Avian Influenza (H7N7) Oxfordshire 2008

Lessons Identified Report

11 March 2009
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1.0 Background and Introduction

Avian Influenza (H7N7) was confirmed at a free range layer unit in Banbury north Oxfordshire, on 3 June 2008. Protection (3k) and Surveillance (10k) zones were implemented. A Local Disease Control Centre (LDCC) was established in Reading and a Forward Operating Base (FOB) at the Animal Health Luddington outstation in Warwickshire. The National Disease Control Centre (NDCC) was established Nobel House, London.

2.0 Aim and Objectives

Aim:

The aim of this ‘lesson identified’ process is to evaluate and identify any further improvements in Animal Health’s / Defra’s capability, processes and organisational structure for managing an outbreak of exotic notifiable disease.

Objectives:

- To ensure lessons identified reports are collated from relevant departments / operational partners and stakeholders one month after operational activity has ceased;
- To hold a debrief meeting discussing key issues identified and issuing actions within two months of operational activity ceasing;
- To establish a framework for the improvement of contingency plans and operational instructions based upon lessons identified;
- To evaluate the implementation of recommendations made in lessons identified reports.

3.0 Approach and Methodology

The lessons identified process was initiated once all operational activity relating to the outbreak was completed. This is produced by collating local, regional and national lessons identified followed by a workshop attended by key staff from the following:

- Local Disease Control Centre (LDCC)
  - Regional Operations Director (ROD)
  - Divisional Operations Manager (DOM)
  - Divisional Veterinary Manager (DVM)
  - Readiness and Resilience Manager (RRM)

- Animal Health
  - Animal Heath – Contingency Planning Division (AH CPD)
  - Animal Health – Vet & Tech Services Team (AH VTST)
  - Animal Health – Human Resources (AH HR)
4.0 Attendees at debrief meeting held on the 16 September

- Animal Health DVM Reading
- Animal Health RRM Reading
- Defra FFG - Exotic Disease Policy – Workstream Leader
- Animal Health - Vet and Tech Services – Veterinary Services Manager
- Defra FFG – Exotic Disease Policy – Project Manager & Policy Advisor
- Defra FFG – VENDU - Veterinary Adviser
- Defra FFG – Head of Wildlife, Aquatic and Zoological Animal Health
- Defra FFG – International Trade - Unit leader responsible for EU Policy, Artificial Breeding Controls and Exports Strategy
- Animal Health CPD - Head of Readiness and Resilience Assurance Branch
- Animal Health CPD - Head of Operational Capabilities Branch
- Animal Health CPD - Readiness and Resilience Assurance Branch
- Animal Health Communications - Head of Corporate Communications
- Animal Health HR - Head of Animal Health HR Policy and Planning
- Defra FFG – NEEG/VLA
- Animal Health Contingency Finance - Contingency Planning Finance Manager
- Health Protection Agency
- Defra FFG – NEEG - Veterinary Advisor

5.0 Current progress on lessons Identified

Part of the process was to revisit issues from previous AI outbreaks. Individual and collective actions were discussed and signed off.

6.0 Key priority areas - Issues
6.1 Culling and disposal

The LDCC operated a lead case officer at the infected premises, this worked very effectively as it improved and streamlined communications to the LDCC from the infected premises (IP). Animal Health have trained field staff who are familiar with use of containerised gassing units (CGU). These were effectively used on the IP for culling.

**Oxfordshire Recommendation 1:** Animal Health DVMs to be aware of the benefits of using lead case officers at IPs.

It is essential to ensure that the process for requesting equipment is clarified to avoid duplication, although in this instance this did not impact on the response time. The LDCC would have benefited from a published protocol for initiating contingency contracts. A protocol would ensure that the Case Officer and Defra Procurement and Contracts Division (PCD) understand their responsibilities and should prevent additional expenditure.

**Oxfordshire Recommendation 2:** AH CPD in conjunction with Defra PCD should produce and publish a protocol for initiating contingency contracts and accessing equipment owned by Defra.

