

**Terms of reference (ToRs) and Call for tender  
for a new OIE Study on  
“Listing and Categorisation of Priority Animal Diseases, Including those Transmissible  
to Humans”**

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**A – The context**

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**1. Summary**

**1.1. Request from the European Community**

The new European Union (EU) animal health strategy establishes that animal health policy must be based on sound and reliable data and be implemented using appropriate decision tools. In particular, it is essential for the EU to have a sound knowledge of animal diseases and threats that are directly or indirectly linked to them. From this knowledge, one may draw categories of diseases and threats, which fit in different types of priorities relevant to different levels and aspects of the animal health overall strategy.

This listing and categorisation for animal diseases and related threats will constitute a compulsory preliminary to determine EU intervention, in particular as regards financial matters (emergency funds, financial support to animal health programmes or emergencies, possible use of insurance mechanisms, public/private partnerships, research needed, (EC) community versus national legislation, etc.).

The EU initiative on “Prioritisation and categorisation of animal diseases related threats” will therefore consist in developing such a model or tool that will be used to define for example whether a particular disease is to be dealt with at the EU level, or at the EU Member States level, or at the private level; or if it needs special input in terms of EU legislation, or in terms of resources, or in terms of research, or in terms of all of these. This tool may be integrated in a legislative framework (i.e. the new EU Animal Health law under preparation) or could exist as a non-legislative tool.

It needs in depth consultation with risk managers as well as with risk assessors, and will be a continuously living exercise, with constant updating.

Within the European Union, after first preparatory work with the Chief Veterinary Officers (CVOs) of the EU Member States has been done (February 2008) and allowed the drafting of a first working document (*see Annex I*) that was sent both to the OIE and to the IFAH<sup>1</sup>, respectively responsible for two different set of studies ((i) one on surveillance<sup>2</sup> and categorisation, (ii) one related to knowledge and research) which are being launched<sup>3</sup>, with an expected outcome in second semester of 2009.

The conclusions of the preparatory work read as follows:

- There is a need to design a global tool for assessing priorities in all animal-related threats, in order to better adapt legislation, allocations of funds and other resources and field action.
- This tool will lead not only to specific priorities regarding the control of certain diseases, but also general priorities that could concern other aspects (e.g. biosecurity, regional cooperation, research, etc.).

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<sup>1</sup> International Federation for Animal Health (IFAH)

<sup>2</sup> OIE study on surveillance ongoing (carried out through another international call for tender, now closed)

<sup>3</sup> IFAH component of these studies has actually already been launched in the meantime (April 2008)

- The private sector, including farmers, the industry; pharmaceutical companies and insurers may need to be involved in the overall animal health strategy.
- The legislation and actions should be considered at national, regional or even international level, according to the animal-related threats faced.
- This tool will not overlap OIE lists of diseases voted by its Member countries and Territories as it will quantify the level of risk posed by a given threat and constitute a real decision-making tool.
- Six chapters have been discussed and provisionally split in different criteria for each selected disease (OIE lists) (*see Annex I*):
  - Chapter A: Epidemiology of the disease (10 criteria proposed);
  - Chapter B: Control measures (8 criteria proposed);
  - Chapter C: Impact on public health (4 criteria proposed);
  - Chapter D: Impact on economy (4 criteria proposed, trade excluded);
  - Chapter E: Impact on social aspects (4 criteria proposed);
  - Chapter F: Impact on trade (4 criteria proposed).
- By weighting each criterion within each chapter, a grade will be assigned for each animal-related threat. It will be the responsibility of the animal health decision maker of each country to determine general threshold and classify each threat in a category of priority.
- OIE will be responsible for conducting the studies on surveillance mechanisms and categorisation of animal disease related threats (while IFAH conducts the study on knowledge and research on animal diseases related threats).

The European Commission has scheduled a steering group for the second semester of 2008, to further develop a scoping paper, with a view to a probable integration of the concept in the (EU) animal health law by 2010.

## **1.2. New work needed**

Taking into account

- (i) the current OIE standards, including the official OIE lists of animal diseases, including zoonoses (see Part A.2. and A.3. below);
- (ii) the “One World One Health” Strategy elaborated between the OIE, FAO, UNICEF and WHO, with the support of the World Bank (see Part A.4. below);
- (iii) the three economic studies already published by the OIE in October 2007: Part I – Economic Analysis – Prevention versus outbreak costs; Part II - Feasibility Study – A global fund for emergency response in developing countries; and Part III - Pre-feasibility study – Supporting insurance of disease losses;
- (iv) another ongoing OIE study on the “Cost of National Prevention Systems for Animal Diseases and Zoonoses in Compliance with OIE International Standards on Quality of Veterinary Services, allowing early detection and rapid response to emerging and re-emerging diseases” (see Part A.5. below);
- (v) the ongoing revision of the EU legislation on animal health and the related recent consultation of the OIE by the European Commission (see Part A.1.1. above),

the OIE has identified the need for a study on **“Listing and Categorisation of Priority Animal Diseases, Including those Transmissible to Humans”**.

