

Food and Agriculture Organization of the United Nations



VIRTUAL MEETING 11 APRIL 2022



Report

99.3 SESSION OF THE EXECUTIVE COMMITTEE OF THE EUFMD COMMISSION

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FOOD AND AGRICULTURE ORGANIZATION OF THE UNITED NATIONS European Commission for the control of Foot-and-Mouth disease (EuFMD) Rome, 2022

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Conclusions

Item 2

1. Endorsement was given to the report on the actions since October 2021, with an appreciation for the volume of actions completed with success.

Item 3

2. Acknowledgement was given to the need for constant monitoring for the risk of introduction of Footand-Mouth Disease and Similar Transboundary Animal Diseases (FAST) into Europe, with specific reference to the factors that might drive risk changes.

3. Action should be taken to report on risk of FAST disease introduction into Europe from the neighbourhood at the Special Session.

Item 4

4. Acknowledgement of the work undertaken under Pillar I and agreement with the objectives and priorities defined for the upcoming semester.

5. Bovine Ephemeral Fever should be removed from the workplan once the amendments to the constitution are adopted with the list of FAST diseases included in the mandate of the EuFMD.

6. Acknowledgement is given by FAO and Global Framework for the Control of Transboundary Animal Diseases (GF-TADS) to the EuFMD support to the global FMD control strategy.

7. Consideration is given to the cross-cutting nature of training, supporting the Member Nation, European neighborhood as well as providing global assistance.

Item 5

Discussion of items.

Item 6

8. Member Nations must be informed of the comments provided to the proposed amended text of the Constitution ahead of the Special Session.

9. Action should be undertaken to develop guidance documentation and training material on laboratory sample processing and shipment for transboundary diseases similar to FMD.

Item 7

10. The Committee acknowledged the work undertaken and agreed on the programme and target defined by the Standing and Special Committees.

Item 8

11. Endorsement was given to the financial report provided.

12. Action should be undertaken to submit the budget revision to the donor providing the justification for the reallocation of resources for the three pillar activities.

REPORT OF THE 99.3 SESSION OF THE EXECUTIVE COMMITTEE

The Session was opened by Dr Martin Blake, Chairman of the Commission, who welcomed all the participants.

Officers of the Commission present at the Session were: Dr Martin Blake (MB, Ireland, President), Drs Jean-Luc Angot (JLA, France, Vice-President), and Lajos Bognár (LB, Hungary, Vice-President).

Executive Committee members present were Drs Hendrik Jan Roest (HJR, The Netherlands), Valentín Almansa de Lara (VA, Spain), Olev Kalda (OK, Estonia), Nikolce Babovski (Republic of North Macedonia) and Chrysoula Dile (CD, Greece).

International organizations observers were Dr Francesco Berlingieri (FB, DG SANTE, Directorate-General for Health and Food Safety of the European Commission), Dr Keith Sumption (KS, CVO-FAO), Drs Monserrat Arroyo Kuribrena and Néo Mapitse (MA, NM, The World Organisation for Animal Health, OIE). The fourth official observer organization, OECD, was not present although invited. Reference Centres were represented by Drs Don King for the World Reference Laboratory for Foot-and-Mouth Disease (WRL-FMD) at The Pirbright Institute (DK, TPI), Labib Bakkali-Kassimi (LBK, ANSES), for the European Union Reference Laboratory for Foot-and-Mouth disease (EURL-FMD) and Nick De Regge (NDR, Sciensano); Dr Stéphan Zientara (SZ), participated as Chair of the Standing Technical Committee.

Dr AbdulNaci Bulut also participated on behalf of Dr Seckin (NB, Turkey).

Secretariat for the 99.3rd Executive Committee Session comprised, Fabrizio Rosso (FR, Deputy Executive Secretary), Tsviatko Alexandrov (TA, Pillar I coordinator), Francesca Ambrosini (FA, Pillar II coordinator), Wilmot Chikurunhe (WC, Pillar III coordinator), Marcello Nardi (MN, Chief Learning Specialist), Cécile Carraz (CC, Chief Operations Manager) and Nadia Rumich (NR, Programme Implementation Manager, Communication and Networks Officer).

Item 1. Adoption of the Agenda

The Agenda was suggested to have item 6, Update on amendments of the Constitution and ROP as first topic. This was agreed. (**Appendix 1**).

Item 2. Report on the activities since the 99.2nd Session

Presenter: Fabrizio Rosso

Key Messages

Activities continued to be delivered towards the objectives defined in the workprogramme with particular reference to capacity building, emergency preparedness, pre-qualification system for FMD vaccines, monitoring of risk for MNs, assistance to FMD control in the neighbourhood, support to FMD WG workplan and to global surveillance.

Covid19 has impacted surveillance and control activities with increased FMDv circulation in the neighbourhood, reduced protection of livestock and higher risk for Europe. Outbreaks notified in Tunisia, Jordan, Palestine.

Pillar I and Pillar III managers have been recruited and the FAO launched the recruitment process for the Executive Secretary.

Summary

The Report (**Appendix 2**) was provided by Fabrizio Rosso, who outlined actions taken since the 99.2nd Executive Committee Session.

In this period, consistent efforts continued to be dedicated to training, with new <u>training menu</u> provided to Member Nations (MN), an impact assessment conducted on trainings delivered in the first biennium, and significant development of the <u>TOM</u> - training management system - with a web app developed and soon available to MNs and other countries. MN have shown strong interest in continuing field training such as Real Time Training. Alternative options are being developed to ensure the delivery and cascade to a wider audience. Therefore, focus has been placed the development of a hybrid real time training to be conducted in a free-disease setting, with the use of innovative tools (virtual reality, crisis simulation software, 3D lesion modelling) combined with field exercises.

The programme on emergency preparedness which focuses on priorities identified by public and private sectors such as vaccination and disposal capacity, enhanced biosecurity and exit strategies, continued as planned. Further development of the <u>EuFMDIS</u> is reported with 14 countries now involved and the second multi-stakeholder platform meeting on vaccine security held in January 2022. The platform is recognized as a good model of multidisciplinary Private Public Stakeholder discussion forum, to address critical issues related to vaccination (availability and accessibility of quality vaccines) in emergency or endemic settings.

Good progress is reported in the development of vaccine demand estimation model (<u>Vademos</u>) and further development have been achieved on the pre-qualification system for FMD vaccines (<u>PQv</u>) in particular with definition of product summary files, IT procedures, evaluation team and process, risk manual, policy document and business plan. The PQv system should be able to receive applications in the second half of 2022.

The semester was characterized by the notification of FMD outbreaks in the European neighbourhood (Tunisia, Jordan and Palestine), and difficulties reported in implementing control strategies (i.e. vaccination programmes) with reduced protection of livestock. In this regard, the risk reduction programme has ensured support to countries affected, providing emergency assistance (sample shipment support, diagnostics, technical support, emergency training) while continuing support on risk mapping, better surveillance, early warning and control of FAST diseases.