The carcases were disposed of using the call off contract arrangement with AH CPD and Defra PCD and carcases were transported effectively. For the future AH/Defra should improve their ability to source more trained drivers in transporting dangerous waste material in the event of a large scale outbreak.

**Oxfordshire Recommendation 3:** AH CPD to engage with Defra PCD to examine other options for increasing the pool of trained contractors.

The rendering site was situated within the Leicester AHDO area. Providing resource to supervise at the rendering site (when outside the LDCC division) can impact on other AHDO business requirements. At times this can build additional pressures on a non LDCC division to deliver key targets and business as usual.

**Oxfordshire Recommendation 4:** AH DVMs with disposal sites within their divisions should assess their resource requirements for supervising activities at a disposal site, should this be required. Any additional resource identified should be incorporated into their local contingency plans.
At the LDCC there was some ambiguity over who was responsible for the final cleansing and disinfection on the infected premises, the industry were not aware that the responsibility for final cleansing and disinfection lies with them. AH CPD reinforced the current policy, that final cleansing and disinfection and its costs are the responsibility of the owner of the premises.

**Oxfordshire Recommendation 5:** In discussions with the industry, Defra Policy should reinforce the message that the responsibility of final cleansing and disinfection lies with industry. Industry should also be made aware of the implications for resumption of international trade in completing final cleansing and disinfection.

### 6.2 Meat, animal by-products and slaughterhouse policy

The infected premises and restricted zones affected numerous egg laying producers. Issues arose when egg volumes were increasing on premises with no official licensing protocol in place for removal (recommendation 17 refers in part).

### 6.3 External communication - operational partners

Both LDCC and the FOB worked effectively when liaising with operational partners and stakeholders. Locally the LDCC liaised directly with the Local Authority who then cascaded information to bordering authorities. It worked effectively having Animal Health senior management involvement at the FOB as this created a strategic link with the LDCC and operational partners.

There was good use of the Defra contractors for specialised sampling. Animal Health should consider initiating such contracts in the future if required.

**Oxfordshire Recommendation 6:** AH VTST should consider extending the use of Defra contractors when specialised sampling is required.

### 6.4 External communication – industry / stakeholders

The poultry industry was well represented at the LDCC & NDCC. The LDCC representatives included the NFU and a spokesperson from the commercial side (meat industry). National Farmer Union (NFU), British Egg Industry Council (BEIC), British Poultry Council (BPC) were represented at the NDCC birdtable. Defra FFG also had regular meetings and communications with industry representatives and the wider stakeholder group. As this outbreak involved a laying flock, a relevant industry representative covering this area would have been beneficial at
the LDCC. At the NDCC level it may have been helpful if the industry representation was formalised.

**Oxfordshire Recommendation 7**: Defra Policy to consider formalising a core stakeholder group for the poultry industry, ensuring all sectors of the industry are represented.

Central Office of Information (COI formerly Government News Network) initiated their contingency plans and were able to attend the LDCC and Infected Premises immediately. There was no significant media attention related to this outbreak and it was therefore necessary to proactively engage the media to ensure that public messages can be distributed when required.

**Oxfordshire Recommendation 8**: When there is little or no media interest in an outbreak, Defra CD and AH Communications should continue, where possible, to proactively engage with the media to ensure that public messages can be distributed effectively.

The Defra website played a significant role and provided a essential point of reference for the public and Animal Health staff during this outbreak. Use of the website in future outbreaks should be promoted and updates effectively managed, especially regarding licensing information. In this outbreak the website was critical in ensuring that information was quickly available to all.

**Oxfordshire Recommendation 9**: Defra policy and AH to continue to be aware of the importance of the public website in informing the public, LDCC and AHDOs. It is essential that information is kept up to date and relevant, with key information including licensing information.

### 6.5 LDCC operations and training

Due to the Reading AHDO being co-located with the Defra continuity site for the London Estate, the LDCC setup was instant and effective due to the infrastructure support that was already in place.