These ToRs address this need. This OIE study on “Listing and Categorisation of Priority Animal Diseases, Including those Transmissible to Humans” defined by these ToRs will be co-financed by the European Commission and by the World Bank, through the OIE World Animal Health and Welfare Fund.

**The aim of this study is to facilitate regional/national veterinary authority management decision making on priorities and categorisation of all animal diseases and animal-related threats.**

**This would facilitate possible priority management decisions on (i) legislation (regional versus national); (ii) surveillance of animal diseases; (iii) on farm biosecurity measures; (iv) control and monitoring of animal movements; (v) import and export of animals and animal products; (vi) assistance to developing countries and trade partners; (vii) border inspection control measures; (viii) public/private partnerships (e.g. on surveillance or on solidarity mechanisms); (ix) awareness campaigns; (x) new research programs; etc.**

**This would also facilitate priority setting to maintain, to further strengthen or to set up (new) financial mechanisms for the control of the different categories of animal diseases identified: regional/national emergency funds; regional versus national financing; public/private partnerships; setting up of regional/national insurance schemes; etc. Eventually, it will be the basis for the definition of schemes for sharing responsibilities and costs.**

**In addition, the OIE stresses that the links between (i) animal health and food security (food supply) and (ii) animal health and public health (not only as regards zoonoses) should not be forgotten when weighing different criteria and setting categories and priorities. This is why OIE lists of diseases of terrestrial and aquatic animals should be strongly taken into consideration to cover both the animal diseases which have an impact on production and also zoonoses.**

## **2. OIE International Standards and related issues**

### **2.1. Terrestrial Animals - OIE single list of animal diseases**

The **OIE single list of animal diseases** was adopted by all OIE Members in **May 2004** (Resolution No. XXXI) and entered into force on January 01, 2005.

In the OIE Terrestrial Animal Health Code (international standards recognised by the World Trade Organisation), the criteria for the inclusion of a disease of terrestrial animals in the OIE List are defined in Article 2.1.1.1. of the OIE Terrestrial Animal Health Code. These criteria are applied according to the decision-making model shown in Article 2.1.1.2. of the OIE Terrestrial Animal Health Code. The weight of the zoonotic aspects of diseases or pathogens is very high in the decision tree used to set up the list. The list and its updating are submitted to the vote of OIE Members.

“Emerging disease” is defined in the OIE Terrestrial Animal Health Code as follows: *“means a new infection resulting from the evolution or change of an existing pathogenic agent, a*

*known infection spreading to a new geographic area or population, or a previously unrecognized pathogenic agent or disease diagnosed for the first time and which has a significant impact on animal or public health.”.*

The criteria in Article 2.1.1.1. are as follows:

<b>Basic criteria Parameters</b>	<i>(at least one 'yes' answer means that the criterion has been met)</i>
<b>International Spread</b>	Has international spread been proven on three or more occasions? <b>OR</b> Are more than three countries with populations of susceptible animals free of the disease or facing impending freedom (based on the relevant provisions of the Terrestrial Code, and in particular those contained in Appendix 3.8.1.)? <b>OR</b> Do OIE annual reports indicate that a significant number of countries with susceptible populations have reported absence of the disease for several consecutive years?
<b>Zoonotic Potential</b>	Has transmission to humans been proven? (with the exception of artificial circumstances) <b>AND</b> Is human infection associated with severe consequences? (death or prolonged illness)
<b>Significant Spread within Naïve Populations</b>	Does the disease exhibit significant mortality at the level of a country or a zone? <b>OR</b> Does the disease exhibit significant morbidity at the level of a country or a zone?
<b>Emerging Diseases</b>	Are there apparent zoonotic properties or is there a rapid spread?

## 2.2. Aquatic Animals

Criteria for listing an aquatic animal disease are listed in Chapter 1.2.2. of the OIE Aquatic Animal Health Code, while Chapter 1.2.3. of this Code covers Diseases listed by the OIE for fish, molluscs, crustaceans and amphibians. The OIE list of emerging aquatic animal disease is currently under study.

