BVA British Veterinary Association | Consultation response

BVA, BCVA, BEVA, BVZS and PVS response to Public Accounts Committee inquiry into Resilience to threats from animal disease

Who we are

1) The British Veterinary Association (BVA) is the national representative body for the veterinary profession in the United Kingdom. With over 19,000 members, our mission is to represent, support and champion the whole UK veterinary profession. We are a professional body and our members are individual veterinary surgeons. We take a keen interest in all issues affecting the profession, including animal health and welfare, public health, regulatory issues and employment matters.
2) The British Cattle Veterinary Association (BCVA) is the specialist division of BVA with a particular focus on cattle. We represent the views of BCVA members in the wider livestock industry while providing and signposting CPD for cattle vets and promote lifelong learning. We promote cattle wellbeing (health and welfare) and provide a community for cattle vets in the UK to belong and share ideas and knowledge.
3) The British Equine Veterinary Association (BEVA) is a specialist division of BVA representing over 4,000 equine veterinary professionals working across clinical practice, research, industry, and policy.
4) The British Veterinary Zoological Society (BVZS) is the zoo, wildlife and non-traditional companion animal (NTCA/exotics) specialist division of the BVA. We are a growing professional organisation consisting of a membership made up of veterinary surgeons, registered veterinary nurses, veterinary and veterinary nursing students, with occasional individual membership granted to scientists with an interest in the field of zoological medicine.
5) The Pig Veterinary Society (PVS) is a specialist division of BVA. It exists to assist its members to care for pigs through dissemination of knowledge about health, disease, the pig's welfare and its management and to promote study and research in the sciences relating to the health and welfare of the pig.
6) The Association of Government Veterinarians (AGV) has also contributed to the development of this consultation response.
7) We welcome the opportunity to engage with the Public Accounts Committee's inquiry on Resilience to threats from animal disease.

Overall view

8) Infectious animal diseases in the UK could manifest in one or several animal populations including companion animals, equine, food-producing animals and/or wildlife, including zoo animals. Many of these diseases are zoonotic - transmissible from vertebrate animals to humans.
9) The UK Government divides 'Notifiable' diseases - diseases that we are legally obliged to report to the Animal and Plant Health Agency (APHA) - in two main groups: endemic disease - already present in the UK, such as bovine TB (bTB); and exotic diseases - not normally present in the UK. Exotic disease may be imported through trade in animal products, human movement or animal migration. Some examples of exotic diseases include Foot and Mouth Disease (FMD) or African Swine Fever (ASF) in imported meat, multidrug resistant Salmonella or Campylobacter in poultry meat, M-pox virus (MPXV) through contact with contaminated animals and Highly Pathogenic Avian Influenza (HPAI) through bird migration.
10) Resilience against animal diseases is important for public health, socio-economic, food security, animal welfare, environmental and biodiversity reasons. Although there are differing

definitions of resilience, in the context of disease and health systems the term implies the ability of the system to predict, respond, contain, and recover from shocks to the status quo.

11) Since the UK left the European Union, the UK Government has had the opportunity to develop an improved regime of sanitary and phytosanitary controls which are essential to maintaining biosecurity, public health, and protecting animal health and welfare. However, some of the changes introduced as part of the Border Target Operating Model (BTOM) model, such as the physical checks at Border Control Posts (BCPs), have not been very effective with at most only 5% of live animal imports being checked at the point of entry, as per the recent National Audit Office (NAO) report on resilience to animal disease. The intention of the BTOM was for all live animal imports to have 100% documentary, identity and physical checks undertaken at BCPs by late 2024[1].

12) The UK has also lost access to key European databases for disease surveillance and prevention, which combined with veterinary shortages, particularly in public health, may have contributed to the lack of preparedness to deal efficiently with a potential animal disease outbreak.

13) BVA supports the need for a regime of robust import controls which is a key line of defence to help protect against diseases not currently present in the UK, as well as for increased data sharing and disease surveillance which can support the detection of risk earlier. In 2023, we gave evidence to the Cabinet Office Border Target Operating Model draft, focusing on live animals and products of animal origin. In our response, we raised that the numerous postponements to the introduction of some checks had caused concern and we called on the UK Government to provide reassurance that delays would not impact on our ability to protect the UK from disease incursion.

