication teams to ensure that correct and timely information is provided.
- monitors policy staff resource requirements and can, if required, utilise a pool of surge and emergency volunteers.
- ensures there are business continuity plans in place to ensure policy staff can access essential systems, documents, equipment, and buildings whenever required.
- works with economists, statisticians, social researchers, scientists, and modellers to undertake socio-economic analysis of the impacts and the costs and benefits of policy options, including the effects on associated businesses, on domestic and export markets as well as consumers and taxpayers.

Defra Imports, and EU trade

A115. The Imports and EU trade team are responsible for import policies relating to Products of Animal Origin (POAO), live animals and germinal products to prevent the introduction of disease into the country, and for policies relating to trade with the EU. This includes communication with the EC on relevant trade and SPS matters and responsibility for policies to control the export of commodities to the EU that are capable of spreading disease. This will also

involve working closely with the UK Office for Sanitary and Phytosanitary Trade Assurance.

Defra Market Access

- A116. The Market Access (MA) team works with APHA, FSA, FSS, DAERA, the UK Export Certification Partnership (UKECP), the British Poultry Council, the Export Certification User Group, OVs, Local Authorities, UK livestock sector bodies and exporters, British Embassies and importing veterinary authorities of non-EU countries to maintain the safe trade in UK exports of POAO, live animals and germinal products to non-EU countries during disease outbreaks. The MA team manages the impact of notifiable disease on the UK's exports of these commodities through regular communication with our non-EU country trading partners, providing updates, and addressing trade-related queries as they arise.
- A117. The MA team works closely with delivery teams to ensure export policy requirements are communicated to inform any restrictions on export health certificates (EHCs), which are issued according to disease certification requirements and in line with any import restrictions imposed by non-EU country trading partners. The MA team also leads on bilateral negotiations to the reopening of non-EU export markets as the disease situation improves.

Defra International Affairs and Science

- A118. The International Affairs team, together with the WOAHA Focal Point for Animal Disease Notification in the Veterinary Trade Facilitation Unit, are responsible for communication with international bodies, notably the WOAHA ensuring effective representation of the UK's disease notifications, control activities and declarations of disease freedom. They also have a role in regularly communicating how UK systems and capabilities function to international partners in advance of any possible outbreaks. The Science team, working with relevant veterinary laboratories, ensuring the right capabilities and evidence requirements are in place.

Defra animal welfare

- A119. The animal welfare team is responsible for providing policy advice on animal welfare on farm including during depopulation, transportation, the need to

protect the welfare of animals affected by movement restrictions as well as on the position of companion animals. The team will seek ministerial approval of depopulation methods used for disease control purposes where this is required by the legislation.

Defra sustainable and competitive farming strategy (sector engagement)

A120. The sector engagement team will advise on the impact on the food supply markets of disease control policies (depopulation, movement restriction, stamping of meat from restricted areas, impact of vaccination on exports, for example). The team will also engage with the Commission (Director General (DG) Agri) on any market intervention measures, advise on state aids aspects of any compensation levels for depopulated livestock, work with animal welfare policy team on animal welfare matters and advise on disposal of animal by-products.

Defra Agri-Food Chain Directorate (AFCD)

A121. In a major outbreak the AFCD will initiate protocols in the Food Supply Playbook, which would include convening stakeholder forums (such as the Food Resilience Industry Forum (FRIF)) which support the operations across the UK Food supply chain and allows us to update and listen to insights from the people in industry closest to the operations of the end-to-end supply chain.

A122. Through forums such as the FRIF, we are able to initiate and scale-up- data collection and reporting arrangements (for example on absence levels and food supply) to ensure we have the information we need to monitor the situation, to understand the mitigations that industry is deploying, and how industry believe government can best support these. This group will assess potential implications on the resilience of the food supply chain and report back to the EDPRT.

Defra's rural and place team

A123. The rural and place team aim is to make sure that strategies, plans, and interventions developed by other departments can deliver their desired outcomes in rural areas by taking account of rural conditions such as demography, distance, and sparsity. The monthly rural insight forum aims to bring together rural stakeholders and other departments to understand what is

happening on the ground and to consider the implications of policies being developed or implemented. Each stakeholder has extensive networks, connecting to other organisations and reaching out into rural communities. This enables them to provide well informed opinion on rural issues.

Defra communications group

- A124. Defra's communications group is responsible for ensuring that a robust and proportionate communications strategy is in place to meet the demands of a disease outbreak situation. They will advise the SoS, other ministers, UK CVO, and Defra CSA on communications issues, manage communications with the media and ensure that all communication channels, including the government's public website (gov.uk) and Defra helpline are updated and provide appropriate, clear, and accurate information to relevant audiences.
- A125. They inform and coordinate Defra and central government information, identify issues of interest to the media and the public, assist policy colleagues with messages and ensure staff are kept informed.
- A126. They are also responsible for managing communications with animal keepers, operational partners, and stakeholders at local level. Defra communications group also co-ordinates the distribution of information packs to livestock premises within PZs and SZs set up to control livestock diseases.

APHA's contract management team (CMT) and Defra group commercial (DGC)

- A127. The contract management team in APHA and Defra group Commercial provide support and advice on the procurement of goods and services required during disease control operations including utilising framework agreements, call-off procedures, contractual terms and conditions, use of emergency purchase orders and procurement of new goods and services if frameworks are exhausted or new requirements arise.

Defra finance

- A128. The finance director role for APHA undertaken as part of the Defra Finance Group is responsible for ensuring the financial integrity of the disease control operation. They will ensure all necessary finance structures are in place, oversee and provide financial support to CDCC Finance, APHA CMT and

Defra group Commercial, horizon scan for strategic and tactical issues, prepare papers for the ExCo and advise on options and recommendations.

- A129. The CDCC finance team is responsible for ensuring that the full cost of the disease control operation is accurately monitored and captured. The team provides financial reports as required and supporting evidence if forecasts indicate that a claim for reserve funding is required from HM Treasury. They are also responsible for payment to suppliers and contractors, compensation to affected parties, HM Treasury reporting and financial reporting.
- A130. The finance business partner team supports the work of the finance director for APHA, liaises with the Defra director of finance and maintains a flow of communications appropriate to the scale and seriousness of an outbreak. They will also liaise with Defra policy team, HM Treasury and other stakeholders as required.

Workforce Surge and Deployment Team (WSDT) and Defra Strategic Human Resources (HR)

- A131. The WSDT manages and coordinates the provision of veterinary, technical, specialist, and administrative resources. It works with internal outbreak teams, in particular the NDCC OCG, on a national basis, Defra Strategic HR and other parts of the Defra Group to secure emergency resource. Depending on the scale of the outbreak the team will also work with a number of OGDs including Department for Work and Pensions (Jobcentre Plus), HMRC and industry organisations. Working in partnership with DEFRA HR, the team may link in with the COBR unit, with the RCVS, British Veterinary Association (BVA), Foreign and Commonwealth Office (FCO) and the CVOs of other countries over recruitment of veterinary or other staff and the use of the International Animal Health Emergency Reserve (IAHER).

The APHA CMT team is also responsible for establishing contract terms and conditions for additional staff and contracted personnel and liaising where appropriate with Defra Group Commercial.

Defra legal advisers

A132. Legal advisers are responsible for ensuring that the disease control operation complies with our domestic and international legal obligations and will liaise with policy colleagues to ensure that our disease control policies support this.

APHA chief executive

A133. The APHA chief executive leads delivery of the operational response and briefs ministers and senior officials on disease control operations.

A134. They plan effective delivery of strategic and tactical decisions and ensure appropriate management of all operational disease control staff (including those from within the Defra family and elsewhere). They authorise recruitment of additional staff, deliver veterinary surveillance advice to inform outbreak decision making and provide Defra's permanent secretary with information concerning control and recovery operations.

APHA outbreak director / Head of Field Delivery (HoFD)

A135. The APHA outbreak director is responsible for leading the CDCC and FOBs. They will manage the overall operational response.

A136. The outbreak director will normally be the APHA HoFD for England. Should an outbreak extend to other countries in GB, the APHA service delivery director would become outbreak director to provide a GB overview and the HoFD would focus on activities in their country.

A137. When disease is confirmed, the HoFD (or delegated representative) will brief the appropriate DLUHC (RED) resilience team and the chair of the Local Resilience Forum (LRF) (in some areas this may be via the Local Authority Animal Health Function (LAAHF)) on the situation and agree local arrangements as a wider consequence of the outbreak. If necessary, a local Strategic Co-ordinating Group (SCG) may be established to manage the wider impacts of an outbreak on the local area (such as health, social, economic, environmental and public information) and the chair of the SCG and HoFD will work closely together.

APHA veterinary director

A138. The veterinary director is responsible for translating the disease control strategy into effective and efficient disease control operations both in the field and in the Customer Service Centres (CSCs). They also assure the quality of veterinary advice from APHA to policy development. This includes epidemiology advice (including epidemiological modelling) via the National Emergency Epidemiology Group (NEEG) and chairing the National Experts Group (NEG). The veterinary director works closely with the Veterinary Heads of Field Delivery (VHoFD) to receive and act on intelligence concerning whether the operational response is achieving the required strategic outcomes.

APHA Veterinary Exotic Notifiable Diseases Unit (VENDU)

A139. VENDU is part of the APHA Veterinary Advice Services Team and is responsible for veterinary advice to policy makers on the control of the disease. VENDU receives reports of suspected disease from the field, ensures that disease investigations are undertaken effectively, that notifications are distributed and acted upon, co-ordinates sample test results from the laboratory, considers the options for control, makes recommendations as appropriate and acts as a central co-ordination point to collate, refine and present up-to-date information on disease reports.

A140. If appropriate during an outbreak or incident, VENDU may delegate some or all their responsibilities relating to that outbreak or incident to an NDCC disease reporting team (DRT). VENDU will retain functional management of the DRT and continue to handle report cases for other exotic notifiable animal diseases.

APHA head of Outbreak Coordination Group (OCG)

A141. The head of OCG

- is responsible for the schedule of meetings (battle rhythm) and co-ordination of APHA NDCC and CDCC functions. They will notify interested parties about the disease investigation during suspicion and upon confirmation of disease. They will also consider the establishment of proportional elements of the NDCC and CDCC and ensure that contingency arrangements are enacted.

- ensures efficient coordination occurs across Defra, operational partners and stakeholders and agrees any deviation from the established operational structures and ways of working with the UK CVO.
- ensures there are business continuity plans in place to enable NDCC staff to access essential systems, documents, equipment and buildings whenever required.

APHA OCG Forward planning

A142. The OCG Forward Planning Team are responsible for horizon scanning to identify possible operational and logistic problems and provide solutions. They will use the output of epidemiological modelling for resource planning purposes in order to assess the operational impact of the predicted progression of the outbreak, identifying likely strategic, tactical and operational milestones.

APHA OCG Management information and Reporting Team

A143. The OCG Management Information and Reporting Team are responsible for collecting, collating, and interpreting summary data and information on the control and management of the outbreak. The team will be a central point of intelligence on the outbreak, its impact and control. They will receive situation reports from the CDCC teams and FOBs and will compile a report of data and analysis, which will be submitted to the NDCC and the COBR Unit on a daily basis or less frequently as jointly agreed between the COBR Unit and the head of OCG. The OCG Management Information and reporting Team will also coordinate the Defra and APHA contribution to the Commonly Recognised Information Picture (CRIP), if required.

APHA OCG Field operations Team

A144. Support the FOBs, by coordinating and providing tactical guidance on all aspects of field operations including valuations, depopulation, transport, disposal and C&D operations. They ensure that services are available to carry out operational functions. They also maintain an overview of status of the field response, handle disputed valuations, litigations and legal liaison and manage air exclusion zones if required. They will liaise with central teams of other organisations whose local staff will be involved in the field operation such as the EA and UKHSA.

A145. The OCG Field Operations Team also implement vaccination operations if required through management of external emergency vaccination suppliers. More detail on vaccination is at paragraphs 280 – 308.

APHA Information technology (IT) liaison team

A146. The IT liaison team co-ordinate requests for IT services, developments and manage their delivery. They liaise with the IT service contractor and APHA Information Management and Technology team (IMT) and Defra Digital, Data and Technology Services (DDTS) who are responsible for the maintenance of IT disease control systems.

APHA National Emergency Epidemiology Group (NEEG)

A147. The NEEG:

- provides the UK CVO and policy makers with expert epidemiological opinion relevant to the control policy.
- provides epidemiological advice and assessment on the determinants, level and distribution of disease to the NEG, other groups and the UK CVO to inform decisions on disease control and prevention measures.
- leads the epidemiological investigations of exotic notifiable animal disease outbreaks, delivers epidemiological modelling, designs surveillance plans and analyses surveillance outcomes. It contributes epidemiological information and expertise to veterinary risk assessments and provides epidemiology reports or the epidemiological components of reports to Defra, the public website and WOAHA.
- provides advice to field operations on disease transmission risks (and potential measures to mitigate these) and likely disease distribution to aid resource allocation and prioritisation of the implementation of control measures.
- establishes a field epidemiology team presence in each CDCC and FOB as appropriate.

APHA Veterinary Head of Field Delivery (VHoFD)

A148. The VHoFD acts as the senior veterinary field adviser to the HoFD and other staff within the field delivery teams. They are responsible for quality assurance of veterinary activities, ensuring that appropriate standards are applied, and

decisions are made based on sound veterinary advice, appropriate risk assessment and considering wider aspects of veterinary issues.

- A149. They lead FOB operational partner and stakeholder engagement. They act as the local spokesperson on the operational aspects of the disease control operation to the media, brief and liaise with the sub-national teams (including the local SCG) to ensure that arrangements are in place to manage the wider consequences of the outbreak and manage the relationship with the wider resilience partners.

APHA Senior leadership operational meeting

- A150. They plan effective delivery of strategic and tactical decisions and ensure appropriate management of all operational disease control staff (including those from within the Defra family and elsewhere). This may include convening the APHA senior leaders to coordinate the operational response. They authorise recruitment of additional staff, deliver veterinary surveillance advice to inform outbreak decision making and provide Defra's permanent secretary with information concerning control and recovery operations.

Tactical / operational - Central Disease Control Centre (CDCC)

- A151. At the tactical / operational level, APHA establishes a CDCC headed by the APHA outbreak director. The CDCC is a virtual structure and will be located across multiple sites and include functions delivered across the agency. The CDCC coordinates operational activities taking place at the FOB and permanently operating CSCs.
- A152. The main functions of the CDCC are described below. The APHA operations manual includes detailed descriptions of roles, responsibilities, and operating instructions.
- A153. All business units within APHA have effective and practicable business continuity arrangements in place to ensure continuation of critical outbreak response activities in the event of disruptive business continuity incident.

