The following is the response by Animal Health Ireland to the request by DAFM for stakeholder feedback on the draft National Farmed Animal Health Strategy. Our response is set out by reference to the headings in the draft report.

Chapter I

Background

1. AHI welcomes the proposed adoption of the ‘prevention is better than cure’ principle, which aligns with current EU animal health strategy and legislation. However, we are of the view that it will be necessary to ensure that domestic legislation is adapted, as necessary, to fully support such a shift of emphasis.

2. AHI welcomes the reference to the need to ensure alignment between animal health policies in Ireland and Northern Ireland. This is all the more important in the context of the UK decision to exit the EU. As we look forward to a future IBR programme, there is a need to consider how best to align policy in both jurisdictions in relation to the use of non-‘marker’ IBR vaccines.

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3. The reference to the role of animal health programmes in supporting Ireland’s climate change mitigation efforts is welcome. However, we note that, to our knowledge, the effect of such programmes remains to be formally incorporated into the forthcoming iteration of the Teagasc Marginal Abatement Cost Curve (MACC) model.

4. AHI welcomes the reference to the need to ensure that the production by animal health programmes of public goods should be taken into account in decisions on investment in public health systems in Ireland. We would strongly support the development of a framework to guide discussions on appropriate cost-sharing mechanisms, which take account of the mix of public and private goods produced by such programmes.

5. The emphasis in the consultation document on the need for clarity with regard to the assignment of responsibility for delivery is welcome.

Chapter II

6. AHI is of the view that the five high-level strategic outcomes identified in the document are appropriate, and believes that AHI can play a significant role in particular in relation to ‘Producer Productivity and Sustainability’, ‘Processor Outcomes’ and ‘Market Access’. Our contribution in the areas of ‘Public Health’ and ‘Response Capacity’ are secondary effects of our actions in relation to the first three outcomes.

Chapter III (Key Enabling Principles)

7. AHI is of the view that the four ‘key enabling principles’ identified in the document are appropriate, and that our own work to date has demonstrated the ability of our organisation to put these principles into practice.

A. Working in Partnership

8. AHI would like to see further detail developed on how those assigned responsibility for managing such complex environments might be equipped with specialised programme/project management skills. In particular, we would welcome the extension of such a measure to
individuals in those bodies external to DAFM that hold responsibility for delivery of relevant programmes and initiatives.

B. Acknowledging Roles and Responsibilities

9. AHI supports the clarification of the principles that would underpin government intervention in the animal health area, agrees that those outlined (protection of public health, protection of the environment, protection of the wider economy, mobilisation of private stakeholders, improving market access, and safe-guarding animal welfare) are broadly appropriate, and would wish to see these principles incorporated into a framework that could guide discussions on cost and responsibility sharing. We therefore welcome the proposed consultation with stakeholders, and subsequent publication of a document, on this issue.

C. Reflecting Costs and Benefits

10. AHI welcomes the commitment to work towards the clarification of contributions by stakeholders to the addressing of notifiable diseases, and would like to see these same principles extended beyond notifiable diseases to encompass measures aimed at improving animal health or biosecurity.

11. AHI welcomes the commitments to “review funding mechanisms for AHI to ensure a sustainable model for the medium term – for the lifetime of Food Wise 2025”. This is consistent with the current AHI Strategic Plan (2015-2017), which identifies the need to develop “a revised, sustainable funding model for Animal Health Ireland”, which is much more robust than the current, inherently fragile model. The Board and management of AHI are of the view that the current funding model requires to be to be reconfigured so as to provide additional income to enable the organisation to continue to deliver its current and future work programmes, and to mitigate significant cash flow and solvency risks inherent in the current ‘matched’, subscription-based funding model.

12. AHI equally welcomes the commitment to “commence the animal health levies section of the Animal Health and Welfare Act and repeal the Bovine Disease Levies legislation” and the reference to the broadening the base of contributors to include actors who do not currently contribute to funding animal health measures, but who benefit from the existence of such measures.

13. In this regard, AHI would encourage DAFM to examine the broadening of the funding base beyond just those livestock keepers who do not contribute to the existing levy. For example, we would also support an initiative from DAFM to explore mechanisms through which entities operating in the private sector, such as veterinary pharmaceutical companies, might contribute to the funding of animal health measures in a manner which is transparent, and which is subject to appropriate governance and oversight mechanisms.