14) The inquiry rightly highlights that factors such as climate change and the rise in anti-microbial resistance (AMR) will lead to the risk of an increase of animal diseases. BVA has long advocated for a One Health[2] approach, integrating human, animal, and environmental health; and for professionals to work together, using an interdisciplinary approach. It is therefore crucial that the UK Government looks at resilience to threats from animal disease with a One Health approach. Greater disease resilience in general should have a positive One Health impact.

15) A key consideration to reduce animal disease and maintain animal health and public health is animal vaccination. Animal vaccination may be of crucial importance to manage everyday endemic animal diseases but also to help control outbreaks of diseases such as FMD - recently identified in Germany, Hungary and Slovakia.

16) We understand that this inquiry scrutinises policy as related to England, as responsibility for policy in this area in other UK nations is devolved. However, it is crucial that any strategies and surveillance mechanisms are joined up, not only within the four nations in the UK, but also with the EU and international partners for it to be effective.

1. Structures, systems and governance processes

1.1. Innovation and effective communication

17) The NAO report highlights that opportunities for efficiency can also come from new technologies, research and innovation citing the APHA response to HPAI outbreaks and its management of bTB and salmonella[3].

18) Building on the existing work, the UK would benefit from a centralised database for animal movements including all livestock species. The Rural Payments Agency (RPA) and APHA currently have independent Country Parish Holding (CPH) databases to register premises holding livestock with no ability to interface. We are aware of units listed differently (active /

[1] https://www.nao.org.uk/wp-content/uploads/2025/06/Resilience-to-animal-diseases.pdf
[2] https://www.who.int/health-topics/one-health#tab=tab_1
[3] https://www.nao.org.uk/wp-content/uploads/2025/06/Resilience-to-animal-diseases.pdf

inactive) on these.

19) The NAO report highlights delays and insufficient funding for Defra's Livestock Information Transformation Programme which would address weaknesses and opportunities across all species. A key threat for the pig sector from inadequate livestock information includes certainty over the existence and location of smaller holdings of pigs. APHA's Livestock Population Report for 2022-23[4] estimates around 20,000 pig holdings in total across GB but only c. 2,400 of these are of commercial scale. These smaller holdings may be more vulnerable to lack of specialised veterinary advice and oversight, weaker biosecurity, and inadequate communication in the event of notifiable disease outbreaks. The existing electronic Animal Movement Licensing (eAML) system does not address unconfirmed animal movements, with larger integrated pig producers making frequent and long-distance movements between premises. These are just 2 examples of how inadequacies in national information and connectedness will seriously delay tracing in the event of a notifiable disease outbreak. Rapid tracing is crucial in getting ahead of such an outbreak.

20) There is also the potential to utilise Artificial Intelligence to gain insights to disease and pathogen outbreaks, such as those used for companion animals via through the Small Animal Veterinary Surveillance Network (SAVSNET)[5],[6]. The UK Government should consider investing in developing and applying emerging technologies to analyse data both for disease tracking and optimising workforce deployment as has been used in conservation[7].

1.2. Veterinary workforce shortages

21) In the recently published NAO report, Defra and APHA reported that they would struggle to manage a more severe outbreak or concurrent serious outbreaks of exotic disease and that their response would be "limited by a lack of capacity (both in government and the private sector) and lack of skills and expertise in some areas, such as veterinary capacity for livestock."[8]. APHA's latest vet vacancy rate, in April 2025, was 20%, according to the NAO report.

22) The UK Government must ensure that on-going endemic disease control is not impacted by an exotic disease outbreak. Recent outbreaks of HPAI and Blue Tongue Virus (BTV) have led to APHA resources being diverted, which risks compromising the notable progress in bTB control with a significant decline of herd incidence in England[9]. Delays to Interferon Gamma testing[10] in breakdown herds to remove residual infection as well as delayed mapping on new bTB areas is of concern in the Low-Risk Area of England, has resulted in enhanced surveillance testing being delayed significantly, risking spread of bTB to neighbouring herds and spill over into wildlife populations.

