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FINAL REPORT OF AN AUDIT

CARRIED OUT IN

FINLAND

FROM 03 TO 07 SEPTEMBER 2012

IN ORDER TO EVALUATE THE IMPLEMENTATION OF CONTINGENCY PLANS IN  
RELATION TO ANIMAL HEALTH, INCLUDING PROVISIONS ON THE PROTECTION OF  
ANIMALS DURING DEPOPULATION FOR DISEASE CONTROL

*In response to information provided by the Competent Authority, any factual error noted in the draft report has been corrected; any clarification appears in the form of a footnote.*

## ***Executive Summary***

*This report describes the outcome of a Food and Veterinary Office (FVO) audit in Finland carried out between 3 and 7 September 2012, as part of the FVO audit programme. The objective was to evaluate the resources and arrangements put in place to implement the European Union requirements for contingency planning, including provisions on the protection of animals during depopulation, in the event of one or more outbreaks of epizootic diseases.*

*Overall the report concludes that:*

*Contingency plans (CPs) have been drafted for the major diseases as required by European Union legislation. However, there is inadequate version control in place so it is difficult to verify the currency of any particular plan. The main instructional tool for dealing with epizootic disease outbreaks is a manual of operations (OM) which is a comprehensive set of documents prepared at the central level by the Finnish Food Safety Authority (Evira) but it is not always kept up-to-date at regional level.*

*Command and control structures for dealing with epizootic outbreaks were clearly defined at both central and local levels.*

*Rendering plant capacity should be sufficient to deal with epizootic outbreaks and it is unlikely that other disposal methods would be needed.*

*Surveillance for the various diseases is in place in line with the requirements of European Union legislation with diagnostic tests being carried out by the central laboratory of Evira. However, although this laboratory has a quality system in place and ISO 17025 accreditation it did not have in place accredited and validated diagnostic test methods for all the epizootic diseases required.*

*Simulation exercises in dealing with epizootic outbreaks take place on an annual basis and many of them involve co-operation with other countries under the auspices of the Nordic-Baltic Veterinary Contingency Group.*

*CPs did not include the welfare requirements in Regulation 1099/2009 requirements (which had not yet entered into force at the time of the audit. The OM did, however, contain information on killing methods which were largely in line with current requirements under Council Directive 93/119/EC.*

*In relation to the fact-finding elements of the mission the audit team found that routine monitoring for epizootic diseases was in place and comprehensive assessments of the risk of entry of epizootic diseases were in place and used to prioritise information campaigns. Industry driven biosecurity schemes were also effectively implemented.*

*The report makes recommendations to the Competent Authorities aimed at addressing areas in which further improvements are required.*

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## ABBREVIATIONS AND DEFINITIONS USED IN THIS REPORT

<b>Abbreviation</b>	<b>Explanation</b>
AHS	African Horse Sickness
AI	Avian Influenza
ASF	African Swine Fever
BT	Bluetongue
CA	Competent Authority
CCA	Central Competent Authority
CP	Contingency Plan
CSF	Classical Swine Fever
CVO	Chief Veterinary Officer
DG(SANCO)	Health and Consumers Directorate General
ELISA	Enzyme Linked Immunosorbent Assay
ETT	Association for Animal Disease Prevention
Evira	The Finnish Food Safety Authority
EURL	European Union Reference Laboratory
FMD	Foot-and-Mouth Disease
FVO	Food and Veterinary Office
FVO report 9100/2003	Report of an audit carried out in Finland in order to evaluate the disease contingency plans for epizootic diseases
LDCC	Local Disease Control Centre
LSD	Lumpy Skin Disease
MAF	Ministry of Agriculture and Forestry
MS	Member State
MVO	Municipal Veterinary Officer
NBVCG	Nordic-Baltic Veterinary Contingency Group
ND	Newcastle Disease
NDCC	National Disease Control Centre
NRL	National Reference Laboratory
OIE	World Organisation for Animal Health ( <i>Organisation Mondiale de la Santé Animale</i> )
OM	Operational Manual for dealing with epizootic disease outbreaks
OV	Official Veterinarian
PCR	Polymerase Chain Reaction
PPR	Pest des Petits Ruminants

PZ	Protection Zone
RSAA	Regional State Administrative Agency
RVF	Rift Valley Fever
RVO	Regional Veterinary Officer
SCAHAW	Scientific Committee on Animal Health and Animal Welfare
SGP	Sheep and goat pox
SVD	Swine Vesicular Disease
SZ	Surveillance Zones

## 1 INTRODUCTION

This audit took place in Finland from 3 to 7 September 2012 and was undertaken as part of the FVO (Food and Veterinary Office) planned audit programme. The audit team comprised three auditors from the FVO and a National Expert. The team was accompanied throughout the audit by representatives of the Finnish Food Safety Authority (Evira) which is the Competent Authority (CA) within the scope of this audit.

## 2 OBJECTIVES

The principal objective of this audit was to evaluate the resources and arrangements put in place to implement the European Union requirements for contingency planning, including provisions on the protection of animals during depopulation, in the event of one or more outbreaks of the following epizootic diseases: Foot and Mouth Disease (FMD), Bluetongue (BT), Classical Swine Fever (CSF), African Swine Fever (ASF), Swine Vesicular Disease (SVD), African Horse Sickness (AHS), Avian Influenza (AI), Newcastle Disease (ND) and a number of other diseases.

A secondary objective was to gather information and to identify areas of best practice in relation to a number of issues relevant to epizootic disease control but not explicitly specified in EU legislation. Such issues include routine monitoring for epizootic disease, the deployment of risk analysis with subsequent determination of alert levels and Member State (MS) requirements for biosecurity measures on farms.

Whilst contingency planning for all of these diseases is included within the scope of this audit, the audit concentrated, in particular, on ASF. The risk of introduction of ASF was considered to be elevated at the time of the audit due to the presence of disease in a neighbouring country.

Contingency planning for epizootic diseases has been assessed in a previous FVO audit DG(SANCO) 9100/2003 (hereafter referred to as FVO report 9100/2003). It is published on the FVO website at:

[http://ec.europa.eu/food/fvo/index\\_en.cfm](http://ec.europa.eu/food/fvo/index_en.cfm)

This audit is a reassessment of the current situation following significant reorganisation of the CAs with the establishment of Evira in 2006 and changes to EU legislation. There are no open recommendations from FVO report 9100/2003.

In pursuit of this objective, the following sites were visited:

MEETINGS / VISITS		no.	COMMENTS
Competent Authorities	Central	2	Opening and closing meetings with Evira. Representatives of MAF were also present. The NDCC was also visited and members of expert groups and representatives of the Association for animal disease prevention (ETT) were met.
	Regional	2	Regional State Administrative Agencies in two regions. Local staff were also met on on-the-spot visits. Sites of LDCCs also seen

Laboratories	2	The Veterinary Virology Research Unit and the Veterinary Pathology Unit of Evira.
Holdings	2	One pig breeding farm and one broiler production unit
Markets & Assembly centres	0	There are no livestock markets in Finland. A demonstration of a pig animal dealing system was seen at the pig slaughter house visited
Loading location for export of pigs	1	Industry bio-security rules prevent animal transport from third countries entering farms
ABP processing plant	1	Location where carcasses would be disposed of in the event of an epizootic outbreak
Slaughterhouses	2	A poultry slaughterhouse and a pig slaughter house which provides staff for on-farm killing teams in the event of an epizootic outbreak.

### 3 LEGAL BASIS

The audit was carried out under the general provisions of EU legislation and, in particular:

- Article 45 of Regulation (EC) No 882/2004 of the European Parliament and of the Council of 29 April 2004 on official controls performed to ensure the verification of compliance with feed and food law, animal health and animal welfare rules.

Full legal references to the European Union legislation quoted in this report are provided in Annex 1 and refer, where applicable, to the last amended version.

### 4 BACKGROUND

Given the potential impact of outbreaks of epizootic disease, it is important that Member States can react immediately and effectively in a co-ordinated manner and in co-operation with neighbouring countries. EU legislation requires MS to have contingency plans in place to combat such outbreaks so as to reduce their adverse consequences.

Of critical importance to the suppression of an outbreak of epizootic disease, is the swiftness of initial diagnosis and the deployment of the first stages of the contingency plan.

The historical situation in Finland is as follows:

#### **Historical Outbreaks of animal diseases in Finland**

<b>Disease</b>	<b>Year of last occurrence</b>
FMD	1959
CSF	1917
ASF	NEVER
ND*	2004

AI**	NEVER
BT	NEVER
SVD	NEVER
AHS	NEVER

\* Virus detected in ornamental pigeons in 2012. Some findings of PMV-1 have been made from wild pigeons in recent years.

\*\* AI in poultry has never occurred. There have been some farmed seropositive geese without clinical signs( but no virus isolation) and some low pathogenic virus detections in wild birds.

## 5 FINDINGS AND CONCLUSIONS

### 5.1 COMPETENT AUTHORITIES

#### Legal requirements:

Regulation (EC) No 882/2004 lays down rules for the performance of official controls; in particular Article 4 requires the designation of competent authorities; co-ordination and co-operation between and within competent authorities and that sufficient legal powers are available to the competent authorities. The availability of sufficient legal powers for the implementation of contingency plan is specified in most of the relevant Directives (see Annex 2). In addition Council Directive 2003/85/EC (Article 74 (3)(d), (g) & (i) and Annex XVII (6) requires close cooperation with environmental authorities and enforcement bodies in relation to FMD control and Council Directive 2005/94/EC on the control of avian influenza (Article 62 (3)) requires close cooperation between the competent authorities responsible for the different sectors, particularly those in charge of animal health, public health, environmental matters and health and safety of workers.

Article 18 (1) of Regulation (EC) No 1099/2009 requires that the competent authority responsible for a depopulation operation shall establish an action plan to ensure compliance with the rules laid down in this Regulation, before the commencement of the operation.