Field delivery managers

A154. Oversee and manage field delivery in one or more FOBs within a geographical area, ensure that sufficient staff have been engaged to deliver field tasks and oversee FOB planning including accommodation requirements.

Veterinary and Technical Advice Team

A155. Co-ordinate and manage the veterinary and technical aspects of the control, eradication and recovery operation. They liaise with policy colleagues and provide veterinary and technical direction to the field operation by means of instructions and guidance. They also provide veterinary and technical support to the NDCC including the management of sample results other than those from disease investigations and circulation of these to the NEEG.

Epidemiology

A156. Contribute to the understanding and control of disease by gathering, collating and interpreting epidemiological information, considering patterns of disease, assessing risk factors and disseminating this information.

Finance

A157. Provide guidance and advice, including overseeing cost forecasts. They record, manage and provide advice on finance activity and manage procurement and contractual activity in accordance with Defra and APHA procedures.

Information Management and Technology Team (IMT)

A158. Provide an analytical information support service to the strategic, tactical, and operational response. They provide data, management of information, maps, and statistics to support risk assessments, modelling, control operations and requirements to support trade with trading partners.

A159. They also provide demographic information on the distribution and numbers of livestock, draw up official zones and produce maps in relation to imposing restrictions and advise on specific issues including scientific, technical and disease control measures.

Communications

A160. Provide a comprehensive, integrated communications service, including all aspects of internal and external communications in liaison with wider communication groups.

Laboratory services

A161. Provide and interpret diagnostic and surveillance testing, disease-specific expert knowledge in relation to the application of laboratory tests, epidemiology and control measures. The reference laboratories for exotic notifiable diseases in the UK include The Pirbright Institute, APHA Weybridge and UKHSA Porton Down

Surveillance

A162. Oversee the required surveillance to enable zone clearance or as required for other teams such as epidemiology and support surveillance activities at the FOB ensuring that field teams undertake clinical inspections, verify details of premises, obtain information on stock numbers and disposition on premises.

Tracings and dangerous contacts

A163. Oversee tracings and dangerous contact (DC) activities to identify the source of disease and limit its spread, ensure that tracings are identified and prioritised promptly and where a veterinary risk assessment indicates an unacceptable risk, recommend stock are depopulated as DCs.

Licensing

A164. Consider applications for exemptions from restrictions and, where allowed and appropriate, licensing those exemptions to permit essential animal movements, activities, events.

International Trade

A165. The APHA International Trade team's function is to take action to limit export activity in line with disease control policies to prevent disease spread and help maintain confidence in markets.

Operational - Forward Operations Base (FOB)

- A166. The FOB implements the disease control operation, ensuring that local operational partners and stakeholders are appropriately engaged. The FOB follows tactical direction and policy guidance set out in the relevant disease control strategies, contingency plans and operational instructions. The FOB also reports progress of the disease control operation to the outbreak coordination group.
- A167. A FOB will be established close to the outbreak or incident location, providing an operational base for those teams that are predominantly involved in field-based activities. Dependant on the nature of an outbreak, further FOBs may be established.
- A168. A FOB manager is appointed, responsible for managing the local accommodation, facilities, and resources, including staff, arranging for the provision of arrival, induction, training, and departure processes.
- A169. The APHA operations manual includes detailed descriptions of roles, responsibilities, and operating instructions. The main functions of the FOB are to:
- ensure jobs are prioritised, allocated on time, fully completed, and accurately recorded.
 - ensure jobs being allocated have the appropriate documents, forms, and mapping.
 - provide materials, personnel and information to reduce the risk of spread of disease from infected to uninfected stock.
 - establish an effective records control system to manage official records including registered files and any other media which conveys information.
 - maintain sufficient supplies to allow undertaking of patrolling, surveillance and for field operations activities.
 - advise on sampling requirements and coordinate the packing and dispatch of samples to the laboratory (this may include a liaison officer from APHA Weybridge)
 - ensure that fair and accurate valuations of all livestock being depopulated for disease control purposes are carried out in accordance with legislative and policy requirements, co-ordinate culling activities on premises where animals are to be depopulated.

- co-ordinate the disposal of carcasses from premises where animals are depopulated.
- assess requirements for preliminary and final C&D and provide advice on how it should be done.
- liaise closely with the national communications teams and provide an integrated communications service at the local level.
- contribute to the understanding and control of disease by gathering, collating, and interpreting field epidemiological information, considering patterns of disease, assessing risk factors, and disseminating this information.
- provide advice and assistance for all aspects of staff health and safety.
- maintain close liaison with local stakeholder groups and operational partners.

Case officer

A170. A case officer is appointed for each premises where disease control activity is taking place. They operate from the premises and are the point of contact with the occupier or operator. They are responsible for overseeing all activities including APHA staff, police officers deployed to the site, other officials, valuers, slaughtermen, contractors for example. They ensure a coordinated well directed operation, compliance with health and safety protocols, minimise the risk of disease spread from the premises and achieve rapid and effective completion of disease control measures.

Gate officer

A171. A gate officer is appointed to each premises where disease control activity is taking place and controls and records movement of people, vehicles, materials, and equipment onto and off the premises.

Operational partners, other government departments and stakeholders

A172. The management, control, and eradication of an outbreak of exotic notifiable disease of animals require a coordinated response between numerous

organisations. Depending on the disease in question and the scale and severity of the outbreak, the NDCC and FOBs may include representation from operational partners, OGDs and stakeholder groups.

Environment Agency (EA)

- A173. The EA works with, and supports partners (including Defra, APHA, LAs and landowners) to minimise the environmental impact of an outbreak and the necessary control measures. They provide expert advice and management options, in particular on waste and disposal sites, determine applications and registrations for waste disposal and recovery activities, pollution prevention issues and monitor the impact on the environment.
- A174. The EA will, where appropriate, provide liaison officers at strategic, tactical, and operational command levels and, where necessary, attend SCG meetings. A Response Coordination Group (ResCG) should be established in the event of a wide-scale incident.

UK Health Security Agency (UKHSA)

- A175. UKHSA assess the impact of disease control measures on public health and ensure directors of public health in LAs are briefed on disease control measures and any related public health issues. UKHSA will field health-related enquiries from public and local health service staff, promote continuity of health care provision in restricted areas, human blood samples and provide laboratory support, epidemiological advice, and access to modelling capability.
- A176. UKHSA will, where appropriate, provide representation at the strategic, tactical and operational command levels and, where necessary, attend SCG and ResCG meetings.

National Police Chiefs Council (NPCC)

- A177. NPCC is responsible for developing policing policies. The council works within a tripartite framework which brings together the local chief constable, the local police and crime commissioner and the home secretary. NPCC advise on strategic policing issues arising from disease control operations, provide a link to chief constables in affected police forces and facilitate agreement of proposed routes with all affected police forces.

A178. NPCC provide representation at the tactical and operational command levels and, where necessary, attend COBR meetings.

Individual police forces

A179. In addition to their wider role in relation to maintaining order and protecting the public, individual police forces will also provide policing of control zones, enforcement of movement controls with LAs and general co-ordination of emergencies support particularly in pursuing legal entry to premises. They provide specialist knowledge in the area of management and co-ordination of major incidents and work in partnership with LAs and APHA to share and consider local intelligence.

A180. A chief officer from the force area affected is usually the chair of the SCG and may be the chair if an outbreak or the activities needed to deal with it reach such proportions that a critical or major incident is declared and the SCG becomes established. A representative of the police force may attend the FOB.

National Animal Health and Welfare Panel (NAHWP)

A181. The National Animal Health and Welfare Panel (NAHWP) is comprised of LA officers who bring together specialist and expert advice for LAs and co-ordinate best practice and enforcement. NAHWP may have representation in the NDCC and provide a forum for national policy issues and for getting information to and from the regions. Information is shared through an online resource, 'the local government animal health and welfare knowledge hub', which has been established to help LAs share experiences, solutions, ideas and good practice in relation to the regulation of the farming industry and protecting the food chain, human health, and animal health and animal welfare.

Local Authorities (LAs) and the Local Authority Animal Health Function (LAAHF)

A182. LAs, county and unitary councils, are major operational partners in the response to an outbreak of exotic notifiable disease in animals. The LAAHF is a term used to identify the personnel within a LA that are responsible for the

provision of animal health and welfare enforcement. The LAAHF is normally located within trading standards or environmental health services and provides an informed link between the APHA, LA and the LRFs. During an outbreak the LAAHF also plays an important role in the implementation of disease control strategies, ensuring an appropriate response to suspected or confirmed animal disease and is fundamental to the efficient access of local information and resources. They also fulfil a significant role in providing advice and education at a local level and may attend the FOB.

A183. During an outbreak the LAAHF will work with their authority to help co-ordinate their response and may:

- provide staff (including animal health officers, emergency planning officers and highways and public rights of way departments)
- provide vehicles
- provide equipment
- provide buildings
- enforce disease control measures and movement licence conditions; and
- erect road signs for publicising control zones
- oversee the enforcement and implementation of animal disease control measures within the food production premises operating under LA approvals

Department of Health and Social Care (DHSC)

A184. DHSC provide clear and unambiguous advice on the human health implications of an animal disease outbreak. DHSC will provide strategic guidance and advice on prophylaxis and treatment of people where necessary. DHSC will promote continuity of health care provision in restricted areas though NHS England.

Cabinet Office, The COBR Unit

A185. The COBR Unit, formerly known as the Civil Contingencies Secretariat (CCS), is responsible for overseeing the cross-government readiness and response for civil emergencies. It supports ministers collectively and the lead departments in particular. It provides a coordinated response by ensuring that

there is an agreed understanding of the triggers for and implications of an outbreak. This involves identification of issues requiring collective discussion and agreement by ministers and recording, communicating, and following up agreed actions.

A186. The COBR Unit will work with other departments, bilaterally or multilaterally, at a strategic level to identify emerging issues and develop solutions or policy options for putting to COBR. In the absence of a permanent consequence management co-ordination centre, The COBR Unit will set up ad-hoc strategic level meetings of departments and agencies, probably at short notice, to fulfil this role.

United Kingdom Mission to the European Union (UKMis)

A187. UKMis monitors and analyses developments in the EU, particularly in the EU institutions (the European Council, European Parliament and European Commission), engages with member states' representation to the EU and supports negotiations with the EU.

• Department for Levelling Up, Housing & Communities (DLUHC)

A188. DLUHC Resilience and Recovery Directorate (RED) provides the government

A189. liaison function on resilience issues. RED works with local organisations to build resilience, to support LRFs working together and, as appropriate, support the response to any emergency. This includes through assisting the exchange of information between affected responders through SCGs and with UK central government. In the event of an emergency, DLUHC will immediately take steps to ensure that they can provide support to the local emergency response, where necessary and as appropriate. This could involve facilitation and co-ordination of mutual aid arrangements between LRFs and in consultation where necessary with the Cabinet Office, convening a ResCG where the local response has been or may be overwhelmed and wider support is required.

Department for Transport (DfT)

A190. DfT provides support to Defra, its associated agencies and stakeholders by responding to demands for information on transport related issues, providing practical advice and guidance, agreeing to derogations of road haulage regulations where appropriate and facilitating contact with the transport industry where necessary.

Food Standards Agency (FSA)

A191. FSA provides advice to the public concerning implications for the food chain arising from an outbreak of exotic notifiable disease of animals. FSA operations is responsible for the protection of public and animal health through the proportionate enforcement of legislation in approved fresh meat premises. FSA is responsible for overseeing the implementation of animal disease control measures at slaughterhouses and elsewhere in the food chain operating under an FSA licence and approval. It is responsible for the delivery of official legislative controls relating to standards of animal welfare and hygiene in slaughterhouses and cutting plants.

Natural England (NE)

A192. NE is focused on conserving and enhancing England's biodiversity and landscapes and maximising the benefits they bring to the public. This includes managing England's agri-environment schemes, implementation of open access legislation including regulation for temporary closure, statutory designation, maintenance, and condition of protected sites including sites of special scientific interest and national parks and managing the majority of the national nature reserves. In particular, NE is the licensing authority for protected species and for the release of non-native and re-introduced formerly native species.

Devolved governments

A193. Representatives from the devolved governments may be based in the NDCC during large-scale outbreaks in Great Britain. For smaller outbreaks or those where disease is limited to England only it may not be necessary for the

devolved governments to be embedded and they may participate at NDCC bird-tables via teleconference.

Core groups

A194. Defra works closely with a number of core groups of stakeholders which have been established to help formulate proposals and seek solutions to issues outside of and during an outbreak. Each group is comprised of experienced members of the relevant professions, and industries and animal keeping sectors, from a number of organisations.

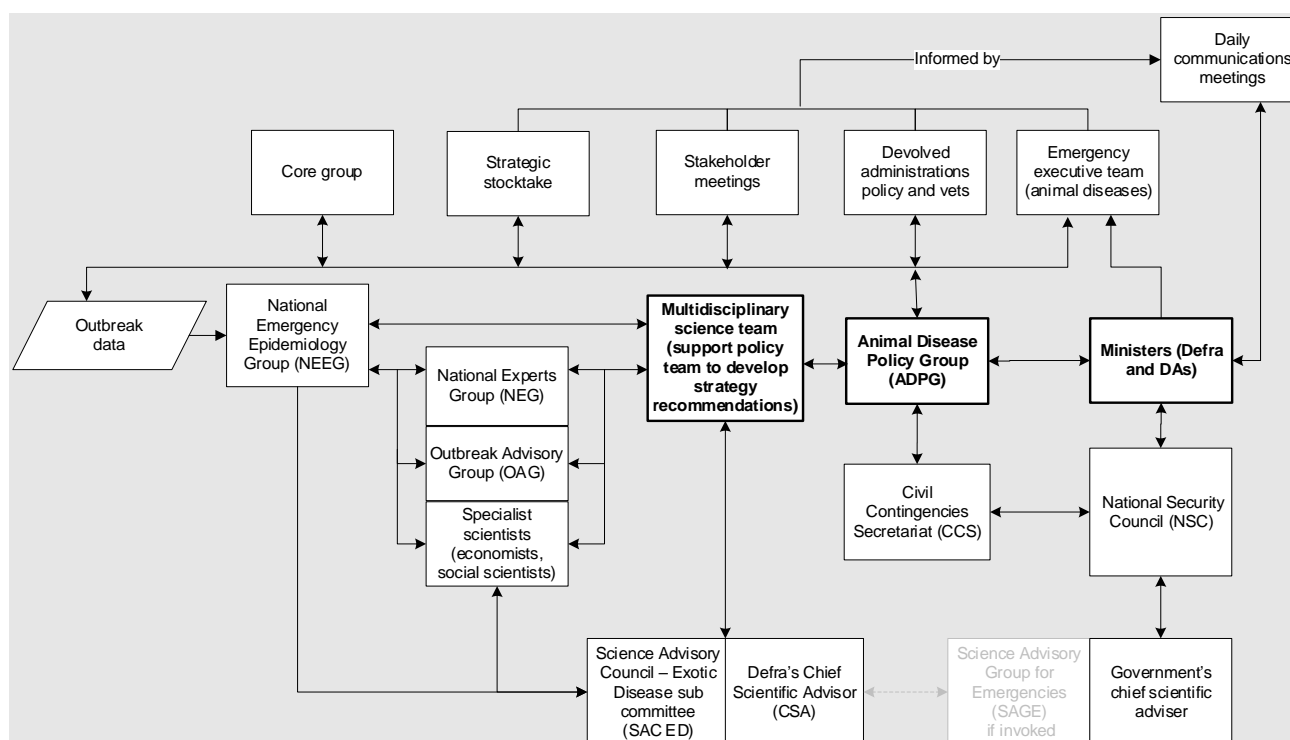
Stakeholders

A195. Stakeholders from relevant industry or species organisations including veterinary partners and stakeholders may be invited to attend bird-table meetings and various other meetings at both national and local levels. Stakeholders provide advice and guidance on animal keeping practices, location of susceptible animals and will have a role in disseminating information to animal keepers.