The FMD situation in the neighbourhood has been monitored, with additional efforts for a better and regular collection and analysis of risk information to ensure an improved monitoring of risk. FAST and FMD <u>quarterly reports</u> have been produced regularly and a Risk Monitoring tool for MNs has been developed and tested. The situation will continue to be followed with attention, considering the increased risk in the neighbourhood due to animal movements connected to seasonality and national feasts, reallocation of resources for other priorities, impact of the Covid-19 pandemic on surveillance and control activities, frequent changes in the vet services management and last, but not least, the current conflict in Europe that might contribute to increase the risk.

Continued support has been provided to countries to progress along the Progressive Control Pathway (Georgia, Turkey, Armenia, Azerbaijan, and Lebanon), to improve surveillance (in Morocco, of note is the activity conducted in partnership with MAPA-Spain and Sciensano). Significant improvements are reported in control plans implemented in Turkey and Georgia.

Support to the global FMD control strategy has been maintained to a significant level, contributing to the delivery of the FMD Working Group workplan and promoting initiatives in line with objectives of the 2021-2025 GF-TADs strategy. In particular, the technical and operational support has been ensured for three roadmap meetings (WA, ME, EA) organized in virtual format, with a good collaboration with regional Virtual Learning Centres (VLC) and the assistance to the PCP Support Officers (PSO) system, which is now being restructured to improve efficacy and efficiency, with a dedicated Training Development Framework to ensure adequate skills of PSOs.

The agreement with the FMD World Reference Laboratory ended in December 2021. It has led to good achievements in global surveillance, reference laboratory network, proficiency test scheme, and assistance for Post Vaccination Monitoring. A new agreement has been discussed and is close to finalization. Collaboration with EURL- ANSES / Sciensano has also assisted in providing high quality trainings, assistance to laboratories of the European neighbourhood and PTs to laboratories of European countries not members of the EU.

Regular coordination was ensured with GF-TADs partners (FAO and OIE) at global and regional level, and with regional organizations such as the Arab Organization for Agricultural Development (AOAD), and the Mediterranean animal health network (REMESA).

On the <u>Secretariat</u> side, the Executive Secretary's position had to be re-advertised and the deadline for response was end of March 2022. Tsviatko Alexandrov has been recruited to manage Pillar I and Wilmot Chikurunhe is co-leading Pillar III, together with Kees Van Maanen. A new vacancy announcement for consultants and Personal Services Agreement (PSA) has been posted in order to fill the gaps for normal internal turnover.

Staff wellbeing <u>guidelines</u> and teambuilding initiatives (internal simulation exercise and retreat) were developed to ensure common vision and enhance collaborative environment. A EuFMD communication strategy (internal and external) has also been developed, including the implementation of new tools.

As per the previous Executive Committee recommendation (a summary is available in the item 2 document) those which are not yet fully achieved, but with work already started, are related to:

- Feasibility of Proficiency Tests (PT) for other FASTs and revision of results of PTs for FMD conducted in past years.
- Organization of the Open Session ongoing and planned for October 2022.
- Budget revision the reallocation of funds has been submitted for internal checks and will be officially proposed to EC and it is also included in the reporting documents.
- The establishment of P2 and P3 position waiting the procedures for in-job grow that should be released soon by FAO.

Concerning additional programmes funded by other donors, the programmes in place are related to:

- Delivery of the third course scheduled in May 2022 on FMD Emergency Preparation for Canada (CFIA).
- Real-Time FMD training program for US and Canadian state and private veterinarians courses replaced by Virtual Real Time Training. A similar agreement with Australia is in the pipeline.
- A project funded by Bill and Melinda Gates Foundation (BMGF) on "Sustainable Business in Animal Health Service Provision through Training for Veterinary Paraprofessionals", implemented in collaboration with HealthforAnimals and the World Veterinary Association in three selected countries Uganda, Nigeria and South Africa (dedicated report is available in documentation).
- The International exercise 'Phoenix' within the project on Resilience against Agro -Terrorism and Agro-Crime" funded Global Affairs Canada (via OIE/FAO, sub-grant agreement).
- Funds have been received from Spain (MAPA) through the OIE, for activities held in 2021 to improve FAST risk-based surveillance in North Africa, in addition to funds received in November 2019 from France for training and awareness in the Mediterranean Animal Health Network (REMESA) countries.
- A one-year project for developing a Feasibility study on the Development of a sustainable system for pre-qualification of veterinary medicines (PQm) started in October 2021 with a BHA-USAID contribution. The project builds upon the pre-qualification system for veterinary vaccines. Depending on the outcome of the project, the subsequent phases might be proposed and possibly accepted by BHA.

The meeting documentation included a collated set of documents, with the Cluster report and the updated Six-monthly report (**Appendix 3**). All documents were made available in the EuFMD Events app.

The Chair thanked the Deputy Executive Secretary for the reports, which were clear and easy to read.

Discussion

HJR asked if the pre-qualification scheme of veterinary medicine considers similar initiatives that might be under development within FAO and/or OIE.

FR indicated that the PQm was proposed to the donor Bureau for Humanitarian Assistance of the United States Agency for International Development (BHA-USAID) considering the possibility to build upon the expertise and experience gained in the establishment of a similar system for FAST vaccines. The proposal was made with the understanding that currently procuring organizations, usually have in place systems to assure not the quality of medicines, but the quality of vendors of veterinary medicines, and this is ensured either through quality assurance schemes (BHA) or through evaluation as part of tender procedures (FAO). A Technical Advisory Group has been established for assisting the development of the feasibility study on PQm which involve FAO, OIE, National Competent Authorities, international organizations and representatives of producers, in order to have proper guidance and avoid any overlapping with ongoing initiatives.

Conclusions

1. Endorsement was given to the report on the actions since the previous Executive Committee, with an appreciation for the volume of actions completed with success.

Item 3. FMD global and regional situation and update on FMD activities

Presenters: Donald King (WRL) and Labib Bakkali-Kassimi (ANSES)

Key Messages

WRL continued assisting the global FMDv surveillance.

There is evidence of movement of viruses out of the Indian subcontinent into central Asia. Currently, the most active virus, at global level, is O/ME/-SA/Ind-2001e, having affected Mauritius, Russian Federation in 2021 and Kazakhstan in 2022.

The outbreak of O/EA-3 in Tunisia in January 2022, closely relating with outbreaks in Nigeria in 2021 and not related to viruses that caused outbreaks in Tunisia in 2018 /2019, appears as evidence of introduction of a new virus lineage into the Maghreb.

A new outbreak of FMD serotype O was detected in Namibia for the first time.