23) Vet-led teams of veterinary technicians (Vet Techs) could also play an invaluable role in disease control and surveillance but clarity is required around their roles, with a need for revised legislation to allow them to be regulated to carry out tasks such as blood sampling and

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[4] https://assets.publishing.service.gov.uk/media/674f2908d7e2693e0e47d02f/LDDG_Pig_Population_data_2022-23_published_2024-25_v3_Final.pdf

[5] Noble PM, Appleton C, Radford AD, Nenadic G. Using topic modelling for unsupervised annotation of electronic health records to identify an outbreak of disease in UK dogs. PLoS One. 2021 Dec 9;16(12):e0260402. doi: 10.1371/journal.pone.0260402. PMID: 34882714; PMCID: PMC8659617

[6] TULLOCH JSP, MCGINLEY L, SÁNCHEZ-VIZCAÍNO F, MEDLOCK JM, RADFORD AD. The passive surveillance of ticks using companion animal electronic health records. Epidemiology and Infection. 2017;145(10):2020-2029. doi:10.1017/S0950268817000826

[7] AI for animal monitoring to optimise workforce deployment has been used in convservation:Fergus P, Chalmers C, Longmore S, Wich S. Harnessing Artificial Intelligence for Wildlife Conservation. Conservation. 2024; 4(4):685-702. https://doi.org/10.3390/conservation4040041

[8] https://www.nao.org.uk/wp-content/uploads/2025/06/Resilience-to-animal-diseases.pdf

[9]https://assets.publishing.service.gov.uk/media/6740a5e8cae8047d600b2019/EnglandTBEpiReport_2023_FULLVERSION_Accessible.pdf

[10] ibid

intramuscular vaccination[11].

24) Vets working in food hygiene and public health in the UK are vital for the protection of the UK consumer. Whilst recruitment and retention in this sector was undoubtedly an issue pre-Brexit, it was exacerbated following the UK's exit from the European Union. In our report "Brexit and the Veterinary Profession" published in 2017, we stated that in the meat hygiene sector alone, some estimates suggest 95% of Official Veterinarian (OVs) working in abattoirs graduated overseas with the vast majority of these being non-UK EU graduates. Approximately 45% of Government Veterinary Services posts are fulfilled by non-UK EU vets and many non-UK EU vets also work in aquaculture and bTB testing[12].
25) Following the last Government's decision to replace the Shortage Occupation List (SOL) – which had veterinary professionals listed- with the Immigration Salary List (ISL), we raised concerns with the Government about the implementation of the £48,100 salary threshold for veterinary surgeons. Most recently, the Government as of 1st of July 2025 has published a statement of changes to immigration rules in which the going rate for veterinarians is £49,500, even higher than the prior threshold[13]. The rate makes it almost impossible to recruit veterinary surgeons from overseas unless they are either very experienced or under 26 years of age. We asked the Home Office in 2024 to consider rethinking the current rules and revising them to set the applicant salary threshold for veterinary surgeons to the standard rate of £38,700[14] and we continue to engage with the Government to ensure that the threshold is reviewed.
26) The workforce model developed by the Institute for Employment Studies (IES) on behalf of the Royal College of Veterinary Surgeons (RCVS) forecasts a much higher vacancy rate for government services (25%) than for other areas of veterinary practice which is predicted to oscillate between 4 and 11%. They stated that in government service, supply was 79% of total demand in 2023, and although predicted to increase slightly to 2029, it is then expected to fall so that in 2035 it is likely to be 78% of total demand[15].
27) The Government should place more emphasis on improving recruitment and retention of staff to ensure there is a lower vacancy rate and more experience in government service, and as expressed in paragraph 25, it should consider lowering the salary threshold for veterinary surgeons coming from abroad to £38,700.
28) There is also a particular challenge in remote and rural areas where recruitment and retention is perhaps even harder, leaving them more subject to potential risk of disease. Without good veterinary coverage and without veterinary schools in these areas, there is a risk that current high standards of welfare will not be able to be maintained and a national risk to disease control may result.