#### Findings:

##### 5.1.1 Competent Authority structure

Information on the structures of the Finnish CA can be found in the country profile. Please see:

[http://ec.europa.eu/food/fvo/country\\_profiles\\_en.cfm](http://ec.europa.eu/food/fvo/country_profiles_en.cfm)

This provides information on the responsibilities of the competent authorities under normal circumstances.

The lead authority for animal health control is Evira which is responsible to the Ministry of Agriculture and Forestry (MAF). Six Regional State Administrative Agencies (RSAAs) oversee the execution of controls by 88 municipal food control authorities (MFCA) and 405 Municipal



Veterinary Officers (MVOs) responsible for animal health and welfare (including some 63 FTE contingency veterinarians). In addition, 15 regional Centres for Economical Development, Transport and the Environment undertake official controls on behalf of Evira in certain sectors.

The Department of Food and Health of MAF is responsible for animal health legislation in Finland. It also supervises the implementation of this legislation. The Department also informs OIE, EU and other Member States of disease outbreaks.

Section 5.2.3 below, outlines the responsibilities of the various CAs for dealing with an epizootic outbreak, as designated in the CPs.

#### *5.1.2 Legal powers available to the CAs*

A number of Finnish legal provisions give the necessary power to the Finnish CAs to implement the measures necessary for controlling epizootic disease outbreaks. These include both general legislation giving powers necessary to control various animal diseases and specific legislation giving powers to control individual diseases. The Animal Diseases Act of January 1980 (Act 55/80, last amended in April 2010) and the Act on the control of Rapidly spreading Animal diseases of December 1960 (Act 488/60, last amended in April 2006) have been frequently updated and along with subordinate legislation give powers to control animal diseases to CAs. These powers include: the right of entry into premises, imposition of restrictions on animal movements, the right to require cleaning and disinfection, the right to impose PZs and SZs to order slaughter of animals etc. The legislation also sets out obligations in respect of the notification of suspicion of animals diseases and requires all certified veterinarians who have not yet reached the age of 50, veterinary science graduates and undergraduates to be available to help in case of animal disease emergencies. They can be directed by Evira which maintains a register of veterinarians.

#### *5.1.3 Cooperation between and within CAs in development of CPs*

The unit for Animal Health and Animal Welfare in Evira is responsible for development of contingency plans for dealing with outbreaks of animal diseases. The Animal Health and Welfare Unit in the Control Department of Evira is responsible for developing and updating the CPs in collaboration with experts of the Research and Laboratory Department and lawyers of the Legal Affairs Unit. Specific contingency plans exist for: FMD, AI, ASF, CSF, BT, SVD, AHS, ND and Epizootic Haemorrhagic Disease of Deer. An additional single plan covers: Rinderpest, Pest des Petits Ruminants, Sheep and Goat Pox, Lumpy Skin Disease and Rift Valley Fever. CPs are updated when a significant change in organisation occurs, legislative requirements change or risk assessments indicate a significant change in risk. It is intended to revise them again in 2013 when a new Finnish Animal Health Act enters into force.

A contingency plan for pandemic influenza has been developed by the Ministry of health and Social affairs and is available at:

[http://www.stm.fi/c/document\\_library/get\\_file?folderId=240565&name=DLFE-20728.pdf](http://www.stm.fi/c/document_library/get_file?folderId=240565&name=DLFE-20728.pdf)

It was developed in response to the threat of an influenza pandemic in 2005-2006. In general the command and control structures for control of zoonotic disease outbreaks in animals are as in an epizootic outbreaks except when serious crises situations develop when the security strategy for society could be implemented. In this event inter-Ministerial cooperation bodies could be established. A description of the security strategy for society is available at :

A number of agreements and contracts have been established as part of the contingency planning process. These include:

- an agreement with a rendering plant on the destruction of carcasses during disease outbreaks;
- an agreement with a company on the provision of equipment for gassing poultry;
- an agreement with the CAs of Nordic and Baltic countries on the provision of personnel to assist in the control of major disease outbreaks. (In addition, another agreement is being discussed with these countries on the exchange of equipment for dealing with epizootic disease outbreaks);
- local agreements at RSAA level relating to the provision of equipment and slaughter teams;

The audit team noted that:

- Evira has consulted with hunters and farmers on how to deal with suspicions of epizootic diseases which can also affect and be transmitted by wild animals;
- the CA informed the audit team that consultation of police and military authorities takes place during the preparation of contingency plans and the operations manual for dealing with epizootic disease outbreaks (OM). This consultation is led by MAF at central level and by the RSAAs at regional level. Under Finnish law the police are legally required to assist official veterinary authorities with animal health and welfare issues if required. During an on-the-spot visits to a RSAA office the audit team met a police liaison officer who confirmed that the police are used to enforce movement restrictions and assist in controlling the public in the event of an outbreak or suspicion of outbreak;
- the CPs and OM are not published on the internet. In the near future is hoped to make them available on an extranet which will allow interested parties to access CP and OM documentation<sup>1</sup>;
- the audit team met a local Environmental Control Officer during one of the on-the-spot visits. He was aware of the environmental issues relating to the disposal of animal carcasses and demonstrated a groundwater map of the locality which indicated areas where burial of carcasses would be prohibited due to the presence of important groundwater sources. In the event of a need to dispose of carcasses by burial he would cooperate with the LDCC to identify other areas where burial of carcasses would be possible. However, the CA commented that the ABP processing plant is always the first choice and would be used whenever it is considered safer to transport carcasses to the plant than to bury them on site in order to avoid spreading the disease during transport (see section 5.6 below).

### **Conclusions on Competent Authorities:**

CAs have been designated and sufficient legal powers are available to develop CPs and control

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<sup>1</sup> *In their response to the draft report the CA indicated that the OM is now available in the extranet to all official veterinarians. The extranet was published on 1<sup>st</sup> October 2012.*

epizootic outbreaks in accordance with the requirements of Regulation (EC) No 882/2004. Coordination with the environmental authorities required in Article 74(3) of Council Directive 2003/85/EC is ensured.

## 5.2 CONTINGENCY PLANS

### Legal requirements:

Requirements for Member States to have contingency plans to control disease outbreaks are required for the following diseases: Foot & Mouth Disease (Council Directive 2003/85/EC), Bluetongue (Council Directive 2000/75/EC), Classical Swine Fever (Council Directive 2001/89/EC), African Swine Fever (Council Directive 2002/60/EC), Swine Vesicular Disease and a number of other diseases (Council Directive 92/119/EEC), African Horse Sickness (Council Directive 92/35/EEC), Avian Influenza (Council Directive 2005/94/EC) and Newcastle Disease (Council Directive 92/66/EEC). A summary of some specific requirements of each is provided in Annex 2 .

Article 18 of Council Regulation (EC) No 1099/2009 requires that the stunning and killing methods planned and the corresponding standard operating procedures for ensuring compliance with the rules laid down in the Regulation shall be included in the contingency plans required under Union law on animal health.<sup>2</sup>

Requirements relating to holding registration, animal identification and movement controls for cattle, sheep and pigs are laid down in Regulation (EC) No 1760/2000, Council Regulation (EC) No 21/2004 and Council Directive 2008/71/EC respectively, and associated implementing measures.

### Findings:

#### 5.2.1 Coverage & Approval

Separate CPs are available for all the relevant diseases. The CPs were initially approved by the European Commission but have since been updated without being submitted to the European Commission for re-approval. The CPs are high level descriptive documents with the detailed instructions for dealing with epizootic disease outbreaks being included in the OM.

The audit team noted that:

- it was difficult for the audit team to be confident that they were studying the latest version of any particular plan. The contingency plan documents did not contain an identifier which clearly indicated which version of the CP was current.;
- the CPs do not refer to animal protection at killing. Information relating to animal protection at killing is referred to in the OM (see section 5.5 below).

#### 5.2.2 Documentation and the system for reviewing and updating

The CPs are not widely distributed as they are high level descriptive documents. They are not available to the general public.

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<sup>2</sup> Regulation (EC) No 1099/2009 was not yet applicable at the time of the audit (it is applicable from 1<sup>st</sup> January 2013)

The OM is developed in Evira. It contains a general section with instructions applicable to the control of all the epizootic diseases and specific sections on AI, BT, ND, CSF and FMD. The OM is distributed to RSAAs electronically at least once per year with a request for local contact information to be updated and the locally tailored plan should then be sent back to Evira for approval.

The audit team noted that:

- ASF would be dealt with according to the instructions for CSF in the initial stages of an outbreak. The CA plans to produce a specific OM section on ASF in the future;
- In one of the RSAAs visited the local contact information had not been updated following a recent change in telephone numbers. In addition some of the staff referred to in the local OM had changed posts. A quality assurance system for ensuring that the OM is kept up to date at all locations is not in place;
- MVOs met on the farms visited did not consider referring to the OM when asked how they would proceed when dealing with an epizootic suspect/outbreak situation; their first instinct was to consider how they would proceed based on previous experience or training only referring to the OM when prompted to do so.

### *5.2.3 Competent Authority command structure during an epizootic outbreak*

The chain of command regarding control of epizootic disease outbreaks is staged at three levels: national, provincial and municipal. The Head of the Food and Health Department of MAF (CVO) is the final authority of the disease control at the national level. He has delegated the contingency planning and day-to-day responsibilities to Evira. The tasks have been further delegated to the Unit of Animal Health in the Standing Orders of Evira.

The provincial veterinarians are normally under supervision of the Unit of Animal Health and Welfare and under command in specific animal disease control tasks defined in the animal health legislation. The RSAAs and municipalities respectively are responsible for controls within their own territory. Evira enters into an annual performance level agreement with each RSAA.

During epizootic disease outbreaks Evira forms the NDCC. The provincial veterinary officers are under command of the head of the Unit of Animal Health in Evira and are responsible for disease control at the provincial level. MVOs are employees of municipalities and only under supervision and command of the RVO in state official control matters including animal health control tasks. All MVOs have the basic training in the control of epizootic animal diseases. However, to guarantee that experienced personnel are obtainable in case of disease emergency, 4-6 MVOs have been chosen on voluntary basis from the area of each provincial office and given special training to handle disease outbreaks.