A new open-access tool for FMD genotyping -FMD genomics dashboard - has been developed, working with Epi Interactive and within the (Letter of Agreement) LoA with EuFMD.

An inter-laboratory study on VNT highlighted marked variability in test results from different laboratories when VNT is used to test sera generated after vaccination.

The French Agency for Food, Environmental and Occupational Health & Safety - ANSES and the World Reference Laboratory - WRL participated and provided technical assistance to three virtual roadmap Meetings for the GF-TADs.

ANSES launched the proficiency testing in February 2022, with 38 European countries registered

Sciensano conducted training courses on serological, virological and molecular diagnosis of FMD for students from University of Nairobi and the University of Addis Ababa.

ANSES has supported the veterinary services of Jordan in the assessment of the FMD epidemiological situation and the risk of spread in the country and region. Support was also provided to the veterinary services in laboratory diagnosis, communications and awareness raising.

<u>Summary</u>

DK presented an update (**Appendix 4**) from the World Reference Laboratory for FMD (WRL). The report highlighted key events which took place since October 2021, mostly events with the highest FMD risk to Europe. The WRL coordinates the OIE-FAO reference laboratories in different parts of the world.

Regarding sample submission, WRL issued reports for six countries namely (Democratic Republic of the Congo (DRC), Islamic Republic of Iran, Jordan, Kenya, Mongolia, Nepal, Islamic Republic of Pakistan and Uganda. During the reporting period, sequence exchange reports were received from seven countries (Israel, Jordan, Kazakhstan, Palestine, Russian Federation, Tunisia, and Zambia) through the respective regional laboratories. Sample shipments were received from Botswana, Malawi, Namibia and Zambia while samples are expected from Egypt, Ethiopia, Ghana, Israel, Kuwait, Qatar, United Arab Emirates (UAE) and Thailand. There has been a coordinated approach targeting priority countries. The laboratory has completed testing Post Vaccination Monitoring (PVM) studies sera for Palestine and Jordan which was supported by EuFMD on sample shipping.

Drivers of trans-pool movement of viruses since 2015 are related to movement of animals due to increased demand for animal protein, human migration as well as new opportunities such as road building. Viruses are seen increasingly to be moving longer distances to cause outbreaks in new parts of the world. There is evidence of movement of viruses out of the Indian subcontinent into central Asia, of particular note being O/ME/-SA/Ind-2001e lineage causing outbreaks in Kazakhstan and Russian Federation. This highlights that viruses are moving in a westerly direction from Mongolia into central Asia. Another lineage monitored in the past six months is O/ME-SA/PanAsia-2^{ANT-10} in the Eastern Mediterranean in countries such as Jordan, Palestine and Israel, with closely related sequences indicating single source, but also related to outbreaks in Pakistan in 2021. The close relationship with viruses in the 2021 outbreaks in Pakistan is atypical. The viruses in Jordan and Israel were expected to show a strong relationship with viruses in intermediate countries and less with Pakistan. This surveillance gap could be solved when new samples expected from a number of states in the Gulf countries are tested and results analyzed. There are reports of severe clinical disease associated with the strain. Vaccine matching data has shown poor results for O-Manisa against this lineage.

The outbreak of O/EA-3 in Tunisia in January 2022, with sequence data closely relating with viruses detected in Nigeria in 2021 and not related to viruses that caused outbreaks in Tunisia in 2018 /2019, shows the introduction of a new virus lineage into the Maghreb. Currently, samples were sent from ANSES and vaccine-matching is in process.

The most active virus at a global level is currently O/ME/-SA/Ind-2001e, having affected Mauritius and Russian Federation in 2021 and Kazakhstan in 2022. Outbreaks in Libya have not been reported officially and submission of samples from this area would support better understanding of the epidemiological situation.

DK reported the detection of a new outbreak of serotype O in Namibia. This is the first time this serotype has been reported in Namibia and a paper describing the outbreaks has been accepted for publication in Transboundary Diseases. In addition to serotype O threatening the region, in South Africa there were outbreaks of SAT2 in KwaZulu-Natal in 2021 and there have been new SAT2 outbreaks in Gauteng and North–West provinces in 2022.

Vaccine prioritization was discussed under the <u>PRAGMATIST</u>, a tool to prioritize FMD antigens against present risks. The lineage risk profiles were updated in November 2021, and the current effort is to prepare an article that will be submitted to the Frontiers in Veterinary Sciences.

The proficiency testing scheme funded under the LoA from EuFMD is in the final stage of phase XXXIII with 51 participants and 33 countries having participated. The exercise is coming to completion and a new phase will begin in 2022.

A new open-access tools for FMD genotyping, has been developed, working with Epi Interactive. The initial phase saw the completion of an FMD genomics dashboard. This will allow users to create custom genotyping reports by inputting sequences, and was demonstrated to EuFMD and Emergency Prevention System global health intelligence and early warning platform (EMPRES-i) teams. More tools are expected with the new LoA funds for further expansion, including FMD vaccine selection via PRAGAMATIST, surveillance and vaccination.

An open-access system for FMD sequences (FMDbase) - a virus sequence database - has been created to address the problem of accessibility data on FMD genomics and went live in 2021.

Practical training on diagnostics is back, having been affected by the COVID-19 pandemic, and the EuFMD virtual-learning material has been translated into French. A new v-learning course is planned for autumn 2022 in English and French.

DK reported an inter-laboratory study on virus neutralization tests (VNT), which highlighted marked variability in test results from different laboratories when VNT is used test sera generated after vaccine. A workshop was convened to discuss options, including use of validated reference sera improve conformity between laboratories.

LBK gave the presentation for EURL (**Appendix 5**) on the activities conducted by ANSES and Sciensano over the past six months.

The proficiency testing for 2022 was launched in February, with 38 countries registered. Sample shipment is expected in May 2022, and sample analysis June 2022. A laboratory meeting is planned in September 2022. Four panels have been developed with panel 1 on live FMDV virus detection and typing, panel 2 on inactivated FMDV virus detection and typing, panel 3 on serum for Ab detection, panel 4 on serum for SVDV Ab detection

The EU Laboratory network meeting was organized in October 2021, with 87 participants. The intention is to organize a face-to-face workshop in September 2022 in Paris.

The consortium received 15 samples from Tunisia, which were all positive on polymerase chain reaction (PCR). They were typed, and sequenced, all being strain O/EA-3, and all related to outbreaks in Nigeria. Sequences and isolates were sent to the WRL. The outbreaks were diagnosed in Tunisia from detection to serotyping and sequencing, demonstrating laboratory capacity at national level. Ten samples were received from Mali, six epithelium and four swabs which all returned positive by PCR. Virus isolation and typing are still pending. Between 2018 and 2022, a total of 213 samples were received from Oman through a student PhD work. 131 epithelium, 20 milk, five saliva samples tested positive. Characterization and evaluation is in progress, to complete the epidemiology of the virus in this region.