Groups and committees

A196. This section describes the groups and committees that may meet and work collaboratively together to control and eradicate the disease. The meeting of these groups is coordinated by the battle rhythm (see page 48). Figure D is a diagrammatic representation of the inter-relationships between the science and policy groups during a disease outbreak

Figure D – Diagram of inter-relationships between science and policy groups



Cabinet Office Briefing Rooms (COBR)

A197. The UK maintains the capability to respond to the range of hazards and threats facing the country through the activation of central response arrangements within the Cabinet Office Briefing Rooms (COBR). The COBR mechanism facilitates cross-government decision making and ensures ministers and senior officials are provided with timely, coordinated and quality advice to enable quick and efficient decision-making during times of national crisis.

A198. COBR arrangements bring together Defra (the lead government department), along with OGDs and where required, operational partners, local partners, Devolved Administrations, international partners, and other response

organisations, to maintain a common understanding of the latest situation and provide advice on strategic issues to ministers. COBR meetings may be held at ministerial or official level depending on the nature and stage of the outbreak and will provide robust decision making to coordinate responses across multiple organisations.

- A199. COBR is designed to be a flexible mechanism that can be adapted to the circumstances. The support cells include a situation cell that coordinates the production and maintenance of a Commonly Recognised Information Picture (CRIP), utilising data reporting from the National Situation Centre. This is supported by policy and operational cells, as well as the Scientific Advisory Group for Emergencies (SAGE). SAGE will coordinate scientific and technical advice to inform cross-government decision making.
- A200. The issues that are likely to be discussed include the operational response, the impacts on the wider government, stakeholder engagement, international and European issues, forward strategy, communications and media and recovery.
- A201. The decision to activate COBR in response to an exotic notifiable disease outbreak in animals will be taken by the COBR Unit in conjunction with Defra and No. 10. Once activated, COBR Unit is responsible for running the COBR mechanism to coordinate the cross-government response to the outbreak in support of the lead government department. The decision to activate SAGE will be taken by COBR, on the advice of the Government Chief Scientific Advisor and / or Defra, departmental Chief Scientific Advisers (CSAs) and CVOs.
- A202. COBR and SAGE will not necessarily be activated in relation to all outbreaks, especially not in relation to more minor outbreaks.

National Security Council (NSC)

- A203. The NSC is the main forum for collective discussion of the government's objectives for national security, including issues relating to threats, hazards, resilience, and contingencies on an ongoing basis including consideration of plans for the protection of life, the continuity of everyday activity and the restoration of disrupted services. NSC would be briefed on significant animal

disease outbreaks. The NSC is further supported by a variety of thematic sub-committees, including on resilience.

- A204. NSC meetings are held at either official or ministerial level and further attendees in addition to those stated in the terms of reference may be invited on an ad hoc basis.

Science Advisory Council – Exotic Disease subcommittee (SAC-ED)

- A205. SAC-ED has been established to give strategic oversight and assurance for dealing with exotic animal diseases during an outbreak. SAC-ED will typically meet annually even if an outbreak does not occur. This may include providing advice in relation to emerging animal disease outbreaks and to the Devolved Administrations, at their request.
- A206. SAC-ED's main role is to advise and challenge the Defra CSA and UK CVO on the department's preparedness to deploy evidence and analysis in support of exotic disease control, which might include Quality Assurance on the application of procedures and scientific support implications; and in the event of an exotic disease outbreak, to review the evidence and analysis supporting disease control policies; to assure its quality and advise on any issues or gaps and how they might be addressed. This will include Defra's disease recovery phase policies and their implementation. Defra will decide when and how SAC-ED should be deployed in relation to outbreaks.
- A207. Membership is drawn from independent academics from across the UK and includes experts in veterinary epidemiology, virology, risk and modelling, social science, economics and practical experience of dealing with outbreaks.
- A208. SAC-ED and the NEG or Outbreak Advisory Group (OAG) perform the roles and functions of a SAGE and for most exotic disease outbreaks SAGE will not be stood up. In the event that the ministerial COBR will be activated, the chair of SAC-ED in consultation with the government and Defra CSA and UK CVO should discuss the potential activation of SAGE by COBR. SAC-ED will form the basis of SAGE and the government CSA will take over the chair to ensure continuity.

Scientific Advisory Group for Emergencies (SAGE)

- A209. SAGE coordinates scientific and technical advice from other expert groups to help support UK cross-government decision making. SAGE will be activated from within the government's crisis management mechanism, often referred to as the COBR. SAGE advice will be one source of advice that will be presented to ministers to support them in making evidence-based decisions. SAGE will be chaired by the government's CSA, a departmental or national CSA, a Chief Medical Officer or UK CVO as appropriate. The secretariat will be provided by the lead government department. Where there is no lead, the secretariat will be provided by Cabinet Office and the Government Office for Science.
- A210. SAGE may establish a number of sub-groups depending upon the nature of the outbreak.

Defra Executive Committee (ExCo)

- A211. The Defra ExCo is the strategic decision-making body, which, if necessary, would be responsible for considering how best Defra should respond to the outbreak or incident. ExCo is chaired by the Defra permanent secretary and would use its standing secretariat. The initial meeting will be at an appropriate time following confirmation of an outbreak of animal disease. Defra's permanent secretary, following advice from officials, has responsibility for deciding if the scale and severity of the outbreak merits an ExCo meeting (or additional agenda item at one of its regular meetings) and the frequency of these meetings.
- A212. ExCo will focus on how Defra as a whole should respond and in particular the budgetary and resource aspects.
- A213. ExCo will comprise of all its standard members and additionally the APHA chief executive, Defra's CSA, director for animal and plant health and welfare and UK CVO, together with any other members the permanent secretary deems appropriate for the outbreak.
- A214. The issues that are likely to be discussed include, resourcing across the group (including use of emergency volunteers), financial and budgetary outlook, communication issues, coordination and liaison with COBR Unit, OGDs and the devolved governments and impact of outbreak on other departmental responsibilities, including business continuity.

Animal Disease Policy Group (ADPG)

- A215. The ADPG provides disease control policy advice and strategic recommendations at UK level which will form the basis for advice to Defra ministers, COBR and other strategic decision makers. It is the forum where the disease control policy and strategic recommendations should be presented, reviewed, discussed, challenged and agreed by UK officials. The ADPG also has an important role in ensuring that policies are consistent (although they may be different) across the four administrations within the UK.
- A216. ADPG is chaired by Defra's director for animal and plant health and welfare, or a nominated deputy, and Defra's EDPRT provides the secretariat.
- A217. The membership of the ADPG includes representatives from Defra policy teams, communications group, Defra legal advisers (animal health and welfare team), UK CVO, NEEG, CVOs or DCVOs and policy officials from devolved governments, the COBR Unit, APHA, UKHSA and FSA.
- A218. Its membership may expand for significant policy decisions and could then include Defra's permanent secretary, other director generals, and directors.
- A219. The issues that are likely to be discussed include policy recommendations for ministers, disease control strategy advice to be given to COBR, science-based policy decisions and the identification of risks and issues for scenarios that may have an impact upon strategies under consideration.

Communications meeting

- A220. The communications meeting is normally a daily forum for identifying and agreeing points to make for communications (internal and external) and media briefing and ensuring the appropriate audience is reached.
- A221. The director of communications will chair the meeting and the communications directorate group will provide the secretariat. The participants at the meeting (or their representatives) will include the chief executive APHA, Defra's permanent secretary, Defra minister, UK CVO, No. 10, exotic disease policy lead, devolved governments and APHA communications.
- A222. The issues that are likely to be discussed include the communications strategy, messages, lines to take, issues of the day and media handling.

Strategic stocktake

- A223. The strategic stocktake normally takes place daily and is a forum for ensuring senior managers within the disease control operation are aware of the latest developments and able to plan and take decisions on the overall strategic direction.
- A224. The UK CVO or UK DCVO will chair the meeting and the UK CVO's office will provide the secretariat. The membership will include the director for animal and plant health and welfare, DCVO, chief executive APHA, CVOs or DCVO and senior policy leads of the devolved governments, Defra's exotic disease policy lead, veterinary head of exotics and welfare, outbreak director, outbreak veterinary director, head of veterinary and technical operations, a member of the NEEG executive, head of international engagement, public health and food safety officials, and economic or industry representatives as appropriate.
- A225. The issues that are likely to be discussed are recent developments and the overall strategic direction of the response.

National Experts Group (NEG)

- A226. The NEG is a permanently operational UK group which, in an outbreak of exotic notifiable disease of animals, provides UK policy teams and CVOs with specific veterinary, technical and scientific advice and recommendations on the disease, its transmission and options for its control via the ADPG, UK CVO and DCVO.
- A227. The NEG will convene where a request on a policy development or option from policy teams or a CVO requires specific advice. The NEG will be chaired by the APHA veterinary director or the APHA head of Advice Services and the APHA Veterinary Advice Services (VAS) team will provide the secretariat.
- A228. The attendees at each NEG will reflect the issues under consideration but will usually include veterinary and scientific representatives from APHA, devolved governments, NEEG and the relevant laboratory (APHA or The Pirbright Institute). FERA, other Defra agencies and observers from exotic disease policy, Defra legal and Defra economists may also be present.
- A229. Depending on the issue under discussion other attendees may include, modelling experts, meteorologists, economists, scientific or veterinary

representatives of imports and exports portfolios and scientific experts in required fields. These can be from within government, its agencies or from external organisations including wildlife groups, academia for example.

- A230. The issues that are likely to be discussed at a NEG may include disease control recommendations for ADPG such as the use of vaccination, risk of disease transmission, involvement of wildlife, role of vectors and the commissioning of additional specialist work if existing models do not provide a sufficient understanding of the outbreak.

Outbreak Advisory Group (OAG)

- A231. The OAG may be set up during an outbreak or on other occasions if deemed appropriate. The main function of the OAG is to review the disease control strategy, whether it is or can be delivered as intended, and whether it is achieving the intended outcomes. It may also be used where it provides the best forum for allowing interaction between experts within and across disciplines to resolve a specific issue or to supplement the existing advice.
- A232. Once set up, the OAG will convene to review the strategy in place, at intervals agreed as part of planning the battle rhythm that are appropriate to the nature and scale of the disease outbreak. In addition, policy leads, the APHA service delivery director or a CVO or DCVO may request a specific OAG meeting to review or assist in disease outbreak control. A NEG meeting may also recommend that an issue be addressed in an OAG meeting and vice versa.
- A233. The OAG will be chaired by the DCVO or appropriate lead from the devolved government and the outbreak administration, planning and resourcing team will provide the secretariat.
- A234. Attendees at OAG meetings will include policy, veterinary, epidemiologist and the relevant reference laboratory representatives that are invited to all meetings, supplemented by other invitees to provide expertise in specific skills and disciplines depending on the issues under consideration.

Core groups

- A235. Defra will convene the relevant core group (or other stakeholder group) for the disease in question at the outset of an outbreak. The purpose is to ensure the

core group is appraised of the disease situation, and for them to provide advice and guidance to government. Core group members provide advice on how to mitigate any issues or concerns raised by industry stakeholders that may need to be addressed at local or national level during the outbreak. They will also be involved in the development of control policies outside of and during outbreaks. The outbreak policy deputy director will chair the core group and Defra's EDPRT will provide the secretariat.

Stakeholder meetings

- A236. Stakeholder meetings provide wider stakeholders with a forum for discussing and influencing policy developments and to help steer the strategic direction. Depending on the outbreak, additional stakeholder groups may be convened. These include selected stakeholders, veterinary stakeholders, retailers and exporters. The issues that are likely to be discussed vary. Stakeholders representing agricultural and rural interests, food supply, consumer organisations and other organisations may be invited.
- A237. The outbreak policy deputy director will normally chair stakeholder meetings and the UK CVO or DCVO chair the veterinary stakeholder groups. Ministers will occasionally chair stakeholder group meetings. The secretariat will be provided by Defra's EDPRT.

Bird-table meetings

- A238. Bird-table meetings take place at the tactical (NDCC) and operational (FOB) levels and are conducted to:
- provide a structure for the management of the outbreak by meeting regularly
 - facilitate the effective management of the outbreak by ensuring communication between all policy, operational, and communications functions involved
 - provide brief situation reports on all aspects of the operation to those concerned in its management, which may include operational partners and external stakeholders
 - to encourage a coordinated and cooperative response

- identify emerging issues and allocate responsibility for resolving them and reporting back
- A239. The participants at the meetings will be from all the areas involved in the management of the disease control operation, including operational partners and invited stakeholders.
- A240. The issues reported on will include an update on current disease status and control measures, situation reports from team managers, updates from stakeholders and operational partners, a review of outstanding actions from previous bird-tables, the battle rhythm and housekeeping issues.

Management teleconferences

- A241. Management teleconferences take place between the NDCC, APHA management and the CDCC as well as between the CDCC and FOB management.
- A242. The teleconferences provide a forum for heads of teams involved in the outbreak to communicate and be provided with central direction.
- A243. The issues that are likely to be discussed include a national update, current situation, control measures, operational and policy issues, resources, communications, IT and data, actions and issues requiring escalation.

Battle rhythm

- A244. The battle rhythm is established to allow all participants to be aware of the activities and meetings so they can better plan their involvement. The battle rhythm set out here is **indicative**. These timings are for an outbreak of significant size in which COBR is established and a daily media briefing is the norm. Any deviation from the set battle rhythm must be agreed between the head of OCG and the UK CVO or UK DCVO, the director for animal and plant health and welfare and the chief executive APHA.

