FINAL REPORT OF A MISSION
CARRIED OUT IN
POLAND
FROM 07 APRIL TO 16 APRIL 2008
IN ORDER TO
EVALUATE THE DISEASE CONTINGENCY PLANS FOR EPIZOOTIC DISEASES
(IN PARTICULAR FOOT AND MOUTH DISEASE AND CLASSICAL SWINE FEVER) AND TO FOLLOW-UP SURVEILLANCE ACTIVITIES FOR BLUETONGUE
Executive Summary

The Contingency Plans (CPs) for epizootic diseases are not yet complete for all diseases. CPs for foot and mouth disease (FMD) and classical swine fever (CSF) were updated in March 2008 and were found in place at central, regional and district level with minor shortcomings only. With the current outbreaks of CSF in Slovakia involving Poland this is of particular importance.

However, the CP on Blue Tongue is not yet approved, although Poland is already involved in the event as it had to establish a restriction zone for recent outbreaks in Germany. No procedures had been established in the district visited, to control movement restrictions of cattle and sheep and dissemination of information to private veterinarians, farmers and establishments.

In case of an outbreak, crisis management teams will be set up at all levels with the responsible OV as deputy head of the team. OV have direct access to supporting services on their relevant level. Legislation also allows for deploying private veterinarians in case of emergencies. Equipment was, in general, found to be sufficient for handling first outbreaks. In two of the three regions visited the veterinary services reported difficulties in recruiting official veterinarians and stated that the staff available at regional and district level were unable to cope with all their official duties. The negative impact of the situation was demonstrated in the lack of measures taken in relation to bluetongue.

Simulation exercises had been organised on a broad level involving other services, such as police and fire brigade. Evidence was also available of effective co-operation in relation to the recent AI outbreak in one region visited.

Most of the epidemiological investigation still has to be done manually as data bases are not yet fully operational. Tracing may be delayed by shortcomings in relation to livestock databases. Furthermore, pigs are often identified by tattoos that can only be read after they have already entered the slaughter line.

Financial provisions to cope with disease outbreaks were available at all administrative levels. No budget is foreseen in Polish legislation to hold stocks of vaccines for emergency vaccination and no draft contracts exist for the purchase of vaccine from other Member States or for private veterinarians to carry out vaccination.
# TABLE OF CONTENTS

1 **INTRODUCTION** ........................................................................................................... 1

2 **OBJECTIVES OF THE MISSION** .................................................................................. 1

3 **LEGAL BASIS FOR THE MISSION** .............................................................................. 2

4 **BACKGROUND** ......................................................................................................... 2

4.1 **Background to present mission** ............................................................................... 3

4.2 **Animal Disease Situation** ...................................................................................... 3

5 **MAIN FINDINGS** ....................................................................................................... 3

5.1 **Legislation** ............................................................................................................. 3

5.2 **Competent Authorities** .......................................................................................... 4

5.2.1 *Designation of competent authorities and operational criteria* ................ 4

5.2.2 *Training* ................................................................................................................. 4

5.2.3 *Official controls and information flow within the veterinary services* ...... 4

5.3 **Disease outbreaks** ................................................................................................... 5

5.4 **Disease surveillance** ............................................................................................... 6

5.5 **Movement controls and traceability** ........................................................................ 7

5.6 **Contingency Plans and manuals of operations** ....................................................... 7

5.7 **Legal powers in "peace time" and in emergencies** ................................................. 8

5.8 **Financial provisions - eradication, compensation** ............................................... 9

5.9 **Provisions for emergency vaccination** .................................................................. 9

5.10 **Information** ............................................................................................................ 10

5.11 **Miscellaneous** ....................................................................................................... 10

5.11.1 *Rendering Plant* ............................................................................................... 10

5.11.2 *Animal Welfare* .................................................................................................. 10

6 **CONCLUSIONS** ....................................................................................................... 10

6.1 **Legislation** ............................................................................................................. 11

6.2 **Competent Authorities** .......................................................................................... 11

6.2.1 *Designation of competent authorities and operational criteria* ........ 11

6.2.2 *Training* ................................................................................................................. 11

6.3 **Disease outbreaks** ................................................................................................... 11