In the OIE Aquatic Animal Health Code, “Emerging disease” is defined as follows: “*means a newly recognised serious disease, the cause of which may or may not yet be established, that has the potential to be spread within and between populations, for example by way of trade in aquatic animals and/or aquatic animal products.*”

## 3. OIE official 'disease-free' status

Since the early 1990s, the OIE has been given by the International Committee, composed of the Delegates of the OIE Member Countries, the responsibility of compiling a list of Member Countries or zones that are officially recognised as being free from certain diseases. For this purpose, a clearly defined and impartial procedure for declaring a Member Country free from a disease was necessary, accompanied by well-designed, science-based questionnaires.

In May 1995, a new procedure was adopted by the International Committee. Developed by the Foot and Mouth Disease (FMD) and Other Epizootics Commission (now called the Scientific Commission for Animal Diseases), which is elected by the International Committee, it permitted the OIE to examine in detail dossiers submitted by the Delegates of Member

Countries in support of a claim that their countries or zones within their countries could be considered free of FMD in accordance with the provisions of Chapter 2.2.10. of the Terrestrial Animal Health Code (FMD was the first disease chosen in the light of its significance for international trade).

In 1996 the first official list of OIE Member Countries or zones that were FMD free without using vaccination was published after adoption by the International Committee.

While this mechanism applied to the recognition of national FMD status, the International Committee next recognised the need to apply the procedure to rinderpest and other diseases deemed to be of priority. **To date, the OIE has a specific procedure for (i) FMD, (ii) rinderpest, (iii) contagious bovine pleuropneumonia (CBPP) and (iv) bovine spongiform encephalopathy (BSE).**

Official OIE recognition of the absence of certain diseases, if the case arises, with or without the use of vaccines is essential to OIE Member Countries that engage in international trade.

Member Countries can also declare themselves free of diseases for which there is, as yet, no specific procedure for obtaining Official OIE recognition of Member Country status. In this case, they must provide the relevant epidemiological information to importing countries in proof of their position. The data provided must conform to the standard measures contained in the Terrestrial Animal Health Code, which is recognised by the Agreement on the Application of Sanitary and Phytosanitary Measures (SPS Agreement) of the World Trade Organization (WTO). These standard measures include “horizontal obligations” (e.g. on Quality of Veterinary Services) and “vertical” prescriptions which are specific to each relevant disease.

The recognition of Member Country status by the OIE is frequently the subject of lengthy discussions at the WTO-SPS Committee in Geneva.

#### **4. “One World - One Health” Strategy**

Today, strategies to fight avian influenza and the possible pandemic as well as potential emerging or re-emerging zoonoses are shared with OIE’s main partners such as WHO and the FAO, this has led to the preparation of the “One World One Health” strategic plan between the three main technical organisations concerned, FAO, OIE and WHO, in cooperation with UNICEF and the World Bank. The “One World One Health” concept is presented in further details at the international conference to be held in Egypt in October 2008.

In addition to the list of priority diseases adopted in the Global Early Warning and Response System for Major Animal Diseases, including Zoonoses (GLEWS)<sup>4</sup> framework, and in the context of the preparation of this One World One Health’s Strategy, the need for further work on categorisation of animal diseases was identified by the different international organisations concerned: indicative names of groups of diseases having common factors and topics having an interest in this context were pre-identified (non exhaustive and without prejudice to their respective importance and weight):

- OIE single list of terrestrial animal diseases; OIE single list of aquatic animal diseases;
- Animal / human interface (including wildlife / human interface; livestock / human interface; pet / human interface, etc.);
- Ecosystems / environment (including wildlife) / animal interface;

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<sup>4</sup> Annex 3 to the GLEWS Agreement (List of diseases of common interest):  
[http://www.oie.int/eng/OIE/accords/GLEWS\\_Tripartite-Finalversion010206.pdf](http://www.oie.int/eng/OIE/accords/GLEWS_Tripartite-Finalversion010206.pdf)

- Possible international spread; Potential for crisis;
- Significant spread within naïve populations;
- OIE official “disease-free” status;
- Zoonotic / non zoonotic animal diseases;
- Disease with zoonotic potential;
- Highly infectious / pathogenic diseases;
- Diseases with a pandemic potential;
- Possible emerging (infectious) diseases;
- Vector-borne diseases;
- Food security / “production” diseases, i.e. disease with an impact on animal production and food security;
- Food-borne diseases; “food-chain diseases” and water-borne diseases;
- Wildlife diseases;
- “Bush-meat diseases”; etc.

