Revision of the EuFMD strategic plan

for the period 2019-2023
The EuFMD – and current 3 Pillars Strategy

39 member states (includes all EU-MS)

- Executive Committee (9 CVOs)
- Secretariat 100% funded by MS
- Programme funded by EC DG-SANTE (85%), others (15%)

EuFMD Strategic Plan 2015-19

THREE Pillars

1. Member states – preparedness
2. Neighborhood – reduce risks
3. Global – support and promote global strategy
PROPOSED REVISION

ANIMAL HEALTH SECURITY THROUGH BETTER PREPAREDNESS AND REDUCED RISK FROM FMD AND SIMILAR TADS ("HOLD-FAST")

Staying true to FMD.

HOLDING OFF the storm of similar TADS
The Strategic Plan
– PRINCIPLES- governing the daily way we will work

- **Continuous co-ordination** with the GF-TADS (Secretariats) at European and Global levels
- **Regular review of the risk** – and responsive management that is enabled to focus attention on areas of weakness and risk
- **Continuous engagement** with veterinary services in the neighbourhood
- **Effective utilisation and capacity building of the system of European and neighbourhood reference laboratories** for earlier detection and improved surveillance of FMD and similar TADS
- **World-leading training quality and tools** – aligned with educational best practise - tuned to the needs - and with the aim of application by national education providers
- **Continuous improvement** - in efficiency, delivery and impact [feedback obtained from end-users]

*Non-negotiable values and commitments that frame the entire strategic planning activity.*
Rationale for the Strategy

• FMD remains the #1 disease risk – in the European neighbourhood
• Over 250 million cases annually across the world – daily risk of FMD entry into EU: must maintain effort
• Capacity, Training and Preparedness tools already developed for FMD are relevant to similar TADS
• EuFMD, with EC support, already active in implementing surveillance and risks reduction programmes in areas where PPR, poxviruses, ASF are present
• FMD spread pathways involve all major species so adapting spread models (EuFMDis) to similar TADS is straightforward
• Europe (+GF-TADS) needs implementing partners able to work effectively at national level in the neighbourhood
A categorisation of FAST diseases

Category 1: FMD, and currently PPR, capripoxviruses

Criteria for inclusion:
- ruminant infections with similar risk factors to FMD;
- are currently present in directly bordering neighbourhood countries;
- Vaccination is an option.

A decision on whether TADS with clinical signs similar to FMD should be in Category 1 is needed. Such include SVD and Seneca Valley virus (SVV: (Senecavirus A infection).
Categories 2 and 3

Category 2: Rift Valley Fever, Bovine Ephemeral Fever [+simbu viruses]

Criteria:
- evidence for circulation/disease in one or more neighbourhood countries but NOT directly bordering to EU MS
- vaccination is needed in response;
- Ruminants are directly affected with major losses.

The need for **contingency plans and effective vaccines** for use in both the neighborhood and potentially in EU-MS is recognized as a priority.

Category 3: Not included in the above since

- these currently cause outbreaks in EU-MS and the priority is not therefore for actions in the European neighbourhood (e.g. ASF);
- co-ordination is well established at EU level: e.g. CSF, BT and AHS;
- For these, no specific activities are planned at this point [vaccine platform].

**Note:**

Outbreaks of a Category 2 FAST disease in countries directly bordering an EU MS could be grounds for elevation to Category 1 status.

Vaccine availability/suitability: also important for AHS
The Three Strategic Goals [Pillars]

1. **Improved preparedness** for management of FMD and similar TADS ("FAST diseases") crises by Members and across Europe as a whole

2. **Reduced risk to Members from the FAST diseases** (FMD and similar TADS) situation in the European neighbourhood

3. **Sustained progress of the GF-TADS Global Strategy against FMD and the improved security of supply of effective vaccines**
Pillar I: supporting MS to prepare for FMD and similar TADS (FAST)

DRAFT Framework for Action Plan

Extended Training: FAST Menu

Extended support options to other TADs

Wider scope of Balkans and THRACE programmes

Preparedness for use of emergency vaccination:

Applied research program

Wider Training Menu: new e-learning and other training, FMD And Similar TADS

Europe –wide and national spread models

Simulation exercise programme
Laboratory capacity assured - Diagnostic Bank
THRACE Surveillance: risk based

- Modelling and decision support
- Vaccine security
- Preparedness training
Pillar I [ Objectives]

1. **National capacity development**: Europe-wide programme of training in FAST disease crisis management delivered in formats that enable MS to develop and deliver better national level training programmes

2. **Regional capacity in planning**: Europe-wide, systematic support delivered to risk assessment, contingency planning and targeting of interventions through modelling of national and regional control measures for FAST diseases

3. **Preparedness for use of emergency vaccination**: for FMD and similar diseases, preparedness plans at European scale developed and tested, including enhanced public private partnering to assure emergency access to effective vaccines

4. **South-Eastern Europe**: integrated surveillance and emergency preparedness system for FAST disease covering the THRACE and Balkan programme countries

5. **Applied research program** delivering valuable tools and knowledge: addressing technical issues considered Europe-wide priorities for national preparedness against FAST diseases
Pillar 1: flexibility to adapt to the changing priorities

DRAFT Framework for Action Plan

Extended Training: FAST Menu

Extended support options to other TADs

Wider scope of Balkans and THRACE programmes

Preparedness for use of emergency vaccination:

FAST technical support: Extended pool of expertise (EU-RLs, OIE/FAO Ref Centres, Neighbourhood experts), on-call down basis

Program Oversight

Executive Committee (decisions on emphasis +/- TADS)