Timing for battle rhythm

Time	Level	Event
0800 – 0830	Strategic	Daily strategic stocktake
	Operational	FOB operational management teleconference
0830 – 0900	Tactical	NDCC bird-table
	Operational	FOB bird-table
0900 – 0930	Tactical	Daily communications meeting
1000 – 1100	Strategic	COBR
1130 – 1200	Strategic	Defra media briefing
	Operational	Media briefing
1200 – 1230	Tactical	NDCC bird-table
	Operational	FOB bird-table
1400 – 1430	Tactical / operational	CDCC tactical-operational management teleconference
1500 – 1600	Strategic	COBR
1800 – 1830	Tactical	NDCC bird-table
	Operational	FOB bird-table
Ad-hoc	Strategic	Animal Disease Policy Group
	Tactical	National Experts Group
	Tactical	Outbreak Advisory Group
	Operational	Disease Emergency Response Committee
2100 approx.	CDCC management information and reports team	Daily report compiled and circulated – to provide a comprehensive situation report on all aspects

A245. Where an outbreak is small, or events are slow moving a more condensed battle rhythm will be appropriate. The main point is to ensure that a schedule is set and understood by all.

Operations and logistics

Contracts, framework agreements and finance

- A246. In the event of an outbreak of exotic notifiable disease of animals it is important that services required as part of the disease control operation can be accessed rapidly. Defra group commercial and APHA Contract Management Team establish contractual arrangements to meet anticipated needs in an outbreak whilst ensuring compliance with EU and UK procurement law and value for money. The suppliers are vetted and are subjected to regular review by Defra Group Commercial and APHA Contract Management Team to ensure their on-going suitability for use in an outbreak.
- A247. The contracts and framework agreements and arrangements are subject to regular review and cover all of the relevant supply chains and include: on-farm depopulation (including catchers and licensed slaughtermen); carcass transportation; carcass disposal (rendering and incineration); and the provision of specialist services and equipment for undertaking C&D.

Depopulation (culling)

- A248. For many diseases (such as avian influenza,) the control policy is to destroy affected animals rapidly, to halt the production or transmission of the disease-causing agent. This may involve the depopulation (also referred to as culling) of whole flocks or herds of animals. For other diseases (such as equine infectious anaemia), only single animals may need to be humanely destroyed.
- A249. Depopulation operations are controlled by Regulation 1099/2009 (on the protection of animals at the time of killing) and carried out under the supervision of APHA. The Welfare of Animals at the Time of Killing (England) Regulations 2015 (WATOK) enforces the requirements of the retained European regulation.
- A250. Carcasses and other potentially infectious items (such as eggs and milk) are required to be disposed of in a bio-secure manner and in compliance with Animal By-Product Regulations (ABPR) at a designated disposal facility. APHA is responsible for arranging the depopulation and disposal of affected

carcasses across GB. For other materials, the keeper is normally responsible for bio secure disposal.

- A251. While the speed of depopulation and disposal is important, the health and safety of personnel, keepers and owners is paramount and careful preparations are put in place by APHA to ensure that health and safety is not compromised. This is particularly important in the case of animal diseases that are communicable to humans (zoonoses).
- A252. It is important that animal welfare is protected and that rules are complied with at all stages in the process of depopulation. However, in exceptional circumstances, compliance with those rules may put human health at risk or may significantly slow down the process of eradication of a disease, thereby exposing more animals to sickness, pain and death. On occasion, there may be a need to derogate from the approved depopulation methods as prescribed in regulation 1099/2009.
- A253. Depopulation as a disease control measure, where appropriate, is carried out by or under the supervision of a VI. Such activities will be undertaken by qualified persons who will be contracted by APHA. A range of framework agreements are in place with these suppliers.
- A254. The welfare of the animals to be culled is given careful consideration when selecting the most suitable depopulation method as outlined in annex 1 of regulation 1099/2009. The depopulation method deployed will depend on the type of incident, species, age, number of animals, and any other site-specific conditions or resource constraints. For domestic pets, it is likely that lethal injection would be used (this is the most common method used by veterinarians for euthanasia of domestic pets).
- A255. Certain limited categories of animals, such as rare species, whose depopulation could compromise the existence of an animal species or animals that are part of a scientific experiment, may be considered for sparing from depopulation, provided that disease control is not compromised. However, such exemptions are not guaranteed and will be considered on a case-by-case basis following a veterinary risk assessment of the premises and consideration of wider issues and impacts.

Breeds at risk

- A256. Special arrangements may be made for animals and poultry which have scarce populations or are geographically concentrated and as such may be considered for exemption, provided that disease control is not compromised. Such breeds are registered in [the UK breeds at risk list](#) (BAR). This list is compiled by the UK Genetics for Livestock and Equines Committee (UKGLE) until June 2022 previously known as the Farm Animal Genetic Resources (FAnGR) Committee, a UK government committee in which the devolved governments participate, providing advice on farm animal genetic resources.
- A257. Decisions to spare are made on a case-by-case basis. A vet will carry out a risk assessment of the premises where the animal is kept. It is important to be aware that there are no guarantees an animal or bird will be spared and that a derogation is not granted automatically.
- A258. It is therefore important that keepers of animals from breeds on the BAR list have contingency plans and measures in place in case of an exotic disease outbreak. The Committee's [guidelines on developing an exotic disease contingency plan for 'breeds at risk'](#) are available online.

Depopulation of animals to prevent the spread of disease

- A259. Ministers also have the power to require the pre-emptive depopulation of animals in order to prevent the spread of FMD, AI and Newcastle Disease (ND).
- A260. Before such powers are used, ministers must make a statement explaining the situation and why it is necessary to resort to using them. Such powers would only be considered in exceptional circumstances. Compensation will be paid for any animals depopulated under these powers.

Disposal policy and arrangements

- A261. In consultation with the EA, LAs and disposal industry representatives, the CDCC field operations team will coordinate the task of finding and utilising available disposal capacity in GB. Responsibility for transporting the carcasses to these facilities rests with the FOB disposals team in liaison with the NDCC. Decisions on which site to use take account of relevant legislation, value for money, the proximity of the facilities to the affected premises, logistical and

seasonal issues, the tonnage of carcase material that needs to be disposed of and any epidemiological data or modelling which may suggest the likely scale of the outbreak. For companion animals or pets, appropriate disposal arrangements will be discussed with owners by the APHA case vet.

- A262. Taking into account the above, and as a guide, Defra's preferred hierarchy of disposal options for carcasses is:
- commercial fixed plant incineration
 - rendering
 - permitted commercial landfill sites
- A263. Operational protocols for use of incineration, rendering and permitted landfill in an outbreak of an exotic notifiable disease have been produced and shared with the EA, the Food chain and Biomass Renewables Association (Fabra) and the Environmental Services Association (ESA).
- A264. APHA staff are responsible for reviewing the selected site's biosecurity and ensuring that the plant complies with disposal site protocols. It is important that full biosecurity procedures are followed and as such, waste will be disposed of under supervision of APHA. All vehicles must be cleansed and disinfected between each load. For zoonotic diseases, UKHSA is also involved in assessing the potential exposure of workers and will issue guidance and prophylaxis as appropriate.
- A265. On-farm pyres and on-farm burial may be considered where access or other avenues of disposal are limited (for example the Isles of Scilly, which is covered by a remote area derogation). Any decisions to use these disposal routes will be taken in consultation with relevant stakeholders and appropriate environmental and public health assessments will be undertaken at each disposal location prior to use.
- A266. Other disposal options, such as mass burial, air curtain burners, incineration in cement kilns and the use of hazardous or municipal incineration, for example, are potentially also available in certain limited circumstances and will only be considered where none of the preferred options are available or if demand exceeds the capacity of the preferred options.
- A267. Defra recognises there are several factors that may impact on the disposal hierarchy in the future. These include new environmental or waste

management legislation and changes to capacity and accessibility of the disposal outlets. The hierarchy will therefore be regularly reviewed, in consultation with relevant stakeholders. New technologies and facilities will also be reviewed on a regular basis.

Disposal capacity

- A268. Disposal capacity is limited and subject to significant seasonal variation. Capacity is also poorly matched to the distribution of poultry and pigs within England since the main disposal facilities are generally located in areas of high cattle and sheep densities.
- A269. In an outbreak there will be a need to optimise disposal capacity and to work with the disposal industry to identify and implement suitable disposal options.
- A270. Additional capacity would be arranged as required in consultation with Fabra. Readily available disposal capacity in the UK is approximately 20,000 tonnes per week depending on the time of year, although additional capacity could be brought online over a period of weeks. This would require the diversion of existing waste streams to landfill. APHA regions have plans in place to invoke these disposal routes as required.

Transportation of carcasses

- A271. APHA has a framework agreement with a range of specialist local, regional and national haulage companies for the provision of International Carriage of Dangerous Goods by Road (ADR) compliant, leak-proof vehicles. For animals depopulated for disease control purposes, the transport of carcasses is undertaken by companies under the control of APHA.
- A272. APHA may appoint a national transport logistics manager and supporting local transport managers. The local transport managers will take on responsibility for all transport logistics once appointed.

Valuation and compensation

- A273. When an animal is destroyed for the control of an exotic notifiable disease, the relevant legislation sets out whether compensation is payable and the rate it is payable at.

A274. Where compensation is payable, APHA will ensure the animal is valued in accordance with the relevant legislation. In relation to certain diseases, an accredited valuer is engaged to assess the value of the animals. APHA maintains a framework agreement of approved valuers that will enable APHA to value the animals. There are certain instances where valuers are not required, and valuation rate cards and fixed table values (mainly for poultry) are used or where the amount of compensation payable is set in law. These rate cards and table values are published on GOV.UK and updated quarterly.

Disputed valuations

A275. In certain circumstances, disease legislation in respect of particular diseases, permits an appeal by the owner of an animal/s or poultry against the valuation as assessed by APHA/valuer. This appeal must be made within 14 days. The appeal, including the reasons for disputing the original valuation amount, must be provided in writing to APHA. At their own expense, the owner may use their own valuer to re-value the animals in question as supporting evidence for their appeal against the original valuation. Any appeal will be assessed by APHA and may then proceed to arbitration or expert determination (if the latter is mutually agreed by the parties) if the dispute is not resolved. The law does not require delaying the destruction of animals whilst a valuation dispute is ongoing.

Monitor valuers

A276. Defra would appoint monitor valuers from framework agreements to ensure that valuations are fair, equitable and consistent and to ensure that government does not overpay compensation.

A277. Monitor valuers will not be able to over-rule valuations already made and issued to animal owners.

Cleansing and disinfection

A278. Once susceptible animals have been destroyed and their carcasses securely disposed of the premises and potentially contaminated transport and equipment will need to be cleansed and disinfected to prevent spread from the premises and potential re-emergence of disease when the premises is restocked. Animal feedstuffs and items which may have been contaminated

and which cannot be cleansed and disinfected may need to be destroyed. It is important to jointly consider potential disease risk and pollution control measures as part of this process.

- A279. Potentially contaminated areas must first be cleansed to remove organic material and are then disinfected with an approved disinfectant or biocide at the recommended rate.
- A280. The EA provides advice on precautions to be taken on premises undergoing C&D in order to minimise environmental impacts of disinfectants or biocides.
- A281. There are two phases to C&D, preliminary (primary) and final (secondary); these are outlined below.

Preliminary (primary) disinfection

- A282. Preliminary disinfection is carried out immediately after depopulation and removal of carcasses has been completed. It is carried out under the direction and control of APHA and at government's expense. Preliminary disinfection consists of spraying contaminated and potentially contaminated areas where the animals were depopulated and where they were housed immediately before with an approved disinfectant or biocide. Preliminary disinfection is considered to be completed 24 hours after the last application of the approved disinfectant.
- A283. The timing of preliminary disinfection is important because, generally, the merging of the PZ and SZ can only take place after a defined number of days following completion of preliminary disinfection on the last IP within the zone. This period may vary depending on the disease.

Final (secondary) C&D

- A284. Depending on the disease, final C&D may be required and can only commence after a certain period has elapsed since preliminary disinfection. The occupier of the premises is responsible for final C&D and its cost. Restocking will not be allowed until final C&D has been completed.
- A285. In cases where final C&D cannot be safely completed (dangerous structures, for example), depending on the disease, the premises may remain restricted and not allowed to restock until APHA is satisfied that sufficient time has elapsed for the infectious agent to have become inactivated naturally. Where a keeper chooses not to undertake secondary C&D, APHA may serve a notice

either requiring its completion or prohibiting the keeping of livestock susceptible to the disease in question and the entry onto the premises (or parts of the premises) unless permitted subject to licensing and biosecurity conditions.

Vaccination

- A286. Published control strategies outline the policy on vaccination for each disease. In general, vaccination may be considered as a control tool as part of wider disease control strategies. This can help move towards the overall goal of eradicating the disease where it is practical to do so, and the full benefits outweigh the wider costs. In the short term, vaccination can help slowdown, reduce and potentially prevent disease spread.
- A287. At the same time, vaccination can carry with it significant costs for industry and government, while having wider implications for factors such as effective monitoring of disease spread, trade and movements of animals. Vaccination is disease specific, and vaccines may not be available for all exotic notifiable diseases. There will be a range of technical issues to consider as well as many wider issues to balance the costs and benefits of deploying vaccine. Any decision therefore to deploy vaccination as a disease control measure requires very careful consideration.
- A288. Emergency vaccination plans and control strategies have been prepared for FMD detailing the procedures and vaccination strategies that would be adopted if a decision to vaccinate was taken. A vaccination response might also be considered for other diseases including, but not limited to, rabies, CSF, BTV, LSDV and AHS.

Preparations in England

- A289. Defra has established a number of contractual arrangements to provide emergency vaccination services, including contingency supplies of vaccine for certain diseases. A range of potential providers are included, whereby one or more companies could be appointed as vaccination contractor to carry out vaccination within England. This includes the potential to undertake vaccination for FMD, LSDV, CSF and for any other diseases for which vaccination is required, under the direction of APHA.

Foot and mouth disease emergency vaccination plan

- A290. Government will consider from the outset of any outbreak of FMD whether vaccination as an extra control measure would help to control and eradicate the disease in the circumstances relating to the specific outbreak situation.
- A291. Detailed instructions and procedures will be issued to the vaccination contractor outlining their roles and responsibilities.
- A292. APHA has also agreed a health and safety policy which incorporates the need for the contractor, their employees, sub and external contractors to comply with best practice and all relevant provisions, whether statutory or otherwise, relating to health and safety at work, including biosecurity protocols. Specific health and safety training must be provided for all staff at the time of call off.

FMD vaccine supplies

- A293. In the event of an FMD outbreak and following detailed analysis of the circulating virus, The Pirbright Institute will advise whether there is a suitable vaccine that could prove effective against the field strain.