Sciensano held two training courses on serological, virological and molecular diagnosis of FMD to students from University of Nairobi and the University of Addis Ababa, against the framework of international exchange. Samples from Ethiopia were positive with serotype O (EA-3 and EA-4) and serotype A/G-IV isolated; this work was published in the Agriculture Review. Training was also provided by ANSES on

emergency diagnosis and post vaccination monitoring with 18 participants from Armenia, Azerbaijan, Georgia, Iraq, I.R. Iran, Pakistan and Turkey.

The consortium participated in the 16th OIE/FO FMD Reference Laboratories Network Annual Meeting in November 2021, and the Risk-based surveillance workshop in Morocco in September 2021; the regional Group for Vaccination Advice (GVA) in North Africa, South East European Neighborhood, and the Middle East, all in January 2022, the workshop on Improving FAST vaccine security through stakeholder engagement, organized by the EuFMD in March 2022 and three virtual FMD roadmap Meetings for West Africa (November 2021), Middle East (December 2021) and East Africa (March 2022).

ANSES participated in field missions supporting the Jordanian veterinary services in the assessment of the FMD epidemiological situation and the risk of spread in the country and region. Support was also provided to the veterinary services in laboratory diagnosis, communications and awareness raising. They assisted in the design of medium to long term options for FMD control. ANSES have supplied laboratory reagents to Jordan and other national reference laboratories, and have participated in a number of scientific projects such as the Fund for Applied Research (FAR) project on harmonization of VNT methods used for post vaccination monitoring in FMD reference laboratories.

Discussion

AB asked if, in addition to the poor vaccine matching reported with O Manisa for O-Ind2001 strain, there was data about other vaccine strains i.e. PanAsia-2.

DK indicated that six different vaccines were tested and although low, the results showed sufficient for virus neutralization.

VA enquired about the risk to North Africa particularly to Algeria and Morocco and DK reported that this is not the first time that they have seen viruses coming from West Africa into North Africa. This is the third such event in recent years. There is need to keep alert for viruses circulating in West Africa (i.e. SAT 2), as this is the potential for what might be found in North Africa.

LBK reiterated that the risk of movement of SAT 2 in North Arica is present, that the unknown situation in Libya is an issue and could contribute to the risk to North Africa and to Europe.

KS underlined the importance of using the Executive Committee meetings to give an up-to-date assessment of the risks to Member Nations, including any factor that might drive changes in the risk for FAST introduction into Europe (i.e. the animal movements, reduce surveillance, and response capacity connected to current conflict in Ukraine) He suggested to prepare a specific update with regards to the improved risk for EuFMD MNs from the neighbourhood.

DK indicated that the intelligence regarding the situation in Russia and Kazakhstan that was presented in relation to the FMD strains detected in Russian Federation, was shared by the Federal Center for Animal Health (FGBI "ARRIAH") and it is important to ensure the continued engagement of laboratories part of the network.

KS reiterated that both countries are FAO members and, at technical level, the work would continue keeping to international obligations, including those related to reference centers. It is important to give greater consideration to the risks associated with this situation and it is important that FAO, OIE and EuFMD all be involved in a range of relevant activities, including bio-threat works on safeguarding strains and pathogens which are in reference laboratories.

AB highlighted another risk, as after COVID-19 pandemic, food prices and also animal prices have increased in the West Eurasia region. Considering the current disease situation in Pakistan and the I.R of Iran, the risk of animal movements due to the price differences, should be considered with attention. He acknowledged the EuFMD for having contributed to establish many surveillance systems already in the region, but underlined the importance of following-up the market price differences in the region in terms of the risk reduction to Europe. In addition, animals will soon be released onto pastures and this might increase the risk as well.

FR echoed AB points of risk connected to market price and noted a three-year spread dynamic of new emerging viruses observed in the past in the West Eurasia (WEA) region. He reminded all that in North Africa, vaccination in Morocco and Algeria is performed for type O and A, and not for SAT2, with the exception of Tunisia.

Conclusions

- 2. Risk of introduction of FMD and similar TADs into Europe should be monitored constantly, with specific reference to the factors that might drive risk changes.
- 3. A report on risk of FAST disease introduction into Europe from the neighbourhood will be presented at the Special Session, on the 27 April 2022.

Item 4. Update on progress of work programme 2019-2023

Fabrizio Rosso introduced the item and stated the Secretariat prepared short videos summarizing progress along the Pillars, to be followed by discussion. He specified that the videos are animated by an avatar, thus emphasizing the innovative, digital capacity of EuFMD. The Pillar Managers presented the issues and highlights of their components.

Pillar I – Improved Preparedness of EuFMD Member Nations

The Pillar Manager is Tsviatko Alexandrov.

Key Messages

Over 90% of Training Credits have been allocated for the 2022-2023 biennium.

GET Prepared wall and European Foot-and-Mouth Disease Spread model (EuFMDiS) development continues and an increased rate of progress is expected.

The Public-Private Partnership (PPP) initiative should continue and remain focused on practical issues/constraints/priorities for improved emergency preparedness and response.

Development of procedures for pre-qualification system of vaccines against FAST diseases is in progress.

Confidence level on FMD and other FAST diseases freedom in Thrace is maintained over 90%.

The 10th FAR call has been issued. Five research projects have been successfully completed in South-Eastern Europe and the second FAR call for the region has been issued.

The Risk Monitoring Tool has been piloted by Spain, Austria, and Bulgaria with positive feedback.

<u>Summary</u>

For the training component, nearly 500 trainees took part in EuFMD courses from October 2021 to March 2022 and over 90% of Training Credits have been allocated for the 2022-2023 biennium.

The development of GET Prepared wall will continue during the upcoming months under the emergency preparedness component. The European FMD spread model (EuFMDiS) has included other countries and will be soon available for 14 countries in Europe, with additional components and modules for other FAST diseases.

The Public Private Partnership initiative held a second webinar on Business Continuity during FAST disease outbreaks and will continue organizing webinars, simulation exercises, and workshop on identified priority issues for crisis management.

In the Emergency Vaccination component, a second Multi-Stakeholder Platform (MSP) vaccine security workshop was held to identify pathways or actions to improve the availability of vaccines suitable for use in disease emergencies.

A proposal for a system for pre-qualification of vaccines against FAST diseases was published in 2021, and procedures are under development with a Standing Committee for PQv for governance and decision-making being proposed at the upcoming Special Session (April 2022).

A workshop was held on preparedness to use emergency vaccination to evaluate decision criteria for implementing emergency vaccination against FMD in four different regions of Europe.

For South Eastern Europe (SEE), the surveillance in place ensured a confidence level in FAST diseases freedom maintained over 90% in the Thrace region. A multi-country FMD tabletop simulation exercise for the Thrace and South East European neighboring region was conducted at the end of 2021. Regional cooperation and coordination are of high priority and this was underlined at the Thrace and SEE management meetings held online in February 2022.