#### *5.2.3.1 National Disease Control Centre*

During an epizootic disease outbreak the NDCC co-ordinates disease control measures at a national level by:

- giving support to local disease control centres (based in provincial veterinary offices);

- determining the extent of protection and surveillance zones (in liaison with LDCCs);
- authorising stamping out measures (killing animals);
- collaborating with local disease control centres (LDCC) on collecting epidemiological data;
- supporting LDCCs with deployment of staff;
- supplying of equipment and other resources needed for disease control measures;
- deciding on the best measures for controlling disease;
- taking care of expenses associated with the control of epizootic and compensations due to disease control measures;
- providing information to MAF and to the other units of Evira;
- providing information to and liaising with the Communications unit of Evira.

The location of the NDCC is a room within the headquarters building of Evira. It is immediately available when required.

The audit team noted that:

- all means of modern communication are available (telephone, e-mail, internet and video-conference facilities). The video-conference system is available to allow exchange of information with the RSAAs. The system was demonstrated to the audit team during an on-the-spot visit;
- a computerised system with software (Kartturi) is used to define 3 km protection zones and 10 km surveillance zones. There is a separate computerised system for managing a possible official vaccination programme. This system is called Rokotusrekisteri (“vaccination register”);
- in accordance with Finnish animal health legislation, MAF determines the extent of the 3 km and 10 km zones. The zones are initially defined as exact circles, not taking into account natural and or geographical boundaries. The software then allows the zones to be redefined and is flexible enough to follow geographical boundaries as appropriate based on advice from the NDCC in liaison with LDCCs.
- in Evira headquarters and in RSAA offices connections to the animal databases are available and the holdings within the 3 km and 10 km zones could be identified, with numbers and types of animals indicated;
- lists of staff and other persons to be called upon immediately were available;
- expert groups have been nominated by Evira for AI/ND, Bluetongue, CSF/ASF, FMD, fish diseases and disinfection. Expert groups consist of experts from Evira (animal health control, virology, production animal health unit, risk assessment unit and meat inspection), MAF, the University of Helsinki, RSAAs, ETT and private health care veterinarians. Expert

groups would be called in for giving advice to the NDCC in disease situations. The expert groups have had meetings in order to evaluate disease situations whenever needed.

#### *5.2.3.2 Local Disease Control Centre*

The locations where LDCC's will be set up is in the 7 RSAAs. The necessary space is available and LDCCs can be installed immediately. Telephone lines, internet connection are all present. Communication with the NDCC is provided via a video-conference system. A system allowing access for all veterinarians in the region to an Evira extranet is in progress, but not operational yet.

The audit team noted that:

- All Regional Veterinary Officers (RVOs) meet in the RSAAs visited were aware of methods needed to control outbreaks of animal diseases;
- In case of an outbreak specially trained, so called Contingency vets, are available. These are local MVOs. MVOs have private practices and also perform official tasks under contract to the CA;
- a 24/7 duty call for responses to notified suspicions is present;
- the audit team inspected a recent file of a suspicion of AI. Documents regarding movement restrictions during the suspicion, sample taking and the removal of the restrictive measures were present;
- in RSAAs visited local OM's were present. They contained local guidelines and local information;
- the local OM's are sent to and approved by the Evira
- there are no procedure for regular updating. Updates are made and sent to Evira whenever they are asked for or it is thought to be appropriate. In addition, version management of OM's was not present. In one RSAA visited the responsible RVO met had different versions of the OM on his laptop and USB stick;
- lists of persons to be called up are present but they were not fully up-to-date (telephone numbers were inaccurate);
- in the RSAA a stock of materials to be used in case of an outbreak was present. Quantities were in line with those required in the OM. In the case of a major outbreak these quantities might be too small but they would be sufficient to deal with initial stages of an outbreak.

#### *5.2.4 Financial provisions*

In the event of an outbreak of epizootic disease finance will be provided out of general taxation. MAF requests the finance from the Ministry of Finance.

The audit team noted that:

- the CA informed the audit team that they foresee no difficulty in obtaining the required

funds in the event of an epizootic disease outbreak. Funding would be available to cover costs associated with compensation for animals killed, purchase of materials, disinfectants, vaccines, clothing, transport (personnel / carcasses / ) recruitment of additional staff, payment for disposal of carcasses, etc.;

- valuations of animals that need to be slaughtered in the event of an epizootic outbreak are assessed by a MVO, preferably a contingency vet. The request for financial compensation is then sent with MVO comments to local RVO and with RVO recommendation to Evira who will take care of final assessment and payments to affected farmers;
- the amount of compensation to be paid to an outbreak farm depends on the seriousness of financial losses to the farmer and how much the losses affect the farmer's livelihood this compensation is provided for in the Finnish Animal Diseases Act (Article 20 of Act 55/80);

#### *5.2.5 Establishment and enforcement of protection and surveillance zones*

As soon as suspicion is confirmed protection and surveillance zones will be installed according the respective Directives.

The audit team noted that:

- under the current Animal Health Law the legal establishment of zones is done by MAF. The initial proposal for the delineation of zones is made by Evira. Under the new Finnish Animal Health Act to enter into force in 2013 the legal establishment of zones will be done by Evira
- establishment of the zones is done with the software of the computer program Kartturi (see section 5.2.3.1 above). There are signs ready to be placed along main roads in the RVOs. In addition, all farmers inside zones would be informed about restrictions in force as soon as possible.
- there are Evira guidelines for handling situations where derogations might be necessary in restriction zones. Depending on the disease animals might be transported if it is permitted in legislation and the RVO in charge can give permission for movement. If animals cannot be transported or moved to another building, holding or establishment some animals may have to be culled to solve the problem in stocking density;
- in case of a major outbreak enforcement will be done on cooperation with the police and if necessary with the army;
- normal communication practices between MAF and the Ministry of Social Affairs and Welfare and respective implementing competent authorities are maintained and enhanced during crisis situations. The management of crises is the responsibility of the respective ministries, competent authorities and central, regional and local administrations within their own mandates;
- if a serious crisis situation develops control functions and communications will be dealt with in accordance with the Security Strategy for Society, which has been adopted by the Government of Finland on 16 December 2010.

### 5.2.6 *Communication procedures during an outbreak*

The NDCC is situated in the building of Evira.

The audit team noted that:

- direct communication between the NDCC and the LDCC's situated in the RSAAs is guaranteed by direct telephone lines, mobile telephones, e-mail and video-conference facilities;
- MVOs at outbreak sites and carrying out surveillance work will report to the RVO, who reports to Evira;
- in case of a suspicion reported to Evira, Evira will give notice to the RVO who will ask the MVO to go to the farm and take samples;
- Evira will manage the national level of communication to farmers, the rural populace, food business operators, the general public etc. RVOs will be responsible for regional and local communication;
- MAF will be responsible for International Communication including to OIE and the Commission of the EU and neighbouring countries.

### 5.2.7 *Availability of Epidemiological expertise*

Expert groups have been nominated by Evira for AI, ND, BT, CSF/ASF, FMD, and disinfection. The groups of experts from Evira (animal health control, virology, production animal health unit, risk assessment unit and meat inspection), MAF, the University of Helsinki, RSAAs, ETT and private health care veterinarians.

Expert groups would be called in for giving advice to the NDCC in disease situations. The expert groups meet in order to evaluate disease situations whenever needed. A meeting of the swine fever expert group was held in June 2011 in order to give advice to risk management when the threat of ASF was discussed. Also the BT expert group met several times during 2008-2009 when the strategy and surveillance for BT were planned.

The audit team noted that:

- the Expert groups comprised all relevant expertise from within the fields of veterinary medicine and epidemiology. The members of the Expert groups had participated in drafting the new 2009 CPs;
- several experts were members of more than one Expert group. There had been some changes to the composition of the Expert groups since their appointments in 2007-2009, however the official appointment document had not been amended and not all participants in a 2011 meeting of the Expert group for swine fevers (CSF/ASF) had been formally appointed;
- meteorological experts, entomologists or experts in the field of wildlife populations and hunting were not regular members of the Expert groups. However, documents were available identifying such expertise which could be called in if needed;
- the Expert groups do not hold regular meetings but may be called on to provide an opinion for Evira e.g. on the basis of new scientific or epidemiological evidence. Evira also makes



use of the Expert groups as panels of experts and would often ask the opinion of a specific member of the Expert group rather than requesting an opinion formed by the whole group;

- Evira's Unit for Risk Assessment also made use of the term “expert groups” for certain diseases but the compositions of these groups were different from those of the Expert groups required under the EU legislation on contingency planning.

#### 5.2.8 *Animal identification and movement control*

There are no animal markets or assembly centres in Finland. Adult animals are sold/bought directly from farms. Slaughterhouses have a dealing system for young calves and pigs so that animals are moved directly from one farm to another. Backyard farming is of very small scale and the animals are bought directly from the farms as well. The broiler sector operates on a strict integrated network and animal movements are controlled by the slaughterhouse and their healthcare veterinarian.

Within Finland a holding is defined as a geographical location where animals are kept, reared or tended permanently or temporarily (Act on animal identification systems, 238/2010). According to this act, fertilised ova, fertilised eggs, embryos and worms/maggots are also defined as animals.

Evira has also issued further instructions about the definition of a holding. According to these instructions two holdings of the same owner can be united or registered as one holding when they are geographically connected and form an epidemiological unit so that there is not land of another holding (owned by another owner) between these two areas and if animal health, food safety or control are not compromised. This definition also applies to a group of islands used for example as pasture for sheep if the holding is then a natural unity.

Animal movements between holdings have to be notified to species-specific registers for cattle, sheep and goats, and pigs.

