



Food and Agriculture
Organization of the
United Nations

eofmd
european commission for the
control of foot-and-mouth disease

ROME, ITALY - HYBRID 12 OCTOBER 2022



Report

100TH SESSION OF THE EXECUTIVE COMMITTEE OF THE EUFMD COMMISSION



Funded by
the European Union

Report

100TH MEETING OF THE EXECUTIVE COMMITTEE OF THE EUFMD COMMISSION

Contents

Conclusions	1
Item 1. Adoption of the Agenda	4
Item 2. Report on the activities since the 99.3rd Session.....	5
Item 3. FMD global and regional situation and update on FMD activities	11
Item 4. Update on progress of work programme 2019-2023.....	15
Item 5 Update on significant projects.....	26
Item 6 Outline of the new strategy.....	29
Item 7 Committees priorities and workplan.....	32
Item 8. Financial and administrative report	33
Item 9. AOB.....	35

Appendices

Appendix 1 Agenda
Appendix 2 Update on activities
Appendix 3 Cluster report and Six-monthly Pillar update
Appendix 4 World Reference laboratory
Appendix 5a; 5b EURL presentations
Appendix 6 Pillar I
Appendix 7 Pillar II
Appendix 8 Pillar III
Appendix 9 Prequalification
Appendix 10 New Strategy outline
Appendix 11 Committees update
Appendix 12 Financial and Administrative overview

Conclusions

Item 2

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

2. Efforts shall continue to be provided for ensuring the collection of samples and their shipment to WRL from countries considered at highest risk for new virus circulation (i.e. Islamic republic of Iran (the), Pakistan) and with fewer samples submitted in the recent period.
3. Further studies should be conducted to understand why certain viruses are predominant in different regions.
4. The unexpected introduction of South American serotypes into Egypt needs urgent attention to better assess the situation and understand the risks for the region. Submission of samples from Egypt should be encouraged in order to ensure proper vaccine matching is conducted with circulating strains.
5. Revision of the foot-and-mouth disease (FMD) risk assessment for Europe is needed in connection with the conflict in Ukraine. The use of Pragmatist is envisaged for assessing risk and related prioritization of FMD vaccine antigens.

Item 4

6. The system for allocation of training credits shall be reviewed and included as a point for discussion for the new strategy together with the cascade training element.
7. The Thrace programme is fundamental and needs to be maintained with possibility to be expanded to other defined risk areas.
8. A review of specific benefit of the Thrace programme considering cost/benefit connected to the early detection / confidence of disease freedom in the high risk area should be conducted
9. Benefit of the EuFMD Hold-FAST strategy in assisting the surveillance and control of transboundary animal diseases (TADs) similar to FMD is recognized, with particular reference to the diseases such as Sheep pox and goat pox (SPGP) or Rift Valley Fever for which there is not a global control strategy under the Global Framework for the Progressive Control of Transboundary Animal Diseases (GF-TADs).
10. Specific attention needs to be dedicated to the assessment of socio-economic impact of foot-and-mouth and similar transboundary animal diseases (FAST) control programmes in order to provide adequate support to investment plans, allowing countries and donors to identify clearly the long term benefits of control programmes implemented. Such activity should not duplicate activities carried out within similar initiatives such as GBADs (Global Burden of Animal Diseases).
11. A meeting should be proposed to North African countries through the Mediterranean animal health network (REMESA) Secretariat aimed at evaluating the FMD control strategies in those countries (Algeria, Tunisia and Libya) that are not regularly participating in roadmap meetings.
12. Collection of representative samples and shipment of FMDv isolates to FAO/WOAH reference laboratories needs to be promoted and assisted in Libya.
13. The development of Pragmatist-endemic needs to be further supported considering the benefits it can provide to neighbouring countries for the prioritization of vaccine strains according to risks.
14. Innovative approaches such as genomic dashboards, training management system (TOM), FMD Vaccine Demand Estimation Model (VADEMOS), Virtual Learning Centers (VLCs), provide the

necessary tools for scaling up delivery of EuFMD courses around the world, fighting FMD in endemic countries, as well as ensuring preparedness in countries free of the diseases.

Item 5

15. The progress of TOM has been acknowledged as well as the benefits it can provide for capacity development in Member Nations (MNs) and other countries. Follow-up activities will be required to promote the use of the tool.
16. The Executive Committee noted the phased approach to implementation, that the PQv project is on track to start receiving applications from early 2023 and that full implementation of the scheme, including linking prequalification system for vaccines (PQv) to procurement, will be included as part of the next work plan for EuFMD.

Item 6

17. A working group will be formed within the Executive Committee members to assist the development of the new strategy with identification of priorities and objectives.
18. The new strategy would need to have a modular approach that can be easily prioritized in case of limited resources; an assessment would be needed to support this approach (i.e. the secretariat to assess and report on uptake of training activities by MN in the past years). The possibility to establish new strategic partnerships should be considered and evaluated by the Commission and its Executive Committee, as mechanisms to improve availability of resources to achieve objectives.

Item 7

19. The workplans of the special committees have been acknowledged and shall continue implementation during the next semester.

Item 8

20. Endorsement was given to the financial report provided.
21. A proposal for revision MN yearly Contributions will be developed to be presented for endorsement at 45th General Session in May 2023.
22. EuFMD will issue the request for pre-financing of Year 4 in the upcoming weeks, and prepare the strategic and financial plan Phase VI to be presented during the 45th General Session in May 2023.
23. Budget revision of the VPP project will be submitted to the donor providing the justification for the reallocation of resources for the three pillar activities.

REPORT OF THE 100TH SESSION OF THE EXECUTIVE COMMITTEE

The Session was opened by Dr Lajos Bognár, Chairman of the Commission, who welcomed all the participants¹.

Officers of the Commission present at the Session were: Dr Lajos Bognár (LB Hungary, Chairperson), Drs Susana Guedes Pombo (SGP, Portugal, Vice-Chairperson), and Hendrick Jan Roest (HJR, Netherlands, Vice-Chairperson).

Executive Committee members present were Drs Hele-Mai Sammel (HMS, Estonia), Taina Aaltonen (TA, Finland), Matjaž Guček (MG, Slovenia), Durali Koçak (DK, Türkiye) and Christine Middlemiss (CM, UK).

Executive Committee observers present were Drs Cristina Bungardean-Armas (CBA, Romania), and Spiridon Doudounakis (SD, Greece).

International organizations observers were Drs Bernard Van Goethem (BVG, DG SANTE, Directorate-General for Health and Food Safety of the European Commission), Francesco Berlingieri (FB, DG SANTE, Directorate-General for Health and Food Safety of the European Commission), Moritz Klemm (MK, DG SANTE, Directorate-General for Health and Food Safety of the European Commission), Francisco Reviriego Gordejo (FRG, DG SANTE, Directorate-General for Health and Food Safety of the European Commission), Keith Sumption (KS, CVO-FAO), Néó Mapitse (MA, NM, The World Organisation for Animal Health, WOAH). The fourth official observer organization, Organisation for Economic Co-operation and Development (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 David Lefebvre (DL, Sciensano); Dr Stéphan Zientara (SZ), participated as Chair of the Standing Technical Committee.

Dr AbdulNaci Bulut and Dr Ana Nunes also participated.

Secretariat for the 100th 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), David Mackay (DM, Vaccine Security), Marcello Nardi (MN, Programme Learning Manager), Cécile Carraz (CC, Programme Operations Manager) and Nadia Rumich (NR, Programme Implementation Manager, Communication and Networks Officer).

Dr Chrystodoulis Pipis and the representative from the OECD were not present.

¹ Underlined names were present physically

Item 1. Adoption of the Agenda

The Agenda was adopted without changes (**Appendix 1**). The Chair reminded all this was the 100th Executive Committee meeting, since the very first one in 1954. All the reports have been scanned and saved in the archive (<https://www.fao.org/eufmd/resources/reports/executivecommittee/en/>). As most of the Executive members were new, there was a tour de table of introductions. It was reminded that as a hybrid meeting, a special effort was to be made to include those online in the discussions.

The chair took the opportunity to update on the procedure for the selection of the Executive Secretary. He reminded that the vacancy had been issued in 2022, candidates were shortlisted and panel composition agreed. The process is ongoing and managed by FAO who should inform the Executive committee chair on the date for proceeding with the interviews.

The chair also reminded that at the next General Session in 2023 there will be two main items related to the Election of the Executive Committee and the adoption of the next strategy which would require some preparation during the next months.