2. Threat of animal diseases in England

2.1. Understand and manage the level of risk

29) The importance of resilience against animal diseases for human public health is emphasised by many examples of animal infections spilling over to the human population (zoonotic transmission). As per point 9, the UK faces risk from both endemic disease - already present in the UK such as bTB - or exotic diseases such as FMD or ASF.
30) The routes of transmission to humans are also varied, from direct transmission - such as bites from animals, contact with an infected animal or fluid- to indirect transmission which occurs

[11] https://committees.parliament.uk/event/22336/formal-meeting-oral-evidence-session/
[12] Brexit & the veterinary profession. (2017). BVA. https://www.bva.co.uk/media/3107/brexit-and-veterinaryprofession-v10.pdf
[13] https://assets.publishing.service.gov.uk/media/68629c9b3464d9c0ad609d33/E03394848_-_HC_997_-_Immigration_Rules_Changes__Web_Accessible_.pdf
[14] https://www.bva.co.uk/media/6018/bva-response-to-nao-skilled-worker-visa-final.pdf
[15] New RCVS workforce model highlights need for more vets working in public health. (2024, December 13). RCVS. https://www.rcvs.org.uk/news-and-views/news/new-rcvs-workforce-model-highlights-need-for-more-vets-working/

through contaminated objects (fomites) or environmental sources such as water courses. There is also vector-borne transmission which relies on intermediary organisms like insects to carry and transmit the disease. All these routes can result in significant human health associated treatment costs and impacts from lost earnings and quality of life.

31) The impacts of wild animal diseases should not be underestimated - both at UK and global levels. While some wild animal diseases remain restricted to the wildlife population where they may impact biodiversity (e.g. relative susceptibility of UK red squirrels to squirrel pox versus grey squirrels), other wildlife diseases also spill over into the domestic animal and human populations (e.g. HPAI in the UK). Globalisation of human travel and trade also emphasises the need for resilience against wild animal-origin diseases from overseas - for example MPXV spillover to humans from rodents in the African subcontinent with subsequent human-human transmission and subsequent global distribution. Wild boar populations in the UK increasing[16]. The importance of understanding and managing wild boar populations and preventing their access to human municipal food waste was emphasised by the 2023 incursion of ASF into Sweden[17].

32) The threats of animal disease(s) to the UK from zoological collections is multifactorial; from considerations of biosecurity and disease screening at point of import from outside the UK, to internal transfer of zoo animals around the UK, to zoonotic risk considerations for both staff within zoological collections as well as the wider public. There is of course the added considerations of interactions and associated disease risk between captive zoo species and wildlife/wild animal vectors of transmission of disease.

33) In the pig sector there is broad recognition that Defra and APHA do indeed understand the scale and scope of the threat of animal diseases; exemplified by the good work of the International Disease Monitoring (IDM) team's reports. However, in other areas there are specific challenges in understanding at a practical level. These include the reality that 40% of the UK pig breeding herd is kept outdoors, often on non-contiguous premises that are bisected by roads – these present major challenges when outbreak control zones are in place. With a growing wild boar population in the UK, there is an ever more urgent need for pragmatic but effective controls to minimise the risk of disease introductions through wild boar incursions to outdoor farms, all based on risk. In other examples, there is insufficient scientific evidence upon which to base risk assessment to support practical guidance. For example, there is ongoing uncertainty over cleaning and disinfection protocols, and duration of fallow for bare land upon which ASF-confirmed cases have been kept. Much of the land allocated to outdoor pig production is rented as part of a longer-term cropping rotation.