The audit team noted that:

- keepers of animals must register at Municipal level with a rural affairs official. A separate registration must be made for each holding and a new registration is required whenever there are any changes in ownership etc.;
- there are central registers of holdings and keepers maintained by Evira. Cattle must be marked with two ear tags within 20 days of birth or earlier if moved from the place of birth. Sheep and goats must be marked with two ear tags within 6 months of birth or earlier if moved from the holding of birth. Electronic identification of sheep and goats is not required in Finland (except for animals that are involved in intra-union trade) as the population of sheep and goats is less than 600,000 animals and the use of electronic identification is optional in line with Article 9 of Regulation (EC) 21/2004. Lambs moving to slaughter before the age of 12 months are also allowed to bear only one ear tag in line with the derogation in Article 4.3 of Regulation (EC) 21/2004. Pigs can move on a batch marking system with tattoos on the shoulder region (“slap marks”) being used to identify batches of pigs moving to slaughterhouses;
- central registers of numbers of animals on holdings are kept for cattle, sheep and goats, and pigs. With respect to poultry a register of number of birds is not held centrally but poultry keepers must register their holdings from the first bird being kept. This requirement includes the registration of ornamental birds such as peacocks;

- Animal movements have to be notified to the central database within 7 days of the movement of animals, which was also the case on the pig farm visited. The monthly number of animals is notified either monthly or at least every four months. Animal movements would be traced and identified both in the farm log book and animal registers;
- areas of high livestock density can be identified in real-time through the animal identification register.

#### 5.2.9 Availability of Equipment

The OM contains a list of equipment that should be held in store in each of the RSAAs. The equipment should be accessible on a 24 hour basis. Items to be included in the emergency store include: initial instructions for veterinarians dealing with suspect outbreaks, protective clothing, sampling equipment, diagnostic equipment, animal handling equipment, disinfectant and equipment for its application and stationary including maps and warning signs.

The audit team noted that:

- in one of the RSAAs visited the emergency store was located at a protected site located at a university clinic. Clear instructions were available as to how to access the site and a specific person had been allocated responsibility for maintaining the supply of stock within its expiry date.

#### 5.2.10 Vaccination policy and availability of vaccine

Whilst information about emergency vaccination is incomplete or outdated in the EU approved versions of the contingency plans, the draft CPs for FMD (2009), AI (2009), AHS (2009) and BT (2007) include plans for emergency vaccination as required in EU legislation. These plans outline criteria for vaccination, estimated number of vaccine doses (FMD, BT), sourcing of vaccine, the vaccine distribution chain and vaccinating personnel.

A recent (2011) comprehensive risk assessment for the spread of FMD within Finland and emergency vaccination, which makes use of *inter alia* assessments by the FMD Expert Group, concluded that an outbreak would most likely be limited to relatively few farms and that emergency vaccination would be neither necessary nor economically beneficial in Finland (see section 5.3.1).

The audit team noted that:

- no vaccination requirements for ND were identified in the CP for AI/ND (2002) which is not in line with the requirements of Article 21(1) and Annex VII(9) of Council Directive 92/66/EEC. In fact, the approved CP stated that there were no efficient or safe vaccines available;
- the CP for CSF (2003) stated that a revision of the vaccination policy and plan would be made when a risk assessment would be available at the end of 2004. However, the 2003 CP had not been amended;
- the disease-specific OMs for AI, BT, ND, CSF and FMD all included chapters on “vaccination”;
- Finland has a prohibition on the routine vaccination of poultry for ND. However, the OM for ND described the compulsory vaccination of pigeons against ND in certain types of

holdings and included a plan for emergency vaccination of poultry;

- FMD and CSF vaccination plans were incomplete, i.e. they described criteria and consideration but not sourcing of vaccine, estimated vaccine doses required, distribution or staff required for carrying out vaccinations;
- there is no requirement in the OM for tamper-proof sealing of samples or sample containers. Samples can be transported by private persons including the owner of affected animals but this is not encouraged by Evira;
- Finnish legislation provides the CA with the legal powers to demand the assistance of any veterinarian (under the age of 50) including final year veterinary students for inter alia emergency vaccination.

### **Conclusions on Contingency Plans:**

CPs are in place as required by Council Directive 2003/85/EC, Council Directive 2000/75/EC, Council Directive 2001/89/EC, Council Directive 92/119/EEC, Council Directive 92/35/EEC, Council Directive 2005/94/EC, Council Directive 92/66/EEC and Council Directive 2002/60/EC. However, it is difficult to ascertain if one is referring to the most recent version of the plan as they are not subject to version control. Detailed instructions for dealing with epizootic disease outbreaks are documented in the OM but this is not always fully up-to-date with local information in RSAAs. However, the OM is a useful and comprehensive document containing detailed information on how to deal with suspicions and outbreaks of epizootic disease.

Expert groups are in place as required by Council Directives 2001/89/EC, 2003/85/EC and 2002/60/EC. The lists of members were not always up-to-date and the terminology is confusing as the term Expert group for various diseases is also used for groups appointed by the Unit for risk assessment<sup>3</sup>.

There are inconsistencies with regard to vaccination between the approved CPs, the draft CPs and the OM. Documented vaccination procedures are not in line with EU requirements laid down in Council Directives 2003/85/EC and 2001/89/EC. In relation to vaccination it is not always clear which CP version would be applicable in an outbreak.

## **5.3 PREPAREDNESS AND AWARENESS**

### **Legal requirements:**

For all epizootic diseases relevant to this audit, there is a requirement that any occurrence of the disease is notified to the competent authority. With the exception of AHS, notification of the European Commission is mandatory. Surveillance programmes and systems for early detection of disease are required for BT and AI. For some diseases, risk factors (e.g. Areas of high animal density, worst cases scenarios) must be identified within the contingency plan. Specific

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<sup>3</sup> *In their response to the draft report the CA stated that the terminology as regards expert groups is not considered confusing in Evira. There are several projects in an expert and research institute like Evira where the term "Expert group" could be used also outside animal health control. The context defines the use of the term. There is only one meaning for the term in the OM and contingency planning.*

preparedness and awareness criteria are specified for FMD; for most other relevant diseases, a communications strategy and appropriate communications training are required.

The organisation of real-time alert exercises is required for FMD and AI. Alarm drills are required for CSF and ASF.

Annex 2 to this report summarises relevant legislative requirements.

## **Findings**

### *5.3.1 Epizootic disease risk analysis and alert levels*

Since 2001 Evira's Risk Assessment Research Unit and its predecessors have carried out several risk assessments relating to ASF, CSF and FMD. In addition to animal diseases the Unit, comprising 19 staff, also works with plant health and food safety. The Unit carries out risk assessments and risk profiling requested by Evira or MAF. Several reports relating to rapidly spreading animal diseases have been published on the Evira website:

[http://www.evira.fi/portal/en/evira/about\\_us/operation\\_areas/risk\\_assessment/reports/](http://www.evira.fi/portal/en/evira/about_us/operation_areas/risk_assessment/reports/).

#### **ASF:**

Possible routes of entry into the country for ASF – Risk profile (Evira Research Report 5/2011, in English).

Identified risks for ASF introduction were: people who had travelled to an infected area, the introduction of infected meat and meat products, the introduction of pigs or semen, contaminated transport vehicles, international catering waste and infected wild boars crossing the border to Finland.

#### **FMD:**

- The spread of foot-and-mouth disease (FMD) within Finland and emergency vaccination in case of an epidemic outbreak (Evira Research Reports 1/2011, in English).

- Spread of foot-and-mouth disease in Finland (EELA Publication 5/2006, abstract in English).

Identified risks for FMD spread if it were introduced were: transport of animals and carcasses for disposal), visits by veterinarians to farms. Airborne spread and spread by movement of sheep were not considered to be likely in Finland.

#### **BT:**

- Introduction and spread of Bluetongue in Finland (Evira Research Reports 3/2009, English summary). The risk of introduction of BT is based on temperature zones in Finland. The high risk area for incursion of infected midges is approximately 29 000 km<sup>2</sup> in the south west region of Finland.

#### **Others:**

- Hazards of Animal Diseases from raw former foodstuffs of animal origin from the retail trade (Evira Research Reports 1/2009).
- Quantitative risk assessment - Epidemic outbreak of classical Swine fever in Finland (EELA Publication 6/2005, abstract in English).
- A qualitative risk assessment on the spread of classical swine fever into and within Finland (EELA Publication 6/2002, abstract in English).

The audit team noted that:

- for each task the Risk Assessment Research Unit appoints i) a project group within the relevant section ii) an expert group to provide data and support which may comprise *inter alia* meteorologists and entomologists and iii) a cooperation group in which industry and other stakeholders would be represented;
- in addition to comprehensive risk assessments, which often take several years to complete (the 2011 FMD report took five years), the Risk Assessment Research Unit carries out risk profiling. The completion of a risk profile normally takes between one and twelve months;
- the risk assessments and risk profiles are used for long-term or medium-term contingency planning particularly using the assessments of the magnitude and duration of an outbreak and for targeting of surveillance activities. An example of the latter is the targeting of farmed wild boar in the AFS surveillance since the 2011 ASF assessment;
- the risk assessments and profiling had recently fed into the Evira guidelines and training for customs staff (risk of disease introduction through personal luggage), awareness campaigns and advice given by ETT on farms employing foreign farm workers and Evira's information cards for farms on disease risks;
- the Unit is currently in the process of developing software tools for the production of semi-quantitative assessments within 1-2 weeks of receiving the task;
- for more rapid assessments of an acute risk situation experts from the Risk Assessment Research Unit are members of the Evira Expert groups.

### 5.3.2 Notification requirements (peacetime)

All suspicions of the occurrence of epizootic diseases are compulsory notifiable under the requirements of the Act on Animal Diseases (55/1980). Owners must report suspicions to their veterinarian and all official veterinary stages (municipal, regional, Evira and the MAF) have to be informed in the chain of command as stated in the animal health legislation.

There have been zero to two official FMD/BT suspicions annually. Most often there have been one or two animals in a herd showing salivation or animals have had some skin or mucosal damage and/or secretion from eyes or nostrils. No cases of FMD or BT have been detected. In addition to suspicions, FMD has been tested for the presence of virus and antibodies to rule out the disease in eleven sheep in 2011.