Five research projects were completed successfully and the second FAR call for the region has been issued. In disease risk assessment and forecasting, the Risk Monitoring Tool -a semi-quantitative generic risk assessment framework to monitor the likelihood of entry of FAST diseases from European neighbouring countries - has been piloted by Spain, Austria, and Bulgaria with positive feedback from the countries.

The 10th FAR – Applied research call has been issued.

The expertise developed within the team has also assisted other EuFMD-funded projects focused on FMD training for field veterinarians in Canada and the United States and for developing a feasibility study for implementing a sustainable system for pre-qualification of veterinary medicines.

The **objective** for the next six months is to continue supporting emergency preparedness of EuFMD member nations. This will be done by providing tailored training programmes, progressing preparedness for emergency response including vaccination, supporting research studies and laboratory proficiency testing services, enhancing risk assessment, and forecasting, and sharing best practices.

The Pillar I Team will continue to work with innovation, flexibility, adaptability and motivation.

The following **issues and considerations** have been brought to the attention of the ExCom:

- The indicator "at least 90 % of the training credits spent by the MN by the end of each biennium" was not met. These training credits were carried over to the second biennium of the current phase V of the Programme.
- The development of the components under GET Prepared is continuing but is delayed by resource constraints, which will be addressed. Increased rate of progress is expected.
- Considering the constructive discussion forum established, the participation of representatives of private and public sectors in Europe should be promoted further. The PPP initiative should remain focused on practical issues/constraints/priorities for improved emergency preparedness and response.

• The MSP is an important initiative to ensure proper engagement and consultation of public and private sectors to identify strategic actions for improving availability of FAST quality vaccines. It has welcomed the PQv system with the recommendation to ensure impartiality, transparency, sustainability, and accessibility

- The ongoing situation of non-FAST TADs in South-Eastern Europe, may impact the support and activities for some of the countries.
- The global pandemic situation has impacted the implementation of studies awarded under the 8th and 9th FAR calls. The EuFMD has granted no-cost extensions.

Discussion

FR highlighted the considerable interest in real time training courses and the importance of maintaining field training experiences to develop alternative options and ensure delivery and cascade to a wider audience. The implementation of a hybrid real time training is progressing to be conducted in disease-free settings.

Conclusions

4. The Committee acknowledged the work undertaken and agreed with the objectives and priorities defined for the upcoming semester.

Pillar II - Risk Reduction Programme in the European neighbouring countries.

The Pillar Manager is Francesca Ambrosini

Key Messages

Continue the regular coordination meetings with GF-TADs partners and regional networks and organizations (OIE, FAO, AOAD, REMESA).

Promote the model of the "Statement of Intentions" established in the SEEN region, to North Africa and Middle East.

Facilitate the discussion forum of the Groups for Vaccination Advice (GVA) and implement their workplan in the three regions.

Enhance capacities of FAST disease reference laboratories.

Continue to carry out Risk-Based Surveillance training and risk mapping.

Progressively implement the Training Management System-TOM in the three regions to enhance competencies of veterinarians and veterinary services.

<u>Summary</u>

Support in the revision of national FMD control plans has been made available, in the South-Eastern European neighborhood (SEEN), specifically in Georgia, Turkey, Azerbaijan Armenia and the Islamic Republic of Iran and in the Middle East, in Lebanon, Libya, Syria, Jordan and Palestine.

In the Middle East, assistance has been provided to Jordan and Palestine to respond to the outbreaks, specifically on outbreak investigation, diagnostic kits, and shipment of samples to WRL.

In North Africa, support was provided to improve surveillance on PPR in Morocco and in response to the FMD outbreaks in Tunisia.

Control strategies were also improved through the promotion of Public Private Partnerships, particularly in I.R Iran and Sudan.

Regular coordination has been ensured with regional GF-TADS partners and regional organization such as the Arab Organization for Agriculture Development.

FAST diseases early warning was improved through the development of national capacities to implement risk-based surveillance and through improved risk-information sharing.

The training cycle on spatial qualitative risk mapping, implemented in partnership with CIRAD, concluded with three risk mapping regional restitution workshops, where updated risk maps were shared by the 14

countries. Furthermore, Tunisia, Egypt, and the I.R Iran, were involved in a pilot study, which is still ongoing, to identify and monitor animal movement drivers.

The multi-country risk information sharing system has been established and operationalized within the TransCaucasus and neighbouring countries of Turkey, Russian federation, I.R Iran, and Iraq, with seven countries regularly sharing data related to outbreaks, vaccination, PVM results and market price of meat and animals.

The design and implementation of risk-based surveillance in Lebanon, Syria, Egypt, has been supported through technical assistance and the delivery of diagnostic kits. Libya received assistance in surveillance of FMD and Rift Valley Fever (RVF).

Risk information in the European neighborhood is regularly collected in the quarterly FAST reports.

The establishment of groups for vaccination, advice, guidance and consultation (GVA), in the three regions neighbouring Europe, has greatly improved the support for post vaccination monitoring and can assist vaccination strategies. Small scale immunogenicity study results have been revised and considered to amend the procurement specifications in the South East European neighborhood.

Laboratory capacity was supported through the participation of the proficiency test scheme conducted by the WRL and through a training on improving diagnostic capacity for FAST diseases in laboratories of South Eastern Europe Neighborhood, conducted in collaboration with ANSES.

An open-access mobile first, course on <u>Rift Valley Fever</u> has been developed and is now available.

The **objectives** of the next six months are to improve risk information sharing with progressive use of developed systems for collection, analysis and reporting and country engagement for better regional risk monitoring; ensure the regular use of spatial risk analysis competencies achieved and the regular update of risk maps developed; establishment of Syndromic Surveillance systems for early detection and optimization of resources; and piloting of the training management system -TOM, to enhance veterinary services and individual's competencies. These objectives, together with the involvement of the private sector through Public Private Partnership models of collaboration, will support countries in the design and update of their Risk-Based Surveillance Plans for FMD and in the surveillance and control of similar TADs.

The following **issues and considerations** have been brought to the attention of the Executive Committee.

- In relation to the first component of the program, 'coordination, and FAST Control Framework' the Official Control Plan of Georgia, submitted in April 2021 shall be considered by the Regional Advisory Group (RAG) for acceptance of country in Progressive Control Pathway (PCP) stage 3 and the EpiNet and WelNet activities require support from FAO and OIE regional offices and GF-TADs;
- For the second component of the programme, 'improved early warning for FAST diseases', the FMD outbreaks in Jordan, Palestine, and Tunisia underlined the lack of resources for the implementation of appropriate control measures and the Risk-based strategic plan (RBSP). The regular submission of samples to Pirbright for vaccine matching and the strengthening of the laboratories capacity in the region are a priority.

