

## **CSF CONTINGENCY PLAN FOR THE NETHERLANDS**

Attached is the contingency plan for dealing with outbreaks of Classical Swine Fever (CSF) in the Netherlands, in accordance with Article 22 of directive 2001/89/EEC.

Veterinary Service,  
Ministry of Agriculture, Nature and Food Quality.

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## **CSF CONTINGENCY PLAN FOR THE NETHERLANDS**

This document sets out the contingency plan for Classical Swine Fever (CSF) as drawn up in 2003 for the Netherlands.

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## List of abbreviations

AID	General Inspection Service
CVO	Chief Veterinary Officer
DCC	National Departmental Crisis Centre
DCS	Departmental crisis staff
DL	Agriculture Department of LNV
DV	Information Department of LNV
CSF	Classical Swine Fever
GD	Animal Health service
GWWD	Animal Health and Welfare Act
ID-Lelystad	Institute for Animal Science and health
KNMvD	Royal Dutch Veterinary Association
LASER	Organisation recognised by the EU as a financial agency for the implementation of EU policy
LNV	Ministry of Agriculture, Nature and Food Quality
RCC	Regional Crisis Centre
RVV	National Inspection Service for Livestock and Meat
SG	Secretary General
VEO	Veterinary epidemiological consultative committee
VVA	Veterinary and Food Policy Department of LNV

## **SECTION A. LEGAL POWERS**

### **1 Statutory Powers**

- The Animal Health and Welfare Act
- The Dry Rendering Act
- The Meat Inspection Act
- The Veterinary Practice Act

#### **2.1 Notification of Suspected CSF**

EU legislation regarding control of animal disease has been implemented in the Animal Health and Welfare Act (AHWA). Article 15 of the Act deals with the control measures to be undertaken by the Ministry of Agriculture, Nature Management and Fisheries (LNV) for diseases in cattle, pigs, sheep, poultry, bees, minks and other mammals and fish. In the Regulation on notification of infectious animal diseases (Articles 2) CSF is denoted as infectious animal disease in livestock, bringing it under the scope of Article 3 of the Animal Health and Welfare Act. Articles 19 and 100 of the Act require compulsory notification of suspected CSF by the owner/keeper and the veterinarian. A special incident desk has been set up that can be contacted 24 hours per day. The course of action on receipt of a notification of CSF is set down in the CSF contingency plan.

As soon as livestock is suspected of being infected the measures set down in Article 4 of Directive 2001/89/EEG are taken. The mayor of the municipality takes the required measures as soon as possible. As most of the cases require emergency action, the head of region (kring) of the National Inspection Service for Livestock and Meat usually takes the necessary action and informs the mayor immediately (Article 21 of the AHWA). In addition, under Article 14 of the Veterinary Practice Act, every veterinarian is obliged to conduct his profession according to the normal rules and practices. This means that the veterinarian is also obliged to ensure that no damage is inflicted to animal health or that there is damage to public health or the national economy.

#### **2.2 Slaughter of infected and animals suspected of being infected**

Article 5, sub-paragraph 1 of Directive 2001/89/EEC lays down that as soon as CSF is officially confirmed on a farm, all susceptible animals present on the farm must be slaughtered on site. Under domestic law slaughter of diseased animals or animals suspected of being diseased can be carried out under Article 22, paragraph 1, sub-paragraph f of the Animal Health and Welfare Act.

#### **2.3 Destruction of carcasses and access to sites to be used for this purpose**

Under Article 2, paragraph 1 a, of the Dry Rendering Act animal waste originating from animals slaughtered under measures to combat the spread of veterinary disease are designated high-risk material. Article 3 of this Act lays down that high-risk material must be rendered harmless under the terms laid down in the Act. The rendering plant has a legal responsibility to destroy material delivered to it under measures to combat the spread of veterinary disease.

In the Netherlands there are two rendering plants with together a total maximum capacity of 2600 tons per 24 hours.

## **2.4 Payment of compensation**

The Animal Health and Welfare Act has a closed system of compensation. This is set out in detail in Articles 85 to 90 of the Animal Health and Welfare Act. Article 86 of this Act states that compensation can be granted from the Animal Health Fund if animals were slaughtered or rendered harmless under measures to combat infectious animal diseases. Compensation for animals suspected of being diseased equals the value of the healthy animal, for diseased animals 50% of this value and animals died before the moment of suspicion 0%. Products and materials will be compensated with the value at the moment the measures were taken, with the provision that the amounts so determined can be decreased by general measures determined by the government. The value will be assessed by a licensed animal assessor. The Minister will inform the owner of the amount as soon as the valuation has been made and accepted.