There have been zero to a few official AI/ND suspicions annually. After the introduction of Infectious Bronchitis of poultry (IB) into Finland the number of AI/ND suspicions has been increasing. Suspicion has been mostly due to increased mortality or due to presence of clinical signs (drop in egg production, decrease feed intake or respiratory signs). In addition to official suspicions, annually 10 - 15 farms are tested for avian influenza in order to rule out the disease. In some cases, investigation has been also initiated on the basis of H5 antibodies detected in EU surveillance. No cases of Highly Pathogenic Avian Influenza have been detected.

There have been no official ASF suspicions before 2012. During this year two suspicions have been investigated – one wild boar was found dead near the border and one mini-pig having serious clinical signs (fever, petechiae) which turned out to be due to haemangiosarcoma. When investigating ASF suspicions, tests for CSF and Porcine Reproductive and Respiratory Syndrome are also carried out. No ASF or CSF has been detected. In addition, 128 pigs were tested in 2011 for ASF, 78 were domestic pigs, 42 farmed wild boars and 8 wild wild boars. During January to June 2012 around 1000 serum samples from slaughtered breeding sows have been tested for the presence of ASF and CSF antibodies. Seven samples from farmed wild boars have also been tested; all with negative results.

All official suspicions are investigated as quickly as possible. The movement restrictions are given to the holding immediately when the first information about possible disease outbreak is received. The laboratory carries out testing during weekends if necessary.

### *5.3.3 Monitoring and surveillance systems*

A yearly surveillance plan is made up by Evira and sent to the heads of the Regional Offices. They pass on the plan to the MVOs who do the sampling. FMD surveillance in Finland is passive being based on the detection of clinical signs on farms and slaughterhouses.

AI surveillance is carried out in accordance with Commission Decision 2010/367/EU. Active surveillance is carried out in poultry by testing for H5 and H7 antibodies. Risk-based sampling is in place targeting:

- production types, which have more risk for AI (e.g. duck and geese holdings and birds intended for re-stocking of supplies of game birds), and
- geographical areas, where population densities are highest (south-western part of Finland).

Samples are collected in slaughter houses except in the case of laying birds and game birds which are sampled on farms. Since 2011, only passive surveillance is carried out for AI in wild birds. Prior to 2011, active surveillance for AI was also carried out in wild birds. AI virus is tested for in the laboratory using PCR.

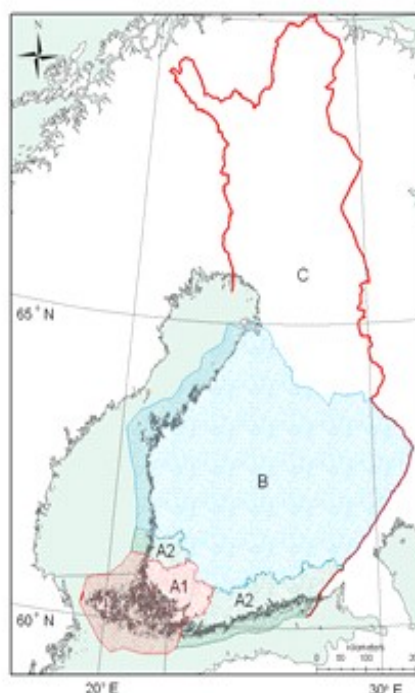
ND surveillance is carried out in order to demonstrate freedom of ND in poultry in order to maintain non-vaccination status of the country in accordance with EU legislation. Breeding flocks are the target population in the surveillance and 60 samples/flock are taken. Annually between 6000 and 8000 poultry samples are being tested for NDV antibodies. If antibodies are found the flock is sampled for the presence of ND virus. Passive surveillance is made based on clinical signs in poultry, racing pigeons and wild birds.

BTV surveillance has been done in accordance with Commission Regulation (EC) No 1266/2007.

Surveillance areas for BTV are indicated on the map below. The estimated surface area of Area A is about 28 935 km<sup>2</sup> and Area B about 151366 km<sup>2</sup>. At the time the programme was set up, the determination of the surveillance area was not based on administrative borders (lääni/län) but temperature zones in Finland. Intensified surveillance area A was set to cover the coastal areas of Southern Finland. The area most at risk for introduction of BTV was considered to be the most south-western archipelago area (islands of Area A1 in the map). Sheep and goat herds from the Åland archipelago have been included in the program. Sheep and goat herds outside Åland were examined clinically in the context of other health control programmes (maedi visna and scrapie). Wild cervids were also included in the BT programme in 2009 and 2010. Due to reduced risk of BTV in Europe already seen during 2010, the decision was made to carry out BTV antibody testing only in dairy herds of Area A1 and A2 and test herd milk only once a year. The testing of dairy herds from Area B (the former basic surveillance area) has been stopped in 2011. Slaughtered animals are sampled at slaughter house from suckler cow herds located in Area A.

## Map of BT surveillance areas in Finland

Area A                      High risk area  
Area B                      Low risk area



CSF surveillance is targeted to breeding animals and to sows on conventional farms. Sampling is done at slaughter houses and on breeding boar (AI) stations. Annually, 1400 – 1500 tests for CSF antibodies are carried out from AI stations and breeding herds and around 1000 samples from conventional farms with sows (sows, maximum of 5 per each farm) when they are sent for slaughter. Farmed wild boars are sampled for CSF and ASF antibody testing on the farms at slaughter. Passive surveillance based on signs is in place for pigs, farmed wild boars and wild boars in their natural habitat.

ASF surveillance has been intensified in the end of 2011 due to worsening ASF situation in the north-western part of Russian Federation. ASF antibody testing has been carried out since the beginning of 2012 from the same breeding animal samples as CSF antibody testing. In addition, farmed wild boars are sampled for CSF and ASF antibody testing on farm and at slaughter. Wild boars in their natural habitat are sampled by hunters in the south-eastern part of Finland.

Up until 1 June 2012 SVD surveillance was targeted to farms producing breeding boars and to boars on breeding boar stations. Annually around 1000 samples were tested for antibodies. Following a change to national legislation this surveillance has stopped. Passive surveillance based on detection and reporting of clinical signs is in place.

AHS is considered exotic disease in Finland. Passive surveillance based on clinical signs is done. Suspicions on the basis of clinical signs would be sampled (tissues samples, sera) and samples would be sent abroad to the EU-CR in Madrid for testing AHS virus.

The 2010 Annual Report on Animal Diseases in Finland in 2010 is available at:

<http://www.evira.fi/portal/fi/evira/julkaisut/?a=view&productId=283>

### *5.3.4 Public awareness activities in “peacetime”*

The Evira webpage ([http://www.evira.fi/portal/fi/elaimet/elainten\\_terveys\\_ja\\_elaintaudit/](http://www.evira.fi/portal/fi/elaimet/elainten_terveys_ja_elaintaudit/)) is the main route to distribute information about serious animal diseases to veterinarians, animal owners



and general public. Information is available in Finnish, Swedish and Russian about many diseases including AI, ASF and FMD. The Annual Report on Animal Diseases in Finland (see section 5.3.3 above) is also a valuable source of information. In addition there are leaflets on various diseases sent to farms and slaughterhouses, articles in farming magazines and newspapers, summaries of diagnostic results from animal health laboratories, bulletins issued by the Evira import and export control unit and maps of the known outbreaks of animal disease in other countries.

The audit team noted:

- comprehensive information on epizootic diseases was available at the various locations visited during the audit;
- much of the information (particularly relating to ASF) was available in Russian as it was targeted to Russian farm workers and other Russian visitors.

#### *5.3.5 Bio-security measures in place on animal holdings*

There are compulsory bio-security rules for chicken, broiler and turkey farms due to salmonella legislation. MVOs control hygienic procedures during official control visits to farms. However, the bio-security rules are not specified in detail in national legislation.

There are also bio-security rules when an officially controlled disease is either suspected or confirmed at farm. These bio-security rules usually include at least the confinement of animals inside and setting up disinfection points at exits, treatment of manure etc.

There are also industry driven bio-security rules for farms that belong to health care schemes (50% of cattle and 90% of pig farms). Most important industry driven health schemes are maintained and supervised by ETT. Industry driven bio-security rules are not approved, registered or supervised by the competent authority.

Broiler production is a strongly integrated sector organised by slaughterhouses. There is long term planning from grandparent level through to hatching, transport, rearing and slaughter. Industry driven contingency planning in the broiler industry covers the whole broiler production chain with the most stringent bio-security conditions being at grandparent level. There are strict biosecurity rules in place on farms. The rules are laid down in the quality systems of the industry. The poultry industry is strongly organised and the individual farmers commit to abide by the strict rules by signing a contract.

The audit team noted:

- strong incentives are in place to encourage farmers to adhere to high bio-security standards. Industry health schemes provide insurance policies that will compensate farmers for disease outbreaks that are not covered by government compensation. These policies contain conditions that require farmers to have adhered to bio-security rules before claims are paid;
- farms visited during the audit had bio-security measures in place with the requirement to shower and change clothes before being allowed access to the animals;
- on the farms visited by the team the biosecurity was maintained at a high level. Additional measures like for instance all-in all-out not only for the farm but also for the neighbouring farms so that a whole neighbourhood or village was animal-free during a certain period were mentioned;

- in the broiler farm visited there were strict rules requiring consultation of a veterinarian in case of increased mortality or decreased food or water intake. In such cases samples were taken and investigated;
- in the poultry slaughterhouse visited a quality system was present and there was an exchange of data between the slaughterhouse and the veterinarian responsible for the farm supplying the broilers.

### 5.3.6 *Staff training*

Veterinarians receive training in the recognising the clinical signs of epizootic disease during their degree courses. Staff from Evira assist in this training by giving lectures to veterinary students and this is facilitated by the veterinary faculty being co-located on the same campus as the Evira headquarters in Helsinki. Evira organises two annual training days for veterinarians. One day covers contingency veterinarians and another day covers all veterinarians. In addition Evira holds four training sessions per year for RVOs and also trains control veterinarians and OVs in slaughterhouses. Epizootic issues can be covered in all these sessions.