FMD lay vaccination

- A294. To ensure that emergency vaccination can be implemented without delay in an outbreak, suitably trained and competent non-veterinary personnel are permitted by law to handle and administer FMD vaccine. Legislation specifically permits vaccine to be supplied to and administered by lay vaccinators who meet specified eligibility criteria as defined in the Veterinary Surgery (Vaccination Against Foot-and-Mouth Disease) Order 2004.

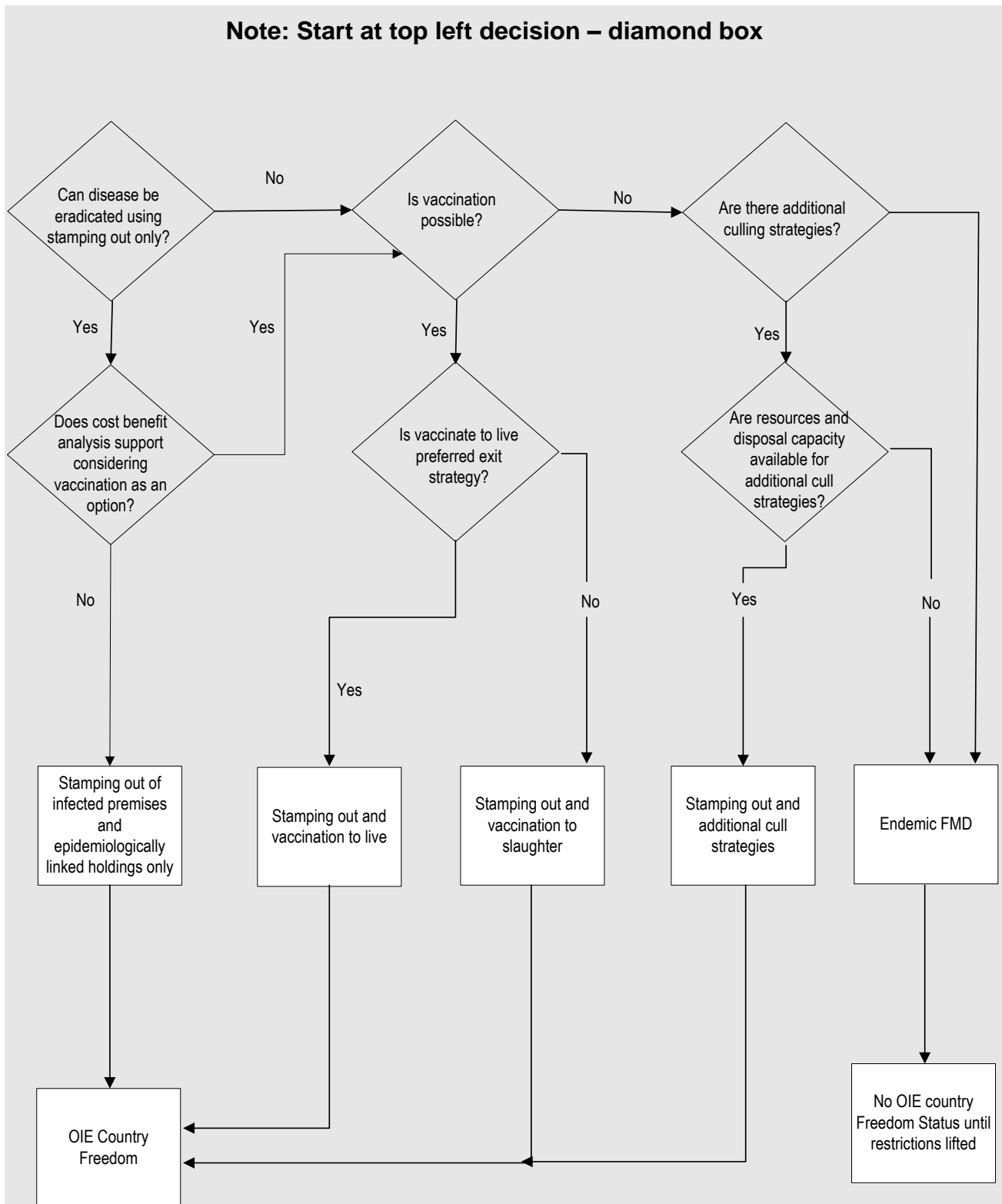
FMD vaccination process

- A295. In the event of a confirmed outbreak of FMD, APHA may appoint a vaccination contractor. Once appointed, APHA will liaise with the contractor to convey the scope and policy of any vaccination project to the contractors and confirm the approach to be taken (including the vaccine delivery arrangements). APHA will also keep the contractors informed of all suspect and confirmed cases as they occur and inform them of any changes which may affect field operations.
- A296. If the decision to vaccinate is taken, a vaccination zone will be declared and a vaccination SZ, of at least 10 km in width, surrounding the vaccination zone will be designated. The contractors will be supplied by APHA with a complete

list of holdings within the vaccination zone and identify those with animals that require vaccination.

- A297. The contractors will then contact keepers to arrange pre-vaccination visits by veterinary surgeons appointed by them for this purpose. The visits will check animal handling facilities and will also inspect animals for clinical signs of FMD.
- A298. Where clinical signs of FMD are identified, the teams will be withdrawn from the farms and the agreed biosecurity protocols must be followed. Vaccination teams would then enter a 72-hour quarantine period before being redeployed.
- A299. Where FMD is not found during the pre-vaccination visit, vaccination teams will be deployed to carry out vaccination, record animal identification numbers, collect and return records. Vaccinated animals will be ear-tagged in a manner outlined in the FMD (control of vaccination) (England) regulations 2006 and advised by Defra.
- A300. For identification purposes, vaccinated cattle will have their details recorded on the cattle passport and their current premises noted on the APHA Notifiable Disease Outbreak Management System (NDOMS).

Figure E – Decision tree for the use of emergency vaccination during an outbreak of FMD



Classical swine fever vaccination

- A301. Vaccination is not a routine control measure. The Diseases of Swine Regulations 2014 provides that no person shall administer a CSF vaccine to any pig unless authorised to do so by Defra's SoS.
- A302. In exceptional circumstances emergency vaccination may be considered. Triggers might include a dramatic increase in the number of premises being confirmed each day or in areas with a high density of pigs during a prolonged outbreak. A decision to vaccinate needs to be approved by the SoS, therefore, detailed operational arrangements are not in place for a wide scale CSF emergency vaccination programme in the event of an outbreak in GB.

CSF emergency vaccination plan

- A303. In accordance with the provisions of CSF Directive 2001/89/EC, the following sets out arrangements for consideration of an emergency vaccination programme.
- A304. Both the directive and our domestic 2014 regulations permit the use of vaccination as a disease control measure in certain circumstances. The primary disease control measure that would be adopted would be a policy of depopulating infected and dangerous contact (DC) pigs. The option to use vaccination would be considered regularly by the CSF expert group at its meetings and would take account of annex VI of directive 2001/89/EC which lists the main criteria and risk factors to be considered for the decision to apply emergency vaccination in pig holdings.
- A305. A decision to use emergency vaccination would therefore be considered in any of the following circumstances:
- disease had become well established in the country and there was a dramatic increase in the number of premises being confirmed each day
 - disease was established in an area with a high density of pigs such as East Yorkshire or Humberside
 - the predictions from disease modellers and epidemiologists suggest that it would take more than 2 months to bring the outbreak under control
 - there was a shortage of rendering or incineration capacity such that infected animals or other animals could not be processed after depopulation

- A306. If emergency vaccination was to be adopted, the CSF expert group would consider the extent of the geographical area in which the emergency vaccination is carried out and would make recommendations to the CVO. They would also make recommendations on the categories of pigs to be vaccinated and the duration of the vaccination campaign. The latter would be affected by the number of premises to be vaccinated and the availability of vaccine.
- A307. In evaluating potential vaccines, it is imperative that the vaccines used are effective and rapid at stimulating a good protective immunity in the vaccinated animal. It is also important that a vaccinated animal should not become infected when challenged by a field virus as such an animal may not develop clinical signs but be infectious to other animals as the field virus replicates and contaminates the environment. It is also essential that a vaccine should prevent congenital infections via the trans-placental infection of field virus which could result in persistently infected carriers and shedders of field virus.
- A308. The choice of vaccine to be used would be reviewed by the CSF expert group as they assess evidence relating to new marker vaccines that are produced and marketed and have tests which can effectively differentiate between affected and vaccinated animals.
- A309. A CSF vaccination response would most likely be delivered by contractors following a similar process as for FMD.

Lumpy skin disease Vaccination

- A310. The routine preventative vaccination for LSDV is usually prohibited in the UK, but the Secretary of State may approve an emergency vaccination programme where the virus is already present and provided that it is supplementary to the control measures already detailed above. Preventative vaccination programmes can also be considered if there is a very high risk of incursion through other routes, for example from a neighbouring country.
- A311. The vaccine against LSDV is a live-attenuated vaccine. The use of it would place restrictions on the international trade of live animals and animal products from the vaccination zone for a minimum period of 8 months if vaccination is used preventatively without any incursion of the disease, and 14 months if it is used as a disease control measure following an outbreak. It would therefore potentially lengthen the period required for the UK to regain disease freedom.

However, without vaccination LSDV could rapidly spread and become endemic in cattle.

- A312. In the event of an LSDV outbreak, the CVOs of the UK administrations will consider the merits of vaccination. Industry groups would be consulted prior to any recommendations being put to ministers to vaccinate. Where vaccination is considered a necessary and proportionate disease control measure, the UK CVO will inform the SoS of our intention to commence an emergency vaccination programme.
- A313. In all instances where vaccination is considered, we would aim to implement the smallest possible vaccination zone required in order to stop the onward spread of disease.

LSDV Vaccination Plan

- A-314. The principles for LSDV vaccination are set out in the [Lumpy Skin Disease Control Strategy for Great Britain](#).

Restoration of disease freedom and recovery

A314. Our response to a disease outbreak does not end when disease has been stamped out. Stamping out disease quickly and restoring disease freedom is vital. The sooner disease is stamped out and disease freedom restored, the sooner normal trade can commence. However, this can be a lengthy process with third countries. It is essential for both government and stakeholders to work on minimising the impact of disease on trade from the start of an outbreak. We also need to work together to minimise the impact on the rural and wider domestic economy.

WOAH terrestrial animal disease code

A315. WOAH, on behalf of its member countries, produces the terrestrial animal health code (the code) which is formally adopted at the annual general assembly of all delegates of WOAH members. The aim of the WOAH terrestrial animal health code is to assure the sanitary safety of international trade in terrestrial animals (mammals, birds and bees) and their products. This is achieved through the detailing of health measures to be used by the veterinary authorities of importing and exporting countries to avoid the transfer of pathogens to animals or humans, while avoiding unjustified sanitary barriers. The code sets out, amongst other things, the detailed requirements to claim country freedom from particular animal diseases. These requirements can include specific surveillance requirements or minimum periods before freedom can be considered. The delegate member of the WOAH for the UK is the UK CVO.

A316. The code is an integral part of the regulatory system established by the World Trade Organisation (WTO) for trade in animals and their products. Veterinary authorities are encouraged to base their import health measures on the WOAH standards. In the EU many of the current measures are also based on the WOAH standards. In the TCA the UK and the EU have agreed to recognise the concept of zoning and other WOAH standards.

Regionalisation (or zoning)

A317. Depending on the disease situation it may exceptionally be possible, following a risk assessment, to divide the country into areas defined as free of disease,

low risk and high risk. Regionalisation (or zoning) is dependent on a range of factors including the epidemiology of the disease, accurate up to date information on its geographical distribution and seasonal trade patterns.

Laboratory surveillance may be required to demonstrate freedom from disease in a region.

- A318. Proposals to regionalise must be acceptable to the other UK administrations and its trading partners. Regionalisation would also impose restrictions on animal and animal product movements to maintain the region's disease status. This may have an adverse economic effect that outweighs any short-term advantage of regionalisation and economic considerations must be considered when coming to decisions on regionalisation.
- A319. In the case of products, it may be possible to negotiate the continuation of exports from the 'restricted' area, with certification for products produced before the incursion of disease (certified to provide assurance that they have been stored separately and have not been contaminated) or products which have been treated to inactivate the pathogen (with the treatment certified).

Compartmentalisation

- A320. Compartmentalisation is a concept that allows companies, in the event of a disease outbreak, to continue to export from affected regions to countries who recognise this concept and accept how it is applied in the UK. Companies must meet the conditions of [the GB Compartment Scheme](#), which is a voluntary scheme for companies producing high-value breeding stock of the main commercial poultry species and includes strict biosecurity measures and the requirement for premises to be approved by government. If you have a suitable poultry farm you can [apply for approval or re-inspection for compartmentalisation](#).
- A321. The UK-EU Trade and Cooperation Agreement (TCA) provides the opportunity for the UK and EU to cooperate on the concept of compartmentalisation, as set out in Chapters 4.4 and 4.5 of the WOAHP Terrestrial Animal Health Code.

Restocking

- A322. The controlled restocking of animals onto premises which have had affected animals depopulated and disposed of is an integral part of the recovery phase.

Depending on the disease, restocking is not permitted until a defined number of days have elapsed following final (secondary) cleansing and disinfection. With certain diseases there is controlled restocking where limited numbers of animals are allowed on the premises (sentinel animals) and observed to ensure disease is no longer present. In some cases, samples are taken from these sentinel animals for laboratory testing to ensure that they have not developed disease and to confirm that disease no longer exists on the premises before all restrictions are lifted and the premises allowed to restock completely. For some diseases, in the event of prolonged outbreaks or if final C&D is not possible the restocking of a premises may not be possible for twelve months.

Scaling down – debriefing and lessons identified

A323. As part of the recovery phase, it will be necessary to scale back on resources once certain parts of the outbreak or incident management response are completed. The UK CVO (or UK DCVO), the director for animal and plant health and welfare, the chief executive of APHA and head of OCG will decide when it is appropriate to de-escalate and reduce the battle rhythm. When operations are at a sufficiently low level, they will agree the timing of the closure of outbreak structures.

Debriefing and lessons identified

A324. At the conclusion of a disease outbreak, it is good practice to conduct debriefings with those involved to capture experiences. The aim is to identify and evaluate where improvements to disease response capability, processes and organisational structures for managing an outbreak of exotic notifiable disease can be made. The feedback from relevant personnel departments, operational partners and stakeholders should be collated in a lessons identified report. The report will provide the framework for improvements of the response to and management of disease outbreaks and the review of contingency plans and operational instructions.