The source and roots of diseases need to be taken into consideration: individualized (e.g. wildlife or livestock to farmers; dogs to children; wildlife to hunters), and systemic (e.g. globalization, climate change, trade, consumer demands). The summary is that the various drivers can be associated with disturbances between human, livestock and wildlife populations.

## **5. Other OIE Economic studies**

In August 2006, the OIE launched a call for tender for three economic studies on the Prevention and control of animal diseases worldwide. The three corresponding economic studies:

- ✓ Part I – Economic Analysis – Prevention *versus* outbreak costs;
- ✓ Part II - Feasibility Study – A global fund for emergency response in developing countries;
- ✓ Part III - Pre-feasibility study – Supporting insurance of disease losses;

were presented during the International Conference co-organised by the World Bank (WB) and the World Organisation for Animal health (OIE) in collaboration with the Food and agriculture Organisation (FAO) of the United Nations: “Global Animal Health Initiative: The Way Forward”, held in Washington DC (USA), at the WB Headquarters on October 9-11, 2007.

The aim of the third study was to analyse the preconditions for market-based insurance products in developing and in transition economies and present options to support the development of market-based insurance products. The main findings of this study were:

- A main pre-condition for developing epidemic livestock disease insurance is the existence of a well-planned government disease prevention and control program, meaning appropriate veterinary services,
- The development of epidemic livestock disease insurance highly depends on different circumstances concerning rural insurance and capacity of insurers as well as organization and disease status in the livestock sector,

- A high level of capacity building would be needed by the insurance sector in most developing countries, and high level of technical assistance to undertake development of products, risk assessment, product pricing and support for insurers.

The Conclusions of the Conference validated the findings and recommendations of the three studies. As regards the first study (“Financing of Animal Epizootics and Zoonoses Prevention and Losses in Developing/Transition Countries - Cost/Benefit analysis - Prevention versus outbreak costs.”), the conclusions of the conference read as follows:

- (i) The costs of preventing major animal diseases are significantly less than those associated with managing outbreaks and the benefit/cost ratio of investing in prevention versus control is high.
- (ii) Despite progress, the current state of Veterinary Services (VS) and preparedness levels in developing/in transition countries continues to pose a real and present threat to the ability to prevention and controls of these major diseases;
- (iii) Evidence from the literature analysis as well as the results of the study extrapolations in the specific case of HPAI, overwhelmingly suggests that these major diseases (including non-zoonotic animal diseases) have the potential to lead to substantial and widespread consequences, especially in today’s globalized markets;
- (iv) In particular, their impacts have implications in terms of public health, food security, market access, poverty, sustainable economic development and social equity/stability;
- (v) the capacity of Veterinary Services to collect and analyse data to conduct cost-benefit analyses should be added to the competencies evaluated in the OIE-PVS tool;
- (vi) This calls for a global approach in the fight against animal diseases, and it is clear that the Veterinary Services have a crucial role to play as the providers of National and Global Public Goods; and
- (vii) The Conference also identified the need to (a) further elaborate on the cost of prevention and surveillance (“in peace time”) and (b) to develop indicators on cost/benefit analysis within the PVS instrument.

In addition, in March 2008, the OIE has launched a new call for tender to carry out an OIE study (IV) on the “Cost of National Prevention Systems for Animal Diseases and Zoonoses in Compliance with OIE International Standards on Quality of Veterinary Services, allowing early detection and rapid response to emerging and re-emerging diseases”. This work is ongoing and the corresponding final study should be available in December 2008.

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## **B – The Call for tender**

### **1. Terms of reference of the OIE study**

#### **1.1. Objectives (see also Part A.1.2. above)**

1. The objective is to propose categories for the prevention and control of animal diseases. These categories should enable the categorisation of animal diseases, worldwide, according to epidemiology, control measures and impact criteria, including societal, economic, trade and public health weights. The criteria used (and their respective weight) will need to be clearly specified.
2. The objective is also to further complete and detail, and to adapt if necessary, the quantitative tool for assessing priorities in all animal-related threats prepared by the CVOs of EU Member Countries (*Annex I*) in order to be able to use it worldwide, and notably in developing and in transition countries. Some proposed criteria may need to be modified as well as their respective weights.

## **1.2. Title of the study**

3. “Listing and Categorisation of Priority Animal Diseases, Including those Transmissible to Humans”.
4. The consultant may suggest an alternative title for the publication of the final version of the study, as long as the scope and content of the study indicated by the above title are respected. The final title to be used for the publication will be validated by the OIE.