Training is also given by other organisations eg the EU Better Training for Safer Food seminars, NBVCG seminars (held every other year), training for laboratory personnel, local training given by RSAAs and others such as industry led animal health organisations.

The audit team noted:

- a NBVCG seminar was due to be held on the 19 to 20 September 2012. The topic was “Contingency Planning for the next Decade” and a copy of the programme was seen by the audit team;
- teams that would slaughter animals in the event of an epizootic outbreak are trained by slaughter house operators with input from the OVs. An examination post training is optional at present but will be compulsory in future with a certificate of competence being issued by an organisation under the National Board of Education;
- during one of the on-the-spot visits the audit team met a RVO who confirmed having received training on epizootic disease control on an annual basis and also having training under BTSF and the EU-FMD group.

### 5.3.7 *Simulation exercises*

Since 2004 Evira has conducted or taken part in 13 simulation exercises related to control of epizootic disease outbreaks or nuclear power incidents. A further exercise on ASF is planned for October this year. A summary of these exercises is in the following table:

Name	Year	Disease	Type	Comments
ND	2004	ND	Practical	
Heluna	2005	FMD	Practical	NBVCG
Loviisa 06	2006	Nuclear power plant	Desktop	An. welfare and food safety
AI-training	2007	AI	Desktop	NDCC
AI & the Foodchain	2007	AI	Desktop	Food Business Operators
BT crisis training	2007	BT	Desktop	NDCC
Hot air	2008	BT	Practical/Desktop	NBVCG
OLKI 08	2008	Nuclear power plant	Desktop	An. welfare and food safety
West Nile Fever	2009	WNF	Desktop	NBVCG -communication
Loviisa 09	2010	Nuclear power plant	Desktop	An. welfare and food safety
Sorkka ( <i>Cloven Hoof</i> )	2010	FMD	Practical	Slaughterhouse
OLKI 11	2011	Nuclear power plant	Desktop	An. welfare and food safety
Autumn 2011	2011	ASF	Desktop	NBVCG
Kotissa	2012	ASF	Desktop	Planned for October

The Nordic-Baltic Veterinary Contingency Group (NBVCG) has been involved in four of these simulation exercises. A report of one of these exercises has been published as published as a peer-reviewed paper <sup>4</sup>

The audit team noted:

- the exercises have tested the operation of the NDCC and in particular communications with other countries in cases where diseases can spread across national boundaries;
- disease investigation including backward and forward tracing across national boundaries was included in the simulation exercises;
- additional exercises take place at RSAA level which focus on the more practical aspects of dealing with epizootic outbreaks. The audit team saw an example of such an exercise on the killing of poultry which took place in 2010 and was used for the training of MVOs and RVOs;
- collection of samples and setting up restriction zones were included in many of the exercises eg. in “Heluna 2005” where dummy samples were sent to Denmark and zones were also set up. The implementation of the control measures required inside the zones was also practiced. Setting up of restriction zones was also included in Hot Air in 2008 (BT) and in Sorkka 2010 (FMD). Also the police and army have been used to assist in control of movements during outbreaks eg. during a ND outbreak in turkeys in 2004.

<sup>4</sup> Westergaard, J.M., Anderson, C.B., Mortensen, S. A foot and mouth disease simulation exercise involving the five Nordic countries. Rev. sci. Tech. Off. Int. Epiz., 2008. 27 (3), 751-758.

## **Conclusions on Preparedness and Awareness:**

Comprehensive risk assessments and risk profiles are in place and are made available to all relevant stakeholders. They have helped targeting surveillance and control activities and have provided valuable information for contingency planning.

Suspicious of epizootic disease outbreaks have been dealt with in accordance with the relevant disease control Directives.

AI surveillance and BT surveillance has been done in accordance with Commission Decision 2010/367/EU and Commission Regulation (EC) No 1266/2007 respectively. In addition, surveillance is carried out for ND, CSF, FMD, SVD and ASF.

Comprehensive and high quality information to raise awareness of the clinical signs and risks of entry of epizootic diseases is made widely available to the farming community and the general public.

High levels of bio-security are widely practised and enforced by industry driven animal health schemes.

### **5.4 LABORATORIES**

#### **Legal requirements:**

Articles 11 & 12 of Regulation (EC) No 2004/882 set out requirements in relation to sampling, analysis and official laboratories, including that laboratories must be accredited to and operate in accordance with ISO 17025.

Specific requirements relating to laboratories are laid down in the various Directives on epizootic disease control including the designation and functions of National Reference Laboratories, the tests and criteria to be applied, and the provision of adequate diagnostic capabilities and capacity. Diagnostic manuals are provided for FMD, CSF, ASF, SVD and AI (See Annex 2).

#### **Findings**

The audit team visited the Unit for Veterinary Virology and TSE testing and the Unit for Pathology – both Units are part of Evira.

##### *5.4.1 Veterinary virology research unit*

The Finnish Food Safety Authority Evira, Unit for Veterinary Virology and TSE testing is the national reference laboratory (NRL) *inter alia* for BT, CSF, ASF, SVD, AHS, AI and ND and it is the designated laboratory for FMD. According to a list provided by the laboratory there are test methods available in the laboratory for the detection of antibodies and virus genomes for FMD, SVD, BT, ASF, CSF, AI and ND and for virus isolation in cell culture for SVD and CSF. As indicated in Annex XI (A) to Council Directive 2003/85/EC samples from Finland would be sent to the NRL in Denmark for any tests requiring the handling of live FMD virus. Any samples requiring testing for AHD, rinderpest, peste des petits ruminants, contagious bovine pleuropneumonia,

epizootic hemorrhagic disease of deer, sheep and goat pox, vesicular stomatitis, lumpy skin disease, rift valley fever and equine encephalitis viruses would be sent either to the EURL (AHS, equine encephalitis), OIE-Reference Laboratory (contagious bovine pleuropneumonia) or to the NRL in UK.

Evira is accredited to EN ISO/IEC 17025 by the Finnish Accreditation Service (FINAS). The scope of accreditation with relevance for this audit for the Unit for Veterinary Virology and TSE-testing covers detection of: antibodies to PMV-1 virus in bird serum by haemagglutination-inhibition test and technique-based accreditation of i) detection of DNA-virus in samples of animal origin by in-house PCR, ii) detection of virus in samples of animal origin by in-house RT-PCR and iii) detection of virus in samples of animal origin by in-house real time RT-PCR. Within the scope of this audit the conventional RT-PCR tests for the M-gene of influenza A viruses and for N1 genes of AI H5 and H7 have been accredited by the laboratory under the technique-based accreditation.

There are general as well as disease specific contingency plans (2009-2010) for the laboratory for dealing with increasing demands for diagnostic testing during an outbreak. Efforts have been made to assess the personnel needed for processing of large numbers of samples. The head of the laboratory estimated that the laboratory would be able to cope with high volumes of samples for 1-2 weeks. Minimum stock of reagents and kits have been defined to ensure that testing of large numbers of samples can be carried out during a weekend without the need for ordering new stock. Re-stocking of diagnostic kits which may require fast procurement from commercial suppliers has been identified as a possible “bottle-neck” in a crisis.

The audit team noted that:

- the laboratory is housed in modern facilities including five bio-security level 3 laboratories, has well-trained and experienced staff and maintains good contacts with the EURLs;
- the new laboratory information management system (LIMS), which was introduced in February 2011, links all activities within the Evira laboratories and replaces 4-5 separate systems;
- estimates of the maximum capacity of the laboratory are included in some of the Finnish (draft) CPs. However, background data for such calculations were not available in the laboratory nor were such estimates included in the laboratory CPs;
- the laboratories in other MS to which Evira would send samples for analysis were sometimes different from those listed in the (draft) CP for the disease in question (rift valley fever, sheep and goat pox). In addition, epizootic haemorrhagic disease in deer were not mentioned on the list provided by the laboratory<sup>5</sup>;
- there was an instruction for sample reception staff which required them to note on the laboratory sample journal if a sample is defective but there are no acceptance criteria and no requirement to keep records in the quality system. Neither were there procedures in place to check that official samples had been packed and transported in accordance with the Operations Manual.
- with regard to differential diagnoses, staff of the laboratory stated that all suspect samples

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<sup>5</sup> In their response to the draft report the CA stated that EHD in deer has now been added to the list of diseases of which samples would be sent to the laboratory abroad (to OIE reference laboratory in France)

are analysed in parallel for AI/ND, CSF/ASF or FMD/SVD. However, there is no procedure in place where the sequences of analysis and decision trees (diagnostic pathways) are defined;

- the available methods for virus and antibody detection of CSF, ASF, SVD, AI meet the requirements in the relevant Decisions (diagnostic manuals). However, most of the analytical methods with relevance for the surveillance and detection of the diseases covered in the scope of this audit, including the enzyme-linked immuno-sorbent assays (ELISA) used routinely for serosurveillance of BT, CSF, ASF, SVD and AI, were neither included in the scope of accreditation nor validated in the laboratory;
- validation is carried out only when a method is prepared for accreditation internally or when a validation file is to be submitted the accreditation body. There are general standard operating procedures in Evira for validation of PCR-based methods and ELISAs, respectively, which require the approval of a validation plan by the head of unit;
- validation of a PCR for detection of BT virus was being finalised and it was foreseen that this method would be included under the technique-based accreditation of PCR methods later in 2012. The audit team was informed that PCR methods for detection of ASF virus, CSF virus and FMD virus might be validated and included before the end of 2013;
- no further methods with relevance for the CPs had been submitted to the accreditation body for assessment in connection to the 2012 accreditation audit (in October/November). Thus an extension of the scope of methods included in the accreditation certificate would not be possible until several months after the following accreditation audit, in the autumn of 2013;
- no validation plans had been approved for additional methods to be submitted for accreditation by the accreditation body and there was no time plan for such validations in the laboratory;
- in 2011 and 2012 to date the laboratory participated in 19 comparative tests organised by the EURLs for FMD, SVD, BT, CSF, ASF, AI and ND, mostly with satisfactory results. Participation in nine more tests was planned before the end of 2012;
- there is a procedure in place for addressing failures in comparative tests. However, this procedure does not require documentation of actions planned and taken. There was no documentation of how the laboratory had dealt with certain failed comparative tests for CSF and ASF where the methods used in Evira had failed to identify all positive test samples. Results from the EURLs had been received in April 2012.