Item 2. Report on the activities since the 99.3 Session

Presenter: Fabrizio Rosso

Key Messages

- The resources that were dedicated in the past two years for the further development of **technologies, know-how, digital tools and e-learning**, essential to continue the delivery of the programme during the COVID-19 pandemic, resulted in an important investment to ensure a better cost-effective approach.
- Training for Member Nations** on FAST preparedness and response remain a priority for the Commission with several trainings delivered and in the pipeline and the resuming of **real-time trainings** conducted in endemic settings for European veterinarian.
- Modelling and risk monitoring tools, emergency toolkits and dashboards, surveillance systems in risk areas were further developed and will continue to **support preparedness and early warning**.
- The **pre-qualification system for FMD vaccines** made good progress with technical and administrative procedures finalized and information day organized with stakeholders.
- The **risk reduction programme** continued in the European neighbourhood with additional opportunities being identified for risk mapping and for better understanding drivers of animal mobility
- The Progressive Control Pathway (PCP) support officer system, PCP toolkit, global surveillance and vaccine demand model and the assistance provided to the FMD Working group ensured **the sustain to the global FMD control strategy**.
- The **Virtual Learning Centres** continue to demonstrate a high demand at regional level for virtual training courses and resources. VLCs are now largely self-sufficient and will provide an important route for delivery of EuFMD's virtual training courses in future.
- The lifting of restrictions connected to COVID allowed the organization of staff meeting ensuring application of **staff wellbeing guidelines**, consolidating the **EuFMD identity**, common values, opportunities, and identify critical issues and priorities.
- Other non-EC funded projects (Prequalification system for veterinary medicines (PQm), Veterinary Paraprofessionals (VPP), capacity development) have provided progress towards the expected achievements.

Summary

The Report (**Appendix 2**) was provided by Fabrizio Rosso, who outlined actions taken since the 99.3rd Executive Committee Session.

The semester was characterized by the progressive **lifting of restrictions** that have limited the organization of field missions and face-to-face events since the beginning of 2020. The pandemic has highlighted even more the importance of investing in preparedness and capacities to scale-up resources during crises. Many **common aspects** with FAST emergencies have challenged the response capacities (resources, biosecurity behaviors, vaccine security, transparency and critical analysis of data, exit strategies, communication) and common tools (modelling, rapid tests, multi-sector response) have been used to assist risk and policy managers. The assistance provided by EuFMD to improve resilience of Member Nations to FAST will continue taking in consideration these relevant aspects, reflecting on the lessons learnt from the pandemic.

The resources that were dedicated in the past two years for the further development of **technologies, know-how** and **tools** -essential to continue the delivery of the programme during the COVID-19 pandemic- resulted in an important investment to ensure a better cost-effective approach in the recent semester and probably in the years to come. The opportunity to organize more **hybrid events** (i.e. workshops, simulation exercises, real time trainings) and **virtual-trainings**, which have good buy-in from countries and partners, will be very useful in order to avoid unnecessary travel and have improved use of available resources.

In addition, within the EuFMD **digitalization strategy** adopted in support to preparedness, prevention and control, the EuFMD digital tools for modelling, risk monitoring, capacity development, emergency response, surveillance were further developed. These include: Training Management System (TOM), crisis simulation software, FMD pan- European spread model (EuFMDiS), risk monitoring tool, risk information sharing systems, Thrace model, the dashboards on FMDv sequences, PCP and surveillance, the vaccine demand model (VADEMOS), the quarterly FMD and FAST reports.

A **digital platform** has been used to store and make rapidly available **emergency training/awareness material** translated in different languages for external users. Considering the risk of introduction/spread of FAST diseases in MNs and neighbouring countries remains high, new awareness material has been developed for Rift valley fever (RVF), SPGP and Lumpy skin disease (LSD) and added to the digital toolbox.

The platform has been beneficial also to facilitate and improve the communication among the team with availability of technical, operational material and standard operating procedures (SOPs).

In the last semester, seven training courses (part of the training credit scheme) were delivered with a concurrent quality revision of the course content included in the **training** menu, in line with the **Training Quality Management System (TQMS)** procedures. The EuFMD Secretariat is working on the logistics to resume **real time trainings (RTT)** in Africa as well as all other field trainings in Europe and neighbouring countries. A hybrid real-time training was organized in Italy with the use of virtual reality tools and field exercises, creating a format that can be used for cascade mechanisms of RTT. Further development of **Training Management System (TOM)** was achieved with the testing phase in European neighbouring countries, in addition to the pilot with Member Nations. A TOM Steering Committee has been appointed to advise and drive critical improvement.

Dedicated efforts have been focused on the **emergency preparedness** with additional expertise identified to develop resources for **GET Prepared** (vaccination, depopulation and disposal), the further development of **EuFMDiS** (post outbreak management, wildlife and disposal capacity modules), the **involvement of stakeholders** in emergency vaccination preparedness exercises, the **Thrace surveillance** for freedom confidence now operational for four diseases (FMD, PPR, SPGP, LSD), support to **laboratory capacity** (Proficiency Testing Service (PTs) for EuFMD non-EU Members, laboratory simulation exercises in Balkans) and the **risk monitoring tool** to monitor changes in the risk of introduction of FAST diseases from the European neighbourhood to EuFMD Member Nations.

Consistent results have been obtained from the project to establish a **prequalification system for FMD vaccines**. The technical guidance and administrative procedure for the prequalification (PQv) of FMD vaccines have been developed and have been under public consultation until the 30th September 2022.

An **information day** has been held with very positive feedback from stakeholders, and expressions of interest in submitting application have been received. The PQv scheme should be the basis for

developing an emergency procurement and supply mechanism for FMD vaccines, operating through FAO procurement procedures, to improve vaccine security.

Agreements for four **small projects** are being finalized according to the results of the selection process of the **10th FAR call**.

The **risk-reduction programme** in the European neighbourhood provided tailored technical assistance (v-learning, meetings, kits, sample shipment, e-leaflets) to Tunisia, Algeria, Jordan and Palestine following the FMD outbreaks detected since the beginning of the year. Support was also provided to Jordan, Lebanon, Syria, Palestine, Armenia, Azerbaijan, Georgia and Türkiye in their progression along the Progressive Control Pathway (PCP) (with risk-based strategic plan (RBSP)/ Official Control Programme (OCP) development, surveillance and post vaccination monitoring (PVM) support). **A group for vaccination guidance, advice and consultation** (GVA) has been established in each region of the neighbourhood with regular discussions on vaccination strategies and the available results of the PVM studies.

The success of **the coordination and cooperation** mechanisms between six countries in **South East European Neighbourhood**, with regular risk information sharing (supported by consistent coordination meetings and a digital data repository platform) provides good basis for the adaptation and adoption of the model in other sub-regions. The **risk mapping** training has been difficult in the past two years due to the absence of physical meetings, but national risk maps have been developed in all the countries with different level of quality. Additional solutions are currently investigated to allow the use of more simple tools for risk mapping and pilot projects will be conducted in three countries (Tunisia, Egypt, and I.R of Iran) for better understanding **drivers of animal mobility**.

Dedicated efforts were also provided to ensure **quarterly coordination meetings** with **FAO and WOA**H offices in the three European neighbouring regions (North Africa-NA, the Middle East-ME, South East European Neighbourhood - SEEN) and to provide regular update on the FAST situation (FAST quarterly reports).

The activities to support the FMD Global control strategies continued to be well managed by the **Support Unit** proposed by EuFMD to the GF-TADs FMD Working Group (FMD-WG). The unit provides technical and logistical support in the coordination of initiatives (e.g. revision of **PCP support officer system** and PCP support Officers (**PSO**) trainings), and events (organization of Roadmap meetings, monitor plan submissions, technical update of PCP-FMD tools, and templates). Thirty countries have now a PSO assigned and the review support system ensured the review of five strategic plans in during the reporting period (Risk Assessment Plans (RAP)-Gambia and Nigeria; Risk-Based Strategic Plan (RBSP)-Sudan, Saudi Arabia, and Jordan).

Additional resources are being developed for the **PCP toolkit** such as the Risk Assessment Plan and Official Control Programme open-access courses and the **vaccine demand estimation model** ([VADEMOS](#)). Technical assistance and v-learning support is regularly provided when requested by FAO (i.e. Indonesia, Southern Africa). The **submission of samples** to the FMD World Reference Laboratory has improved in 2022 with already 265 samples from 17 countries received (July 2022), but several issues persist (i.e. difficulties in collecting samples at central level, maintenance of cold chain, shipping costs). Efforts will continue to be dedicated to the global surveillance and a **dashboard** has been developed under the Letter of Agreement (LoA) with TPI, to improve timely communication on virological surveillance results, complement

genotyping data with relevant epidemiological data on outbreaks and finally allow end-users to collaboratively enrich the dataset. The [Virtual Learning Centres](#) continue to demonstrate a high demand at regional level for virtual training courses and resources, and have been well received by both FAO colleagues and partners within national veterinary services. Two of the VLCs established by EuFMD (Southern Africa Development Community (SADC) and South Asia) are now largely self-sufficient in the delivery of online courses and, increasingly, do not rely on any funding from EuFMD. The VLCs will provide an important route for delivery of EuFMD's virtual training courses in future.

New challenges might be connected to the **increase of risk** of disease spread from the East Europe due to the current conflict (uncontrolled animal movements, reduced access to animal healthcare services and products, reduced capacities of vet services and laboratory) and at the global level due to the possible impact of the pandemic on the agri-food systems, with changes in the value chains and animal movement patterns. Investigation and close monitoring of such possible changes and their impact on FMD disease spread is needed with the identification of risk hotspots in MNs and neighbouring countries for an improved risk based surveillance to optimize the resources available.

The possibility to hold in-person meetings allowed the organization of face to face meetings within the team. It was an opportunity to reflect on the recent results and issues towards the achievement of the programme indicators, to reiterate the **staff wellbeing guidelines**, consolidate the **EuFMD identity**, common values, opportunities, and identify critical issues and priorities.