Guidance to ExCom:
Strengthened role of the expert committees (Standing Technical Committee STC), working with EFSA to guide on priorities
Pillar II: Risk reduction from FMD - and similar TADS - in the neighbourhood countries

Expected Results:

- Synergies achieved between FMD control and surveillance for other TADS
- Better early warning: multiple TADS
- Better co-ordination and informed response (REMESA, OIE/FAO, EFSA/EU)
- Effective neighbourhood networking of TADS Ref -Labs (bridging role)
Pillar II: Risk reduction from FMD - and similar TADS - in the neighbourhood countries

- Support national PCP implementation (FMD), coordinate with GF-TADS
- FAST: Improved Early Warning through surveillance in HOT-SPOTS
- Extended Training Support programmes (more delivery through partners)

Program Oversight
- Executive Committee (on +/- TADS)

Guidance to ExCom:
- Strengthened role of the expert committees (Standing Technical Committee STC), working with EFSA to guide on priorities

FAST technical support: surveillance support will engage with EU-RLs (FMD, Poxviruses, PPR etc), +NRLs, bridging EU and neighbourhood expertise
Pillar III: Supporting the GF-TADS Global Strategy on FMD

Expected Results:

- Global PCP – progress is better measured and communicated
- OIE/FAO FMD surveillance system is functional and supports regional FMD Roadmaps
- Global uptake of training courses (through GF-TADS and academic partners)
- Synergies achieved between FMD and PPR [progressive control programmes]
Significant outcomes that will increase European preparedness

• **A Europe-wide TADS modelling capacity** serving MS and the region as a whole (EuFMDis+)
  – able to identify the impacts of TADS and of control measures
  – This capacity should be in place by 2021.

• **Laboratory proficiency and capacity for FAST diseases** established across the Balkan countries supported by a **diagnostic bank**
  – A cost-efficient system for ensuring all NRLs participate in proficiency tests for FAST diseases
  – Bank enabling re-supply in first week(s) of a FAST incursion is proposed.
  – potential emergency supply for other MS beyond the Balkan region.
  – This capacity to be established by end of 2020.

• **Integrated FAST disease early warning system** in the REMESA/neighbourhood region
  – be in place by end of 2020.

• **Vaccine security platform**:  
  – Addresses a gap affecting contingency planning
  – public-private platform (PPP) – bringing private sector, RL and R&D experts, vaccine registration and contingency planners together on a regular basis
  – from early 2020
HOLDING FAST : Core actions of proven impact

- A World –leading Training Programme.
- GET Prepared: expertise and support to guide MS on stress-testing of their preparedness resources.
- Regionally co-ordinated targeted, national assistance to countries to apply the Progressive Control Pathway (PCP-FMD): The intensity of effort will be co-ordinated with GF-TADS/REMESA partners.
- Fund for Applied Research (FAR Fund): maintained. Studies with generic (multi-TADS) applicability will be favoured, but if funds allow there may be expansion to specific technical studies on single TADS if high enough a priority.
Oversight, Governance, communication and co-ordination with partners

Oversight and governance
• ExCom. the periodic (six-monthly) review

Co-ordination, in a changing disease risk environment
• need for periodic review and re-positioning of efforts to achieve the greatest effect
• the priorities of GF-TADS Europe and any associated expert groups will provide a demand basis for change in activities.
• The Executive and its three Officers will respond to proposals for change at the regular six-monthly Executive or on an ad-hoc basis where immediate response is needed that was not foreseen or adequately resourced in the work programme

Co-ordination with the private sector: specific platforms
• Modelling and emergency planning, where impacts of FAST diseases and control options affect the private sector
• For vaccine security

Technical support for decisions on changing priorities
• Greater role of the Standing Technical Committee (STC) on decisions upon changes in priorities or intensities of efforts on specific TADS.
• engagement between the STC, the OIE-SRR and EFSA

Emergency management: co-ordination
• On a day to day basis, the programme management resides with the EuFMD Secretariat, who will decide on appropriate actions
• work with the GF-TADS Emergency Management Centre (EMC : based in FAO) where specific missions are required.
  – Specific agreements/MOU may be developed with the EMC
Financial considerations

Financial

1. Current program (ends 9/2019) financing is 2m€ per year*, of which 1m€ per year on Pillar 1 (Member States)
2. With this budget, only a small diversion of resource from FMD to other TADS can be managed without affecting FMD operations
3. Additional funds needed to achieve significant change in European security
   1. Diagnostic Bank (FMD+) for proficiency and emergencies, for Balkans/THRACE (or wider)
   2. Laboratory testing for additional TADS in a neighbourhood (“early warning” surveillance) in hot-spots
   3. Whole –Europe spread modelling efforts to optimise control efforts on basis of risk
   4. Emergency (vaccine) reserves OR assured supply (AESOP): and associated platform

*amount unchanged since 2006
PHASE IV to PHASE V

PHASE IV by Pillars

- PHASE IV
  - 24%
  - 49%
  - 26%

PHASE V by Pillars

- PHASE V
  - 21%
  - 45%
  - 29%

PILLAR I  PILLAR II  PILLAR III

97th Executive Committee meeting
31 Jan – 1 Feb 2019
Other considerations

Human resources

1. No significant change needed in numbers
2. Some need for a wider expertise base [advisors/consultants] - managed by call for experts – more in laboratory area than in epidemiology & control policies
3. Need to strengthen professional positions within Secretariat – from two (P5/P2) to three (P5/P4/P2) to cope with level of co-ordination with GF-TADS/partners – and depth

Other

1. EuFMD Constitution
   
   No immediate need to change – flexibility exists.
   
   Future Executive to consider need for revision ahead of the General Session 2021
Thank you

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