#### *5.4.2 Unit for Pathology*

Evira's Pathology Research Unit and a part of Production Animal and Wildlife Health Research Unit work in the same premises in Helsinki. Production Animal and Wildlife Health Research Unit operates on three sites for production animals and on one site for wildlife. In Helsinki all preparation of tissue samples for histopathology is carried out by Pathology Research Unit .

The audit team noted that:

- instructions are in place for dealing with suspicions of rapidly spreading diseases starting in the necropsy halls. The instructions deal with all relevant aspects, including coordination with risk managers and laboratory, contamination risks, risks to staff, sample preparation and submission to the Unit for Virology, waste handling, cleaning and disinfection;
- internal procedures in Evira ensure that the sections carrying out necropsies are informed whenever a suspect case is being investigated by other Units in Evira to ensure extra vigilance and biosecurity;
- suspect samples from the necropsy hall in Helsinki would be transferred to the virology laboratory in stainless containers which would be disinfected on the outside before being placed in the sample elevator to the laboratory floor;
- the pathologists had provided Evira's field staff with targeted instructions for sampling of birds for AI/ND and sampling of pigs as well as for packaging of samples.

### **Conclusions on Laboratories:**

The laboratories involved in pathology and virology under the contingency plans have a well-established system for cooperation and for coordination with other relevant units in the competent authority. There are contingency plans for the laboratories but they are not always coordinated with the national contingency plans. There are suitable facilities and sufficient staff for laboratory work during a limited outbreak. However, *inter alia* sample acceptance criteria and diagnostic pathways have not been defined which could lead to inconsistent approaches, particularly in outbreak situations.

The choice of virological methods is in line with EU requirements and the laboratory routinely participates in comparative tests. However, the fact that most of the relevant test methods are outside the scope of accreditation and the lack of documentation dealing with problems identified in comparative tests makes it difficult for the competent authority to assess the reliability of the test results, e.g. from surveillance programmes.

## **5.5 DEPOPULATION FOR EPIZOOTIC DISEASE CONTROL**

The animal welfare objective of the audit was to assess the implementation of the EU requirements on animal welfare during depopulation laid down in Annex E of Council Directive 93/119/EC. This Directive was in force at the time of the audit and until 1<sup>st</sup> January 2013. The audit also assessed the state of preparedness for implementation of Article 18 of Council Regulation (EC) No 1099/2009 which applies from 1<sup>st</sup> January 2013.

### **Legal requirements:**

Article 10.1 and Annex E of Council Directive 93/119/EC lays down rules when killing is performed for the purpose of disease control. Methods permitted for normal slaughter which cause certain death are permitted. In addition, the competent authority may, permit the use of other methods ensuring that if methods are used which do not cause immediate death, appropriate measures are taken to kill the animals as soon as possible, and in any event before they regain consciousness; nothing more is to be done to the animals before it has been ascertained that they are

dead.

From 1<sup>st</sup> January 2013 the rules for the killing of animals laid down in Council Regulation (EC) No 1099/2009 must be followed. These rules include killing for the purpose of depopulation. In particular, Article 18 of the Regulation requires that the stunning and killing methods planned and the corresponding standard operating procedures for ensuring compliance with the rules laid down in the Regulation shall be included in the contingency plans required under Union law on animal health and that, when implementing depopulation, the competent authority shall take any appropriate action to safeguard the welfare of the animals in the best available conditions.

## **Findings:**

### *5.5.1 National legislation*

The audit team noted that:

- the CA indicated that to apply Council Regulation (EC) No 1099/2009 by 1<sup>st</sup> January 2013 some legislative changes would be needed, mostly the Animal Welfare Act. It is proposed to start the process for amending this act in 2013;
- the CA indicated that the full inclusion in the contingency plans of the stunning and killing methods planned and the corresponding SOPs for ensuring compliance with the rules laid down in Council Regulation (EC) No 1099/2009 may be delayed due to the introduction of an amended Animal Health Act in early 2013.

### *5.5.2 Contingency Plans/Operational Manuals/Instructions*

The audit team noted that:

- in one of the RSAAs visited the CA explained that since 2006 there had been only two epizootic disease incidents: a suspicion of AI and a confirmed outbreak of ND in pigeons. The premises with pigeons were depopulated, after the CA had put in place an action plan that involved two killing groups and the use of lethal injections with approved medicines, as indicated in the OM. The CA also considered other methods of killing, such as the use of CO<sub>2</sub> in containers and neck dislocation. These methods were eventually not used taking into consideration factors such as best welfare practice, logistics and number of birds to be killed;
- the CA indicated that the RVO in the LDCC makes the decision on which method of killing is used in an outbreak in cooperation with the contingency veterinarians, the CCA experts and the slaughterhouses OVs.

### *5.5.3 Methods of killing and availability of equipment*

The audit team noted that:

- regarding the use of cervical dislocation and a blow to the head (percussion), in the official translation to Finnish of Council Regulation (EC) No 1099/2009 the word "slaughterhouse" is incorrectly inserted in the first sentence of the point 3 of Chapter II of the Annex I. As a result, even though the English version does not allow their use as routine method, in accordance with the Finnish version these methods could be first choice during an outbreak;



- the CA does not expect to need to use derogations for methods of killing as they consider Council Regulation (EC) No 1099/2009 give additional choices to Council Directive 93/119/EC. The CA informed the audit team that the OM would be updated in relation to appropriate methods of killing in line with Council Regulation (EC) No 1099/2009;
- with respect to killing methods for birds the OM methods provides detailed instructions for the use of CO<sub>2</sub> and the CA has signed contracts with specialised companies to provide equipment and personnel;
- there is an inconsistency in the OM in relation to the killing of ducks and geese. At one point the OM indicates that killing of ducks and geese with CO<sub>2</sub> is uncertain but then it gives a minimum time for these species in the CO<sub>2</sub> atmosphere to ensure death. This is contrary to Table 3 of Annex I to Council Regulation (EC) No 1099/2009 that indicates that CO<sub>2</sub> at high concentration can be use in poultry except for ducks and geese;
- the CA preferred method for killing cattle was captive bolt plus pithing, as indicated in the OM. Regarding the use of electrical stunning it was noted that the minimum current table in the OM were in accordance with Annex I of Council Regulation (EC) No 1099/2009;
- an RVO met during the visit to the pig farm at first indicated that the preferred method for killing sows during an outbreak would be captive bolt and bleeding, and percussive blow to the head of piglets. He later indicated that this would more properly be a decision of the veterinarian of the slaughterhouse who would be in charge of the killing team on farm;
- the OV in the slaughterhouse visited indicated that electric stunning and bleeding would be used for sows, and a percussive blow for piglets. He stated that the RVO has the responsibility for the choice of method. The audit team noted that the electric tongs of the portable equipment were not fully suitable for use in sows. Finally, a CA representative indicated that for killing piglets the company that have a contract to provide CO<sub>2</sub> containers will be used, as a percussive blow to the head should not be considered a routine method of killing during depopulation, in accordance with the English version of the Regulation;
- the slaughterhouse visited had lists of staff that would be used for depopulation and equipment available but did not have a written contingency plan to cope with animal welfare during outbreaks, such as for interruption of normal work in the slaughterhouse due to shortage of staff engaged in on-farm killing or during the quarantine of animals in the lairage while waiting for sampling results in the case of a suspicion of epizootic disease.

### **Conclusions on depopulation for epizootic control**

The CA has started to make arrangements to amend CPs and OM to update them with the requirements of Article 18 of Council Regulation (EC) No 1099/2009. However, delays are expected due to their connection with the putting in force of the change in the Animal Welfare Act in the first months of 2013.

In general guidance to produce action plans to ensure compliance with the rules laid down in Council Regulation (EC) No 1099/2009 are already in the in the OM, eg. methods of killing and killing groups. However guidance on how to calculate killing rates and the factors limiting the method of killing are not yet developed.

The information in the OM does not fully guide the responsible RVO and the slaughterhouse OV in choosing the most suitable killing method and development of action plans so is not fully in line with the requirements of Article 18 of Council Regulation (EC) No 1099/2009.

## 5.6 DISPOSAL OF CARCASSES

Regulation (EC) No 1069/2009 lays down health rules for animal by-products (ABP) and derived products, in order to prevent and minimise risks to public and animal health. In particular, Article 9 (f)(i) specifies that animals and parts of animals killed for disease control purposes, shall be considered as Category 2 animal by-products and therefore subject to the disposal methods specified in the Regulation.

In relation to FMD controls, Directive 2003/85/EC (Article 72 (1), (4) & (5) and Annex XVII (points 13 & 14) requires that the means of disposal of carcasses does not cause environmental damage and that appropriate sites and undertakings for the treatment or disposal of animal carcasses be identified in the contingency plan. Council Directive 2000/75/EC on control of Bluetongue requires that the means of destroying carcasses be specified in the instructions for staff.

### Findings:

In the event of an epizootic disease outbreak the first choice for disposal of carcasses would be of in ABP processing plants approved under Regulation (EC) No 1069/2009. Information on the ABP processing system in Finland can be found in a report of a recent FVO audit carried out in order to evaluate the implementation of health rules on ABP (FVO report 2011-8959). The CA estimate that the main Category ABP processing plant could cope with 300 tonnes of carcasses per day. Other processing plants which currently process pet food and fur animal feed could be used if additional capacity were to be needed. There are also further incineration/co-incineration plants (mainly small scale) some of which could be used in an exceptional epizootic disease outbreak. Given the low probability of an epizootic outbreak which would overwhelm the rendering capacity it is considered unlikely that burial or burning of carcasses on open pyres would need to be used in Finland.