34) In the equine sector, the lack of a functional digital equine identification and traceability system being fully implemented is also having a negative impact in resilience to animal disease. This is in contrast to cattle, sheep, and pigs, where traceability supports surveillance, outbreak management, and international trade; thus undermining disease preparedness especially for notifiable diseases such as African Horse Sickness (AHS). The current contingency plan for AHS remains theoretical rather than operational, and it does not sufficiently account for the practicalities of equine management, movement, or recovery in a real-world outbreak. In a fast-moving outbreak, tracing equine movements - between premises, events, and borders - is virtually impossible under current systems. The Government should consider mandating and delivering a Digital Equine ID and Movement system while developing a recovery and support framework for the equine sector.

35) It is crucial for the Government to also understand the risk of zoonotic disease associated with companion animals, including rabies, *E. coli*, Salmonella, coronaviruses, *Brucella c*anis, HPAI, MPXV and *Echinococcus* spp. (Hydatid disease). There has been a notable rise in cases of brucella canis in recent years and the Government has concluded that all UK cases have been in dogs that "have either been imported, have mated with an imported dog, have had contact

[16] https://www.york.ac.uk/news-and-events/news/2024/research/wild-boar-contraception/

[17] https://www.woah.org/app/uploads/2024/11/2024-11-sweden-asf-selfd-eng.pdf

with the birthing products of an imported dog, or are the offspring (puppy) of an imported dog"[18].

36) Any incursion of a disease would have wide ranging social, economic, food security and environmental impacts as well as on animal health and welfare, as the current HPAI outbreak is showing. The government must continue to have clear and regularly reviewed policies in place to face various scenarios and these should be communicated to all stakeholders ideally prior to the event – the desired outcomes must be clear – for example; least loss of animal life; least risk to human health, least economic impact for producers, least overall economic impact; fastest possible return to international trade; most security of food supply etc.

37) There is a critical need for Defra to work with the different industries and expert veterinary species-specific groups dealing with pigs, cattle, poultry, wildlife and equines, alongside public health vets and general practice vets to understand the level of risk better and develop contingency plans.

38) There should also be joined up work with the devolved administrations to ensure there is a cohesive approach to disease control. The recent delayed communications from Scotland[19] and Wales[20] related to the whole-England Bluetongue Restriction Zone (BT RZ)[21] illustrate this.

39) The threat that notifiable disease incursion brings to international trade should not be underestimated, both in socio-economic terms for producers but also for allied industry partners as well. For example, UK exports of pork and products amount to around £600m per year[22] and this market would most likely be lost on confirmation of, for example, FMD or ASF. Aside from the immediate economic shock there would longer term consequences including competition with cheaper imports during the recovery phase (with potentially lower welfare standards e.g. farrowing crate phase-out), and further shrinkage of the national pig herd with implications for processor capacity, and for allied industries including veterinary medicine suppliers. The UK already presents only a limited commercial opportunity for veterinary products including vaccines. This already results in inconsistency of supply, and this would be exacerbated if the market shrinks further. All these factors add stress to producers, encouraging yet more to exit the sector with long term implications for national food security.

2.2. Measures to protect the UK's biosecurity against threats

Border Control Points (BCPs)

40) While robust import controls are certainly one of the key lines of defense to protect against disease, physical checks currently being carried out at BCPs may not be the most effective. The NAO report has pointed out only about 5% of live animal imports currently undergo physical checks at point of entry - and this is Defra's best estimate - despite the target being 100%[23]. The intention was for high-risk animal products imports to have 100% checks by April 2024. Physical checks are currently being carried out at BCPs which are not always located on the most direct route between the point of departure and destination thus impacting the efficacy of the controls. The possibility of long delays at BCPS are also an issue for animal health and welfare and far too often animals are stuck at BCPs for long periods of time.

41) The National Pig Association (NPA) noted evidence of inadequate border control systems, highlighting reports from the Port of Dover that they have noted an increase in commercial products of animal origin (POAO) arriving displaying health marks denoting prohibition from leaving the country of origin due to animal disease restrictions (e.g. Romania and ASF)[24].