Restoration of normal operations and recovery

Restoration of trade

- A325. For EU trade, when a disease is detected, restrictions are put in place in line with the obligations in the SPS Chapter of the UK-EU Trade and Cooperation Agreement. Once the disease control zones around an infected premise have been lifted, enhanced surveillance will be carried out to prove that disease is no longer present in that area. Exports to the EU can resume once this surveillance has been completed with favourable results, and any additional safeguard measures imposed on the UK by the EU during the outbreak have been lifted. The TCA's SPS Chapter has a commitment to expedite the recognition of the disease status when the status has been recovered after an outbreak.
- A326. For trade with non-EU countries, exports may be adversely affected after the disease outbreak has been tackled and disease freedom has been declared. Securing the resumption of exports can be protracted and challenging, often involving detailed technical and political negotiations, inward inspection visits, and discussions to agree revised certification rules. Exporters should not therefore assume that declaration of disease-free status automatically means that non-EU third country import requirements will revert to those that existed before the disease outbreak. They should contact the APHA Centre for International Trade for information on the latest certification requirements for exports to non-EU third countries.

Rural and wider economic recovery

- A327. During an outbreak, consideration of the wider impacts of disease control measures on rural communities, individuals and businesses, the environment, tourism, industry, agricultural sectors and LAs will be required. The relevant teams in Defra, APHA and other government departments and will take advice from local recovery coordination groups, stakeholders and partners to ensure action is taken where necessary.
- A328. Depending on the nature and scale of the outbreak, any recovery and support measures will need to be identified at an early stage and the need for such measures will be continually assessed as the outbreak develops. Support may be targeted at either specific business sectors or geographic areas where

trade, movement of goods, services or people may have been restricted or public perception of the impact of the outbreak has or will have a significant impact (such as potential food safety concerns, or that rural areas not open or accessible).

- A329. Recovery can take years, depending on the disease outbreak, and involve social and developmental recovery in the region as well as getting individual farms and trade back to normal.

Part B – Emergency preparedness

Introduction

- B1. This part of the Plan focusses on how government maintains its resilience and how it prepares between outbreaks to respond to exotic disease outbreaks. Further information on how government will manage an outbreak can be found in Part A of the plan. The annex provides a summary for animal keepers with a focus on the actions of animal keepers to prevent and report disease, with an overview of how government responds.

Working in partnership – awareness and responsibility sharing

- B2. Defra works with stakeholder organisations to develop control strategies for the diseases of most concern and publishes biosecurity advice for animal keepers (see [individual diseases](#) for details). There are also a number of industry initiatives to raise awareness and improve the reporting of suspicion of disease, prevent and respond to disease outbreaks.
- B3. In the absence of a disease outbreak, government routinely conducts exercises which involve industry representatives. Animal and Plant Health Agency (APHA) engages with operational partners and stakeholders as part of their on-going emergency preparedness arrangements and, where possible, includes them in the planning and implementation of exercises.
- B4. “Core groups” of industry representatives have been established to assist governments in developing control policies for the diseases that are of most concern. Members of a core group attend in a personal capacity rather than as representatives of an industry body or organisation. As well as providing useful insights during policy development, relevant core groups are also informed when there is a strong suspicion of disease. Stakeholders are informed as soon as disease is confirmed so they can help government to disseminate relevant messages.
- B5. The National Animal Health and Welfare Panel (NAHWP) and the Association of Chief Trading Standards Officers (ACTSO), working in association with

Defra and APHA have produced templates for Local Authority (LA) exotic notifiable animal disease contingency plans. The templates are reviewed on an annual basis to ensure the guidance remains up to date, to reflect lessons learnt from disease outbreaks and to take on board feedback from LAs and other stakeholders. The templates are available via ACTSO to its members and allows them to further document and tailor their response plans to suit their local operational command and control structures.

Pathways for introduction of disease

- B6. There are many ways in which disease may enter the country. Avian Influenza (AI), for example, circulates in the wild bird population which may spread the disease to poultry and other captive birds. Diseases such as bluetongue, are spread by biting midges (vectors). Some diseases, such as FMD, can be spread by direct animal contact and also in viral plumes carried by wind. Many of these pathways can only be managed by maintaining high standards of biosecurity. For airborne, and some vector spread diseases, some biosecurity measures and vaccination (if available and deemed appropriate) can help protect animals from infection.
- B7. One of the most significant pathways or potential routes of entry for exotic diseases such as foot and mouth disease (FMD) and classical swine fever (CSF) is trade, both legal and illegal, of live animals and products of animal origin from areas of high disease risk. Legislation and health certification requirements are in place to prevent unhealthy animals or products from unhealthy animals from entering the UK or being moved for trade purposes. Additionally, controls such as standards for biosecurity and a bans swill feeding and feeding kitchen scraps to animals further reduce the risk of outbreaks.
- B8. The UK Office for Sanitary and Phytosanitary Trade Assurance co-ordinates SPS trade assurance in the UK to ensure existing and new trading partners continue to meet GB's import conditions for animal health disease standards, and food and feed safety.
- B9. There is a high-risk period between the introduction of an exotic disease and detection of the first case during which infected but undiagnosed animals may

be moved or sent to slaughter in good faith. Standstill periods, whereby animals are not allowed to move off a premises for a set number of days after animals have been moved on, significantly reduce the risk of undetected disease spread during this period, but vigilance and early reporting of suspicion of any disease is essential.

- B10. A range of horizon scanning forums exist such as the monthly Ministerial Biosecurity Meeting (MBM). Defra monitors the [international disease situation](#) and may publish preliminary outbreak assessments when there is a new outbreak in another country. Defra may publish a qualitative risk assessment when there is a new disease incident in an EU member state, a country bordering the EU or in one of our third country trading partners. When a significant risk is identified, government will discuss with relevant stakeholders and may put in place measures to mitigate risks to animal health or public health, including additional surveillance or post import testing.
- B11. The World Animal Health Information System ([WAHIS](#)) interface maintained by the World Organisation for Animal Health (WOAH) also provides information of interest to stakeholders, including information by country such as disease reports.
- B12. Following a disease outbreak within the territory of a trading partner, the UKO will identify, analyse, and coordinate the assessment of any risks associated with the traded commodity, if suitable, the regionalisation implemented by the affected trading country will be recognised and if necessary, additional import restrictions and health certification requirements will be imposed. Through its coordination function, the UKO will engage with the DAs and FSA or FSS (in the event of a food safety risk being identified).
- B13. Any Market Access Requests for trade in new commodities is first risk assessed by the UKO, and audits conducted to validate the disease control conditions in place to mitigate the incursion of disease through import pathways.

Readiness and resilience

Defra emergency preparedness

- B14. The Exotic Disease Policy Response Team (EDPRT) is responsible for developing, implementing and maintaining fit-for-purpose control strategies for the main exotic notifiable diseases in preparation for an outbreak or incident. This involves taking a risk-based approach to policy development, whilst making best use of available evidence and expertise, and using cost benefit analysis to inform policy decisions. This ensures there is an appropriate legislative framework and underpinning measures including restriction notices and declarations of movement restriction zones (such as protection and surveillance zones). The team also develops and maintains stakeholder relationships and promotes the sharing of responsibility through core groups of stakeholders. This is in addition to working closely with delivery agents and devolved governments. APHA takes the lead in undertaking veterinary risk assessments and issuing movement licences to allow a swift and effective risk-based response to disease outbreaks and incidents.
- B15. The team has trained individuals who can respond to a disease emergency and undergoes regular testing of its capabilities. As well as routinely working with APHA contingency planning resources, the team works with resilience colleagues across Defra who deal with other national risks. The team works in line with established integrated emergency planning processes to mitigate the risks of exotic animal disease: anticipating and assessing these risks, preventing as far as practicable their occurrence, preparing our ability to respond in line with this contingency plan, and enabling recovery and learning. The latter is a continuous process with lessons identified from a range of sources: post-exercise and post-outbreak learning, as well as wider inquiries such as the UK Covid inquiry.

APHA emergency planning and operational instructions

APHA Head of Field Delivery (England) (HoFD)

- B16. The HoFD has a role in ensuring that APHA is prepared to respond to an outbreak or incident of exotic notifiable diseases of animals.
- B17. The HoFD has responsibility for operational preparedness to deal with disease outbreaks which might be small and localised or part of a much larger (national or international) disease emergency. They are also responsible for building and maintaining effective relationships with the local livestock or food chain sector as well as other parts of the public sector delivery chain including Local Resilience Forums (LRFs), police, LAs, UK Health Security Agency (UKHSA), Natural England (NE) and the Environment Agency (EA).
- B18. Between outbreaks the HoFD informs policy development through feeding back intelligence on issues or practices which could impact on disease preparedness, risks and handling.

APHA Resilience and Technical Advisors

- B19. APHA Resilience and Technical Advisors play an important role in coordinating contingency planning activities. They are responsible for maintenance of local plans and procedures and for advising the local management team on readiness and resilience.
- B20. Their primary responsibilities are:
- to ensure that the local team is always at the required state of readiness to respond to the initial stages of an outbreak and has the resilience to deal with emergencies caused by animal diseases and situations where animal welfare is in jeopardy as a consequence of other types of emergency
 - to develop and maintain local plans and procedures for responding to outbreaks and incidents of exotic notifiable diseases in animals or other disruptive challenges
 - to oversee the development of appropriate skills within field teams to ensure resilience, capability and capacity to effectively invoke and implement emergency response plans

- to maintain close links with and be the single point of contact for operational partners, including LRFs

Local emergency planning

- B21. APHA is fully engaged in all aspects of emergency planning and incident response related to outbreaks of exotic notifiable diseases of animals. The main objectives of this work are to ensure that there is a complete understanding of roles and responsibilities, and that the disease control structures and processes are aligned with the well-established emergency response structures that may be required to manage the wider consequences of an animal disease outbreak.
- B22. The principal mechanism for multi-agency co-operation under the Civil Contingencies Act is through LRFs. Although APHA is not a statutory responder under the provisions of the Civil Contingencies Act, in practice LRF membership often expands to include all relevant responders (such as NE and APHA) and APHA actively engages with individual responders and chairs of LRF to maintain the strong links that it has developed.
- B23. The LRF is a forum for bringing together all the statutory responders (responders with specific duties defined under the Civil Contingencies Act) within a local police area for the purpose of facilitating co-operation to fulfil their duties under the Civil Contingencies Act. The LRF does not have a separate legal identity, powers to direct their members, or an incident management role, although the chair often becomes the chair of the Strategic Co-ordinating Group (SCG) if one is formed. LRFs and SCGs have an important role in managing the wider consequences of animal diseases.
- B24. The purpose of the LRF is to ensure effective coordination of those duties under the Civil Contingencies Act that need to be developed in a multi-agency environment. In particular, the LRF process includes:
- compilation of agreed risk profiles for the area, through a community risk register
 - a systematic, planned and co-ordinated approach encouraging statutory responders, according to their functions, to address all aspects of policy in relation to:
 - planning for emergencies

- planning for business continuity management
 - publishing information about risk assessments and plans
 - arrangements to warn and inform the public
 - other aspects of the civil protection duty, including the promotion of business continuity management by LAs
 - support for the preparation, by some or all, of its members of multi-agency plans and other documents, including protocols and agreements and the co-ordination of multi-agency exercises and other training events
- B25. The [national risk register](#) provides further details of the exotic notifiable disease outbreak risks in animals for which LRFs need to review and assess the local impacts. The risks assessed as being significant will need to be included within the community risk registers. APHA is engaged in this process and can help with information on the density of livestock and with assessing the impacts on local communities.

Operational instructions

- B26. APHA and Defra have well developed operational guidance and desk instructions that are used by staff involved in the response to an outbreak of exotic notifiable disease of animals. They provide direction and guidance on the many tasks involved in the outbreak response, ensuring that there is a consistent approach taken.
- B27. Operational instructions are reviewed regularly and updated as necessary. They reflect current best practice in relation to dealing with a disease investigation and disease outbreak response.

Training

- B28. APHA is responsible for designing and delivering a comprehensive range of business focused training for veterinary, technical and scientific areas. Business areas assess training needs and work to develop an annual programme of training. This approach supports the development of bespoke solutions that meet business needs. Defra holds details of policy staff across the organisation who will be called on during an outbreak and has an ongoing development programme to maintain this capability.

APHA field veterinary staff

B29. All new field veterinary entrants receive general and specific training related to their work areas and on exotic notifiable disease procedures. Veterinary staff also have access to a database of disease profiles covering disease briefing, decision support, ranking and risk assessment (D2R2). Selected individuals attend specific relevant continuing professional development training, for example in epidemiology. APHA holds courses as required, to ensure an adequate resource of trained staff.

APHA technical staff

B30. All new technical staff receive background in animal disease awareness which covers the specific roles they may perform in a disease outbreak. There is a programme of practical and classroom-based training for technical staff identified to take on the role of case officer, including training for those involved in poultry depopulation.

APHA staff involved in finance or procurement

B31. Finance staff are trained to use all appropriate systems to support the financial management of the outbreak from the initial financial decisions and all the subsequent financial information.

B32. They are also trained to set up the appropriate files to capture financial information that will support any claim to both the European Commission (EC) and Her Majesty's (HM) Treasury and also provide timely financial management information to senior management.

B33. Defra group commercial and APHA Contract Management Team provides regular training sessions for their own procurement staff that may be required to provide support during an outbreak.

APHA administrative staff

B34. Staff are involved in a programme of training designed to equip them with the skills and knowledge to provide administrative support during an outbreak situation and to support the requirements for finance and management

information. Additionally, there is exercising of the contingency plan and procedures.

APHA administrative, field and technical staff

- B35. Disease control centres will require staff that are able to take up positions on confirmation of disease. Posts have been identified together with responsibilities and working instructions.
- B36. Administrative, field and technical personnel take part in regular contingency exercises. This is part of their job description and work objectives.

Veterinary Delivery Partnership (VDP) Official Veterinarians

- B37. The Veterinary Delivery Partnership (VDP) is an agreement between government and veterinary companies for the supply of a flexible package of veterinary services. Under the VDP, providers who are contracted to provide tuberculosis testing services to England and Wales are also required to supply emergency veterinary personnel in the event of an outbreak.
- B38. As part of the VDP, Official Veterinarians (OVs) would be called upon to undertake roles alongside permanent APHA veterinary staff within a defined timeframe. On appointment there is a specific training programme for OVs, this includes:
- an induction into APHA's management of outbreaks of exotic notifiable disease of animals
 - awareness and use of the APHA operational instructions
 - establishment of disease control centres and forward operational bases

Exercises

Local exercises

- B39. APHA has a programme of coordinated animal disease exercises in order to refine and demonstrate the agency's emergency preparedness to deal effectively with outbreaks of exotic notifiable diseases of animals. Each field team takes part in at least one full-scale exercise per year which will involve

the participation of operational partners and stakeholders. The programme identifies the diseases to be exercised to ensure all capability can be assessed. The actual locations of exercises remain a decision for the HoFD in conjunction with local operational partners and stakeholders.