The audit team noted that:

- the Category 1 ABP processing plant visited is currently installing an additional processing line. Plant management informed the mission team that within three months this line should be operational and in a crisis situation an estimated 3000 tonnes per week of carcasses could then be disposed of using using an ABP Method 1 process (133 C at 3bar pressure for 20 minutes). Other ABP processing plants in Finland that usually work on a seasonal basis could be brought into service to provide a continuity of disposal capacity for ABP from slaughterhouses;
- comprehensive rules for transport of carcasses are included in the OM. Carcasses would be transported using leak-proof vehicles provided by the processing plant. They would move under a specific authorisation of the CA following disinfection. The rules are general and cover the transport of carcasses for all diseases including Bluetongue and FMD;
- sufficient suitable transport capacity should be available for dealing with all but the most severe epizootic crisis;
- the Environmental control officer (working for the Centre of Economic Development Transport and the Environment) responsible for the ABP processing plant visited by the audit team confirmed that the option of burial of carcasses had been considered in the event of a severe epizootic crisis. A map of ground water resources in the locality indicating areas where burial could not take was shown to the audit team. The audit team were informed that similar maps exist to cover the territory of Finland. No specific locations where burial could take place had been identified. This would be considered on a case by case basis in

the unlikely event that burial of carcasses was needed as a disposal option and is likely to be used only in the case of AI outbreaks in remote locations.

### **Conclusions on disposal of carcasses:**

There should be sufficient ABP processing capacity in Finland to dispose of animals that would have to be killed to control epizootic disease outbreaks in all but the most severe epizootic crisis. The animals would be processed in line with the requirements of Regulation (EC) No 1069/2009. The requirements of Article 72 § 1,4 & 5 and Annex XVII § 13 & 14 of Directive 2003/85/EC and relevant requirements of Council Directive 2000/75/EC Article 18 and Annex III are met by means of the procedures set out in the OM.

## **6 OVERALL CONCLUSIONS**

Contingency plans (CPs) have been drafted for the major diseases as required by European Union legislation. However, there is inadequate version control in place so it is difficult to verify the currency of any particular plan. The main instructional tool for dealing with epizootic disease outbreaks is a manual of operations (OM) which is a comprehensive set of documents prepared at the central level by the Finnish Food Safety Authority (Evira) but it is not always kept up-to-date at regional level.

Command and control structures for dealing with epizootic outbreaks were clearly defined at both central and local levels.

Rendering plant capacity should be sufficient to deal with epizootic outbreaks and it is unlikely that other disposal methods would be needed.

Surveillance for the various diseases is in place in line with the requirements of European Union legislation with diagnostic tests being carried out by the central laboratory of Evira. However, although this laboratory has a quality system in place and ISO 17025 accreditation it did not have in place accredited and validated diagnostic test methods for all the epizootic diseases required.

Simulation exercises in dealing with epizootic outbreaks take place on an annual basis and many of them involve co-operation with other countries under the auspices of the Nordic-Baltic Veterinary Contingency Group.

CPs did not include the welfare requirements in Regulation 1099/2009 requirements (which had not yet entered into force at the time of the audit. The OM did, however, contain information on killing methods which were largely in line with current requirements under Council Directive 93/119/EC.

In relation to the fact-finding elements of the mission the audit team found that routine monitoring for epizootic diseases was in place and comprehensive assessments of the risk of entry of epizootic diseases were in place and used to prioritise information campaigns. Industry driven biosecurity schemes were also effectively implemented.

## 7 CLOSING MEETING

During the closing meeting held in Helsinki on 7 September 2012 the audit team presented the findings and preliminary conclusions of the audit to the CA. During this meeting the CA did not indicate any major disagreement with the findings and preliminary conclusions.

## 8 RECOMMENDATIONS

The CA is requested to provide the Commission services with an action plan, including a timetable for its completion, within one month of receipt of the report in order to address deficiencies in the report and, in particular, the following:

N°.	Recommendation
1.	The CA should introduce a system to ensure that CPs for epizootic diseases (and the related OM) required under European Union legislation are updated in accordance with EU requirements.
2.	The CA should ensure that all analytical methods used for official samples are included in the scope of accreditation in order to meet the requirements of Article 12(2) of Regulation (EC) No 882/2004.
3.	In order to be ready for application of Council Regulation (EC) No 1099/2009 on 01/01/2013 the CA should ensure that staff are prepared to produce complete action plans as required by Article 18 of in cases where depopulation of premises is required in epizootic outbreaks.
4.	Documented procedures for vaccination should be developed in line with the requirements laid down in Council Directives 2003/85/EC, 2005/94/EC and 2001/89/EC.

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

[http://ec.europa.eu/food/fvo/rep\\_details\\_en.cfm?rep\\_inspection\\_ref=2012-6401](http://ec.europa.eu/food/fvo/rep_details_en.cfm?rep_inspection_ref=2012-6401)

## ANNEX 1 - LEGAL REFERENCES

Legal Reference	Official Journal	Title
Reg. 882/2004	OJ L 165, 30.4.2004, p. 1, Corrected and re-published in OJ L 191, 28.5.2004, p. 1	Regulation (EC) No 882/2004 of the European Parliament and of the Council of 29 April 2004 on official controls performed to ensure the verification of compliance with feed and food law, animal health and animal welfare rules
Dir. 2003/85/EC	OJ L 306, 22.11.2003, p. 1-87	Council Directive 2003/85/EC of 29 September 2003 on Community measures for the control of foot-and-mouth disease repealing Directive 85/511/EEC and Decisions 89/531/EEC and 91/665/EEC and amending Directive 92/46/EEC
Dir. 2005/94/EC	OJ L 10, 14.1.2006, p. 16-65	Council Directive 2005/94/EC of 20 December 2005 on Community measures for the control of avian influenza and repealing Directive 92/40/EEC
Dir. 2001/89/EC	OJ L 316, 1.12.2001, p. 5-35	Council Directive 2001/89/EC of 23 October 2001 on Community measures for the control of classical swine fever
Dir. 92/66/EEC	OJ L 260, 5.9.1992, p. 1-20	Council Directive 92/66/EEC of 14 July 1992 introducing Community measures for the control of Newcastle disease
Dir. 92/35/EEC	OJ L 157, 10.6.1992, p. 19-27	Council Directive 92/35/EEC of 29 April 1992 laying down control rules and measures to combat African horse sickness
Dir. 92/119/EEC	OJ L 62, 15.3.1993, p. 69-85	Council Directive 92/119/EEC of 17 December 1992 introducing general Community measures for the control of certain animal diseases and specific measures relating to swine vesicular disease
Dir. 2000/75/EC	OJ L 327, 22.12.2000, p. 74-83	Council Directive 2000/75/EC of 20 November 2000 laying down specific provisions for the control and eradication of bluetongue
Reg. 1099/2009	OJ L 303, 18.11.2009, p. 1-30	Council Regulation (EC) No 1099/2009 of 24 September 2009 on the protection of animals at the time of killing

<b>Legal Reference</b>	<b>Official Journal</b>	<b>Title</b>
Dec. 91/42/EEC	OJ L 23, 29.1.1991, p. 29-30	91/42/EEC: Commission Decision of 8 January 1991 laying down the criteria to be applied when drawing up contingency plans for the control of foot-and-mouth disease, in application of Article 5 of Council Directive 90/423/EEC
Reg. 1069/2009	OJ L 300, 14.11.2009, p. 1-33	Regulation (EC) No 1069/2009 of the European Parliament and of the Council of 21 October 2009 laying down health rules as regards animal by-products and derived products not intended for human consumption and repealing Regulation (EC) No 1774/2002 (Animal by-products Regulation)
Reg. 1760/2000	OJ L 204, 11.8.2000, p. 1-10	Regulation (EC) No 1760/2000 of the European Parliament and of the Council of 17 July 2000 establishing a system for the identification and registration of bovine animals and regarding the labelling of beef and beef products and repealing Council Regulation (EC) No 820/97
Reg. 21/2004	OJ L 5, 9.1.2004, p. 8-17	Council Regulation (EC) No 21/2004 of 17 December 2003 establishing a system for the identification and registration of ovine and caprine animals and amending Regulation (EC) No 1782/2003 and Directives 92/102/EEC and 64/432/EEC
Dir. 2008/71/EC	OJ L 213, 8.8.2008, p. 31-36	Council Directive 2008/71/EC of 15 July 2008 on the identification and registration of pigs (Codified version)
Reg. 1266/2007	OJ L 283, 27.10.2007, p. 37-52	Commission Regulation (EC) No 1266/2007 of 26 October 2007 on implementing rules for Council Directive 2000/75/EC as regards the control, monitoring, surveillance and restrictions on movements of certain animals of susceptible species in relation to bluetongue
Dir. 2002/60/EC	OJ L 192, 20.7.2002, p. 27-46	Council Directive 2002/60/EC of 27 June 2002 laying down specific provisions for the control of African swine fever and amending Directive 92/119/EEC as regards Teschen disease and African swine fever

<b>Legal Reference</b>	<b>Official Journal</b>	<b>Title</b>
Dec. 2003/422/EC	OJ L 143, 11.6.2003, p. 35-49	2003/422/EC: Commission Decision of 26 May 2003 approving an African swine fever diagnostic manual
Dec. 2000/428/EC	OJ L 167, 7.7.2000, p. 22-32	2000/428/EC: Commission Decision of 4 July 2000 establishing diagnostic procedures, sampling methods and criteria for the evaluation of the results of laboratory tests for the confirmation and differential diagnosis of swine vesicular disease
Dec. 2006/437/EC	OJ L 237, 31.8.2006, p. 1-27	2006/437/EC: Commission Decision of 4 August 2006 approving a Diagnostic Manual for avian influenza as provided for in Council Directive 2005/94/EC
Dec. 2010/367/EU	OJ L 166, 01.07.2010, p. 22-32	2010/367/EU: Commission Decision of 25 June 2010 on the implementation by Member States of surveillance programmes for avian influenza in poultry and wild birds