6.4 **Disease surveillance** ............................................................................................... 11

6.5 **Movement controls and traceability** ........................................................................ 12

6.5.1 *Contingency Plans and manuals of operations* ........................................... 12

6.6 **Financial provisions - eradication, compensation** ............................................... 12
6.7 Provisions for emergency vaccination ............................................................... 12
6.8 Information ...................................................................................................... 12

7 CLOSING MEETING ......................................................................................... 12

8 RECOMMENDATIONS ....................................................................................... 13
### ABBREVIATIONS & SPECIAL TERMS USED IN THE REPORT

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>AH</td>
<td>Animal Health</td>
</tr>
<tr>
<td>AI</td>
<td>Avian Influenza</td>
</tr>
<tr>
<td>ARiMR</td>
<td>Agency for Restructuring and Modernisation of Agriculture (<em>Agencja Restrukturyzacji i Modernizacji Rolnictwa</em>)</td>
</tr>
<tr>
<td>BT</td>
<td>Bluetongue</td>
</tr>
<tr>
<td>CAs</td>
<td>Competent Authority(ies)</td>
</tr>
<tr>
<td>CCAs</td>
<td>Central Competent Authority(ies)</td>
</tr>
<tr>
<td>CP</td>
<td>Contingency plan</td>
</tr>
<tr>
<td>CSF</td>
<td>Classical Swine Fever</td>
</tr>
<tr>
<td>CVO</td>
<td>Chief Veterinary Officer</td>
</tr>
<tr>
<td>DVO</td>
<td>District Veterinary Officer</td>
</tr>
<tr>
<td>EU</td>
<td>European Union</td>
</tr>
<tr>
<td>FMD</td>
<td>Foot and Mouth Disease</td>
</tr>
<tr>
<td>FVO</td>
<td>Food and Veterinary Office</td>
</tr>
<tr>
<td>GIW</td>
<td>General Veterinary Inspectorate (<em>Główny Inspektorat Weterynarii</em>)</td>
</tr>
<tr>
<td>IRZ</td>
<td>Animal identification and registration database (<em>Baza danych Identyfikacji i Rejestracji Zwierząt</em>)</td>
</tr>
<tr>
<td>OIE</td>
<td>World Organisation for Animal Health</td>
</tr>
<tr>
<td>OV</td>
<td>Official Veterinarian</td>
</tr>
<tr>
<td>RVO</td>
<td>Regional Veterinary Officer</td>
</tr>
<tr>
<td>ZCHZZ</td>
<td>Control of infectious animal disease) software designed for the localization of disease outbreaks and demarcation of protection and surveillance areas</td>
</tr>
</tbody>
</table>
1 INTRODUCTION

The mission took place in Poland from 7 to 16 April 2008. The mission team comprised 2 inspectors from the Food and Veterinary Office (FVO). The mission was undertaken as part of the planned FVO mission programme for 2008.

The inspection team was accompanied throughout the mission by representatives from the central competent authority (CCA).

An opening meeting was held on 7 April 2008 with the CCA and representatives from the Agency for Restructuring and Modernisation of Agriculture (ARiMR). At this meeting, the objectives of the mission and the itinerary were confirmed by the inspection team, and additional information required for its satisfactory completion was requested.

2 OBJECTIVES OF THE MISSION

The objective was to evaluate the resources and arrangements that Poland has put in place to implement the European Union requirements for contingency plans for epizootic (former OIE List A) diseases, with special regard to foot and mouth disease (FMD), and classical swine fever (CSF) and bluetongue (BT). The mission team examined the legislation, structures and procedures which have been introduced in Poland to give effect to the relevant and updated contingency plans, in the event of one or more outbreaks of the above diseases.