• The capacity development for surveillance and improved control, has met some difficulties for risk mapping training in online modality. PVM study and syndromic surveillance did not take place as planned in Lebanon and Libya due to national constraints.

Discussion

FB mentioned that Bovine Ephemeral Fever (BEF) is part of the work programme but that the revised Constitution does not include it and raised the point if it should be removed from the workplan. VA and HJR supported the comment.

FR replied that few resources has been used for BEF, as it is regularly monitored, for the European neighborhood in the FAST reports, and a survey was carried out in 2021, to understand the situation and control programmes in the neighborhood and assess the expertise available.

KS reminded the Committee of the serious consequences of BEF, and that, should it no longer be under the EuFMD's remit, alternatives should be sought.

MB agreed that this issue deserved further consideration now that it was not on the EuFMD list. The GF-TADs should be involved to address diseases that are not in the FAST list. KS reminded the Committee of the Lumpy Skin disease (LSD) outbreaks in 2009, which started at the border between Lebanon and Israel, spreading towards Turkey, with potential consequences in Europe. The rapid spread of diseases does not allow for emergency updating of the Constitution.

MB agreed to bring this issue to the attention of the GF-TADs and have a broader discussion.

Conclusions

5. To remove BEF from the workplan once the amendments of the constitution are adopted with the list of FAST diseases included in the mandate of the EuFMD

Pillar III – Supporting the Global Strategy for FMD control

The Pillar Managers are Wilmot Chikurunhe and Kees Van Maanen

Key Messages

Three virtual FMD roadmap meetings were held (West Africa, Middle East, and East Africa).

The open-access course "Introduction to the RBSP" was launched.

The EuFMD Support Unit was established to provide online support to the GF-TADs FMD WG.

The PCP-FMD Support Officer (PSO) system and associated training was fine-tuned.

Dynamic dashboards to display FMD virological and surveillance data and to visualize progress of countries along the PCP have been developed.

Increased sample submission-for shipments from Zambia, I.R Iran, Kenya, Nepal, Palestine and Niger.

Five courses were delivered during this reporting period, with over 1000 participants.

Summary

Under the first component, online solutions and formats were developed to address the needs of the EuFMD work programme, in support to the GF-TADs FMD Working Group. These included:

- three online FMD roadmap meetings conducted for West Africa (2021), Middle East (2021), and East Africa (2022);
- the virtual West Eurasia Epi and Lab networks meeting held in 2021;
- an open-access course "Introduction to the RBSP";
- support to the fine-tuning of the PCP-FMD Self-Assessment Tool, and Tool for Review and Communication (TRAC);
- the establishment of the EuFMD Support Unit which is providing support to the GF-TADs FMD WG.

The PCP-FMD Support Officer (PSO) system and associated training was improved by updating the structure, to better support national authorities (2021).

For the second component of Pillar III, dynamic dashboards were developed to display FMD virological and surveillance data and visualize progress of countries along the PCP. Virtual learning FMD diagnostics modules were reviewed with the WRL, and the new FMD Laboratory Investigation Training Course (FLITC) translated into French. A retrospective analysis of all virological data available from 2012 to 2018 from OIE/FAO reference laboratories was carried out to identify gaps and priorities for surveillance. Inactivated lateral flow device (LFD) samples were shipped in lieu of tissue samples, which countered the impact of the COVID pandemic on sample submission.

Sample submission increased thanks to targeted communication and support for the shipments from Zambia, I.R Iran, Kenya, Nepal, Palestine and Niger. Samples from small-scale immunogenicity studies in Palestine were successfully shipped for testing at the WRLFMD.

Two of the Virtual Learning Centres established by EuFMD have now become largely self-sufficient in the delivery of online courses, and increasingly independent from EuFMD funding. VLCs proved an important platform for the organization and delivery of relevant GF-TADs virtual events and those of regional animal health networks. PCP FMD v-Roadmap meetings were hosted for WA, ME and EA. Over 1000 learners from West, Central, East and Southern Africa and South Asia have completed at least one EuFMD course in the period September 2019-April 2022, with the following courses delivered or made available:

- Introduction to the Risk-Based Strategic Plan course, which supports the progress along the FMD PCP;
- Applying Public-Private Partnerships course, aiming at supporting the establishment of publicprivate partnerships for improving FAST disease control;
- Introduction to Rift Valley Fever open-access / mobile-first;
- Lumpy Skin Disease Preparedness course and Introduction to Lumpy Skin Disease open access courses, in collaboration with FAO REU;
- Simulation Exercises for Animal Disease Emergencies course. This course transitioned to the FAO eLearning academy.

The multi-stakeholder platform on vaccine security has contributed to identifying issues and priorities of public and private stakeholders related to availability and accessibility of quality vaccines and to explore options to improve security of vaccines against FAST diseases.

A vaccine demand model (VADEMOS) to estimate the size of the possible FMD disease vaccine market in endemic countries, has developed further. It aims to estimate the demand of FMD vaccines considering the forecasted growth of livestock populations in combination with projected progress of countries along the PCP-FMD by 2030.

The **objectives** of the next six months are to reinforce the PSO system, building upon a training development framework to improve mechanisms supporting national authorities. Assistance in Africa, Middle East and South Asia will continue to be provided to progress along the PCP FMD, with the development of training courses and the training management system -TOM.

Pillar III will continue to support the progress of the GF-TADs global strategy against FMD and improve security of supply of effective vaccines, through sample shipment, analysis and the development of dashboards for genomic analysis and vaccine matching; fine-tuning and validation of the decision support model to estimate vaccine demands, assistance to countries for PVM and control strategies.

The following issues and considerations have been brought to the attention of the Executive Committee:

- Continued demand for virtual training, and consequently resources need to be allocated to this activity. VLCs should be self-sustained after the second year of implementation and could assist the delivery of EuFMD courses.
- The SARS-CoV-2 global crisis has affected some of the activities under Component 3.1 during the reporting period.

Discussion

KS expressed FAO's appreciation for the work that EuFMD does in support of the global FMD control strategy, including the PCP support offices system that is cost effective and a very efficient way of supporting -at distance- countries that are interested in progressing along the PCP. Other activities of relevance are the regional groups for vaccination advice and the virtual learning centers which have been supported effectively. EuFMD has helped to build capacity within the VLCs that is now available through these Centres to the regions.

NM echoed this from the perspective of GF TADS, which appreciates the support given by EuFMD to the FMD working group for implementing the global control strategy.

FR mentioned that the Secretariat's involvement in the GF-TADs FMD working group is considered an excellent and useful collaboration.

Conclusions

6. FAO and OIE acknowledged the assistance given by the EuFMD in support of the global FMD control strategy.

Capacity Development

Manager: Marcello Nardi

Key Messages

The report on Impact of virtual trainings between September 2019 and December 2020 and strategic prioritization of courses for Pillar II and III countries was completed.