Conditions may be attached to the granting of compensation regarding the layout, hygiene, re-stocking of the animals and veterinary supervision of the farm. This could also apply to the rules which may be set for the levies raised to fund the compensatory payments. The Minister could reduce compensation, withhold payment or demand repayment if it is determined that the conditions have not been met.

## **2.5 Cleaning and disinfecting and other measures to be taken with regard to buildings and land**

Under Article 22, paragraph 1 h of the Animal Health and Welfare Act, the officer attending on the basis of Article 21 of the Act can order the cleaning and disinfection of buildings, land, manure silos and storage areas. These measures are laid down in Articles 7 and 8 of the Regulation concerning the execution of measures to combat infectious animal diseases.

## **2.6 Standstill orders and limitation of movement orders**

As soon as CSF is officially confirmed the competent authorities will delineate a protection area around the infected farm with a radius of at least 3 km and a *surveillance zone* with a radius of at least 10 km (article 9, 2001/89/EEC).

Article 30 of the Animal Health and Welfare Act forms the basis for the standstill orders to be put in place to combat the spread of animal disease. In addition, under this Article warning signs must be placed.

Under the procedure set down in Article 31 of the Animal Health and Welfare Act the necessary regulation comes into force immediately after it has been made known to the media.

Under Article 30, paragraph 1 of the Act, the Minister of Agriculture, Nature and Food Quality may ban the transport of animals, products or materials which could be carriers of contamination, in the whole of the Netherlands, or in certain areas of it.

Under Article 30, paragraph 2 of the Act the head inspector of the district may announce a standstill order around a farm infected or suspected of being infected.

Under Article 22, paragraph 1, sub-paragraph d of the Act buildings and land can be declared infected or suspected of being infected by posting official notices.

As soon as a notice has been posted the farm concerned automatically becomes subject to the following general legal provisions:

A ban on animals, products and materials that could be carriers of infection entering or leaving the farm is set down in the Decision on transport to and from buildings and land contaminated or suspected to be contaminated under Article 25, paragraph 1 of

the Act.

Restricted access for persons is set down in the Decision on access of individuals or groups to buildings or land contaminated or suspected to be contaminated under Article 25, paragraph 2.

The compulsory cleaning and disinfection of persons leaving the farm is set down in the Regulation on leaving building and land contaminated or suspected to be contaminated, under Article 26 of the Act.

## **2.7 Vaccination**

Under Directive 2001/89/EEG vaccination against CSF is prohibited.

Under Article 19 of Directive 2001/89/EEG it is possible to carry out emergency vaccination to supplement control measures already taken in the event of outbreak of CSF in accordance with the procedures and provisions laid down in paragraphs 2 to 9 of this article. This decision will be made by the European Commission in consultation with the Member State. A vaccination programme will be provided to the European Commission at the moment the Netherlands ask the European Commission to take vaccination in consideration as a control measure in an CSF outbreak.

Under domestic law the emergency vaccination is laid down in Article 17 of the Animal Health and Welfare Act.

## **3 Enforcement**

Under Article 114 of the Animal Health and Welfare Act officials designated by the Minister are responsible for compliance with disease control as established in accordance with this Act. Detection of punishable offences is the responsibility of the officials so designated under the Criminal Code.

## **4 Penalties**

Violations of Article 3 of the Animal Health and Welfare act are punishable under the Economic Offences Act. If a veterinarian does not fulfil his duty of care in the practice of veterinary medicine the measures set down under Article 16 of the Veterinary Practice Act come into force. These measures can be imposed by a disciplinary tribunal.

## **SECTION B. FINANCIAL PROVISIONS**

### **1. Covenant for financing outbreaks of animal disease**

The expenses for legal control of contagious animal diseases are financed by the Animal Health Fund (article 83 and 95 of the Animal Health and Welfare Act). In July 2000, the Ministry of LNV entered into a covenant with the Commodity Boards Cattle, Pigs, Poultry, Sheep and Goats about the payments of the costs of outbreaks of contagious animal diseases designated by the Dutch government. The covenant covers the period 2000-2004, with the understanding that it will be renewed (with or without modifications) for a five-year period. The Commodity Boards agreed to bear the costs up to the sum of about 467.000.000 euro. For the pig sector this amount is set on about 226.890.000 euro on behalf of the Commodity Board for Pigs. The Dutch government will pay any costs over this amount. The covenant is approved by the European Commission.