In pursuit of this objective, the following sites were visited:
<table>
<thead>
<tr>
<th>Competent authority visits</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Competent authority</td>
<td></td>
</tr>
<tr>
<td>Central</td>
<td>2</td>
</tr>
<tr>
<td>Regional</td>
<td>3</td>
</tr>
<tr>
<td>Local</td>
<td>7</td>
</tr>
<tr>
<td><strong>Laboratory visits</strong></td>
<td></td>
</tr>
<tr>
<td>Central/reference</td>
<td>1</td>
</tr>
<tr>
<td><strong>Animal product processing sites (non-human consumption)</strong></td>
<td></td>
</tr>
<tr>
<td>Animal rendering plant</td>
<td>1</td>
</tr>
<tr>
<td><strong>Live animal control sites</strong></td>
<td></td>
</tr>
<tr>
<td>Farms</td>
<td>5</td>
</tr>
<tr>
<td>Approved assembly centres</td>
<td>1</td>
</tr>
<tr>
<td>Dealers</td>
<td>1</td>
</tr>
<tr>
<td>Private veterinarians</td>
<td>2</td>
</tr>
<tr>
<td>Border Inspection Point (BIP)</td>
<td>1</td>
</tr>
<tr>
<td><strong>Food processing establishments</strong></td>
<td></td>
</tr>
<tr>
<td>Slaughterhouses</td>
<td>1</td>
</tr>
</tbody>
</table>

### 3 Legal Basis for the Mission

The mission was carried out under the general provisions of Community legislation and, in particular, Article 45 of Regulation (EC) No 882/2004 of the European Parliament and of the Council.

### 4 Background
4.1 BACKGROUND TO PRESENT MISSION

In recent years, following the FMD crisis in UK in 2001, missions covering FMD and/or CSF have been carried out by the FVO in all the Member States. Whilst it has been found that Member States are aware of the threats posed by epizootic disease to the health status of their national livestock populations, and that all had contingency plans in place, deficiencies were detected and there was considerable variation in the level of preparedness in the various Member States. The new FMD outbreaks which occurred in the United Kingdom in 2007 further highlighted the need for well developed and resourced Contingency Plans.

The outbreaks of BT throughout Europe have furthermore stressed the threats posed by the sudden and sometime unexpected spread of former exotic diseases and the need for MS to be prepared to implement immediate emergency measures.

4.2 ANIMAL DISEASE SITUATION

The following table provides information on the last reported cases of the three main diseases within the scope of the mission in Poland:

<table>
<thead>
<tr>
<th>Disease</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>BT</td>
<td>Never</td>
</tr>
<tr>
<td>FMD</td>
<td>1971</td>
</tr>
<tr>
<td>CSF</td>
<td>1994</td>
</tr>
</tbody>
</table>

5 MAIN FINDINGS

5.1 LEGISLATION

The CCA informed the mission team that some EU requirements for contingency plans have been put into national legislation through Acts and supporting Ordinances.

Polish law allows the direct use of supporting services (police, fire brigade) in the event of major outbreaks of animal diseases.

Furthermore, the legislation provides for the compulsory conscription of private veterinarians as official veterinarians (OVs).

Observations:

- There are no CPs for various former OIE list A and B diseases as lined out in Council Directive 92/119/EEC, Article 20, including BT as described in Council Directive 2000/75/EC, Article 18 (although a draft was provided to the mission team).
• The Polish law does not allow for OVs to store tranquillisers.

5.2 COMPETENT AUTHORITIES

5.2.1 Designation of competent authorities and operational criteria

The General Veterinary Inspectorate (GIW) is responsible for supervising animal diseases and protecting animal health.

The chain of command is defined in national legislation, with District Veterinary Officers (DVOs) reporting to Regional Veterinary Officers (RVOs), who in turn report to the Chief Veterinary Officer (CVO).

The CA stressed that the veterinary services are experiencing difficulties in recruiting sufficient numbers of full-time OVs.

Crisis management teams with permanent and non-permanent staff are organised at all administrative levels in the event of an outbreak.

Observations:

• In the event of staff shortage, the official services have to rely upon private veterinarians or non veterinarians such as biologists etc.

• Procedures are in place for co-operation between different CAs in the event of an outbreak. The efficiency of these procedures had been tested at the beginning of 2008 in real life in one region which had experienced an outbreak of avian influenza (AI).

• At district level, information from the RVO does not always result in the necessary measures to be taken as described in the EU legislation.

5.2.2 Training

Evidence of regular training was available in the visited regions, including on topics such as AI and BT.

In the past, simulation exercises were performed for FMD, CSF and AI. Additional practical experience was gained in the course of the recent AI outbreak.