## **1.3. Timeline**

5. This call for tender is launched by the OIE by the end of September 2008.
6. The corresponding work shall begin in December 2008.
7. An inception meeting will take place with the selected consultant in December 2008.
8. An interim report will be requested on 2<sup>nd</sup> March 2009.
9. The objective is to receive a first final draft of the study in early May 2009 in order to present it to the stakeholders consultation held by EU Member States. During this meeting, possible policy options may be highlighted, including those dealing with cooperation and with assistance to third countries.
10. Depending on the outcome of the peer review, a second final draft report may be requested in June 2009.
11. The final version of the study is requested for Monday 13<sup>th</sup> July 2009 at the latest.
12. In any case, corresponding disbursements must be completed by December 2009.

#### **1.4. Content of the study**

13. The purpose of the tool is to enable regional or national Veterinary authorities to set up priorities for their respective country/region and therefore facilitate their discussions and negotiations on necessary animal health legislation, programmes and investments with their government/institutions, stakeholders, including the private sector, farmer organisations, Donors, and insurers, when appropriate.
14. The tool should facilitate priority management decisions and priority setting on animal related diseases and threats.
  - (i) Keeping in mind that these priorities might change over time, for a specific disease, it should help to put temporally more emphasis... (e.g. -not exhaustive-) on research; on (regional versus national) legislation; on surveillance; on vaccination and/or on antigen/vaccine banks; on eradication; on other control measures (e.g. control of movement of animals; biosecurity measures, etc.); on certification; on private initiatives; on emergency funds; on insurance schemes; on compensation; on awareness campaigns, etc.
  - (ii) For each specific category what are the priority diseases? On the basis of which criteria?
15. The consultant is also expected to test this instrument in order to assess its effectiveness and its reproducibility to categorize and list priority animal diseases in different contexts (different regions, economics, social contexts, animal disease status, production systems, trading systems, laboratory capabilities, etc.).
16. The final tool is not a simulation / epidemiology software. The expected final tool should consist in an assessment of data, including tables, lists of diseases, categories and related criteria in order to make the risk objective and thus facilitate risk management decisions.

#### **1.5. Diseases to be covered**

17. The quantitative tool for prioritising all animal-related threats and biosecurity shall be able to categorize all diseases of the OIE lists for all animals (terrestrial and aquatic animals, production animal, companion animal or wildlife). The study should include examples of different types of diseases: highly contagious, endemic, zoonotic, etc.
18. For each disease, a special attention should be given to the related performances of veterinary services as regards their capability for early detection and diagnosis of the disease concerned.

#### **1.6. Methodology and Sources of Data**

19. The consultant is expected to carry out mainly desk work rather than duplicating country field missions already done by different organisations concerned.
20. This study shall first focus on the analysis of the table of criteria set up by the CVOs of EU Member States (*Annex 1*, see also Parts A.1.2. and B.1.1.above). This analysis will be based on a review of the literature and meetings with key informants (OIE, FAO, EC, CVOs, etc.).
21. Data available through the World Animal Health Information Database (WAHID) Interface which provides access to all data held within OIE's World Animal Health Information System (WAHIS) should be used as appropriate. The EU's Animal Diseases Information System (ADIS; formerly Animal Disease Notification System - ADNS) and the ongoing study carried out by IFAH for the EC may also be used if necessary.

22. The OIE is currently carrying out Evaluations of Performances of Veterinary Services, using its PVS tool in countries which have requested such an evaluation. The OIE-PVS evaluation reports available (those available for further distribution to Donors and Partners) should be used by the consultant as the ability of Veterinary Services to fight against a disease strongly depends on the quality of Veterinary Services and their performances.
23. The adapted tool will then be tested in 4 randomly chosen non-EU-countries within the list of countries where PVS evaluations have been performed (among countries for which the PVS report is available), as well as in 3 EU Member States. Those tests will be undertaken both by one of the consultant team and by an expert assigned by the OIE in order to assess the reproducibility of the instrument.
24. The final output will be a new instrument for setting priorities in all animal-related threats, all around the world.

## **2. OIE Call for Tender**

25. The purpose of this call for tender is to select one candidate body (consultant(s), team of experts or consultancy consortium, referred to as “the consultant”) to complete an OIE study on “Listing and Categorisation of Priority Animal Diseases, Including those Transmissible to Humans”.
26. The Terms of reference (ToRs) of this study are presented in Part B.1. above. These ToRs are a full part of this call for tender.