LASER executes all the payments, the administration and the justification of the payments.

### **2.1 Personnel**

Money voted to the Ministry each year cover the cost off staff employed by the Ministry of Agriculture, Nature Management and Fisheries (Veterinarians, office staff, laboratory staff and officials of the General Inspection Service). If additional personnel are required on a temporary basis their cost is borne by the Animal Health Fund for the Control of Contagious Diseases. The costs covered in this Fund include not only the pay but also personnel-related operating costs, e.g. travel and subsistence.

### **2.2 Equipment and consumable items**

The costs of equipment and consumable items are covered by the Fund. Small equipment and consumable items are in stock as are the 9 mobile electrocution devices and the 26 handheld electric stunning devices (tongs) used for killing animals.

Costs for major capital items on call to hire or to buy from commercial firms are also covered by the Fund.

### **2.3 Slaughter, transport of carcasses and transport and destruction of contaminated material, sanitation**

These costs are covered by the Fund.

### **2.4 Compensation payments**

Compensation payments are paid out of the Fund. Once valuation is agreed payment is authorised by the District Inspectors of the Veterinary Service and passed to the Director of the National inspection Service for Livestock and Meat, who signs for payment on behalf of the Minister. In general payment takes place within one month after valuation.

### **2.5 Emergency vaccination and identification**

As a rule the costs of vaccine, emergency vaccination and identification are provided for by the Fund although there is an opportunity for the Minister of Agriculture, Nature

Management and Fisheries in article 84 of the GWWD to decide that these costs are in total or partly at the expense of the owner of the livestock concerned.

### **3 Timely compensation**

The co-operation of the farming community can be relied on only if compensation for depopulated ruminants is paid promptly. In general payment takes place within one month after valuation. But the Netherlands endeavour to ensure that payments are made no later than 60 days after depopulation/destruction.

## **SECTION C. THE CHAIN OF COMMAND**

### **1. Introduction**

The chain of command is described in the crisis decision-making manual ("*LNV handboek crisisbesluitvorming*") set down by the official department management. This manual can be found on the Ministry's Internet web site (<http://www.minlnv.nl/>) and those who could become involved with combating CSF are familiar with it. This contingency plan incorporates the parts of the manual which can be used during an outbreak of CSF.

### **2.1 LNV chain of command**

In the event of an outbreak of CSF, the Secretary General of LNV is the official leader of the LNV chain of command (see diagram). To effectively combat an outbreak, the following measures will be taken:

- The National Departmental Crisis Centre (NDCC-LNV) will be activated.
- The departmental crisis staff (DCS) will be assembled, and will meet in room 9H06 of the Ministry's main building

The DCS is made up of: Secretary General (SG) as head, Director General, CVO (also co-ordinator of the operations team), the directors of DV, VVA, DL, RVV, ID-Lelystad, AID, LASER, the relevant regional LNV director (also co-ordinating director of the RCC), the crisis management co-ordinator RVV and the secretariat will be led by a policy staff member of VVA.

One or more regional LNV crisis centres (RCC-LNV) will be activated

### **2.2 The National Departmental Crisis Centre**

The National Departmental Crisis Centre acts as supporting and/or executive staff and facilitator in service of the LNV crisis organisation, in which every outbreak of an OIE-listed A disease is treated in theory as a crisis. When the NDCC is activated, a process manager is appointed by the SG (in consultation with the crisis staff, including the CVO) charged with all facilities-, personnel- and other non-policy-related matters needing arrangements.

- The National Departmental Crisis Centre (NDCC) is housed in the main building of the Ministry of LNV, Bezuidenhoutseweg 73 in rooms 11, 13, 14, 16, 17 and 18 in the 3000 hallway. These rooms, normally used as meeting rooms, can be set up in emergencies as crisis centres.
- The address is
  - Bezuidenhoutseweg 73
  - Post box 20401
  - 2500 EK Den Haag
  - Telephone 070-378502
  - Fax 070-3786113.

De LNV crisis organisation has the general duty to:

- make recommendations to the Minister of LNV about measures to take;
- assembling and evaluating information about the national and international situation;
- take measures to ensure a lawful and efficient carrying out of the decisions taken by the Minister of LNV.