The meeting documentation was made available on the Events App, with the Cluster report and the updated Six-monthly report (**Appendix 3**). No official documents were printed by the EuFMD for this meeting.

I. EuFMD programme

The significant progress made are summarized in the Cluster report (a Cluster is a group of workplans which have common objectives or similar technical focus) and the significant achievements of the biennium summarized in the infographic.

The budget revision submitted to the European Commission with a reallocation of unspent funds from travel and training budget lines to consultancy, contract and procurement has been formally endorsed by the donor.

Additional EuFMD Program Non-EC funded were reported.

- a) A third edition of FMD Emergency Preparation online USDA course for Canadian Food Inspection Agency (CFIA) veterinarians, academics and veterinarians from United States Department of Agriculture (USDA) and 50 percent seats for veterinarians from private sector (funded by CFIA, Animal Health Emergency Management Project (AHM) Canada and USDA- U.S. Department of Agriculture (APHIS)-Veterinary Services) was held in May-June 2022. (USD 25 000).
- b) The Real-Time FMD training program for US and Canadian state and private sector veterinarians (funded by participants, managed by Texas A&M University) was put on hold due to Covid-19 restrictions. The courses were replaced by Virtual Real Time Training developed and implemented in a Pilot in May 2021 with the second course implemented in November 2021. The third VRTT course will take place in Nov-

Dec.2022 (USD 70 800).

- c) Competency-based training of veterinary paraprofessionals (VPPs) to increase access to business opportunities in the “last mile” delivery of quality-assured animal health services for vaccination against FAST diseases, a project funded by Bill and Melinda Gates Foundation (BMGF). Programme implementation is done jointly with HealthforAnimals and the World Veterinary Association (WVA). A blended training approach will be used with mobile-first online modules and practical workshops delivered in partnership with local training institutes. (USD 2 384 636).
- d) Planning for the International exercise ‘Phoenix’ within the project “Building Resilience against Agro - Terrorism and Agro-Crime” funded by Global Affairs Canada (via World Organisation for Animal Health (WOAH - founded as OIE), sub-grant agreement) continues. The regional tabletop exercises will be combined with the international exercise at the end of the project to allow for the delivery of preparatory activities by FAO/OIE/INTERPOL, delayed due to COVID-19 (USD 180 000).
- e) A one-year project for a Feasibility study on the Development of a sustainable system for pre-qualification of veterinary medicines (PQm) started in October 2021 with a USAID’s Bureau for Humanitarian Assistance (BHA-USAID) contribution of USD 300 000. The project builds upon the pre-qualification system for veterinary vaccines. The BHA has agreed to extend the project up to February 2024 for the development of technical and administrative document to operationalize the system and additional funding (USD 800 000).
- f) A two and a half year project for the delivery of EuFMD Virtual Real Time Training for FMD and Similar Transboundary Animal Diseases and other trainings, has been signed the Australian Government Department of Agriculture, Water and the Environment (“DAWE”) for AUD 180 860 (USD 132 498).

NR gave a brief overview of the Real-Time Training situation. She summarized the numbers of the past courses, gave an update on the hybrid training which had been implemented in June 2022 in Northern Italy, using Virtual Reality headsets and a visit to a farm, during which differential diagnosis were outlined. The hybrid course tested the new lateral flow devices made by Istituto Zooprofilattico Sperimentale della Lombardia e dell’Emilia Romagna, B. Ubertini (IZSLER).

Ms Rumich informed the meeting about the real time training, which should start again in Kenya in December 2022, the EuFMD’s visibility and communication progress, as well as actions taken for staff wellbeing.

The Chair thanked the Deputy Executive Secretary for the reports.

Discussion

HJ requested clarifications on the PQm and particularly on the risk of using EuFMD resources for activities that do not specifically fall within the EuFMD mandate.

FR indicated that the PQm scheme has been launched building on the know-how and experience gained in the development of the PQv system. Up to now, the activity was limited to the development of a feasibility

study for which technical expertise has been identified and supported by USAID-BHA. The second phase of the project has been endorsed by BHA with the aim to develop a roadmap for PQm implementation and the identification of issues and possible solution related to the quality of veterinary medicines supply chain. Additional resources have been made available by BHA with the possibility to work towards the development of a common system for PQv and PQm optimizing the resources available.

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.
- Trans-pool movements continue to bring new risks in both endemic and FMD free countries with connected challenges for the selection of appropriate vaccines to control FMD outbreaks
- O/ME-SA/SA-2018 as an emerging lineage. This new serotype O lineage, previously detected in India and Sri-Lanka in 2018/2019, was detected in UAE in 2021 in sheep and goats, with potential to spread widely following the same pathways as O/ME-SA/Ind-2001 (d and e). There is good vaccine matching with O Manisa, O 3039, and O TUR-5/09.
- Unofficial reports of cases of FMD serotype O and A in Egypt, with the virus characterized within the O/Euro-SA topotype with high nucleotide identity to FMDV sequences from South America.
- O/ME-SA/PanAsia-2ANT-10 was reported to be causing multiple outbreaks in Eastern Mediterranean countries of Jordan, Palestine and Israel. There is close relationship with viruses detected in Pakistan and the UAE of 2021.
- FMD Serotype O/EA-2 were detected in Malawi and Mozambique (ongoing), O/ME-SA/Ind-2001e in Indonesia in May June 2022, and SAT 2 in Botswana in August 2022, with the Serotype O in southern African countries being exotic to the region
- Dashboards development is progressing with the Genotyping dashboard finalized, PRAGMATIST dashboard at demo version while the Surveillance dashboard under development
- Overall, good performance in the FMD Proficiency Testing Scheme in 2022.

Summary

DK presented an update (**Appendix 4**) from the World Reference Laboratory for FMD (WRL). The report highlighted key events which took place since October 2022.

The WOA/FAO global network of laboratories is coordinated by the WRL and this gives good overview of FMD events around the world and the level of threat on EuFMD Member Nations.

DK indicated that samples were received and diagnostic reports issued to 12 countries, namely Algeria, Ethiopia, Israel, Mongolia, Namibia, Pakistan, Palestine, Thailand, Tunisia, United Arab Emirates (UAE) and Zambia. Similarly, genome sequence exchange was carried out for Ghana, Indonesia, Malaysia, Malawi, and Niger through respective regional WOA/FAO reference laboratories. There was significant improvement in sample submission from endemic countries. Samples were received from Sudan while sample shipment is expected from Egypt and Yemen. Lab activities benefited from the coordinated approach that targeted priority countries.

The significance of trans-pool movements was discussed, in relation to the change that they bring to regional risk in both endemic and FMD free countries and the challenges for the selection of appropriate

vaccines to control FMD outbreaks. The suspected movement of two viruses from South America to Egypt and the risk to EuFMD Member Nations was given as an example.

The case of Indonesia FMD outbreak (O/ME-SA/Ind-2001e) was discussed, noting that the country had been FMD Free without vaccination since 1990, having stopped vaccination in 1986. The current outbreak, reported in two foci in May 2022, was reported to spread very fast to affect 213 districts in 19 provinces by mid-June same year. The WRL is providing the support needed to evaluate vaccines that generate heterologous responses.

DK reported O/ME-SA/SA-2018 as an emerging lineage. This new serotype O lineage, previously detected in India and Sri-Lanka in 2018/2019, was detected in UAE in 2021 in sheep and goats, with potential to spread widely following the same pathways as O/ME-SA/Ind-2001 (d and e). There is good vaccine matching with O Manisa, O 3039, and O TUR-5/09.

O/ME-SA/PanAsia-2^{ANT-10} was reported to be causing multiple outbreaks in Eastern Mediterranean countries of Jordan, Palestine and Israel. There is close relationship with viruses detected in Pakistan and the UAE of 2021. To this isolate, O Manisa vaccine strain was found to not match very well, particularly with isolates from Jordan. There are ongoing studies to evaluate FMD vaccine strains against this lineage.

Regarding the new risks from FMD viruses from South America, DK reported that there are unofficial reports of cases of FMD serotype O and A in Egypt, with the virus characterized within the O/Euro-SA toptotype with high nucleotide identity to FMDV sequences from South America. If these viruses circulate, they will pose a new exotic threat to countries in the region.

DK indicated that in the current reporting period outbreaks of FMD Serotype O/EA-2 were detected in Malawi and Mozambique (ongoing), O/ME-SA/Ind-2001e in Indonesia in May June 2022, and SAT 2 in Botswana in August 2022, with the Serotype O in southern African countries being exotic to the region.

Under the Pragmatist tool for virus prioritization, lineage risk profiles will be updated at the FAO/WOAH Laboratory Network meeting in November 2022. A paper was submitted to the *Frontiers in Veterinary Science*. Laboratory capacity and proficiency testing was reported as the key activity of the WRL that ensures equivalence between different laboratories guided by ISO17025 accreditation.