As Reading LDCC was a significant distance from the Infected Premises, a Forward Operating Base (FOB) was an essential requirement. This was established at the Animal Health Luddington outstation in Warwickshire. It enabled field staff to be physically located near the restricted zones.

There were IT and telecoms issues during the first few days of implementation. Any FOB is essential to the LDCC response and needs to be incorporated in the daily battle rhythm of the LDCC including bird
tables and ROD/NDCC teleconferences. Note: (a major project is currently underway on recommendation 10).

**Oxfordshire Recommendation 10:** AH CPD should look into the feasibility of updating the LDCC model to include a Forward Operating Base (FOB).

**Oxfordshire Recommendation 11:** Animal Health DVMs and CPD to be aware that any FOB needs to be included in the LDCC battle rhythm including LDCC/NDCC teleconference, relevant management meetings and bird tables.

During this outbreak VOs from the LDCC/AHDOs were tasked with completing risk assessments during visits to traced premises. Field staff would have benefited from specific guidance relating to how risk assessments should be carried out.

**Oxfordshire Recommendation 12:** AH VTST to be aware of the issues around AH veterinary staff completing risk assessments.

Contingency Finance reported that there were vast improvements in the return of completed paperwork during this outbreak, this proved essential when authorising prompt payments to key contractors.

The LDCC did not have enough trained staff in the Interim Avian Influenza Tracing System (IAIT). Due to the vast amount of tracings that were initiated by the LDCC, there was a requirement for trained staff to process these rapidly. Trained staff were requested through AH HR although there was limited availability from other divisions.

**Oxfordshire Recommendation 13:** Animal Health DVMs to ensure they have identified and trained staff in the use of the IAIT. They should also consider identifying a trainer who is available to tutor staff in the use of the IAIT.

At the LDCC there was limited epidemiology experience and a quicker method of deploying epidemiology resource at the LDCC and the NDCC is required. (6.5 also refers)

**Oxfordshire Recommendation 14:** Animal Heath VTST to ensure that experienced staff can be sought to support the NDCC and LDCC epidemiology teams.

**6.6 LDCC/NDCC communications**
There was some confusion in parts of the NDCC over who to contact in the LDCC. There were two DVMs and a ROD in the LDCC and a DVM at the FOB. To ensure that there can be an effective communication link with the LDCC there should be only one route of contact and this is through the NDCC Vet Ops Team.

**Oxfordshire Recommendation 15:** AH CPD to ensure that the NDCC setup plan includes clear roles, responsibilities and communication links to LDCC.

It was considered that within the NDCC & LDCC there was insufficient epidemiology support. On several occasions the NEEG team were unable to gather the required field epidemiological information to enable them to quickly provide advice to facilitate policy decisions (see recommendation 14).

The Rapid Analysis and Detection of Animal-related Risks team (RADAR) commented that staff should ensure they only use official data approved by the NDCC when reporting, it is important that there is no contradiction in details, as this can cause confusions and undermine statistical reporting.

It is important that staff understand that once the operational response has ceased, there is still ongoing work within other areas such as LDCC restocking and international trade. Therefore it is important to ensure that a clear and concise communication link to relevant teams once bird tables have been discontinued is in place.

**Oxfordshire Recommendation 16:** When NDCC bird tables are discontinued, AH CPD should agree a clear communication plan for ensuring residual local and national outbreak issues can be effectively communicated.

### 6.7 Data Management and results

As in previous outbreaks, a data control team was established at the Reading LDCC. This was staffed by a specialist team from Animal Health Business Development Division (AH BDD).

### 6.8 Records management standards and audit

To ensure that we can retain good working relationships with our contingency contractors, we need to make prompt payments within set deadlines. Completing the file audit can be unwieldy; staff need to be aware of the situation and trained to complete this area of work. The
LDCC suggested that the operational instructions relating to records management should be updated.