### **2.1. Duration and Time Constraints**

27. One intermediary report will be requested on 2<sup>nd</sup> March 2009.
28. The final report and dissemination material shall be made available to the Director General of the OIE on Monday 13<sup>th</sup> July 2009 at the very latest.
29. The time limit of the final report and dissemination material is not negotiable in the offers as follow-up activities will be cascading. A significant penalty (% of the agreed price) will be applied by the OIE after each week of delay (counted from Monday 13<sup>th</sup> July 2009), unless otherwise decided by the OIE during the study after signature of the contract.

### **2.2. Report and Dissemination material**

30. The OIE expects regular contacts and exchanges of information during the execution of the activities, at least on a monthly basis.
31. A technical meeting (half a day, briefing and exchange of views) will take place in Paris at the OIE Headquarters upon signature of the agreement with the selected consultant.
32. The interim report should be provided to the OIE by 2<sup>nd</sup> March 2009.
33. The first draft final report and dissemination material should be available on Monday 4<sup>th</sup> May 2009.
34. The final report and dissemination materials shall be made available to the Director General of OIE Monday 13<sup>th</sup> July 2009 at the very latest.

### **2.3. Properties of Reports and Dissemination Material**

35. All the reports and dissemination material made during the execution of the activities in order to complete the study are the worldwide properties of the OIE. In any country, all

the reports and dissemination material or extracts cannot be copied, reproduced, translated, adapted or published in journals, documents, books, electronic media and any other medium destined for the public or presented for information, educational or commercial purposes, without written permission done by the OIE.

36. These obligations must be applied by the contractor and the possible co-contractors or sub-contractors.

#### **2.4. Confidentiality of Documents**

37. All documents which can be given by the OIE for the production of the study must not be shared with persons or organisations which are not directly concerned by the production of the OIE study. All confidential documents must be kept confidential.

38. These obligations must be applied by the contractor and the possible co-contractors or sub-contractors.

## **2.5. Administrative and Financial Conditions**

### **General conditions**

39. The working languages are English and French. Final reports and dissemination materials must be provided in both languages. For the French version, it will be sufficient to provide a shortened version of the report. The reports are required in both hard and soft copy and are to be prepared using standard PC-compatible software.
40. The offer will describe the general conditions under which the reports will be made available to the OIE, in particular the time required for the different activities.
41. The offer shall contain a detailed timetable and a flowchart of activities to be carried out.
42. The activities shall begin as early as possible, in any case in December 2008.
43. The date of delivery of the intermediary reports may be negotiated.
44. The date of delivery of the final outputs of the study in the main reporting language cannot be negotiated.
45. The offer must include a signed commitment ensuring that the experts proposed and agreed by the OIE cannot be changed before the studies (between the offer and the beginning of the project) or during the studies.
46. The list of experts to be interviewed by the consultant will be sent to the OIE for discussion and validation.

### **Budget**

47. The OIE World Animal Health and Welfare Fund (OIE World Fund) is financing this study. Consultants are informed that this study will be co-financed by the European Commission and by the World Bank (to Donors to the OIE World Fund).
48. The final price of the offer(s) can be negotiated by the OIE during the Call for Tender and the final price agreed will be definitive (non modifiable after the signature of the contract). The proposed price may indeed need to be renegotiated (depending on OIE World Fund budget line for this activity) with the selected consultant, before signature of the contract, as the OIE World Fund cannot overspend or sign financial commitments above available funds.
49. The price proposed is not the sole criterion to be taken into account when assessing offers received.

### **Payment conditions**

50. Forty percent (40%) of the total price will be paid upon the signature of the contract.
51. Thirty percent (30%) of the total price can be paid, after 2<sup>nd</sup> March 2008, upon receipt of a validated intermediary report.
52. The full complementary payment will be made after validation and confirmation by the OIE of the successful receipt of the study.
53. As far as the final reports and dissemination material are concerned, the penalty mentioned in the contract (% of the agreed price) will be applied by OIE after each week of delay (counted from Monday 13<sup>th</sup> July 2009)

## Content of the Offers

54. Each interested candidate body shall deposit at, or send its offer to, the OIE Headquarters in (a) sealed envelop(s) labelled as follows:

**Monsieur le Directeur Général**  
**Organisation Mondiale de la Santé Animale (OIE)**  
**12, rue de Prony**  
**F.75017 Paris**  
**FRANCE**

55. The sealed envelop(s) should be deposited at, or send to, the OIE Headquarters in another envelop (double envelops ; i.e. offer in a sealed envelop contained in the mail envelop) with a clear additional indication both on the external mail envelop and on the sealed envelop referring to:

**“Appel d’offres – Etude Catégorisation »**

and in bold capital letters, the words :

**“APPEL D’OFFRES - NE PAS OUVRIR SVP”**

In order to avoid that envelops are opened by accident with general daily mail, this latter indication must also be clearly visible on the external shipment envelop if a private quick mail delivery service is used.