With regards to other WRL activities, DK reported that the dashboards development is progressing well with the Genotyping dashboard finalized, PRAGMATIST dashboard at demo version while the Surveillance dashboard under development. A EuFMD eLearning training course on FMD diagnostics will take place in Nov-Dec period. The next WOA/FAO FMD Reference Laboratory Network meeting will take place on 29 Nov – 1 Dec in Lelystad, The Netherlands in physical and virtual format. A meeting related to a twinning project with Pan African Veterinary Vaccine Centre of African Union (AU-PANVAC) (with vaccine companies) will take place on 8-10 Nov in Ethiopia. There is a new WOA twinning project with Embakasi (Kenya) – with opportunities to link to the EuFMD real-time training course.

LBK gave the presentation (**Appendix 5a**) on the European Union Reference Laboratories EURL activities conducted during the last six months. 52 laboratories were invited to the FMD/SVD Proficiency test scheme in 2022. There were 46 positive answers. 40 laboratories were included in the FMDV EURL network. The organisation of the PT included 25 Eu MS, five candidate countries, five countries supported by EuFMD and six countries supported by the European Commission (EC).

Overall, the performance was good although some laboratories lacked reagents.

The EURL Workshop 2022 was held face-to-face on the 27-28 September 2022 in Paris, with the participation of 53 participants from 37 countries (32 from EU countries; five non-EU), EC and EuFMD. New members invited were Algeria, Morocco and Tunisia. The sessions were on FMDV epidemiology, FMDV diagnostics, control and biosecurity on FMDV diagnostics, FMDV research and Seneca virus infection. The group discussion focused on diagnostic reagent bank and on RNA Transfection methods.

A Molecular Biology training was held on 18-22 July 2022 with five countries: Montenegro, Slovenia (funded by EC, EURL), Kosovo², Moldova (funded by EuFMD, LoA) and Albania (2 weeks funded by the International Atomic Energy Agency (IAEA)). The training included sample treatment, Ribonucleic acid (RNA) extraction, real-time Reverse transcription polymerase chain reaction (RT-PCR) for detection and typing, conventional RT-PCR, sanger sequencing/Bioinfo, introduction to Next-generation sequencing (NGS), treatment of SANGER results, summary of results and conclusion.

DL from the EURL for Capripox viruses at Sciensano presented information (**Appendix 5b**) as regards the sheep pox outbreaks in Spain and the epidemiology of LSD globally during the past few years.

Discussion

KS highlighted the relevance of the cases of sheep and goat pox in Spain, questioning any possible change in term of risk and any possible lesson learnt from this introduction. FB informed that the source of infection in Spain is still not clear and investigation is ongoing. EuVet mission is going next week to Spain to provide technical support for investigation and controlling the diseases.

FR shortly presented the risk monitoring tool and what it had shown for Spain indicating PPR and SPGP as higher risk for introduction from the neighborhood.

DK was asked if there was any further information about the Southern America viruses that have spread to Egypt and replied that the Egyptian authorities had been contacted and indicated that these are unofficial reports. There is need to find out more information about the situation regarding viruses of South American origin and what is the extent of spread. There are no recent samples received by WRL from Egypt.

DK was further asked by NB why serotype O/PanAsia2-Ant10 seemed to have disappeared but back again and said there is the need to understand why certain lineages become dormant and others are dominant in certain areas.

NB also highlighted the uncertainty about sample submission from I.R. of Iran and Pakistan. DK reported that their observations and sequence data from Jordan supports that the most closely related serotypes are from Pakistan, meaning the threat was directly from Pakistan and not from Pakistan through I.R. of Iran to Türkiye to countries in Eastern Mediterranean.

With reference to the origin of FMDv South American strains in Egypt, DK indicated that the only country in South America (SA) that has FMD is Venezuela but there is no evidence or epidemiological investigation

² "Reference to Kosovo shall be understood in full compliance with United Nations' Security Council Resolution 1244 and without prejudice to the status of Kosovo".

results that demonstrate the virus came directly from this country, although sequence data supports that idea. The appearance of both serotype A and O at the same time could be an indication of the virus situation in the country of origin.

FR thanked the reference laboratories for their collaboration in training, surveillance and technical assistance to the different EuFMD initiatives. He highlighted that the serotype O/ME-SA/SA2018 detected in UAE and linked with virus previously detected in Sri Lanka might have the same distribution pattern of the O/MESA/Panasia 2 now present in the Middle East (Jordan, Israel, and Palestine) and might therefore threaten the European neighbourhood. In North Africa, where O/EA3 has been spreading since January 2023, the link with West Africa circulating strains highlight the possible risk connected to SAT2 which is also circulating in West Africa. He also indicated that samples have been collected in Egypt and need follow-up on the possibility to ship them to WRL. He highlighted that it is quite demanding to facilitate sample shipment from certain countries but very beneficial. Focus and assistance should continue to be targeted to specific areas and countries to improve collection of samples, with Pakistan and Egypt as examples.

The committee wanted to know if available vaccines match the South American strains and were informed that limited data indicates that the vaccines used in Europe do match with the strains in South America.

In conclusion, concerning how to factor the Ukraine situation into the assessment of risk, DK said that at the moment there is no information coming from the area about increased risk but there is urgent need for a system to measure and monitor the likelihood of FMDVs moving into EuFMD Member Nations.

Conclusions

2. Efforts shall continue to be provided for ensuring the collection of samples and their shipment to WRL from countries considered at highest risk for new virus circulation (i.e. Islamic republic of Iran (the), Pakistan) and with fewer samples submitted in the recent period.
3. Further studies should be conducted to understand why certain viruses are predominant in different regions.
4. The unexpected introduction of South American serotypes into Egypt needs urgent attention to better assess the situation and understand the risks for the region. Submission of samples from Egypt should be encouraged in order to ensure proper vaccine matching is conducted with circulating strains.
5. Revision of the foot-and-mouth disease (FMD) risk assessment for Europe is needed in connection with the conflict in Ukraine. The use of Pragmatist is envisaged for assessing risk and related prioritization of FMD vaccine antigens.

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. 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

- Real-time trainings are back. Courses will be held in Kenya in December and January.
- Webinar for SPGP to all Member Nations is coming soon aiming to improve knowledge on recognition and diagnosis.
- GET Prepared wall has been reconstructed and with improved rate of progress.
- public private partnership (PPP) group will be included in broader emergency preparedness activities including workshops and simulation exercises.
- EuFMDiS is expanded to other countries and further developed and adapted to other FASTs
- Thrace project is very successful and at highest priority.
- The results of the studies from the FAR calls will be used and promoted to improve FAST disease control.
- Additional version of Risk Monitoring Tool for foot and mouth and similar transboundary (FAST) animal diseases (Peste des Petits Ruminants, Lumpy Skin Disease, Rift Valley Fever, Sheep and Goat Pox) (RMT-FAST) has been created that might be used by EU neighbouring countries.

Summary

An avatar movie presented the activities under Pillar I in the last six months on improving preparedness for management of FMD and similar TADS crises by Members and across Europe as a whole (**Appendix 6**). The Pillar has seven components which include Training for Member Nations; Emergency preparedness; Emergency Vaccination; South-Eastern Europe; Applied research; Proficiency Test Services and Disease risk assessment and forecasting

In the Training component nearly 200 trainees completed the training activities delivered during the period. Five courses were delivered including a pilot Hybrid Real-Time Training (HRTT) course using a blend of classwork, virtual reality and on-field training. The possibility of running between two and four RTT courses is being explored. The EuFMD Virtual Learning platform has continued to be fully functional with more than 20.000 registered users and around 1 200 learners that have accessed the open access courses. A new course will be available soon on FMD Minimum Biorisk Management Standards.

The GET Prepared progress rate has improved (upon dedication of additional staff). Development of new resources is ongoing. The contents for three additional bricks of GET Prepared wall have been developed and are undergoing review. The European FMD spread model (EuFMDiS) user group has been expanded to include Baltic and North-West European countries. New features of the model were further developed. PPP

Initiative representatives participated in the second interactive workshop to address constraints to the use of emergency vaccination in Europe and its neighbourhood.

In the Emergency vaccination component, the Standing Committee for PQv (SCPQv) met in April, June and July to provide advice on the strategy for implementation of the PQv scheme and development of the draft administrative procedure and technical guidance. The Pre-Qualification Technical Advisory Group for FAST vaccines (PQvTAG) has also been active, developing a risk-based approach for the technical requirements for FMD PQv vaccine applications. An information day on PQv was organized with more than 100 stakeholders attending and providing positive feedbacks on the system and procedures established.

For South Eastern Europe, the surveillance in place ensured a confidence level on FAST diseases freedom maintained over 90 percent in Thrace region. Management meeting of Thrace and South Eastern Europe (SEE) was held in Montenegro as a hybrid event together with FAST surveillance workshop and a regional coordination meeting of the national laboratories. Laboratory simulation exercise with participation of the nominated representatives from Western Balkans four national laboratories was implemented. All SEE national laboratories received support in reagents.

Following the 2nd call for project proposals, four small projects were endorsed to be implemented in the SEE region by national and regional institutions.

Four projects were selected for funding under the 10th FAR call on emergency vaccination, laboratory capacity development, optimization of vaccination strategies and FMD surveillance.

The new Letter of Agreement with the FMD EURL to support eligible countries participation in the Proficiency Testing was signed. All seven beneficiary countries registered to participate.