- maintain the necessary internal and external contacts including informing citizens and other involved persons.

The crisis staff (a part of the LNV crisis organisation) is primarily concerned with the main policy and regulatory decisions and has as its job:

- evaluating the crisis situation;
- formulating/evaluating the possible policy options;
- making recommendations to Minister of LNV about policy measures to be taken;
- measures to take to ensure a legal and efficient execution of policy decisions taken by the Minister of LNV ;
- translating policy decisions into assignments for the operational team;
- formulating/evaluating the communication/information strategy to be followed.

### **2.3 The operations team**

The crisis staff are supported by the operations team which is charged with:

- gathering and interpreting information, setting up a policy information system;
- formulating policy proposals;
- executing policy decisions;
- preparing situation reports.

The operations team is under day-to-day management of the CVO, who is responsible for:

- harmonising the work of the operations team with existing regional teams and workers in the field;
- communication and harmonisation about the formulated policy proposals with the regional and field teams before they are submitted to the crisis staff for decision.

The operations team will be housed in the crisis centre in rooms 11, 13 and 16 of the main building.

### **2.4 The NDCC has at its disposal the following facilities:**

- audio-visual equipment
  - video-conferencing facility for 8 people
  - overhead projector which can be linked to the video system
  - radio
  - television
  - video
  - direct connection to Parlement
- communications equipment and information systems
  - direct connection to the public telephone network
  - connection to the national emergency network
  - fax connections
  - variable network connections suitable for voice and data transmissions
- meeting facilities
  - whiteboard(s), flip-over
  - overhead +
  - projector screen
- necessary information
  - maps of the Netherlands (both large-scale national and detailed maps)
- LNV crisis decision-making manual including important telephone and fax

numbers, addresses and emergency network numbers.

### **3 The National RVV Crisis Centre**

The national RVV has set up a national RVV crisis centre to give veterinary-technical support for the operation team and the local crisis centre. Along with the regional crisis teams, it concentrates on implementation of the main decisions taken by the NDCC and is responsible for their execution.

## **4. Local Disease Control Centres**

### **4.1 Responsibilities**

The regional director LNV is in charge of the general and logistic management of the regional crisis centre (RCC). A RVV crisismanager is responsible for the veterinary eradication activities of the RCC.

### **4.2 List of regional crisis centres**

The National RVV disease control centre maintains a list of regional crisis centres centres. This list gives for each centre the name of the persons in charge, the address, its telephone, telex, fax number and e-mail address and a map showing the area under its control; this list is available to the Commission as required.

### **4.3 Temporary regional crisis centre**

In the event of a disease outbreak the Secretary General may decide to set up a temporary regional crisis centre conveniently located close to the disease outbreak. This centre is preferably within the surveillance zone surrounding the primary outbreak. If such a temporary centre is established the Netherlands will inform the Commission of its geographical location and the territory it is responsible for.

### **4.4. Regional crisis centre**

The regional director LNV is in charge of the general and logistic management of the regional crisis centre. The crisis manager RVV is in charge of the disease control. They both directly report to the DCS. The crisismanager RVV also reports directly to the director RVV. All staff allocated to a centre for the period of the disease emergency are under their command. They have the necessary authority to:

- Designate a holding as an “infected premises” (after consultation with, and the sanction of, the national disease control centre if that is considered necessary)
- Deploy the necessary staff and equipment to infected premises,
- Arrange valuation and slaughter of infected and contact ruminants and pigs, the disposal of carcasses and contaminated material and sanitation procedures,
- Advise on the delineation of protection and surveillance zones; close livestock markets and abattoirs as necessary,
- Stay in contact with police and other authorities over the designation of infected premises and the maintenance of standstill orders and other restrictions.

### **4.5 Equipment**

The local centres are equipped with;

- adequate telephone, telex, fax and e-mail communications. One line is reserved for communication with the NDCC.
- Record systems
- Maps covering the territory overseen by the centre (minimally 1:50,000)

- Lists of persons and organisations in the area covered by the centre to be contacted in the event of a disease outbreak:
- Facilities for informing the press and other media so that all persons are fully aware of the restrictions in force.
- Equipment stores (see section 7)
- Facilities for cleaning and disinfecting personnel, clothing and vehicles.