- B40. Each exercise is assessed, and an exercise evaluation report produced annually. These reports are used to highlight and promote best practice and lessons identified and are used to review and update contingency plans as appropriate.
- B41. APHA is also involved in supporting wider exercising of animal disease response plans with partner agencies at the LRF and on an individual organisation basis.

UK/GB exercises

- B42. The FMD Order 2006 requires government to undertake national exercises to test the government's capability to respond to an outbreak of FMD. Exercise London Plane was a national tabletop exercise with supporting workshops which was held late in 2023 and continued into early 2024. The exercise tested government's response capability for concurrent outbreaks of FMD and HPAI across England, Scotland and Wales, and its implications on Northern Ireland
- B43. Exercise Blackthorn was the most recent UK wide live-play exercise - involving Defra, SG, WG, DAERA, APHA and their associated operational partner and stakeholder organisations. Exercise Blackthorn tested APHA's response to a significant outbreak of FMD. Lessons learned from Exercise Blackthorn have been published on [gov.uk](https://www.gov.uk)

Assurance

Emergency Readiness Management Assurance Scheme (ERMAS)

- B44. The ERMAS is a framework tool used to enable APHA to monitor and confirm the extent to which the Agency can effectively mount an initial response to disease outbreaks. There are two components:
- B45. ERMAS1 - measures the readiness of APHA's field services to operate in response to an animal disease emergency. ERMAS also seeks to assure that plans and procedures are in place to allow the business transition into an effective disease response mode, utilising the structures described in part A of this plan.
- B46. ERMAS2 - measures the readiness of APHA's customer service centres to provide outbreak surveillance, licensing and tracings functions that support the actions of field services.
- B47. Assessments occur annually and the framework tool is regularly updated to account for changes to business processes or delivery models.
- B48. APHA also administer the Disease Response Capability Assessment (DRCA) on behalf of Defra. The DRCA asks parts of APHA with a defined statutory outbreak response (for example Laboratory Services, IT services and Operational Partners) to determine their confidence in their capacity and capability to respond to varying outbreak scenarios.

Equipment and stores

Provisions of stores and equipment at national level

- B49. APHA Weybridge has stores of equipment to enable the agency to carry out its routine duties within defined time limits of resupply. The normal stocking levels at APHA Weybridge would provide for the initial requirements of an outbreak of animal disease until emergency contracts with suppliers take effect. APHA also has a national network of stores facilities.

Local minimum stocking levels

B50. APHA have stores at a number of offices that hold or have immediate access to sufficient equipment to deal with disease cases in the first 48 hours, including provision for equipping additional veterinary personnel. Stock levels are managed by designated staff, who have day-to-day responsibility for monitoring availability and serviceability of stores. A stock control system is in place to allow for mutual support across APHA.

Laboratory capacity

B51. The Disease Emergency Response Committee (DERC) has a specific remit to ensure that sufficient laboratory facilities for the diagnosis and surveillance for exotic notifiable diseases of animals are available during outbreaks and other surges in demand. The committee is constituted from representatives from APHA, The Pirbright Institute, Defra and representatives from Scotland, Wales and Northern Ireland. Where APHA has national responsibility for screening and or confirmatory testing for the disease in question, or where testing for specified diseases has been delegated to APHA by the national reference laboratory, a laboratory emergency response team will be commissioned to coordinate and implement the laboratory contingency plans.

B52. APHA Weybridge provides the diagnostic and surveillance testing service for a number of exotic notifiable diseases and is the national reference laboratory for Newcastle disease (ND), AI, rabies, CSF, contagious agalactia, equine infectious anaemia, equine encephalomyelitis, West Nile virus, dourine and glanders.

B53. The Pirbright Institute is the national reference laboratory for FMD, African swine fever (ASF), swine vesicular disease (SVD), BTV, epizootic haemorrhagic disease (EHDV) peste des petits ruminants (PPR), rinderpest, African horse sickness (AHS), lumpy skin disease (LSDV) and other ruminant pox viruses.

B54. Contingency surge capacity testing, in the event of a disease outbreak, is provided by APHA Weybridge. Serological testing capacity is provided on a contingency basis of up to a maximum 80,000 samples per week. The laboratory would be ready to start contingency surge capacity testing within four days of notification with a capacity of: 5,000 tests in week 1; 10,000 tests

in week 2; 20,000 tests in week 3; 30,000 tests in week 4; and building to full capacity of 80,000 tests per week at week 8.

Staff resourcing and finance

Government veterinary resources

B55. Veterinary staff from APHA, Defra and other government departments (OGDs) will provide the initial emergency response capability.

Non-government veterinary personnel - emergency veterinary personnel

B56. As part of the VDP contract, 100 experienced OVs are available to support the outbreak response. In the event of an outbreak of exotic notifiable diseases of animals, these OVs would be called upon immediately to undertake roles that would otherwise be undertaken by permanent APHA veterinary staff.

Non-government veterinary personnel – temporary staff

B57. Non-government veterinarians may be engaged on temporary contracts to work as Veterinary Inspectors (VIs). This may include private veterinary practitioners and retired government veterinarians.

Overseas government staff

B58. The International Animal Health Emergency Reserve (IAHER) agreement was most recently signed in 2016 with Ireland, USA, Canada, Australia and New Zealand to provide staff covering a range of disciplines (including veterinary, technical, laboratory, emergency planners and logisticians) in the event of an outbreak of disease.

B59. An operations manual details the activation and deployment processes of the IAHER and was tested in an international, real-time simulation exercise in 2016 in which all signatory countries participated. An evaluation report of the exercise acknowledged the value of the agreement and made recommendations for improvements.

Technical, administrative and policy staff

- B60. Staff from APHA, Defra and OGDs will provide the initial emergency response capability. If necessary, during an outbreak of exotic notifiable diseases of animals, the chief executive of APHA and the director for animal and plant health and welfare will seek Defra Executive Committee (ExCo) authority to require the release of further staff from Defra and Defra agencies to work on emergency duties. As appropriate, the ExCo will provide clear direction to Defra, its agencies and work groups, in order that non-essential staff can volunteer their services and be released quickly. Defra has arrangements in place which identify suitable volunteers who could provide assistance to an emergency for core Defra policy roles. Those who have left the department but have said they would wish to assist in the event of an emergency may also be contacted.
- B61. APHA has systems in place that provide the means to identify personnel who have appropriate veterinary, technical and administrative skills and experience of disease outbreaks.
- B62. In conjunction with other policy areas, EDPRT can, if required, utilise a pool of surge and emergency volunteers with the right policy and support skills that have been pre-identified as being available to be immediately seconded to the NDCC response teams in the event of a disease outbreak.
- B63. OCG RDC, in conjunction with Defra Strategic HR, will lead on coordinating staff deployments in response to needs, with support from Shared Services Connected Limited (SSCL).
- B64. If necessary, Defra will also trigger the use of the cross-government memorandum of understanding on mutual aid and the redeployment of human resources. This relates to the loan of staff from OGDs.

Annex – Summary for animal keepers

Introduction

This publication summarises points from the Contingency Plan for Exotic Notifiable Diseases of Animals in England.

- C1. It explains how animal keepers can help prevent diseases in animals, what they must do if they suspect disease and how the government responds to disease. Further information on how we will manage an outbreak is available in Part A of the plan. Information on how we prepare between outbreaks is available in Part B.
- C2. The responsibility for preventing outbreaks of exotic notifiable disease, reporting suspicion and dealing with them when they do occur is shared between government, operational partners and stakeholders.
- C3. A number of particularly dangerous animal diseases which are not usually present in England are controlled by law – we refer to these as ‘exotic notifiable diseases’ in this plan.
- C4. Stakeholders include all those who may be affected by an outbreak of exotic notifiable disease. This includes the farming industry and rural businesses, as well as those keeping animals for any purpose, for example as companion animals or pets.
- C5. There are clear legal requirements on animal keepers (for example reporting notifiable disease, complying with any restrictions, maintaining any records required by law, undertaking and paying for final cleansing and disinfection). But there are also clear practical advantages for stakeholders and government alike when responsibility is shared.

Vigilance and biosecurity

- C6. As animal keepers you are responsible for the health and welfare of your animals. You should check and monitor for any signs of ill health.

These could be:

- changes in behaviour

- a loss of condition
 - lameness
 - stopping eating or drinking
 - vocalising more
 - developing skin or hide lesions
- C7. You should follow good biosecurity at all times, regularly check the health of your livestock, poultry and individual animals, and monitor them for changes in production. Reviewing production records can help you to detect disease early. If you are concerned about the health of your animals (including birds and companion animals or pets) you should consult your vet promptly.
- C8. The term biosecurity encompasses all measures that prevent or reduce the risk of disease entering or becoming established in kept animals, or from spreading once disease occurs. You should comply with import restrictions. Read our [biosecurity guidance](#) and a list of approved [disinfectants](#).
- C9. A number of industry-led initiatives can help you increase biosecurity on your premises. For example:
- The [AHDB Biosecurity Advice Link](#)
 - the [British Lion code of practice](#) for the egg industry
 - the [Equine Industry biosecurity](#) guidance
- C10. You should have your own plans so that you know what you would do if an animal disease is suspected or confirmed.

Animal keeper responsibilities

- C11. If you notice clinical signs in any of your animals, including companion animals, or a change in production causes you to suspect a [notifiable disease](#), you are required by law to report that suspicion to the Animal and Plant Health Agency (APHA) via the Defra rural services helpline on 03000 200 301.
- C12. If you are not sure about the significance of the signs you should discuss first with your own vet. If suspicion of a notifiable disease remains, you must make sure that APHA are notified promptly. Your own vet may seek a consultation with APHA as necessary.

Actions if disease is suspected or confirmed

On suspicion

- C13. When you report a suspected exotic notifiable disease to APHA, we (APHA) will assess your call. If appropriate, we will launch an official investigation and send a veterinary inspector (VI) to your premises to conduct a veterinary inquiry.
- C14. The purpose of the veterinary inquiry is to establish if disease is present, or may have been present, on your premises. If so, we need to find out for how long, where it may have come from, and where it may have spread to.
- C15. We will immediately put in place temporary statutory restrictions which the VI will confirm in writing when they arrive. In addition, we will specify the biosecurity requirements you must comply with. For example, you may need to provide a means of cleansing and disinfection (C&D) at the entrances and exits of the premises and buildings or warning signs at appropriate places.
- C16. We will prohibit the movements of animals to and from the premises. It is highly unlikely that we would license any movements at this stage. You will need to stop all visits to the premises (including regular visits such as fallen stock or pest control), except those that are specifically permitted under licence.
- C17. You will need a licence to move anything on or off your premises. You should discuss your licence requirements with our veterinary inspector (VI).
- C18. You must provide information required by official inspectors. You must help them in investigating and controlling disease. You may need to provide details of production records, and details of movements of animals and other things liable to transmit disease, on and off the premises.
- C19. The VI will advise whether footpaths should be closed on your premises.
- C20. These restrictions apply to all premises where disease is reported whether it's a farm or a private dwelling. We will adjust the restrictions as appropriate to the circumstances at the specific premises.
- C21. While carrying out the veterinary inquiry, the VI will conduct a clinical examination of your animals and an inspection of your production and animal

movement records. If disease cannot be ruled out at this stage, the VI will take samples for laboratory testing. In certain circumstances the VI may require animals to be humanely destroyed. The VI may impose further restrictions – you will need to make sure that you understand and comply with them.

- C22. Depending on the disease concerned the restrictions may apply to your whole premises or to individual animals. They will usually include a ban on the movement of susceptible animals on and off your premises. They may also include restrictions on anything else that is liable to transmit disease, such as meat, products, equipment, vehicles and manure.
- C23. We will leave the restrictions in place until we can rule out an exotic notifiable disease. If we confirm disease, then the restrictions will remain in place. The occupier of the premises is responsible for making sure that the restrictions are observed.
- C24. The aim of our restrictions is to prevent the spread of disease. There will inevitably be some disruption to normal business for those affected.
- C25. We may also declare a temporary control zone (TCZ) around a premises where we suspect disease. We are most likely to do this if we suspect diseases such as foot and mouth disease (FMD), highly pathogenic avian influenza (HPAI), bluetongue (BTV), classical swine fever (CSF), African swine fever (ASF) and African horse sickness (AHS). If your premises is within a TCZ, you will have to comply with the conditions and restrictions stated in that declaration, even if you do not suspect disease at your own premises.
- C26. You should have plans in place to deal with prolonged movement restrictions. Pressures on accommodation can arise quickly. This applies to farmed animals and domestic pets but is especially challenging in the pig and poultry sectors.
- C27. Further detail can be found in Part A (page 8) of the contingency plan, and also in our individual disease control strategies (pages 5 and 6).

On confirmation

- C28. If we confirm a notifiable exotic disease in England, Defra will take action – in partnership with operational partners and stakeholders to:

- stamp out the disease, so that we can regain our disease-free status which may involve the disease control measures described in this publication
- protect the health and safety both of the public and of those directly involved in controlling the outbreak
- keep the economic effects on the taxpayer, the public and the farming industry to a minimum

C29. Within its disease control objective, Defra aims to:

- keep to a minimum the number of animals that die or need to be humanely destroyed, whether for disease control purposes or to safeguard animal health and welfare
- balance adverse effects on animal health and welfare, the rural and wider economy, the public, rural communities and the environment

C30. For most diseases, we will do this by:

- taking action on the infected premises (IP) and other premises (contact premises) where disease is most likely to have spread from and to
- declaring movement control zones such as protection zones (PZ), surveillance zones (SZ) or restricted zones (RZ) as required by EU and national legislation. This includes animal controls and controls on animal products, taking into account the risk of disease spread. (In the case of FMD, the Great Britain administrations will immediately impose movement restrictions across the whole of Great Britain if disease is confirmed)
- restricting activities that might increase the risk of spread – for example there might be a ban on hunting or shooting
- considering banning gatherings of animals including shows or market
- considering export bans
- considering compulsory housing of animals susceptible to the disease
- investigating the origin of the disease and determining whether there has been further spread of disease from that source
- completing other surveillance to investigate possible further spread of disease

- C31. If disease is confirmed on your premises, you will need to continue to comply with the restrictions and measures put in place on your farm until the disease is stamped out and restrictions are lifted.
- C32. If your premises is located within a declared disease control zone, you must comply with the conditions and restrictions which apply within the zone. You may also be required to carry out additional biosecurity measures. You must watch particularly carefully for any signs of disease and report any suspicions immediately to APHA.
- C33. Further detail can be found in Part A (page 16) of the contingency plan and within our individual disease control strategies (pages 7 and 8).