In disease risk assessment and forecasting, after piloting in Spain, Bulgaria and Austria the risk-monitoring tool has started to be piloted and adapted in neighbouring countries. Stakeholders have been made aware about the Risk monitoring tool through a short video presentation, FAO-EuFMD webpage creation and presentation in technical meetings and conferences.

TA, the Pillar I manager, underlined the objectives for the next six months to continue supporting the 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.

He brought the following issues to the attention of the ExCom across the different components:

- There is increased number of training activities that need to be delivered for MNs;
- The Real-time trainings are back and will be delivered starting from December 2022;
- Webinar for SPGP to all Member Nations is coming soon aiming to improve knowledge on recognition and diagnosis;
- A LSD symposium is planned for the first quarter of 2023, organized in collaboration with FAO's Emergency Prevention System (EMPRES);
- GET Prepared wall reconstructed and with improved rate of progress;
- EuFMD plans to include the PPP group in broader emergency preparedness activities including workshops and simulation exercises;

-
- EuFMDiS is being adapted to other FASTs (PPR and SGP) which is very relevant considering the current situation in Europe;
 - The progress made in implementing a system for PQv is significant and well received by stakeholders;
 - Activities in Thrace and Western-Balkan countries are at highest priority due to risk. Considering the situation with a FAST disease in Europe and the uncertainty with the war to the East, other countries/areas may be considered as high risk where the Thrace model can be adapted;
 - The results of the studies from the Fund for Applied Research (FAR) calls will be used and promoted to improve FAST disease control;
 - All seven beneficiary countries registered to participate in the annual PT indicating the success of the Component in promoting the PT and facilitating achievement of Europe-wide PT participation;
 - After the pilot with a Pillar II country, comments and (positive) feedback regarding RMT-FAST have been used to create an additional version that might be used by EU neighbouring countries.

Discussion

FR underlined the good work of PI, the importance of activities conducted to improve preparedness in MNs and reminded that half of the budget is used for PI activities. He informed that there is interest received by Armenia to be a member of the Commission and highlighted that numerous face-to-face trainings were postponed due to COVID-19 with an impact on the activities in the work plan, as they need to be concentrated in the last year of implementation.

LB requested a table that indicates which of the trainings are most important for the MNs and requested how the trainings and credits are defined. He also suggested to look at the unspent training credits (TCs) in previous years.

FR acknowledged the question and replied that a questionnaire is sent to the MN during the General Session, to receive feedback on courses and assess training needs in order to ensure good impact of the capacity development programme. He suggested reconsidering the training credits scheme, how the TCs are allocated and to have it as a point for discussion for the next strategy. The cascade training is still missing and technical assistance may be an additional element to be added. Not all the training credits are used by countries and it was suggested to evaluate the courses not receiving good uptake, recognizing that unallocated TCs are redistributed to MNs. KS suggested to develop an algorithm to assist defining the training needs and credits according to size of countries and risks and suggested to create a dedicated working group together with EC reflecting on TCs allocation.

FB underlined that the Thrace surveillance activity is fundamental and needs to be maintained. He highlighted that this surveillance system can be adapted to other risk areas. FB requested information on the programme costs compared with the other activities, and was told that the budget of component 1.4 is available in the report and detailed figures can be provided by the Secretariat. He agreed that the programme is fundamental for the free status and it is very important that it is recognized by the WOAHA.

Christine Middlemiss requested if there is a way to review to positive benefit of Thrace programme, considering that, although expensive, it sounds like producing a very good benefit in terms of mitigating risk for all 39 EuFMD Member Nations.

Conclusions

6. The system for allocation of training credits shall be reviewed and included as a point for discussion for the new strategy together with the cascade training element.
7. The Thrace programme is fundamental and needs to be maintained with possibility to be expanded to other defined risk areas.
8. A review of specific benefit of the Thrace programme considering cost/benefit connected to the early detection / confidence of disease freedom in the high risk area should be conducted.

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

The Pillar Manager is Francesca Ambrosini

Key Messages

- Regular coordination meetings have been held with GF-TADs partners and regional organizations. FAST quarterly reports have been regularly published.
- Israel, Jordan, Palestine representatives met at the FAO HQ in Rome to discuss FMD situation and coordinated actions.
- Follow-up of the Regional Roadmap meetings conducted for the progression in the PCP stage.
- Improved capacity of FAST disease reference laboratories in the countries based on the assessment carried out with the French Agency for Food, Environmental and Occupational Health & Safety (ANSES) on the needs in the three sub-regions of the neighborhood. Training has been undertaken and a new one is in progress for the next six months.
- Following the Risk Based Surveillance training carried out with Sciensano, activities on risk mapping continued in North Africa.
- Rift Valley Fever open access course has been made available.

Summary

Pillar II programme focusses on the progressive control of FAST diseases in the neighboring regions, reducing the risk of FAST diseases to EuFMD Members (**Appendix 7**).

The national capacity for improved FAST surveillance and early detection is enhanced through risk information sharing, risk management and risk mapping.

➤ Concerning co-ordination and FAST control framework (comp. 2.1):

Assistance has been provided to Armenia, Azerbaijan, and Türkiye in the drafting of the Official Control Plans (OCP) and to update the Risk Based Surveillance Plan of Jordan. One mission was conducted in Armenia and Georgia for the progression in the PCP.

The second GVA meeting and the Epidemiology Network (EPINET) meeting have been carried out in the SEEN. In Middle East, support was provided to the FMD-PPR Regional Roadmap Meeting.

The Emergency Management Center and EuFMD organized a meeting with Israel, Jordan, and Palestine in Rome to share information in the sub-region and coordinate control measures. The Public Private Partnerships design is continuing in collaboration with Arab Organization for Agricultural Development (AOAD).

The quarterly FAST Report has been regularly published and the Coordination meetings with FAO and WOAH regularly held.

➤ Concerning improved early warning for FAST diseases (comp 2.2):

Risk hot spots identification continues as well as, the studies on animal mobility drivers with new partner agreements under discussion. Risk-based surveillance for multiple diseases has been strengthened.

Non-structural proteins (NSP) and structural protein (SP) antibodies surveys were carried out in Türkiye. FMD sero-surveillance in Jordan, the shipping of samples from Sudan and the analysis of the serological survey in Lebanon are ongoing.

The Statement of Intention for improved control of FAST diseases established between Transcaucasus and neighbouring countries allowed regular sharing of risk information and vaccination data.

- Concerning capacity development for surveillance and improved control programmes (component 2.3):

The capacity of the countries for surveillance and improved control is progressing. The Virtual Learning platform is fully functional.

The pilot of the Training Quality Management System (TQM) is continuing.

Studies on vaccine efficacy and vaccination effectiveness are in progress.

Training courses for the control and Early Warning System have been delivered and new ones are planned.

FA, Pillar II Manager, brought the following issues to the attention of the Executive Committee. There is need in North Africa to establish a system to regularly assess improvements along FMD-PCP (i.e. FMD roadmap meetings or meeting in the margin of the Joint permanent committee of the Mediterranean Animal Health Network's (JPC REMESA) for a better coordination and FAST control framework.

To improve early warning for FAST diseases, the identification of new risk areas for FAST is of priority: EuFMD is maintaining a high level of assistance in SEEN countries to anticipate any virus incursion and spread towards Europe. The lack of national financial sustainability for the implementation of appropriate control measures in endemic countries (i.e. Jordan, Palestine, Lebanon) is a constraint.

The capacity development for surveillance and improved control is enhanced and new areas of development have been identified in the provision of support to passive surveillance and qualitative risk mapping using more easy-to-use tools and systems.

Additional achievements presented were the regular meetings with FAO, WOA, the Tripartite (Türkiye, I.R of Iran and Pakistan) in the SEEN, the implementation of the Statement of Intention, meetings with AOAD and the related Memorandum of Understanding (MOU) under discussion, the GVA, and the organization of trainings with ANSES, Sciensano, and IZSLER.

The collaboration with FAO EMC allowed the organization of the meeting in Rome with Israel, Jordan, and Palestine to share information on the viruses circulating in the sub-region. EuFMD is assisting the EMC in the RVF emergency in Mauritania and is ready to provide kits for laboratory analysis linked with field surveys to be carried out, based on the report of the mission. The open access course on RVF is available.

Regarding the FAST Report, the EuFMD has not reported on Bovine Ephemeral Fever, as agreed in the previous Executive Committee meeting.

Discussion

FR opened the discussion underlining that the Covid situation has limited the face-to-face meetings in the European neighbourhood and the relationships with the countries need to be reinforced. The Tripartite (Türkiye, I.R of Iran, and Pakistan) meetings are taking place regularly. Libya is a country that need particular

attention as although there were two consultants appointed by EuFMD, the situation on the FAST diseases is not clear and FMD samples have not been collected and shipped to WRL recently.

KS thanked EuFMD for the report and the activities that are taking place. He emphasized that with the adoption of the new Constitution and strategy, there are areas the EuFMD could prioritize. As an example, he highlighted that Sheep and Goat Pox is not a priority for GF-TADs, but the disease is present in Spain; there is no global control strategy for Sheep and Goat Pox control, and this deserves attention and support from EuFMD in the countries, regions and sub-regions. In addition, KS underlined the importance of the socio-economic analysis on national control plans for countries to leverage on the external support received and identify proper return of investment done or planned for the control of FAST.