## **SECTION D. RESOURCES**

### **1. Personnel**

#### **1.1 List of staff**

At the national RVV disease control centre a list of the staff to deal with a disease emergency is available. The National Inspection Service for Livestock and Meat (RVV) is responsible for the provision of an adequate number of well-qualified staff both at the national and regional level.

#### **1.2 Agreements**

There are, for instance, standing agreements on the deployment of personnel with the Animal Health Service (*GD*). The Animal Health Service is responsible for ensuring that well qualified personnel, specialised in Classical Swine Fever is available and guarantees that in an outbreak of disease they can be deployed under the command of the National Inspection Service for Livestock and Meat (*RVV*). The Royal Dutch Veterinary Association has the names and addresses of all practising veterinarians in the Netherlands and provides support in the recruitment of extra personnel in times of crisis. This could be veterinary practitioners for support tasks.

#### **1.3 National RVV disease control centre**

The veterinarian in charge of the national RVV disease control centre has at her/his command veterinarians and other staff who have been trained in the management of disease emergencies

#### **1.4 regional crisis centres**

RCC's are minimally staffed as follows:

- The officer in charge is the regional director LNV
- RVV crisis manager
- 2 - 3 veterinarians
- 2 - 4 lay support staff for field duties
- 2 - 5 office support staff

#### **1.5 Training**

The veterinarians are trained in the diagnosis of CSF.

#### **1.6 Expert groups**

The composition of the central expert group (VEO) may vary but shall consist of at least:

- a senior veterinarian
- 2 veterinarians with a scientific research background from the Institute for Animal science and health
- 1 veterinary epidemiologist
- 1 veterinarian from the National Inspection Service for Livestock and Meat
- 1 veterinarian from the National Animal Health Service
- administrative personnel

#### **1.7 Personnel resources in the Netherlands**

The Netherlands ensure that sufficient trained staff are immediately available.

## **2. Equipment and facilities**

### **2.1 Availability**

Since effective control of CSF depends on the immediate availability of equipment and immediate access to facilities, the following equipment is readily available.

### **2.2 Equipment**

The Netherlands do have available at regional (Kring) offices of RVV or some other convenient place the following equipment:

- Protective clothing
- Disinfectants effective against CSF virus, detergents and soaps
- Pumps, shovel and scrapers
- Humane killers and lethal drugs
- Autopsy and sampling equipment
- Sign posts/warning notices for use at infected premises and in protection/surveillance zones
- Maps
- Vaccination equipment

### **2.3 Access**

The veterinarian in charge of the disease control centre has standing arrangements for access to:

- Vehicles
- Combustible materials
- Digging equipment
- Flame guns (for sterilising metal)
- Knapsack sprayers and other means of sanitation.

### **2.4 Transport of carcasses**

Since carcasses must be transported to rendering plants in sealed vehicles, the Netherlands ensure that these facilities are available in sufficient quantity to deal with major epidemics.

### **2.5 Office equipment**

Each RCC has office equipment available including:

- Office furniture, photocopiers, etc.,
- Record systems specifically designed for CSF outbreaks; these may be computer-based
- Pre-printed forms and standing instruction(restrictions, valuation, epidemiological, public, tracing, movements)

## **3. Diagnostic laboratories**

### **3.1 Laboratories**

Laboratory tests for the confirmation of a CSF diagnosis are carried out at the Central Institute for Animal Disease Control (CIDC-Lelystad), which is fully equipped for this purpose. The tests ( Agent detection: indirect fluorescent antibody test (IFT) and indirect peroxidase antibody test (IPT) and Virus isolation; Antibody detection: ELISA

and the VNT on the basis of an IPMA) are carried out according to the new proposed EU regulation as laid down in annex 3 of EU document VI/5709/98 and chapter 2.1.1 of the OIE manual of standards for diagnostic tests & vaccines.

### 3.2 Duration of Tests

Depending on the amount of samples submitted, identification of the agent by IFAT and IPT takes  $\pm$  1 day and by virus isolation between  $\pm$  5-10 days.

Depending on the amount of samples submitted, detection for antibody by screening ELISA takes  $\pm$  1-2 days and by virus neutralization on the basis of an IPMA  $\pm$  5-10 days. ELISA positive results have to be confirmed in the virus neutralization test against CSFV, BVDV and BDV.

### 3.3 Sampling

Instruments and tubes necessary for sample collection are stored at every district office of the RVV and at the Animal Health Service.