56. For the offer to be valid, the envelop(s) should arrive, be deposited and registered against receipt **at the latest on Monday 3<sup>rd</sup> November 2008 at 12:00 o’clock (French time)** at the OIE Headquarters in Paris.

## Human Resources

57. The offer(s) will detail the team who will work on the study with the CV of each person of the team and a personal engagement of each person indicated that they agree to work on this project during the concerned period.

58. The persons indicated in the offer(s) must be the persons who will actually be working on this project. The offer must include a signed commitment ensuring that the experts proposed cannot be changed before the studies (between the offer and the beginning of the project) or during the studies.

59. During the execution of the contract, if a person is replaced without the agreement of the OIE or if the OIE notes that another person than these declared during the offer(s) works on the project, the OIE has the possibility to stop the execution of the contract and only the validated work will be paid.

## Prices and Costs

60. The offer(s) will specify:

- The price of the study,
- The budget for travel and accommodations,
- The total price,
- The payment conditions proposed.

## Selection Criteria

61. The designation of the selected offer(s) will be made following examination by a designated commission of all offers officially received in due time at OIE Headquarters on the basis of:
- The prices (in particular: total price, price of the study), although this will not be the sole criterion for the final decision;
  - The nature and quality (compliance with the ToRs) of the proposals offered, given the time constraints;
  - The human resources used, notably as far as expertise and experience on Veterinary Services is concerned;
  - The understanding of the expected outcome and method(s) of work proposed;
  - The excellence, a well established international reputation and experience demonstrated on similar economic studies or on similar economic simulation;
  - Consultants are invited to declare their interests and ongoing or past work for the EC / EU on associated topics (evaluation of community animal health policy and preparation of new animal health strategy).
62. The OIE will then inform the winning offer(s) and all parties concerned will decide bilaterally on a date to negotiate and finalize the contract between the parties on the basis of the selected offer.
63. The 172 OIE Member Countries and Territories will be kept informed.

*Annex 1*

## NON PAPER

### TITLE 21/03/08

Prioritisation and categorisation of animal diseases related threats

### LEAD OFFICIAL/S & UNIT

SANCO D1 / E2 – E. Bonbon / K. Van Dyck

### DESCRIPTION

*In simple language, provide an overview of what the initiative is about and why it is needed.*

The new EU animal health strategy establishes that animal health policy must be based on sound and reliable data and be implemented using appropriate decision tools. In particular, it is essential to have a sound knowledge of animal diseases and threats that are directly or indirectly linked to them. From this knowledge, one may draw categories of diseases and threats, which fit in different types of priorities relevant to different levels and aspects of the animal health overall strategy.

This categorisation and prioritisation model for animal diseases and related threats will constitute a compulsory preliminary to determine EU intervention.

This initiative will therefore consist in developing such a model or tool that will be used to define for example whether a particular disease is to be dealt with at the EU level, or at the Member States level, or at the private level; or if it needs special input in terms of EU legislation, or in terms of resources, or in terms of research, or in terms of all of these. This tool may be integrated in a legislative framework (i.e. the new EU Animal Health law) or could exist as a non-legislative tool.

It needs in depth consultation with risk managers as well as with risk assessors, and will be a continuously living exercise, with constant updating.

### CURRENT STATUS & NEXT STEPS

*Without going into detail, set out the current status and timing foreseen for the initiative (start date, likely adoption date, etc.) and provide any detail as regards past, current and planned stakeholder consultations.*

The first preparatory work with the CVOs has been done (Feb 08) and allowed the drafting of a first working document (in Annex) that what sent to the OIE and to the IFAH, respectively responsible for two studies (one on surveillance and categorisation, one related to knowledge and research) which are being launched (March – April 2008), with an expected outcome in second semester of 2009.

A steering group is scheduled for the second semester of 2008, to develop a scoping paper, with a view to a possible integration of the concept in the animal health law by 2010.