FR replied that EuFMD worked on the socio-economic impact of diseases but the assessment of benefits of control plans is lagging a little, and the next activities on socio-economic analysis are planned in this direction.

DK commented on the area of vaccines in the neighborhood emphasizing on the lack of information and that this is a constraint. Discussions with the GVA are undergoing. There are little studies from the countries, (Jordan and the Caucasus). Tools such as the Pragmatist are under development to collect data on vaccine strains according to risks.

KS and FR discussed the possibility to organize a PCP workshop for North Africa (Algeria, Tunisia, and Libya) in the margin of the REMESA JPC meeting, indicating that this should be proposed to the REMESA Secretariat by the GF-TADs Working Group. NM, in his capacity as co-chair of the GF-TADs Secretariat, informed that the REMESA Secretariat in Tunis has been contacted for the Maghreb region to agree on the development of the FMD control programme.

Clarifications on the GF-TADs PCP system and process were requested regarding North Africa. FR explained that within the Regional Roadmap Meetings, the countries share the control activities implemented and the FMD situation so that the PCP level is assessed and roadmap for PCP control progression agreed. Tunisia and Algeria deserve particular attention as their control plans were evaluated in 2013 and since then no revision on the progression has been made.

Conclusions

9. Benefit of the EuFMD Hold-FAST strategy in assisting the surveillance and control of transboundary animal diseases (TADs) similar to FMD is recognized, with particular reference to the diseases such as Sheep pox and goat pox (SPGP) or Rift Valley Fever for which there is not a global control strategy under the Global Framework for the Progressive Control of Transboundary Animal Diseases (GF-TADs).
10. Specific attention needs to be dedicated to the assessment of socio-economic impact of foot-and-mouth and similar transboundary animal diseases (FAST) control programmes in order to provide adequate support to investment plans, allowing countries and donors to identify clearly the long term benefits of control programmes implemented. Such activity should not duplicate activities carried out within similar initiatives such as GBADs (Global Burden of Animal Diseases).
11. A meeting should be proposed to North African countries through the Mediterranean animal health network (REMESA) Secretariat aimed at evaluating the FMD control strategies in those countries (Algeria, Tunisia and Libya) that are not regularly participating in roadmap meetings.
12. Collection of representative samples and shipment of FMDv isolates to FAO/WOAH reference laboratories needs to be promoted and assisted in Libya.
13. The development of Pragmatist-endemic needs to be further supported considering the benefits it can provide to neighbouring countries for the prioritization of vaccine strains according to risks.

Pillar III – Supporting the Global Strategy for FMD control

The Pillar Managers are Wilmot Chikurunhe and Kees Van Maanen.

Key Messages

- Tailored support provided through the PSO system to countries to progress along the PCP-FMD is effective.
- There is need to enhance and expand the PSO system through improved availability of resources by partners and donors (GF-TADs, DTRA, etc), for supporting the system.
- There is need for continued support to the GF-TADs FMD WG for event organization, event delivery and improved internal coordination mechanisms; particular attention should be given to effective collaboration with Regional Advisory Groups.
- There is need for targeted sample shipments/collaboration of specific countries in order to achieve characterization of FMDV from at least 30 different outbreaks across 6 different countries.
- Demand for virtual training is expected to increase; this requires prioritization of training development and sufficient human resources to support the training programme.
- Engagement of veterinary services in all three pillars will be important to validate usability of TOM as well as pilot the tool, which will require dedicated resources.
- Sustainability of VLCs is important, encouraging seeing VLC southern Africa preparing to deliver lumpy skin disease course to French-speaking audiences in the region.

Summary

Pillar III has four components, each with a different sub-objective. These include sustained and effective implementation of the FMD Global Strategy, strengthened global laboratory surveillance support and improved FMD virus intelligence to guide regional and national implementation of the GF-TADs Strategy, improved national and regional capacity for progressive control of FMD through delivery of high impact training in at least six roadmap regions, and improved security in FMD vaccine supply.

A presentation was done by an avatar covering the work of PIII for the six months from April to October 2022. WC then presented the achievements and issues of the same period (**Appendix 8**).

Two PCP-FMD roadmap meetings were planned for the period from beginning of year to October 2022. These meetings were held virtually for Eastern Africa in March and for Central Africa in September 2022. The vital role of the Support Unit was evident. To develop capacities of countries to progress along the PCP-FMD, open access courses to assist countries to develop the Risk Assessment Plan (RAP) and Official Control Programme (OCP) are under development. The first drafts are with instructional designers with RAP second review aimed for October 22. When completed, the two will add to the RBSP, which is already developed.

Review of FMD control plans progressed through 2022. 5 plans were reviewed for Gambia and Nigeria (Risk Assessment Plans), and for the Sudan, Saudi Arabia and Jordan (Risk based Strategic Plans). Support was provided to pilot TRAC and similar support was provided to the refinement of the Vaccine Demand Estimation Model (VADEMOS). The EuFMD initiated the PSO competency framework, with four new PSO

appointments achieved for three new countries since Sept 2021. GF-TADs partners accepted PSO re-structuring proposal to support national authorities so they can progress in the PCP-FMD.

Several activities were reported in the area of laboratory diagnostics. Working with the WRLFMD and Epi Interactive, development of an interactive genomics dashboard was achieved and is now ready for launch. The dashboard will be shared with WOAHA/FAO FMD reference laboratories first, then later with the wider FMD community. Collaboration and interactions with WRLFMD, ANSES, IZSLER, in the support to countries under pillar II and pillar III regarding sample collection, shipment, data analysis and advice, as well as roll-out of PTS was effective. Working with the EuFMD training team, a bilingual FMD Laboratory Investigation Training Course (FLITC) course has been prepared. The course will be delivered at the end of 2022. PVM/ Small Scale Immunogenicity studies (SSIS) were supported in Uganda, Jordan, Palestine, and the SEEN countries. As a result of this work, publications are underway.

Significant improvement was noted in the area of sample submission to the FMD World Reference Laboratory. It is reported that by July 2022, a cumulative 265 samples from 17 countries had been received. It is important to note that with this increase, several issues such as difficulties in collecting samples at central level, maintenance of cold chain, and lack of funds for shipping samples to the World Reference Laboratory were noticed.

The EuFMD successfully launched the VLC projects, which have been well received by both FAO colleagues and partners within national veterinary services. The Virtual Learning Center for Southern Africa (VLC SFS) is now self-sustaining, delivering capacity building activities to stakeholders at cost recovery and using the funds to strengthen the platform. It is expected that VLC Eastern Africa (EA) becomes independent at the end of the current phase. There was significant activity on the VLC platforms in connection with delivery of FAST courses. VLC Eastern Africa delivered two virtual courses during the reporting period. These are FMD Investigation Training Course and Lumpy Skin Preparedness course. The VLC Southern Africa completed the translation of LSD preparedness course to French and Portuguese to target French and Lusophone SADC audiences.

The course *Introduction to Foot-and-mouth disease*, will be transitioned to the FAO eLearning academy by the end of the year. This review and transition of a second course will confirm a consistent improvement in the EuFMD's capacity in virtual course development. The TOM Training Management System web app has been finalized and a Steering Committee has been identified during the reporting period. Pilots were completed in two Pillar I countries and the training team is leading the process of identifying more countries in Pillar II and III.

On the EuFMD platform, preparations have been underway for training courses such as the FMD Investigation training for North and West Central Africa which started in September 2022, FMD laboratory investigation training which is scheduled for November 2022, and Risk Analysis along the value chain has been reviewed and will be starting in October 2022. Socioeconomic Impact assessment and Vaccines, Vaccination and Post-Vaccination monitoring courses are currently under revision for tentative delivery in first half of 2023. The platform recorded 1 307 individuals from West, Central, East and Southern Africa and South Asia completing at least one EuFMD course in the period September 2019 to date. Meanwhile, the open access RAP and OCP courses are currently in development and are expected to be published before the next reporting period.

The two validation workshops of November 2021 and the vaccine security meeting of January 2022 have provided recommendations that have made further development of VADEMOS possible. The recommendations related to increasing the accuracy of the estimations of vaccine doses needed for progressive reduction in the impact of the disease and viral circulation. External validation of VADEMOS will be pursued through a peer-reviewed publication that is under preparation. When this is done, the model will be added to the PCP-FMD Toolkit in support of the GF-TADs FMD WG and the community of countries engaged in the PCP-FMD. The tool will contribute evidence on cost-effectiveness of different vaccination strategies to inform decisions on national FMD control programs.

The following issues were brought to the attention of the Executive Committee:

- Tailored support provided to countries to progress along the PCP-FMD is very effective. Need to enhance and expand the PSO system through improved availability of resources made available by partners and donors (GF-TADs, DTRA, etc.), for supporting the system;
- Continued support to the GF-TADs FMD WG for event organization and delivery and improved internal coordination mechanisms; particular attention should be given to effective collaboration with Regional Advisory Groups;
- Characterization of FMDV from at least 30 different outbreaks across six different countries, and 100 FMD viruses per pool cannot be reached without targeted sample shipments/collaboration of specific countries;
- Demand for virtual training is expected, requiring prioritization of training development and sufficient human resources to support the training programme;
- Engagement of veterinary services in all three pillars will be important to validate usability of the TOM as well as pilot it. This will require dedicated resources.