14. AHI considers that the proposed animal health levy can play a key role in meeting the objective of the NFAHS of establishing a revised, sustainable funding model for our organisation, supplementing, or replacing, the current ‘matched’ subscription-based model. It is appreciated that this is a significant departure from the existing AHI funding model and an objective that can only be achieved through active leadership by DAFM, and following the emergence of a broad consensus on the part of our stakeholders in favour of such an outcome.
15. Recognising that the introduction of an animal health levy and an agreement on the manner in which it would be used in support of this strategy will not come about in the short term, AHI considers that there is an immediate need to refine the current AHI funding model. We draw attention, in particular, to the fact that our subscription funding base does not contain a mechanism to reflect changes in the size of the production base, arising from sectoral expansion, or from merger and acquisition activity, to which the subscription amounts were originally related.

16. The commitment to subject all animal health initiatives to an *ex ante* cost-benefit analysis is supported by AHI, and is a principle which we have sought to apply in relation to the major programmes for which we are responsible.

D. Applying the principle that ‘prevention is better than cure’

17. The recommendation that a cost-benefit analysis of herd health planning and farm bio-security practices will be undertaken is welcome. AHI encourages DAFM to consider including within the remit of such a study an analysis of the means by which the adoption of such practices might be incentivised among the farming community, and other relevant actors in the value chain.

18. AHI welcomes the recommendation that “all educational and training programmes for farmers and animal owners will provide modules on animal health and herd health planning”, and considers that it has developed considerable expertise in this area in relation to bovine herd health, that could be used to underpin future training programmes in the cattle sector.

19. AHI welcomes the recommendation in relation to the proposed horizon scanning and risk analysis, and, given its experience in developing and implementing an expert Policy Delphi study and a farmer priority identification survey in 2009, would welcome the opportunity to be involved in the design and implementation of such an exercise.

20. The development of a national coordinated AMR action plan is of the utmost importance, and AHI would welcome the opportunity to be centrally involved in its development and the implementation of those aspects relating to those species which fall within its remit.

**Chapter IV (Supporting Infrastructure and Systems)**

A. Animal Health Surveillance

21. AHI endorses the importance attached in the document to the acquisition of animal health surveillance data. Our experience in the BVD eradication programme, *CellCheck* and *Beef HealthCheck* has been that the acquisition of high-quality, timely and relevant information is critical to the development of appropriate policy responses, aimed at resolving identified animal health issues.

22. AHI would welcome the opportunity to participate in the National Stakeholder Forum, referred to in the National Animal Health Surveillance Strategy.

23. An effective framework for surveillance will draw on data generated by many sources, including individuals and private commercial entities. Developing a framework to address the right to privacy on the part of these individuals and businesses will be critical in order to ensure the continued flow of surveillance data from these sources.
24. Of equal importance to the sustainability of such a model will be the ability to demonstrate the utility of the information acquired – in economic and other terms – to the information providers. This is a principle that AHI has developed in relation to the national BVD eradication programme (lower cost testing for Negative Herd Status herds) and CellCheck programmes, and is currently developing for the Beef HealthCheck programme (assigning of economic values to the pathologies identified at slaughter).

25. A surveillance system which includes as one of its principle objectives the improving of outcomes in relation to significant endemic animal health issues will be most effective when good-quality information, analysed and presented in a manner conducive to enabling good decision-making, is made available in a timely and user-friendly fashion to those individuals who can effect improved animal health outcomes at farm level. It is therefore critical that the farmer, and the farmer’s nominated veterinarian, are provided with such information to facilitate corrective and preventive action.

26. AHI supports the proposal that surveillance output data would be made publicly available to all stakeholders to support policy development and prioritisation and to support international trade of Irish animals and products. AHI already publishes the outputs of the national BVD eradication programme on its website, and proposes to engage with stakeholders in relation to the publication of data from the CellCheck programme.

C. Laboratory Services
27. AHI welcomes the reference to the establishment of data sharing arrangements and the integration with other providers of surveillance data to inform policy formation. AHI regards the sharing of such information with those who can most directly influence animal health outcomes at farm level – the farmer and the farmer’s nominated vet – as being critical to improving animal health outcomes and underpinning the legitimacy of the collection of animal health data.

D. Epidemiological and Risk Analysis
28. AHI is of the view that the science base encompassed under the heading of risk analysis should be expanded to include the social sciences. Experience from several of our major programmes has been that the human behavioural aspects of programme implementation are not sufficiently well understood in an Irish context, nor are the associated risks sufficiently well quantified.