In brief, the milestones would be:

1. Study on harmonised quantifiable criteria for prioritisation: scientific support (EFSA, IFAH, ...) - 2008
2. Policy options to be outlined: brainstorming including selected MS and stakeholders, and field trials – 2008/2009
3. Stakeholders consultation on policy options identified - 2009
4. CVOs deep discussion on options - 2009
5. Impact assessment - 2009-2010
6. Legislative drafting (in the framework of the animal health law) 2010

## ANNEX

### EU ANIMAL HEALTH STRATEGY – WORKING DOCUMENT

#### PRIORITISATION OF ANIMAL-RELATED THREATS AND BIOSECURITY

##### Preamble

The purpose of this document is **not only** to define priorities for EU funding of animal disease prevention, control and/or eradication. It is a **global tool** for assessing priorities in all animal-related threats, in order to better **adapt EU** legislation, allocations of funds and other resources and field actions (whether in relation to awareness campaigns, training, vaccination campaigns or external cooperation, etc), but also **MSS'** relevant legislation and actions, as well as the role and actions of the **private sector**, all of which form part of the **EU animal health strategy**.

This exercise will lead to the definition of **different types of priorities**, which will have to be **linked with the other Working Parties on financing and trade** (especially when dealing with **control measures**), as well as the **objectives** of the EU animal health policy; hence the division into chapters relating to each of the four objectives: **public health, farming economy, society and trade**.

There will not only be specific priorities regarding certain diseases, but also **general priorities** that could concern much more than specific disease control (e.g. biosecurity, cooperation with TC, research, etc).

This document and its subsequent decisions will also provide the EU with **reliable scientific grounds** whenever its health regulations differ from the OIE standards. The difference between this document and the OIE list of diseases is that the latter is a simple "yes or no" that does not quantify the **level of risk** posed by a given threat, whereas the present exercise is a real **decision-making tool**. Moreover, it is directed not only at trade problems, but also in the main to **disease control**, of which trade measures can be considered to form a part.

It should be borne in mind that the overall importance of the threat as regards animal and public health, economy and society should be compared to the threat as regards trade. If there are trade problems but no significant effects elsewhere, this means that the international standards (or EU or MSS' regulations) should be amended or withdrawn.

Once the risk managers (i.e. CVOs) have examined it in **practical terms** and drawn up the general framework, the **scientists** (epidemiologists, statisticians and risk analysts) will be requested to give their advice in order to obtain reliable data, in particular regarding **methodologies to quantify each criterion** (from 1 to 5), mainly in Chapters A, B and C. Furthermore, as the number of criteria in the chapters varies, **each criterion should be attributed a relative weight** within the chapter in such a way that each chapter represents the **same amount of points**. The questions could be asked in precise terms (e.g. addressed to EFSA).

**The final step** will remain in the hands of the decision-makers, who will consider the weight to be allocated to each objective of the EU Animal Health Strategy, and consequently to **each chapter C to F**, as well as the chapter-specific and general **thresholds**, with a view to eventually classifying each threat in a **category of priority** (horizontal: biosecurity, import control, TC assistance... or vertical: EU, MS, private sector...).

Of course, this should be a **permanent "living" exercise** in order to permanently update the document according to the latest data. Indeed, the **epidemiological situation** - both within the EU and internationally - modifications in the OIE standards, new findings on diagnostic tests, treatments or vaccines, will modify the overall ranking of diseases. It should therefore be clear from the beginning that the exercise **should be conducted regularly**, and in any case each time it is justified by a new event. This emphasises the importance of a **permanent survey**. The **future EU animal health law**, while being solid enough to provide a **permanent basis** for Member States with regard to their animal control measures, should incorporate this.

The following table reflects discussions during the meeting on 18 February, written comments and the results of informal field trials conducted by some MSs and the Commission on the basis of 5 diseases (FMD, LPAI, TB, PRRS, and RVF). These results demonstrated the relevance of the exercise, despite certain discrepancies linked to the different approaches adopted by different MSs: for that reason, this exercise should be conducted **without consideration** for its future use, and **the methodologies for the criteria should be defined precisely** on the basis of scientific advice and practical experience, not only in the MSs or EU, but also in the world as a whole.

The table has been modified as regards its order, the position of certain criteria and the titles of the chapters, but it remains unchanged as regards the data required. A and B provide answers to the questions "What is the risk?" and "Can we control it?", while C, D, E and F provide answers to the question "What is the potential impact of the threat?"

Some **examples** of methodology and criterion coefficients are given. Each criterion has a coefficient so that the total of weighted criteria in each chapter is 10 (the total count of each chapter is therefore between 10 and 50). This ensures equality between the chapters, and each chapter can be subsequently weighted.