Discussion

FR commented that through the VLCs, the EuFMD now has instruments to deliver courses to a wider audience and can now focus on developing new courses and use those virtual learning centres for delivering EuFMD trainings.

KS commented that this is a high impact support that EuFMD is providing to the FAO and WOAHA in support of GF-TADs. The innovation started in EuFMD and now they assume parental responsibility, as VLCs are now able to stand on their own, providing a range of EuFMD courses that meet local demand. There are now seven VLCs around the world, not all of them fully independent.

Conclusions

14. Innovative approaches such as genomic dashboards, training management system (TOM), FMD Vaccine Demand Estimation Model (VADEMOS), Virtual Learning Centers (VLCs), provide the necessary tools for scaling up delivery of EuFMD courses around the world, fighting FMD in endemic countries, as well as ensuring preparedness in countries free of the diseases.

Item 5 Update on significant projects

Capacity Development

Manager: Marcello Nardi

Key Messages

- TOM Training Management System has been developed by EuFMD and is now being piloted.
- The Identification of piloting countries is a priority;
- TOM Steering Committee has been identified and a launch meeting will take place before the end of the year.

Summary

The presentation introduced the main updates about TOM Training Management System, a capacity development support tool that allows countries to monitor the delivery of competency-based education for veterinarians and similar roles. The TOM web app has been finalized and is now being piloted, while two new pilots started (Türkiye and Tunisia), in addition to the previous two being already piloted (Ireland and Austria). The TOM Steering Committee has been identified and a launch meeting will take place before the end of the year. Identification of piloting countries and development of new iterations of the tool that will allow National veterinary authorities to manage it in a more independent way are among the priorities for next semester.

Discussion

KS highlighted the importance of the tool to support Statutory Bodies and Competent Authorities for capacity development. The tool can be beneficial for development of skills and competencies and adopted by MNs and beyond.

Conclusion

15. The progress of TOM has been acknowledged as well as the benefits it can provide for capacity development in Member Nations (MNs) and other countries. Follow-up activities will be required to promote the use of the tool.

Prequalification of Vaccine

Manager: David Mackay

On behalf of the prequalification of vaccine (PQv) team, DM presented the strategic approach to prequalification and updated the committee on the status of implementation.

Key Messages

- The vision for PQv is to improve vaccine security for FAST diseases by promoting the use of vaccines shown to comply with internationally agreed minimum standards.
- In the first instance, the goal of PQv is to publish information on the extent to which evidence has been provided that vaccines against FMD comply at least with the minimum standards of the World Organisation for Animal Health.
- Implementation will follow a phased approach with Stage 1 acting as a proof of concept to demonstrate the feasibility of the scheme and to confirm that the output is valuable to risk managers and to companies submitting applications for PQv.

Summary

As part of the workplan 2019-2023, EuFMD is putting in place a system for prequalification of FMD vaccines to promote the use of vaccines that comply with minimum international standards (**Appendix 9**). Increased uptake of vaccines that have been prequalified should also improve predictability of demand, thereby promoting investment by manufacturers and benefitting vaccine security for member nations. A system of prequalification is an important prerequisite for putting in place Assured Emergency Supply Options (AESOPs) for FMD, representing an alternative, or supplement, to conventional FMD vaccine banks. The EuFMD has taken into account the experience gained by the World Health Organization (WHO) in operating a successful prequalification scheme for many years, adapting the approach to reflect the wide differences that exist between the human and veterinary domains with respect to vaccines and the practice of vaccination. Taking into account that EuFMD is not a regulatory authority, prequalification will be based on the principle of 'qualification assurance'. Only vaccines that have been 'qualified' by at least one national competent authority through the issue of a marketing authorisation will be eligible for prequalification. Applicants will submit a copy of the marketing authorisation together with additional information in the form of a prequalification evidence file (PEF) demonstrating that the vaccine complies with at least the minimum standards in the Manual of Diagnostic Tests and Vaccines for Terrestrial Animals of the World Organisation for Animal Health (the 'WOAH Terrestrial Manual'). Prequalification will not repeat, or peer review, the evaluation performed by the national authority, rather a risk-based approach will be applied to assess the level of assurance that has been demonstrated for WOA compliance in relation to the key properties of the vaccine that are essential for its safe and effective use.

The key elements are either in place or in final stage of development for EuFMD to be in a position to accept applications for PQv as part of Stage 1 as from January 2023.

Discussion

In discussion, members emphasised that EuFMD should ensure when developing the PQv scheme to take full account of the roles and responsibilities of other organisations and authorities which already have a role in assuring the quality of FMD vaccines and approving their use. Members were pleased to note that stakeholder engagement had been prioritised in developing the organisational structure and operational procedures for PQv. KS noted that the PQv proposal had been well received by manufacturers at the recent information day and that it can be really beneficial to assist vaccine security issues.

DM emphasised that during the first phase of implementation (Stage 1) PQv would be an entirely voluntary procedure for both manufacturers and risk managers. This means that it not currently linked to procurement or other incentives. It is envisaged that in future the system is linked to procurement procedures so that only products that are pre-qualified will be able to enter to those tender procedures. The outcome would take the form of information on the EuFMD website that risk managers in Member Nations of EuFMD might find useful in reaching decisions on use of FMD vaccines. At Stage 2 it is envisaged that PQv could form part of the basis for restricted tender procedures for EuFMD/FAO or for any other organisation that wishes to make use of the service. At that stage of implementation, any organisation wishing to use the output of PQv would need to seek a mandate to link PQv to their procurement activities. This approach mirrors the PQ procedure operated by WHO.

Conclusion

16. The Executive Committee noted the phased approach to implementation, that the PQv project is on track to start receiving applications from early 2023 and that full implementation of the scheme, including linking prequalification system for vaccines (PQv) to procurement, will be included as part of the next work plan for EuFMD.

Item 6 Outline of the new strategy

Presenter: Fabrizio Rosso

Key Messages

- A new strategy needs to be developed for presentation and approval at the next General Session.
- After the endorsement of the strategy a detailed workplan will be defined taking into consideration the priorities and objectives identified and the resources availability.
- The new strategy should build on outcomes of the current phase and focus to a) protect livestock sector in EuFMD Member Nations from introduction and spread of FAST diseases, b) Ensure adequate capacities to respond to crises and improve resilience of livestock sector to FAST diseases, c) Sustain control of FAST diseases to reduce the spread and impact on livestock sector.

Summary

FR shared a presentation (**Appendix 10**) with reflections on the changes faced in the recent period and the priorities identified building on results of the activities carried out during the current workprogramme 2019-2023.

COVID-19 has impacted agri-food systems with consequences (i.e. increase Market Price index) that are not yet completely understood on food value chains in the years to come. Conflict in Europe might have an impact on risk. Uncontrolled movements, disruption of food value chain and difficult animal health care services, reduced vet services capacities. COVID-19 has highlighted more the relevance of the following: capacity to upscale resources, preparedness and exit strategies, modelling tools, early detection and rapid tests, vaccine security, biosecurity behaviours, multi-sector involvement in control, communication and scientific expertise, transparency and critical analysis of data and public health impact.

Digital transformation in the delivery of projects/trainings/meeting has been up-scaled with digital tools and platforms widely used.

More focus needs to be provided on optimization of resources. COVID-19 and other crisis has diverted (or might divert) resources to other priorities and risk based activities improve efficiency and efficacy.

He indicated the principles that should drive the work of the Secretariat in the years to come:

1. COORDINATION: Ensure alignment of objectives and efforts with global and regional GF-TADs strategies, with optimization of the use of resources across the organizations.
2. PARTNERING Promote public-private platforms to facilitate collaboration and cooperation towards common goals (prevention, preparedness, control) in the priority risk areas/diseases identified.
3. DIGITALIZATION: Ensure that digitalization drives the development/improvement of tools and activities keeping the focus on end-user needs.
4. SCIENCE AND INNOVATION: Enhance and foster the link between science and policy through knowledge translation (*bringing relevant research outcomes to risk managers/policy makers*).

5. EFFICIENCY: Ensuring best use of expertise and resources within the team and working in partnership with centres of expertise.

He also identified **seven key areas** that can be proposed within the next Strategy to secure Europe from daily threat of FAST diseases:

PROTECT LIVESTOCK sector in EuFMD Member Nations from introduction and spread of FAST diseases.	1 - RISK MONITORING. Ensure risk information are regularly collected, analysed and available for risk managers in Member Nations and other countries.
	2- RISK MITIGATION. Enhance livestock biosecurity levels to increase protection against FAST diseases.
Ensure adequate capacities to RESPOND TO CRISES and improve resilience of livestock sector to FAST diseases.	3 - CAPACITY DEVELOPMENT. Improve skills for effective and efficient response to FAST incursion.
	4 - TOOLS and RESOURCES. Sustain capacity for assess impact of FAST incursion, assist proper response to crises and timely scaling up of resources.
Sustain CONTROL OF FAST DISEASES to reduce the spread and impact on livestock sector.	5 - GLOBAL FMD CONTROL. Sustain global FMD control strategy.
	6 - FAST CONTROL. Support FAST control in risk areas to reduce risk for MNs.
	7 - VACCINE SECURITY. Improve availability of quality FAST vaccines.