Various administrative levels were involved in the simulation exercises. The supporting services were included in the exercises on all levels.

Observations:

• Details of the simulation exercises and lists of participants were shown to the inspection team in the regions visited.

5.2.3 Official controls and information flow within the veterinary services
RVOs are responsible for overseeing the animal and public health status of the region, supervising the DVOs and delivering training to veterinarians within the region. They are obliged to perform regular, planned and comprehensive inspections of the DVOs, which cover the full range of official duties. The frequency of inspections is at the discretion of the RVO.

Observations:

• Information flow along the hierarchy about the BT situation was shown to be fast.
• However, no concrete action could be demonstrated at a district level visited.
• The RVO had not followed up on the measures taken by the DVO nor did he check the district's ability to cope with the situation – the district visited has one acting veterinarian only.
• No direct information flows have been established between neighbouring districts of Poland and Belarussia on their disease situation (for example, the OV at the BIP visited next to Belarussia stated that he would receive information about possible outbreaks in Belarussia via the Polish CCA from the OIE).

5.3 Disease Outbreaks

In the event of disease outbreaks, crisis management teams are set up. The scale of the outbreaks determines the level at which the crisis management team is set up (within one district, within the region, or covering more than one region). The head of the region or district, functions as head of the crisis management team and the RVO or DVO as deputy head of the crisis management team.

Supporting services such as police and fire brigade participate in the crisis management teams as well as spokespersons for the press. Thus they will constantly be updated on the situation.

If information needs to be spread fast, some of the parishes will give the latest update on the situation during church services, reaching parish members without telephone lines.

The official animal health laboratories in Poland are connected with each other and will help each other out if necessary. Staff are trained in a way that they may take over for or from colleagues of other units if, for example, they need to work in shifts to cover an outbreak.

Observations:

• In the case of the BT restriction zone, the crisis management team had not been meeting and the representatives from the supporting services met by the mission team had not been informed. The information had been sent at the beginning of February 2008 and meetings were planned for the end of April.
• Detailed maps on the restriction zone were not available although required by Directive 2000/75/EC, Article 8.
• Information on holdings within the restriction zone, species kept, or the number of animals, had not been gathered.

• The DVO stated that he had informed farmers, veterinarians and establishments affected by the restriction zone over the telephone. He assured the inspection team that all trade restrictions were also imposed by telephone.

5.4 Disease surveillance

The CA met stated that samples for the monitoring of diseases were taken according to an annual plan.

In the case of CSF, this plan includes sampling of wild boar according to a geographical risk assessment (5-10 % of the annual hunting bag). Furthermore, the environmental agencies must notify any abnormalities in wildlife to the OVT. The sampling rate of domestic pigs for CSF varies according to risk assessment of the districts, with 59 samples taken from high risk areas (e.g. border areas, areas around international airports) and 10 samples taken from other districts.

The FMD sampling and testing in 2007 comprised testing of 3969 animals from 3737 herds, most of them cattle.

The national reference laboratory visited for CSF and BT is accredited and well equipped and staffed. It participates in the annual CSF ring tests organised by the Community Reference laboratory. It has not yet participated in the ring tests organised for BT but will do so when the next round is organised. No diagnostic serological or virological methods have been set up in relation to African Horse Sickness. In case of suspicion the samples would be sent to another MS laboratory for relevant diagnostics.

Traps for Culicoides species to determine the risk of BT have been set up, as described in Regulation (EC) No 1266/2007, Annex I.1.2. in all areas of Poland since June 2007. According to a report seen of December 2007, most Culicoides species trapped comprised Culicoides obsoletus (21046) and punctatus (8901).

The Polish CA have also started to test all imported bovines in 2007 and 2008 for BT antibodies.

Observations:

• According to the national statistics provided, sampling for CSF had been carried out according to the annual plan.

• Evidence was also available that both suspect cases of domestic pigs and wild boars had been sampled for CSF in 2007 and 2008 in the visited national reference laboratory for CSF (all with negative results).

• No evidence was shown of monitoring of BT according to the detailed description in Regulation (EC) No 1266/2007, Annex I.1.1. Sentinel animals are not included in the monitoring programme.