The Training Management System - TOM is ready to be piloted and a Steering Committee will be established.

Summary

The EuFMD Training team (**Appendix 6**) finalized a report, on the training impact of courses delivered between September 2019 and December 2020. The strategic prioritization of the training needs in Pillars II and III areas highlighted areas of improvement in existing courses, whether to re-calibrate capacity development or focus on specific content before the end of the Phase V.

An update on training management system - TOM, the Progressive Learning Pathway for developing capacity, was presented. This tool, which will enhance training management capability and provide competency-based education (CBE) frameworks for the veterinarians through a web-based platform, is now ready to be piloted in selected countries. A call for expression of interest for the TOM Steering Committee has been issued.

Conclusion

7. M. Blake commented that training is across all activities and can support European neighborhood as well as provide global support.

Item 6 UPDATE ON AMENDMENTS TO THE CONSTITUTION AND ROP - COMMENTS

Presenter: Fabrizio Rosso

Key Messages

Consultation process has been carried out in past months among Member Nations on the amendments to the Constitution and Rules of Procedure proposed by Ireland and comments were received either by single or group of countries.

The Secretariat, in consultation with the FAO Legal service and NSA Division Director, reviewed the comments received and prepared a document with feedback for each comment received.

The Executive Committee is invited to comment on the feedback provided and on the additional amendments proposed.

<u>Summary</u>

FR read the comments received and proposals of the changes to the constitution, summarized in a short paper (**Appendix 7**).

Discussion

The preamble has a comment, read by FR, to include a definition of transboundary animal diseases. MB confirmed that international treaties do not require definition in the preamble. HR asked how the Special Session will give feedback to the comments, and FR explained that responses to comments will be made in writing and sent to MN before the Meeting

Comment to art 2 pt 5. HR asked how to guarantee that samples are properly processed as a FMD laboratory in the network may not be expert in the diseases similar to FMD, and how to ensure this sample could be transferred to a reference laboratory. FR responded that FAO/OIE reference laboratory network exists solely for FMD. Training and guidance documents can be provided to ensure samples are properly processed or shipped as part of the EuFMD activities. He indicated that the comment does not need to be addressed in the text of the Constitution but such training/support activity can be included in the workprogramme of the Commission.

Comment to art 2 pt 5. DK mentioned that describing samples as isolates could be too prescriptive, and suggests "representative material "or "positive samples" or other. He reminded all that MN in the EU have an obligation to send positive material on to the EURL. FB (DG SANTE) clarified, concerning the latter comment by DK that there is no need to reiterate the obligation as it is stated in the EU legislation. KS supported the proposal to replace the word "isolates". He underlined that the article in question does not state where the laboratories would be and the network of labs for FMD is global. He indicated that it may not need to refer to European member countries, but just to note that the reference is to a global network.

Comment to Art IV, p 11. FB confirmed that the Secretariat had well interpreted the comments in the feedback on the need to have a clear list of diseases similar to FMD and avoiding words such as 'including' which might give space for different interpretation. Concerning the last sentence of the paragraph "other

diseases shall be identified based on", it is understood that if other diseases are identified, they would still be included in the first part of the paragraph. He suggested that this should be reiterated during the Special Session. He added, concerning Rinderpest, that it would be preferable to clearly state that activities of EuFMD should focus on awareness and preparedness.

FR acknowledged the rinderpest activities of the Commission are intended to be only for preparedness and awareness. The FAO Legal Service advised not to include that specification in the list of diseases in the Constitution. This request has been addressed in the separate document on 'criteria for review and prioritization of Tads similar to FMD' to be endorsed at the Special Session and for which a reference is included in Art IV. With regard to the comment on the possibility to include other diseases similar to FMD, FR reiterated that any change in the list of diseases indicated in Art IV (addition or removal of diseases) should go to the process described in Art XIV on the amendment of the constitution. This can be highlighted more in the background documentation that will be shared with MNs ahead of the Special Session with the feedback to the comments received.

Furthermore, as indicated in the Rules of Procedures (r.2), at each regular session there should be an item on the agenda concerning the proposals of the Executive Committee on policy matters and on the review and prioritization of transboundary animal diseases similar to foot-and-mouth, which pose an immediate threat to territories of Members (Article II, IV and V of the constitution). Therefore, the process to include/remove diseases in the list of diseases similar to TADs described in the Constitution should be first proposed, discussed and endorsed at the General Session and then Constitution should be amended accordingly, following the procedures defined in Art XIV.

MB stated that this also addresses a question by NM (OIE), which was related on the removal of diseases from the list. KS indicated that this might limit the committee's response capacity to situations. MB and FR confirmed that awareness and preparedness for rinderpest will be included within the criteria and prioritization document to be endorsed at the Special Session.

FR added the editorial comments and those on the document on criteria for review and prioritization for which there were no additional discussion during the meeting.

MB thanked all and underlined that the changes will be proposed by Ireland at the Special Session and asked for support from the Executive Committee.

Conclusions

- 8. To share with Member Nations before the Special Session the comments received, and the responses, whether they are addressed or not in the amended text of the Constitution proposed for adoption.
- 9. To develop guidance documentation and training material on laboratory sample processing and shipment for transboundary diseases similar to FMD.

Item 7 Upcoming Sessions (Open Session 2022 and Special Session)

Presenters: Stephan Zientara and Fabrizio Rosso

Key Messages

The three committees of the Commission (STC, SCBRM, SCSAR) have defined specific programmes and targets.

The Standing Committee on Pre-qualification System for FAST vaccines has been proposed.

The Open Session 2022 is planned as hybrid event, based in Marseille, with physical and virtual participation.

<u>Summary</u>

SZ reported on the activities of the four **EuFMD Committees.** (Appendix 8).

The Standing Technical Committee (STC) focused the work on the following items: Open Session 2022, Applied research calls and selection of projects; Risk monitoring tool (guidance); LFD shipment- joint opinion with SCBRM; TOM - training management system (guidance); Workplan 2021-2023 (guidance); Programme/activities of Special committees

The Special Committee for Biorisk Management (SCBRM) is working on the revision of the EuFMD Minimum Biorisk Management Standards and drafting MBRMS for tiers A and B; Annex/database of accepted inactivation/disinfection methods; Training in biorisk management (EuFMD virtual training is under development). The Committee has also proposed to include in the activities the definition of mechanism (i.e. mutual inspections) for evaluation of MBRMS in tier D lab.

The Special Committee on Surveillance and Applied Research (SCSAR)has worked on methods to measure and monitor surveillance capacity; Assessment of the diagnostic capacity of MNs to respond to a crisis; Barriers on integrated surveillance and control.

The Standing Committee on Pre-qualification system for FAST vaccines (SCPQv) had a first meeting in December 2021 on revision of TORs; update on PQv initiative and proposal of a Chair.