### 3.4 Capacity

The maximum capacity, reached within 3-4 weeks after the first outbreak, is estimated to be:

Test	Samples per week
IFT/IPT	1000
Virus isolation	4000
Antibody detection by ELISA	55000
Antibody detection by virus neutralisation	500

## **SECTION E. INSTRUCTIONS FOR DEALING WITH CSF**

The CSF manual from the RVV with the standing instructions for dealing with CSF (“uitvoeringsdraaiboek KVP”) can be found on the Ministry’s Internet web site (<http://www.minlnv.nl>). A copy of the standing instructions is attached in Annex I and II.

## **SECTION F. VACCINATION**

### **1. Legal possibilities**

Vaccinations are not allowed in the Netherlands. The Ministry of Agriculture can determine if and with what vaccine any emergency or ring vaccination programme is to be undertaken. Only registered vaccines may be used, according to the Veterinary Drugs Act.

### **2. Stocks**

No vaccine against CSF disease is available.

### **3. Distribution**

Given that it is not permitted there are no arrangements at present for distribution of emergency vaccine. If necessary, the Animal Health Service can set up this distribution within a few days.

### **4. Administration**

By law vaccination can only be applied by veterinarians.

### **5. Vaccination plan for emergency vaccination**

A detailed plan for emergency vaccination, including a map with the areas with a high density of pigs is under preparation and will be send later.

## **SECTION G. TRAINING PROGRAMMES AND PUBLICITY AND DISEASE AWARENESS**

### **1 Training programmes**

#### **1.1. Expert groups:**

Annex III shows the Netherlands' regular training programmes for expert groups. These training programmes include training in clinical diagnosis, epidemiological enquiries (tracing and surveillance), and infected premises procedures.

#### **1.2 Training of other staff involved in CSF control:**

This includes:

- The diagnosis of CSF
- Procedures at infected premises and within protection and surveillance zones
- Procedures at local crisis centres
- Procedures at national disease control (crisis) centres
- Tracing exercises, record keeping
- Notification and publicity procedures.

Each year two veterinarians will be nominated to attend Community-based CSF training courses when these are established.

### **2. Publicity and disease awareness**

#### **2.1 Reporting requirement**

The Animal Health and Welfare Act states that if an animal shows symptoms of a contagious animal disease, this must be reported to the authorities by the livestock holder and veterinarian. To eliminate confusion, a national 24-hour telephone line has been opened. It was announced with a publicity campaign.

In cases of, for example, an increased risk of outbreak due to a disease in another Member State, there is a possibility of deploying extra legal powers. An extra incentive for reporting suspicious cases is achieved by compensation of diseased animals for 50% of their value in healthy condition.

Holdings reporting diseased animals are visited by a team of RVV specialists who decide if further action is necessary, depending on the situation at the holding.

#### **2.2 Publicity**

Through publications in the journal of the Royal Dutch Veterinary Association, articles in the farming press (*Agrarisch Dagblad*,) and publications by the Animal Health Service the awareness of CSF for veterinarians (the "*GD Veterinair*", a newsletter for veterinarians) and farmers is maintained.

Disease awareness campaigns targeted at farmers and professional personnel who regularly visit farms are held when needed. Besides these publications, various Internet sites (<http://www.gd-dieren.nl/pages/frames/frplvzkv.htm>, <http://www.europa.eu.int/> and <http://www.oie.int/>) are used to maintain disease awareness.

#### **2.3 Veterinary education**

During veterinary studies, clinical symptoms and epidemiology of CSF are thoroughly studied. The control measures and notification procedures are discussed more

generally for highly infectious animal diseases. Students are advised to consult the Internet to keep abreast of the epidemiological situation in Member and non-Member States.

In post-graduate veterinary medicine education, especially in the new programmes for accredited veterinarians, great attention is paid to the veterinarian's responsibility. The KNMvD is very much involved with ICT, and have their own Internet site. The OIE site highlights the epidemiological situation in other Member States and non-member countries.

#### **2.4 Agricultural education**

Agricultural education also covers the clinical symptoms of the various diseases, including CSF, as well as the notification procedures and measures. Agricultural education is also making use of the possibilities that the Internet offers for maintaining awareness of the situation elsewhere.

#### **2.5 Exercises**

In general once a year a simulation exercise of an animal-disease outbreak will be held in particular to test the standing instructions.

## **Annex I**

### **Standing instructions in case of suspicion**

## **Annex II**

### **Standing instructions**