• One district reported that all fallen bovine stock are tested for BT.
5.5 MOVEMENT CONTROLS AND TRACEABILITY

The national animal database is run by Agency for Restructuring and Modernisation of Agriculture (Agencja Restrukturizacji i Modernizacji Rolnictwa, ARiMR).

A software programme called the ZCHZZ was available in the regional and district veterinary offices visited. This software is designed as a tool to localise disease outbreaks and demarcate protection and surveillance areas.

Observations:

- Evidence of the availability of updated information in the central bovine database in relation to the bovine holdings visited was available in the RVOs and DVOs. However, no search tool was available that would allow the follow up of all the movements within one herd in a certain timeframe, except by checking each individual animal.

- In the regional veterinary offices visited lists were also available of farmed game and animal parks, and estimated wild boar populations.

- The ZCHZZ is not yet a fully functional data base for movement controls. In some of the district veterinary offices visited no holdings had been entered into the system. In addition, not all geographical data of holdings are in the system.

- Holding registers were available on the holdings visited.

- In the slaughter house visited, traceability was readily demonstrated by the quality management staff.

- Several of the cattle arriving at the slaughterhouse had only one ear tag, contrary to Article 4 of Regulation (EC) No 1760/2000.

- The majority of arriving pigs could not be identified until they had already entered the slaughter line as they had been tattooed without ink. This is contrary to the requirements of Regulation (EC) No 854/2004, Annex 1, Section 2, Chapter 3, 1.

5.6 CONTINGENCY PLANS AND MANUALS OF OPERATIONS

Only some of the required CPs have been finalised and approved by the Commission Services. These CPs available at the time of the inspection were:

- Foot and mouth disease (FMD);
- Swine vesicular disease (SVD);
- African swine fever (ASF);
- Classical swine fever (CSV);
- Highly pathogenic avian influenza (HPAI);
- Newcastle disease (ND);
– Bovine spongiform encephalopathy (BSE);
– Infectious haematopoietic necrosis (IHN).

The CP for Bluetongue was available only in draft form

In the regions and districts visited, the CA met stated that the plans had been adopted to local conditions.

**Observations:**


- CPs on FMD and CSF were available at regional and district level and accessible for the OVs responsible for the supervision of the establishments visited. The versions seen were the latest update from 2008.

- Minor shortcomings and discrepancies in the adaptation of CPs were seen. For example, the legal basis for the treatment of raw milk on suspect and infected holdings was outdated, the list of rendering plans was not updated and in some cases contact numbers were missing.

- The printed versions of the FMD-CPs seen in the districts visited that did not have dairy product establishments did not include instructions on the treatment of milk or the instructions were not correct and would not have guaranteed inactivation of the FMD virus. However, the CA met stated that the correct treatment instructions were available in the version available via the webpage.

- Updated manuals of operation as foreseen in Council Directive 2001/89/EC Annex VII (e), were readily available at the slaughterhouse and rendering plant visited but not seen in all DVOs.

### 5.7 Legal Powers in "Peace Time" and in Emergencies

The crisis management teams comprise permanent and non-permanent staff and have legal powers to take decisions. At national level, the CVO has at her disposal offices with the necessary equipment to set up an emergency crisis team. Furthermore, if necessary, the head office of the Polish fire brigade made it clear that their offices may also be used for this.

Meetings of the permanent members of the crisis management team include the participation of supporting services. These supporting services are directly available at regional and district level with clearly defined tasks.

Regions and districts are prepared to assist each other as foreseen in Polish legislation. Furthermore, one region visited holds cooperation contracts with a neighbouring region of another Member State in case of outbreaks of animal diseases.

In a region visited, a truck trailer has been rebuilt to serve as a culling unit for pigs. The team was told that there are two such containers available for easy transport and access on site in case of outbreaks that involve the culling of a large number of pigs. Access to the equipment is decided centrally.
Observations:

- Documents on the meetings of the crisis management teams were available.
- The mobile culling container was demonstrated to be fully deployable with a small team.
- One region had logistical arrangements for the support of districts to assist on farms in case of outbreaks.
- Equipment kits prepared to go on farms in case of outbreaks as required by Council Directive 2003/85/EC, Annex XVII, point 8., were also demonstrated at district level. However, they were not always complete according to the available check lists and in some cases some of the items had expired.
- Evidence was available of cleaning and disinfection of trucks used for transport of live animals as well as for trucks used for collection of material for rendering.