29. AHI recognises the great extent to which it depends upon the expertise of CVERA as a critical support for its programmes, and welcomes the reference in the consultation document to the routine support by the Centre for initiatives in the animal health, animal welfare and food safety fields.

E. Animal Health / Animal Disease Statistical Modelling
30. AHI supports the objective that “Animal health/animal disease modelling will be developed as a tool to assist in decision-making with regard to disease control and eradication programme.” However, it is important, in our view, that the development of this expertise is not confined to use in relation to epidemic disease, but rather that it is available to assist policy development in relation to the major economically important endemic diseases. Our particular experience of the use of such modelling in the context of the BVD eradication programme has been that it can play a key role in elucidating the impact on animal health outcomes of alternative policy options.
31. AHI believes that DAFM should encourage the location of statistical modelling expertise within CVERA, to exploit synergies with other skillsets already located in the Centre.

F. Economics of Animal Health
32. Animal Health Ireland welcomes the high-level objective that “Economic evaluation will be incorporated as a routine into the decision-making process with regard to all animal health and welfare initiatives.” Our experience has been that the demonstration of an economic incentive arising from improvements in animal health is a necessary (but of itself insufficient) condition for mobilising voluntary intervention by stakeholders.

G. Availability and Capability of Farmed Animal Veterinary Services
33. In the view of AHI, the interaction between a well-informed farmer and a well-informed veterinary practitioner is that which is most likely to bring about desired animal health outcomes at farm level.

34. Veterinary practitioners have relevant expertise in evaluating, investigating and preventing disease outbreaks, are in frequent communication with farmer clients and are key influencers of farmers in relation to animal health matters. In order to maximise the value which the farmer’s nominated veterinarian can provide, it is important that both parties have access to up-to-date, high quality information, which has been analysed and presented to users in a manner which encourages good decision-making.

35. Albeit based on relatively limited experience to date, AHI regards the delivery of herd-level animal health interventions by trained veterinary practitioners in the context of structured national animal health programmes as representing a potentially very efficient and effective means of enhancing such programmes. It therefore encourages DAFM to carry out an evaluation of the relevant RDP measure, and to make recommendations as to the refinement of the programme and as to the potential scope of its action for the future.

I. Supporting Access to International Markets
36. It is the view of AHI that animal health is a key determinant of product quality and a key component of sustainability, that Ireland’s animal health status should form an integral component of Ireland’s unique selling proposition, and that we should put in place objectively verifiable performance indicators to substantiate the health claims which underpin our brands.

37. AHI therefore supports the strategic action, recommended in the consultation document, that Ireland’s existing animal health status, and its on-going animal health programmes, can and should be used as an asset in developing access to new markets. We encourage DAFM to consider formally benchmarking Ireland’s animal health status against that of key competitor countries in order to identify areas for improvement and, conversely, areas of possible competitive advantage.

K. ICT Developments and Data Management
38. AHI has invested heavily in the development of a significant animal health database using the existing ICBF database as the platform. In our view, the consolidation within the ICBF database of relevant animal health data, relating to the animal health matters falling within the AHI remit, is critical, as it creates the potential for farmers, veterinarians, and other relevant system users to access relevant information via a single portal. This enables a holistic approach to be taken to the animal health status of the herd as a whole. Taking into account the frequent concurrent presence
of diseases on individual farms and the interactions that take place between diseases, such an approach is more likely to lead to desired animal health outcomes than when storage of relevant animal health information is fragmented and poorly accessible to the relevant users.

39. AHI is aware that DAFM is currently amending the functionality of the AHCS database to enable the automated restriction of herds in the context of the national BVD eradication programme. We would encourage DAFM to ensure that any modifications to AHCS are future-proofed to allow their potential application in relation to planned or emerging programmes for other endemic diseases. It is also critical that the enhanced functionality extends to the issuing of biosecurity notifications (e.g. to neighbouring farms and attending veterinary practitioners). Such additional functionality, while of immediate utility in relation to the programmes for which AHI is responsible, is likely to also be relevant to the management of future exotic disease outbreaks.

L. Veterinary Medicinal Products
40. AHI supports the view that there is a need for the effective communication of the risks posed by AMR and believes that, properly resourced, our organisation can play an important role in developing and implementing such communications with the farmers and service providers that fall within our scope of operation.