Discussion

MK indicated that EC is facing significant challenges related to budget availability due to expenditure mainly connected the Highly pathogenic avian influenza (HPAI) outbreaks and related disease control budget. The budget for veterinary programmes, emergency support, including EuFMD and other grants issued by EC, in the upcoming years will be therefore impacted with reduced availability. It is therefore suggested to identify core activities that should be prioritized within the implementation phase of the next strategy. FB indicated that trainings and risk identification remain of high interest for the EC whether certain activities, despite considered important, might not fall directly under the mandate of DG SANTE (i.e. research). Timeline for the development of new strategy with prioritization of actions need to be defined to allow proper discussions at EU level.

KS reminded that in past years, in order to face budget constraints, it was proposed to have a two-year agreement as a temporary contract versus the usual four-year one and indicated that there might be possibilities to look to other partners that might be interested to specific objectives and activities.

Conclusions

17. A working group will be formed within the Executive Committee members to assist the development of the new strategy with identification of priorities and objectives.
18. The new strategy would need to have a modular approach that can be easily prioritized in case of limited resources; an assessment would be needed to support this approach (i.e. the secretariat to assess and report on uptake of training activities by MN in the past years). The possibility to establish new strategic partnerships should be considered and evaluated by the Commission and its Executive Committee, as mechanisms to improve availability of resources to achieve objectives.

Item 7 Committees priorities and workplan

Presenter: Stephan Zientara

Key Messages

- The three committees of the Commission: Standing Technical Committee, Special Committee on Biorisk Management, Special Committee for Surveillance and Applied Research (STC, SCBRM, SCSAR respectively) have defined specific programmes and targets.
- Relevance of applied research programme that provides tangible results and outcomes used by risk managers/policy makers.
- Relevance to keep the focus on Europe and its neighbourhood (with particular reference to risk areas: Balkans, Thrace and East Europe for the current increased risks).
- Importance of the global surveillance and FMD virus intelligence (to inform risk monitoring, preparedness).
- Relevance of PQv initiative with benefits for emergency preparedness and risk reduction (contributing to address vaccine security issues).
- Importance of continuing investigating needs and opportunities to establish diagnostic bank for FMD
- Relevance of keeping focus on trainings, real-time trainings, digital-learning and training management system for improving skills of vets and paravets.
- Continue the implementation of the EuFMD digitalization strategy – in line with FAO digitalization approach.
- Ensuring regular coordination with partners (FAO, WOA).)

Summary

Stephan Zientara, chairperson of the Standing Technical Committee (**Appendix 11**) gave an overview of the roles of the EuFMD Committees: the Standing Technical Committee, the Special Committee on Biorisk Management, the Special Committee on Surveillance and Applied research, and the Special Committee on prequalification system for FAST vaccines.

He outlined the upcoming Open Session, which will include 56 presenters of which 40 in person and 16 online. 88 abstracts have been received. There will be two side events: a workshop on FAST risk Monitoring and one on FAST vaccine availability.

The Open Session will be streamed and physical, and will make use of a specific Trello board to showcase all the presentations.

Discussion

Lajos Bognár thanked all and the director of NSAH made some remarks overall.

Conclusions

19. The workplans of the special committees have been acknowledged and shall continue implementation during the next semester.

Item 8. Financial and administrative report

Presenter: Cécile Carraz

Key Messages

- EuFMD Member Nations Contributions Secretariat Core Staff & Financial Position;
- Reminder outstanding contributions before year end;
- Revision MN yearly Contributions to be presented for endorsement at 45th General Session in May 2023;
- EU Funded Activities (Phase V: 2019-2023) financial position and expenditures by Pillar at 30-09-2022
Progress report for pre-financing Year 4 by 30 November 2022;
Preparation work strategic and financial plan Phase VI to be presented during the 45th General Session in May 2023.

Summary

CC presented the EuFMD Secretariat administrative summary and financial position of the Trust Funds (**Appendix 12**) operated by the Commission. The position of EuFMD Members contribution report showed received contributions for year 2022, highlighting no outstanding contribution from the previous years and reminder for year 2022 (USD 159 833) will be sent before end November.

Financial Statement at 30-09-2022 showed a positive of balance of USD 155 487 to cover personnel commitment up to year-end. The allocated budget covers the core staff of the secretariat endorsed by 44th General Session (GS) April 2021 and ExCom October 2021, composed 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. Executive Secretary (vacant June 2020); Deputy Executive Secretary; Programme Implementation Manager & Communication & Network Officer; Programme Operations Lead Programme Learning Lead; Pillar I coordinator; Thrace & Balkans Experts; IT Engineer; Data Analyst; HR and Operations Specialists.

A proposal for revision MN yearly Contributions to be presented for endorsement at 45th General Session in May 2023.

Financial report on the EuFMD Emergencies and Training Funds, for provision of virtual and Real-time trainings to non-EuFMD members and support to FAO Regional Offices, was presented indicating that due to the implementation of new FAO financial policies regulations since 2021, the Trust fund is now closed. Agreement with Australia 2011-2021 is finally closed and a new agreement with DAWE May 2022- November 2024 (USD 132 498) is operational. EuFMD is raising single seed funding and contribution agreements with partners (e.g. Canada, New Zealand) and is working on the opening of

new Multi-donor Trust Fund for activities in line with the EuFMD Strategic Plan, including response to FMD emergencies or to support capacity-building programmes.

Financial statement at 30-09-2022 of the BMGF project “Veterinary and veterinary para-professional capacity skills training” (November 2020-December 2023) was presented highlighting the request to donor for an amendment to the agreement for a budget revision with increase and reallocation of unspent lines.

Financial statement at 30-09-2022 of the project “EuFMD Real Time Training Course for Texas A&M University” (November 2019-February 2023) was presented highlighting available balance for activities for 3rd VRTT in December and discussion with donor to evaluate further collaboration for an amendment to the agreement for implementation and delivery of Real Time Training Courses.

Financial Position of EU Funded Activities (Phase V: 2019-2023) was reported showing level of expenditures by Pillar at 31-09-2022 after 36 months of activities representing the 75 percent of the programme implementation highlighting no over expenditures by budget line according to the endorsed Budget Revision.

EuFMD will issue the request for pre-financing of Year 4 in the upcoming weeks, and prepare the strategic and financial plan Phase VI to be presented during the 45th General Session in May 2023.

Discussion

FB mentioned the punctual and efficient detailed report, and good replies to budget queries.

Concerning the pre-financing of Year 4 and closure of Phase V, he suggested to present the budget tables by component in the cluster report.

He reiterated the importance of an agreed timeline and preparatory work on strategic and financial plan for Phase VI, considering the upcoming EC position, in order to have a draft grant agreement in place during summer 2023.

FR agreed with FB on the importance to coordinate and to follow up efficiently with donor to address any concern for a correct forecast and preparation work in a timely manner for Phase VI, and mentioned the importance of identifying partnerships to contribute in synergy to the implementation of the Action.

Conclusions

20. Endorsement was given to the financial report provided.
21. A proposal for revision MN yearly Contributions will be developed to be presented for endorsement at 45th General Session in May 2023.
22. EuFMD will issue the request for pre-financing of Year 4 in the upcoming weeks, and prepare the strategic and financial plan Phase VI to be presented during the 45th General Session in May 2023.
23. Budget revision of the VPP project will be submitted to the donor providing the justification for the reallocation of resources for the three pillar activities.

Item 9. AOB

N/A

EuFMD Committees

Executive Committee, Standing Technical Committee (STC), Special Committee for Surveillance and Applied Research (SCSAR), Special Committee on Biorisk Management (SCBRM), Tripartite Groups.

Hold-FAST tools

AESOP. Assured emergency supply options; EuFMDiS, FMD spread model; GET PREPARED toolbox. Emergency preparedness; GVS. Global Vaccine Security; Online Simulation Exercises; Outbreak Investigation application; Pragmatist. Prioritization of antigen management with international surveillance management tool; PCP-FMD. Progressive Control Pathway for foot-and-mouth disease; PCP-Support Officers; SAT. PCP Self-Assessment Tool; RTT. Real Time Training; SMS Disease reporting; SQRA toolkit. A method for spatial qualitative risk analysis applied to FMD; Telegram; TOM. EuFMD training management system; Global Monthly reports; VADEMOS. Vaccine Demand Estimation Model; VLC. Virtual Learning Center. Microlearning.

United Nations Sustainable Development Goals (UN-SDGs)

EuFMD's programme has a main focus on



Thinking of the
environmental
footprint

Together against wasting resources,
think twice before printing.

Animal Production and Health Division,
NSHA / European Commission for the
Control of Foot-and-Mouth Disease
(EuFMD)

eufmd@fao.org

fao.eufmd.org

eufmdlearning.works

eufmdvirtual.com

eufmd-tom.com

Food and Agriculture Organization of the
United Nations
Rome, Italy