Movement controls and licences

Licensing

- C34. If restrictions are in place, we may allow certain limited activities to take place using licences. Whether we do so will depend on the circumstances and will be subject to veterinary risk assessment and statutory requirements. These licences would set out conditions (veterinary inspection, cleansing and disinfection and monitoring) that you must comply with before, during or after the licensed movement. You must comply with restrictions and with all conditions in order to minimise the risk of spread of disease.
- C35. We will publish information about the latest disease situation and guidance on how to apply for movement licences on gov.uk. We will also publish information about changes to restrictions within zones.
- C36. Places which handle animals, animal products and waste can present a risk of spread of disease. They may need separate approval in order to ensure they operate good and effective processes to mitigate the spread of disease. This is detailed in the relevant control strategy and can include disease control approval of the operation of slaughterhouses, meat plants, hatcheries, egg packing, laboratories and other places.
- C37. Control strategies and legislation set out the minimum duration of zones and controls within them.

Welfare moves

- C38. You are responsible for the welfare of your animals. Where animals are suffering due to overcrowding, you may have to humanely destroy those animals; no compensation will be paid for any animals humanely destroyed as a result. In exceptional circumstances, we may consider arranging disposal (at your own cost).
- C39. Once we have put movement restriction zones in place, we will consider whether licences can be made available to permit certain essential movements for welfare purposes. This might cover cases like dairy cow movements for milking, movements to permit treatment by veterinary surgeons. In all cases it will be subject to assessment of the risk. Strict conditions will apply to these licences, ensuring such moves take place under suitable biosecurity arrangements. We will respond to requests for welfare moves as quickly as possible. We will explain our decisions clearly. You can find further information on movement restrictions in the disease specific control strategies (see Part A pages 7 and 8).

Regionalisation

- C40. We may be able to divide the country into areas defined as free of disease, low risk areas and high-risk areas. This would depend on the disease situation and our assessments of risk. We call this “regionalisation”. We would impose restrictions on animal and animal product movements based on protecting each region’s disease status. Further detail can be found in part A (page 75) of the plan.

Communications

- C41. For each outbreak or incident of exotic notifiable disease of animals, we make sure that we provide accurate, timely updates on the latest situation, as well as guidance for those affected. In the event of a disease outbreak, you should read our guidance on the [animal disease](#).
- C42. APHA specifically contact livestock keepers and veterinary practices using a combination of text messages (SMS) and email messages. Social media posts directing people to GOV.UK, GOV.SCOT or GOV.WALES for the latest

disease related information and guidance will be released as required. APHA may also distribute information packs to livestock premises within PZs and SZs set up to control livestock diseases. Livestock keepers are also encouraged to sign up to the [APHA animal disease alerts service](#).

C43. We may also use national stakeholder groups to communicate.

Depopulation

C44. For many diseases our policy is to quickly cull affected animals to prevent the spread of the disease. For livestock diseases, this may involve the depopulation (also referred to as culling) of whole herds of animals. For other diseases such as Equine Infectious Anaemia and Rabies, only single animals may need to be humanely destroyed.

C45. We may consider sparing certain limited categories of animals, such as rare species or breeds at risk, so long as this does not compromise our work to control the disease. You can tell APHA officials about any at risk breeds if they visit your farm or premises during a disease outbreak, but it is better if you send a completed [animal breeds at risk registration form](#) to APHA.

C46. We make decisions to spare on a case-by-case basis. A vet will carry out a risk assessment of the premises. There are no guarantees an animal or bird will be spared.

C47. If you keep animals from breeds which are on the breeds at risk list, you must have plans for what to do if there is a disease outbreak. The Committee's [guidelines on developing an exotic disease contingency plan for 'breeds at risk'](#) are available online.

C48. We arrange depopulation and dispose of affected carcasses. You are normally responsible for bio secure disposal of other materials such as bedding.

C49. Further detail can be found in Part A (page 60) of the contingency plan.

Valuation and compensation

C50. When an animal is destroyed in order to control an exotic notifiable disease, legislation sets out whether you are entitled to [compensation](#) and if so what rate that compensation should be paid.

- C51. Where the government need to pay you compensation, we will make sure that the animal is valued in accordance with the relevant laws. Depending on the disease, either:
- an accredited valuer will be used to value the animals
 - we will use valuation rate cards and a fixed table will be used
 - the amount of compensation payable may be set in law
- C52. Under certain disease legislation, animal owners may dispute our valuation.
- C53. Further detail can be found in Part A (page 64) of the contingency plan.

Cleansing and disinfection

- C54. Premises and potentially contaminated transport and equipment will need to be cleansed and disinfected. This will need to be done once the animals which may catch the disease have been destroyed, and their carcasses have been safely disposed of. We do this to prevent disease spreading from the premises. We also do this so that when the premises are re-stocked, the disease won't occur again.
- C55. We carry out preliminary disinfection as soon as depopulation is completed, and all carcasses have been removed. This is done at our cost.
- C56. You – as the occupier of the premises – are responsible for secondary and final cleansing and disinfection (and it's done at your cost). For most diseases, we will not allow restocking until this secondary cleansing and disinfection has been completed.
- C57. Further detail on cleansing and disinfection can be found in part A (page 65) of the contingency plan.

Compartmentalisation

- C58. Compartmentalisation is a concept that allows companies, in the event of a disease outbreak, to resume trade with member states and 'third countries' who have signed up to the scheme. Companies must meet the conditions of EC regulation 616/2009, which includes strict biosecurity measures and the

requirement for premises to be approved by government. If you have a poultry farm you can [apply for approval or re-inspection for compartmentalisation](#).

- C59. The UK-EU Trade and Cooperation Agreement (TCA) provides the opportunity for the UK and EU to cooperate on the concept of compartmentalisation, as set out in Chapters 4.4 and 4.5 of the WOAHA Terrestrial Animal Health Code.

Restocking

- C60. We may allow controlled restocking after appropriate cleansing and disinfection. We may allow a limited numbers of animals onto the premises (sentinel animals) which can be observed to make sure that disease is no longer present. In some cases, samples will be taken from these sentinel animals for laboratory testing. We do that to confirm that disease no longer exists on the premises before all restrictions are lifted and you are allowed to restock completely.
- C61. For other diseases – particularly if there are prolonged outbreaks, or if secondary cleansing and disinfection is not carried out – it may not be possible to restock a premises for several months.
- C62. Further detail can be found in the disease control strategies for each disease about restocking requirements.
- [Notifiable Avian Disease Control Strategy for Great Britain](#)
 - [Foot and Mouth Disease Control Strategy for Great Britain](#)
 - [Rabies Disease Control Strategy for Great Britain](#)
 - [Bluetongue Great Britain Disease Control Strategy](#)
 - [Disease Control Strategy for African and Classical Swine Fever in Great Britain](#)
 - [African Horse Sickness Control Strategy](#)
 - [Lumpy Skin Disease Control Strategy for Great Britain](#)

Vaccination

- C63. Our published control strategies set out our policy on vaccination for each disease. In general, we may consider vaccination as a control tool as part of

wider disease control strategies. This can help move towards the overall goal of eradicating the disease where it is practical to do so, and the full benefits outweigh the wider costs. In the short term, vaccination can help slow down, reduce and potentially prevent disease spread.

- C64. Vaccination can have significant costs for industry and government. Vaccination also has wider implications for effective monitoring of disease spread, and for trade and movements of animals. Vaccination is disease specific, and vaccines may not be available for all exotic notifiable diseases. We will carefully consider a range of technical and other issues in balancing the costs and benefits of deploying vaccine.
- C65. We have prepared emergency vaccination plans and control strategies for FMD covering what we would do if a decision to vaccinate was taken. We might also consider vaccination for other diseases including, but not limited to, rabies, CSF, bluetongue, lumpy skin disease and AHS.

Preparations in England

- C66. Defra has established a number of contractual arrangements to provide emergency vaccination services, including contingency supplies of vaccine for certain diseases. A range of potential providers are included: one or more companies could be appointed as vaccination contractor to carry out vaccination within England. This includes the potential to vaccinate for FMD, lumpy skin disease, CSF and for any other diseases for which vaccination is required, under the direction of APHA.

Trade, import and export

- C67. In the event of a disease outbreak or incident and depending on the disease, the UK may lose its WOA (World Organisation for Animal Health) international disease-free status. This may result in some countries no longer accepting animals, germinal products, animal products, meat or meat products, and milk and dairy products and other animal products from the whole country or parts of it. We may need to withdraw export health certificates until the situation has been clarified with the importing country.

- C68. Some animal products which are restricted from international trade may be traded within the GB market subject to certain controls and special domestic health marks being applied to the carcass or packaging. Such arrangements are specific to the disease and product to be moved.
- C69. Trade restrictions can remain in place for a long time, even after the disease has been eradicated and disease-free status has been re-established. Trade is important for the financial viability of the livestock and other animal sectors, so we will work closely with trading partners to make sure that safe trade can start again as quickly as possible.

Glossary

ABPR	Animal By-Products Regulations
ACRE	Action with Communities in Rural England
ACTSO	Association of Chief Trading Standards Officers
ADDI	Animal Demography and Disease Informatics (APHA)
ADPG	Animal Disease Policy Group
ADR	International Carriage of Dangerous Goods by Road (UN Regulation) Animal Health Policy and Implementation (Defra)
AFCD	Agri-Food Chain Directorate, DEFRA
AI	Avian Influenza
AHS	African Horse Sickness
AHWBE	Animal Health and Welfare Board for England
Animal Keeper	Anyone who keeps an animal or animals (birds are also covered by the term) for any purpose and includes livestock, pets, for example.
APHA	Animal and Plant Health Agency
ASF	African Swine Fever
BAR	Breeds at Risk
Battle rhythm	The daily cycle and timetable of meetings and other activities scheduled as part of the disease control and eradication process
BVA	British Veterinary Association
C&D	Cleansing and Disinfection

CDCC	Central Disease Control Centre
CGU	Containerised Gassing Unit
CLA	Country Land and Business Association
COBR	Cabinet Office Briefing Rooms
COBR Unit	formerly known as the Civil Contingencies Secretariat (CCS)
CRIP	Commonly Recognised Information Picture (CCS)
CPRE	Campaign to Protect Rural England
CSA	Chief Scientific Adviser (Defra)
CSF	Classical Swine Fever
CVO	Chief Veterinary Officer
D2R2	Disease Briefing, Decision Support, Ranking and Risk Assessment Database
DC	Dangerous Contact – these are animals of susceptible species where the risk of exposure to infection is considered to be very high.
DCVO	Deputy Chief Veterinary Officer
DAERA	Department of Agriculture, Environment and Rural Affairs (Northern Ireland)
Defra	Department for Environment, Food and Rural Affairs
DERC	Departmental (or Disease) Emergency Response Committee
DfT	Department for Transport
DG	Director General
DHSC	Department of Health and Social Care
DRT	Disease Reporting Team
EA	Environment Agency

EC	European Commission
EDPRT	Exotic Disease Policy Response Team (Defra)
EFRA	Environment, Food and Rural Affairs (Parliamentary Select Committee)
ERMAS	Emergency Readiness Management Assurance Scheme
ESA	Environmental Services Association
EU	European Union
ExCo	Defra Executive Committee
FABRA	Food chain and Biomass Renewables Association
FAnGR	Farm Animal Genetic Resources Committee
FCELG	Food Chain Emergency Liaison Group
FCDO	Foreign, Commonwealth and Development Office
Final (Secondary) Cleansing and Disinfection	After preliminary disinfection, the cleansing (including disposal of manure, bedding for example), degreasing, washing and disinfecting of premises to remove the infective agent, reduce the level of it, such that recrudescence will not occur on restocking.
FMD	Foot and Mouth Disease
FOB	Forward Operations Base
FSA	Food Standards Agency
GB	Great Britain
GCSA	Government's Chief Scientific Adviser
HoFD	Head of Field Delivery
HM	Her Majesty's
HR	Human Resources

IAHER	International Animal Health Emergency Reserve
IMT	Information Management and Technology
IP	Infected Premises
IT	Information Technology
LAAHF	Local Authority Animal Health Function
LA	Local Authority
LEPs	Local Enterprise Partnerships
LGA	Local Government Association
LEADER	Liaison Entre Actions De Development de L'Economie Rurale (EU funding scheme for rural development)
Livestock	All animals (including poultry) susceptible to exotic notifiable disease
LRF	Local Resilience Forum
DLUHC	Department for Levelling Up, Housing & Communities
NAHWP	National Animal Health and Welfare Panel
ND	Newcastle Disease
NDCC	National Disease Control Centre
NE	Natural England
NEG	National Experts Group
NEEG	National Emergency Epidemiology Group
NFU	National Farmers Union
NPCC	National Police Chiefs' Council
NSC	National Security Council

OAG	Outbreak Advisory Group
OCG	Outbreak Coordination Group
OGD	Other Government Department
WOAH	Office International des Epizooties (World Organisation for Animal Health)
OV	Official Veterinarian - Veterinary surgeons authorised to perform work on behalf of government.
PCR	Polymerase Chain reaction
PERT	Procurement Emergency Response Team
Preliminary Disinfection	Biosecurity procedures put in place during the depopulation and disposal of animals and the initial treatment of contaminated areas of a premises with disinfectant.
PZ	Protection Zone
RADAR	Rapid Analysis and Detection of Animal-Related Risk
R&TA	Resilience and Technical Advisor
RCC	Records Control Centre
RCVS	Royal College of Veterinary Surgeons
RED	Resilience and Recovery Directorate (DLUHC)
ResCG	Response Coordination Group
RSPB	Royal Society for the Protection of Birds
RSPCA	Royal Society for the Prevention of Cruelty to Animals
RPA	Rural Payments Agency
SAC-ED	Science Advisory Council – Exotic Disease sub committee
SAGE	Scientific Advisory Group for Emergencies
SCG	Strategic Co-ordinating Group

SCoPAFF	Standing Committee (of the European Commission) on Plants, Animals, Food and Feed (formerly SCoFCAH)
SG	Scottish Government
SIR	Security, Intelligence and Resilience Directorate (Cabinet Office)
SoS	Secretary of State
SPS	Sanitary and Phytosanitary
Stamping out	The process of eradicating an outbreak through the culling of affected and, where appropriate, exposed animals or birds, the bio secure disposal of carcasses and infective material and the cleansing and disinfection of affected premises
SVI	Senior Veterinary Inspector
SZ	Surveillance Zone
TCA	Trade and Cooperation Agreement between the UK and EU
TCZ	Temporary Control Zone
UK	United Kingdom
UKHSA	UK Health Security Agency
UKRA	United Kingdom Renderers Association
UKREP	United Kingdom Permanent Representation to the EU
VA	Veterinary Adviser
VDP	Veterinary Delivery Partnership
VENDU	Veterinary Exotic Notifiable Diseases Unit (APHA)
VHoFD	Veterinary Head of Field Delivery
VI	Veterinary Inspector - appointed veterinarians with enforcement powers under the Animal Health Act 1981
WAHIS	World Animal Health Information System

WG The Welsh Government
WTO World Trade Organisation

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