**Oxfordshire Recommendation 17:** Animal Health DVMs should ensure they have staff identified and trained in the records control and field debriefing procedures, as part of their LDCC setup plans.

**Oxfordshire Recommendation 18:** Animal Health CPD in conjunction with RRMs should update the operating manual in relation to records management to accurately reflect working procedures.

### 6.9 Policy and licensing

The infected premises and restricted zones affected numerous egg laying producers. Issues arose when egg volumes were increasing on premises with no official licensing protocol in place for removal.

**Oxfordshire Recommendation 19:** Defra Policy to ensure that templates are produced in advance for licensing of laying birds and eggs that can be activated quickly when necessary.

### 6.10 Sampling and lab issues

At the Joint Disease Emergency Response Committee meeting (DERC) the VLA reported that communications ran smoothly with the LDCC and the quality of the submissions forms has improved greatly over the last 12 months.

There was a liaison officer from the VLA embedded within the FOB, their role was to quality check the samples before they are submitted to the VLA. Although this led to speedier and accurate submission of samples there were delays in getting some results back from urgent tracings.

### 6.11 HR issues, pay and conditions

As with previous AI outbreaks there were strong views from staff at the LDCC regarding the decision not to pay the Emergency Displacement Allowance (EDA). Staff in the LDCC felt that this could be a potential disincentive for AH staff who volunteer for detached duty. Some staff seem unaware of the principles of the allowance and how this is initiated. Animal Health staff need to be aware of the policy behind the allowance and how it is invoked.
Oxfordshire Recommendation 20: Animal Health HR should communicate with AH staff to ensure they are aware of the policy and procedures relating to the Defra Emergency Displacement Allowance (EDA). AH HR should also discuss with Defra the scope of the EDA.

The LDCC and FOB found it difficult to source staff with specific skills using HR resources request procedures. In order to obtain skilled staff on occasions the LDCC had to directly contact staff with specific skills to check their availability, they would then ensure the official HR procedure was followed.

Oxfordshire Recommendation 21: To help identify AH staff with specific skills, AH HR should consider implementing a skills register outlining key skills required when working in a LDCC or NDCC.

6.12 Operational Partners - HPA

HPA and supervising staff from Leicester AHDO reported good use of PPE and RPE at disposal site. HPA also reported that good onsite use of PPE by Animal Health staff and contractors who were present at the IP.

The HPA were kept up to date with ongoing issues locally and nationally and were aware of their responsibilities due to good liaison with the LDCC, and the local primary care trust and NDCC nationally.

Oxfordshire Recommendation 22: Animal Health DVMs to be aware that the HPA will need to utilise the local Primary Care Trust to provide their support function to the LDCC

7.0 Conclusion

The overall response to this outbreak was very effective and the lessons identified in this report should help fine tune future responses. Staff willingness and flexibility ensured the NDCC, LDCC and FOB were established instantly and smoothly and the excellent relationships further developed with operational partners and stakeholders were critical. Issues at the FOB relating to IT and infrastructure were overcome by good onsite management and engagement with key contractors.

The quick and effective response ensured the outbreak was contained to one site. It did, however, produce challenges in terms of the first H7N7 high pathogenic avian influenza in laying hens and table eggs and for these reasons the consequences of managing the disease on this occasion had a wider impact.

As with previous outbreaks the FOB principle was used, this was essential due to the Reading LDCC distance from the IP. This approach was effective and
increased operational response, as field staff were located closer to the incident and could react more flexibly.

Field operations and surveillance actively were effectively delivered, although greater structure needs to be build into the field epidemiology teams response at both the LDCC and NDCC.

The NDCC response and setup was considered proportionate to the outbreak and appropriate. Greater clarifications of roles and communications links within the NDCC would assist future outbreaks.

Both LDCC and NDCC made good use of a variety of communication channels to effectively communicate with operational partners, stakeholders and the public. As with previous outbreaks there was good working relationship with the VLA regarding sample submissions, and with HPA relating to public health issues.

AH HR was active within the LDCC and NDCC and provided effective support and training.