5.8 FINANCIAL PROVISIONS - ERADICATION, COMPENSATION

Each administrative level holds its own budget for emergencies as foreseen in Polish legislation. If cases pass outside a district level, the region steps in. If the outbreak passes outside regional level, the central level will take over. Here the matter will no longer be only within the responsibility of the Ministry of Agriculture. An extract from the annual national budget covering animal diseases was received.

For the compensation of animals, their value is calculated by an expert team consisting of an OV and two skilled persons from the commune (legislation covering this aspect was received).

Observations:

- The inspection team was informed that during the recent AI outbreak poultry owners were compensated within one week.
- Lists of people experienced and skilled for the valuation of animals were provided to the inspection team.

5.9 PROVISIONS FOR EMERGENCY VACCINATION

No vaccines for former OIE "list A" diseases are produced in Poland. In case of emergency vaccination, the vaccines would have to be obtained from other Member States.

Vaccination would be done mainly by private veterinarians.

Observations:

- No plans on emergency vaccination were available, contrary to the requirements of Directive 2003/85/EC, Annex XVII, 10.
- No draft contracts had been drawn up for the purchase of vaccine or other
equipment such as ear tags in case of emergency vaccination.

• No draft contracts on the employment of private veterinarians for vaccinations had been drawn up.

5.10 INFORMATION

Information on diseases that are or should be covered by CPs is available or being prepared.

During the simulation exercise, constant information was provided by the media channels, sign posts, church services and other local sources.

Observations:

• Leaflets on FMD, CSF and AI for farmers were presented to the team in some districts.

• One region had provided a Powerpoint presentation on BT for veterinarians.

• The keepers of the animals on the holdings visited and the private veterinarians met were well informed of symptoms of major epizootic diseases (e.g. FMD, CSF).

5.11 MISCELLANEOUS

5.11.1 Rendering Plant

A rendering plant visited had to store all rendered material as the incinerator previously used was no longer accepting this material. Numerous large containers were kept outside the buildings within the premises of a plant visited.

5.11.2 Animal Welfare

The assembly centre visited has no equipment for emergency killing of animals. Pigs that may arrive with an injury from transport, e.g. a broken leg, are not killed immediately within the premises but have to travel 15 km to a nearby slaughterhouse where they then have to await regular slaughter. Alternatively, the veterinarian on site would have to drive 7 km home to fetch material for euthanasia as he does not routinely carry this material with him when visiting the plant. However, he stated that the latter option was unlikely to be applied.

6 CONCLUSIONS
6.1 **Legislation**

The lack of CPs for some diseases would impair the application of measures in case of outbreaks.

Tranquillisers for emergency use on farms need to be purchased by the OV when needed as stock keeping is not permitted; this may result in difficulties or delays in handling animals for sampling in suspect cases.

6.2 **Competent Authorities**

6.2.1 *Designation of competent authorities and operational criteria*

The structures foreseen for emergency outbreaks are clearly defined.

The lack of measures taken by DVOs informed about a disease situation by the RVO may lead to significant delays in handling outbreaks.

6.2.2 *Training*

Simulation exercises are organised and planned on a large scale, thus preparing the participants for possible outbreaks and providing them with tools to adapt their procedures should the real event happen.

6.3 **Disease Outbreaks**

Although the system of disease eradication set up with the CPs is well documented for some diseases, the lack of action when its application is required (as demonstrated within the visited district within the BT restriction zone) makes it unreliable in practice.

6.4 **Disease Surveillance**

Disease surveillance is risk based and was shown to be established and efficient for CSF. The early establishment of the Culicoides traps provides a valuable insight into the possible spread of BT cases via its vectors within all areas of Poland.

The lack of sentinel animals for the detection of BT, particularly within the restricted areas, may result in the spread of the disease and delay in detection.
6.5 MOVEMENT CONTROLS AND TRACEABILITY

In case the event of outbreaks, tracing back movements is very time-consuming at district level as each individual animal has to be checked. In large holdings this may consume manpower as well as valuable time.