SZ also reported on the preparation process for the organization of the **Open Session**, planned for October 2022, in Marseille. Physical participation will have a maximum of 150 seats between EuFMD team, panelists, speakers and delegates. Open access will be possible for virtual attendance to all sessions, with two themes per day to allow smaller group events and side meetings with experts/panellists.

The title of the session is "Digitalization and innovation applied to the prevention and control of FAST diseases' and the different themes covered are: Emergency Preparedness and Response - Risk Analysis and Modelling - Surveillance and control - Virology and Diagnostics - Vaccines & Vaccination - Digital learning for veterinarians.

FR presented an update on the **Special Session** to be held with EuFMD Member Nations and permanent observers on the 27th April 2022.

The Session will be held fully online as the voting procedures can be now conducted in this modality and the agenda includes: Updates on workplan since the last General Session, Constitution and Rules of Procedure, criteria for review and prioritization of TADs similar to FMD, Elections of the Executive committee and Endorsement of SCPQv membership.

According to the Constitution, a quorum of 20 countries is needed in order to have the Session and elections. Whereas the Constitution and the Rules of Procedure can be amended by a two-thirds of the membership (26 countries).

The procedures to vote will be shared and according to Rule XII.7 (a) of the General Rules of FAO, voting by roll-call shall be conducted by calling in English alphabetical order the names of all Member Nations entitled to vote. The chairperson cannot vote (rule VI3) and his/her vote can be taken from another member of their same delegation.

After the amendments of the Constitution are adopted, the Constitution should be submitted to CCLM (FAO Committee on Constitutional and Legal Matters) and then to FAO Council. Amendments become effective only with the concurrence of the Council. The Rules of Procedure should be approved by the Director General of the FAO.

It is important that members represented at CCLM (Slovakia) and Council (Belgium, Bosnia, France, Israel, Italy, Luxemburg, Spain, and Sweden) are prepared to support the proposal.

In preparation of the election of the Executive Committee, the secretariat facilitated a meeting of non-EU countries requested by Turkey and North Macedonia, in parallel with meeting of EU countries coordinated by EU French Presidency. As indicated in the Constitution for the election procedures, members will be nominated by a country and supported by another. Members should also ensure that Chair and co-Chair have been identified within the nomination.

Concerning the SCPQv membership, following a call for expression of interests to Member Nations of the EuFMD, and an evaluation of the curricula of the experts nominated against the profiles received conducted in collaboration with Standing Technical Committee, the Executive Committee endorsed the composition of the ad interim SCPQv in October 2021, to allow a first meeting before the end of 2021. The Executive Committee recommended the composition of the SCPQv should be endorsed at the Special Session in April. Gabor Kulcar, Head of Vaccine Department, Veterinary Medicinal Products Directorate in Hungary was proposed as chair.

Conclusions

10. The Committee acknowledged the work undertaken and agreed on the programme and target defined by the Standing and Special Committees.

Item 8. Financial and administrative report

Presenter: Cécile Carraz

Key Messages

The EuFMD Member Nations contribution report showed the contributions received for year 2022, highlighting no outstanding contribution from the previous years.

The Financial Statement at 31-03-2022 showed a negative balance, stemming from staff commitment charged for the whole contract period and that will be covered from the yearly contributions by end of the year.

The implementation of new FAO financial policies regulations led EuFMD raising single seedfunding and contribution agreements with partners. EuFMD is working to open a new Multidonor Trust Fund.

<u>Summary</u>

CC presented the EuFMD Secretariat administrative summary and financial position of the Trust Funds (Appendix 9) operated by the Commission.

The position of EuFMD Member Nations contribution report showed the contributions received for year 2022, highlighting no outstanding contribution from the previous years. Financial Statement at 31-03-2022 showed a negative balance, stemming from the staff commitment charged for the whole contract period and that will be covered from the yearly contributions by year end. The allocated budget covers core staff of the secretariat as endorsed by both the 44th General Session in April 2021 and Executive Committee meeting in October 2021; it is made up by FAO staff professional positions and key consultant roles to coordinate and manage the programme of activities, which includes the Three Pillars Workplan and projects funded by other partners.

CC provided the financial report on the EuFMD Emergencies and Training Fund, for provision of Real-time and online training to non-EuFMD members and support to FAO Regional Offices, which indicates a cash balance of 75,620 USD. She mentioned that the implementation of new FAO financial policies regulations since 2021, led to EuFMD raising single seed-funding and contribution agreements with partners (e.g. Canada and Australia). EuFMD is working to open a new Multi-donor Trust Fund, by end of year 2023, for activities in line with the EuFMD Strategic Plan, including response to FMD emergencies or to support capacity-building programmes.

The financial position of EU funded activities (Phase V: 2019-2023) was reported showing the level of expenditures by Pillar at 31-03-2022 after 30 months of activities, representing 62.5% of the programme implementation.

CC presented the proposed budget revision that will be submitted to the donor for reallocation of resources within each pillar. Specifically from travel, training, procurement and general operating expenses budget lines where less than 45% spent and from the Project Evaluation line for the foreseen but not carried-out mid-term evaluation at end of 1st biennium to professional, consultant and contract budget lines.

Discussion

MB acknowledged that COVID-19 had a severe impact on the work modalities, with the need to shift funding to be able to deliver the three pillars activities.

FR commented on the importance of following-up efficiently with the formal submission of the revision of the budget to DG SANTE, addressing any question the Donor might have, in order to have the reallocation of funds accepted for the delivery of the planned activities towards the established objectives.

Conclusions

- 11. Endorsement was given to the financial report provided.
- 12. Budget revision will be submitted to the donor providing the justification for the reallocation of resources for the three pillar activities.

Item 9. AOB

FB informed the Executive Committee that earlier in the year, the EuFMD published a guidance document on FMD emergency vaccination plan in European Union countries. The reference to legislation in the document was not up to date and the document referred only to EU Member countries. This is not considered appropriate nor within the mandate of the EuFMD and it is recommended that activities/documents are delivered to address issues that are relevant to all members of the Commission, avoiding dealing with specific EU legislative issues which are discussed in other fora and relevant only for some members. He acknowledged that the Secretary has already replied and took action on this.

FR indicated that the finalization of the document took a long time leading to errors in the document update, that the EU legislation was considered as relevant for 27 MNs of the EuFMD and acknowledged that the title of the document was indeed referring to EU member nations and that was not appropriate as such guidance documents should be addressed to all MNs. The EuFMD took immediate action to remove the document from the website and is working on its update and revision, taking into consideration the comments received from EC and will be shared with DG SANTE before publication

MB thanks the EuFMD Secretariat for the work done in preparing the documentation for the meeting and the Executive Committee members for their commitments and support over the last three years.

www.fao.org/eufmd.html