41. AHI also supports the view that farmers, veterinary practitioners and advisors need to work together to reduce the need for antibiotic use, and considers that the national BVD eradication programme and the CellCheck programme have played an important role in reducing the requirement for antibiotics in the bovine sector.

42. AHI supports the recommendation on the development and implementation of an electronic system for collecting data on antibiotic usage. Our experience has been that the development of a credible, robust evidence base is an essential springboard for mobilising actors and for the development and refinement of policy. AHI believes that the increasing sophistication and ready availability of modern technology, such as smart phones, should be exploited to the greatest extent possible to facilitate the capture of antibiotic prescription and usage data in as close to real time as possible. Furthermore, the development of feedback loops, which allow farmers and veterinary practitioners to benchmark the level of usage of antibiotics by volume and category against peer groups, will be essential to embedding a culture of continuous improvement.

M. Independent Scientific Advice
43. AHI supports the objective that independent scientific advice will continue to be a critical and core element of animal health policy and operational programme development. AHI believes that its collaboration with organisations such as CVERA, Teagasc and UCD, and the work carried out by the various Technical Working Groups, has made, and will continue to make, a substantial contribution to the development of the robust science base which underpins our various programmes.

N. Education, Training and Communication
44. AHI welcomes the statement that it has become “the accepted reference point for independent high quality up-to-date information relating to animal health issues in the bovine sector in Ireland”. We believe that, properly resourced, our organisation can rapidly acquire the same standing with respect to other major livestock sectors in Ireland. We note in this regard the
recommendations contained in the report of the Pig Industry Stakeholder Group (particularly recommendation 22).

45. AHI supports the objective that the animal health components of Knowledge Transfer initiatives and the targeted farm animal advisory service under the RDP are delivered in the time scale envisaged and are of a consistent high quality. AHI has invested significantly in both human and ICT resources to ensure that this is the case, and looks forward to the outcome of future DAFM evaluation of these measures with a view to further refining existing programmes of training and to planning future programmes.

Q. Research and Innovation

46. AHI is of the view that research into animal health has not received the priority it merits in the Sustainable Healthy Agri-Food Research Plan (SHARP), where the primary emphasis is on animal breeding, animal reproduction, animal well-being, and animal nutrition and product quality. We would wish to see a rebalancing of these priorities under the ‘animal production’ heading in future research plans.

47. Notwithstanding the above, AHI supports the objective in the consultation paper that new priority areas for research should be identified to build on the animal health-related actions outlined in SHARP. To this end, we have sought to establish mechanisms to regularly engage with various Research Performing Organisations to proactively identify opportunities to develop and submit proposals for research funding.

48. AHI supports the view that genetic and genomic selection can make an important contribution, as part of an holistic, multi-faceted programme, to certain animal health programmes, particularly those that are of typically long duration, such as those for the control of Johne’s disease. Through its programmes, AHI contributes valuable phenotypic information to the ICBF database that facilitates research into this area, and ultimately, the establishment of market signals that encourage producers to select and breed from more disease-resistant animals.

49. AHI supports the objective that data from its programmes should be made available to researchers in the animal health and genetics fields (and more broadly) and has sought to address related data protection concerns through the development of a Service Level Agreement with ICBF.

Chapter V
Ensuring Compliance with Animal Health Standards

50. AHI is of the view that the adoption of best practice should be encouraged through all means at our disposal, including peer learning, awareness-raising, technology, price signals, peer-pressure and, where appropriate, regulation.

51. AHI recognises that limited regulation can be an essential driver for collective action, particularly in relation to the control of the highly infectious diseases that fall within its remit. We also believe that regulation is likely to be better accepted, and therefore better complied with, by those subject to it when it is preceded by a meaningful process of communications and consultation. We would wish to see greater emphasis in this section of the document on non-regulatory approaches to compliance, addressing a potential role for DAFM in assisting industry to develop mechanisms such as producer-initiated animal health statements, or industry codes of practice. We would also support an exploration by DAFM of the potential for industry Quality Assurance
schemes to provide further encouragement for the adoption of best practice animal health measures, particularly those that contribute to the achievement of agreed national animal health priorities.

Chapter VI
Ensuring results

52. AHI welcomes the commitment to establish a ‘Farmed Animal Health Strategy Oversight Body’, and would wish to directly participate in same. We would equally wish to ensure, however, that the remit of the proposed Body is congruent with the governance arrangements at both the individual programme and corporate levels, which AHI already has in place.

ENDS