Community requirements on the identification of cattle (Regulation (EC) No 1760/2000) and pigs (Regulation (EC) No 854/2004) were not being fully applied.

6.5.1 Contingency Plans and manuals of operations

The lack of some CPs may be crucial in case of outbreaks.

In particular, the lack of a CP for BT is having a real impact as Poland was obliged to take measures because it was included in restriction zones for BT cases. The lack of the application of measures may also be due to the lack of a CP giving clear instructions.

Although instructions foresee an annual updating of CPs, the CCA stated that this was not possible for all the CPs due to lack of staff.

The minor shortcomings detected could lead to mistakes and delays in taking measures in case of an emergency.

6.6 FINANCIAL PROVISIONS - ERADICATION, COMPENSATION

Financial arrangements presented to the mission team provide for a smooth and efficient eradication of, and compensation for, outbreaks.

6.7 PROVISIONS FOR EMERGENCY VACCINATION

The lack of plans or draft contracts for vaccine purchase and administration hinders the preparation for emergency vaccination.

6.8 INFORMATION

Provisions for the information of the public are included in plans for the eradication of outbreaks.

7 CLOSING MEETING

A closing meeting was held on 16th April 2008 with representatives from the, the regional authorities visited and a representative from ARiMR. At this meeting, the main
findings and conclusions of the mission were presented by the inspection team. The representatives of the competent authorities present took note of these findings and conclusions, offered their initial comments and gave details of some corrective actions taken to address shortcomings described by the inspection team.

8 RECOMMENDATIONS

<table>
<thead>
<tr>
<th>No.</th>
<th>Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>To urgently prepare all remaining CPs (Epizootic haemorrhagic disease of deer; Rinderpest; Peste des petits ruminants; Rift valley fever; Lumpy skin disease; Sheep pox and goat pox; Vesicular stomatitis; African horse sickness; Viral haemorrhagic septicaemia; Infectious salmon anaemia) as required by Community legislation and submit them to the European Commission services.</td>
</tr>
<tr>
<td>2</td>
<td>In case of outbreaks of disease in neighbouring Member States or third countries that require measures to be taken in Poland, to apply the measures foreseen in Community legislation and the CPs without delay.</td>
</tr>
<tr>
<td>3</td>
<td>To ensure that identification of pigs can be checked for before the animals enter the slaughter line as required by Regulation (EC) No 854/2004, Annex 1, Section 2, Chapter 3, 1.</td>
</tr>
<tr>
<td>4</td>
<td>To improve the central animal database and the ZCHZZ database to enable efficient detection of animal movements, geographical location of the holdings and determination of protection and surveillance zones as required by Council Regulation (EC) No 1760/2000.</td>
</tr>
<tr>
<td>5</td>
<td>To ensure that there is an adequate number of staff available to apply Community measures in the event of an outbreak of an epizootic disease, as required by Regulation (EC) No 882/2004, Article 4.2.</td>
</tr>
<tr>
<td>6</td>
<td>To apply the measures for monitoring and surveillance for bluetongue, including the use of sentinel animals, as set out in Regulation (EC) No 1266/2007, Annex I.</td>
</tr>
</tbody>
</table>

The competent authority's response to the recommendations can be found at:

## ANNEX 1 - LIST OF LEGISLATION REFERENCED IN THE REPORT

<table>
<thead>
<tr>
<th>Reference</th>
<th>OJ Ref.</th>
<th>Detail</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Legislation relating to Animal Health and Contingency Plans</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Legislation on the identification of animals and the control of animal movements**
<table>
<thead>
<tr>
<th>Reference</th>
<th>OJ Ref.</th>
<th>Detail</th>
</tr>
</thead>
</table>

**Legislation relating to Animal Welfare**

<table>
<thead>
<tr>
<th>Reference</th>
<th>OJ Ref.</th>
<th>Detail</th>
</tr>
</thead>
</table>

**Legislation relating to the production of feed and food and official controls**

<table>
<thead>
<tr>
<th>Reference</th>
<th>OJ Ref.</th>
<th>Detail</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reference</td>
<td>OJ Ref.</td>
<td>Detail</td>
</tr>
<tr>
<td>----------------------------</td>
<td>-------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>