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[18] https://www.gov.uk/government/publications/brucella-canis-information-for-the-public-and-dog-owners/brucella-canis-information-for-the-public-and-dog-owners

[19] https://www.gov.scot/publications/bluetongue/pages/bluetongue-movement-restrictions-for-animals/

[20] https://www.gov.wales/written-statement-bluetongue-virus-control-policy-response-england-wide-rz-1st-july-2025

[21] https://www.gov.uk/government/news/bluetongue-virus-restricted-zone-to-be-extended-to-all-of-england-on-1-july-2025

[22] https://committees.parliament.uk/writtenevidence/135815/html/

[23] https://www.nao.org.uk/wp-content/uploads/2025/06/Resilience-to-animal-diseases.pdf

[24] https://committees.parliament.uk/writtenevidence/135815/pdf/

Delays at Border Inspection means that these non-permitted shipments then auto-clear without inspection through the Timed-Out Decision Contingency Feature (TODCOF) and high-risk product then enters the UK through legal channels.

42) The BCP for the Strait of Dover, the narrowest part of the English Channel, is around 22 miles inland, so there is a huge risk that POAO either inadvertently or intentionally do not pass through the BCP. This should be compared with the stringent regulations and checks that are in place in Europe when the exports are travelling in the opposite direction.

43) There is also a need for improved biosecurity systems, especially at public entry points in addition to trade entry points. BVA is aware of existing concerns about the transport of unprocessed meat and processed meats from high-risk countries. The NPA provides concerning evidence over the volume of illegal POAO entering the country, particularly via Port of Dover - quoting the recovery of 243 tons since 2023 even though the inspection team are only funded to work 20% of time and check a very small percentage of vehicles[25].

44) Individual imports of POAO represent a significant risk of disease incursion. The recent ban on personal imports of meat is welcomed but there needs to be more advertising and communication over the ban. There is also a need for increase surveillance, including baggage searches by Border Force supported by APHA officials at entry points from Europe, in particulary UK airports and Ashford and St Pancras International stations.

Access to databases and disease surveillance

45) As we stated in our position on veterinary scanning surveillance[26], the UK veterinary surveillance network is vital to identifying and managing threats to public health, trade, and wider society from animal diseases. It is crucial that APHA is sufficiently funded to maintain this role. Veterinary surveillance and animal health and disease monitoring is equally important across livestock, equine, wildlife, and companion animals. In the position we also recommend that the UK Governments should "…increase the coverage of the scanning surveillance network through the use of syndromic surveillance and the repurposing of existing health data or data on clinical disease events e.g. health records from private practice, private laboratories, abattoir reports, market monitoring, farm assurance schemes or fallen stock reports."[27]

46) Continued monitoring of new and emerging diseases through data collection, analysis, and sharing across species provides high-quality intelligence on animal health and welfare. This helps policymakers, veterinary professionals, and animal keepers to take decisions to improve animal health and welfare and productivity, as well as identify and manage threats to public health, trade, food quality, the environment, and leisure and tourism.

47) Surveillance systems should also ensure that there is access to appropriate data and monitoring mechanisms and that this data can be shared amongst different sectors and countries to prevent disease from spreading. It is crucial to ensure that there is international collaboration in order to protect the UK's biosecurity.

48) In this context, the recently announced UK-EU veterinary agreement provides the UK with an opportunity to re-gain access to the databases which are key to protect the UK such as Animal Disease Information System (ADIS), which tracks and reports notifiable diseases across the EU; the Rapid Alert System for Food and Feed (RASFF), and the Trade Control and Expert System (TRACES). The RASFF was established to ensure the exchange of information between member countries to support swift reaction by food safety authorities in case of risks to public health resulting from the food chain[28]. TRACES is the European Commission's platform for animal and plant health certification required for the importation of animals, animal products, food and feed of nonanimal origin and plants into the European Union, and the intra-

[25] https://nationalpigassociation.co.uk/mps-get-to-witness-dover-illegal-meat-seizures-at-first-hand

[26] https://www.bva.co.uk/media/3115/bva-position-on-veterinary-scanning-surveillance.pdf

[27] https://www.bva.co.uk/media/3115/bva-position-on-veterinary-scanning-surveillance.pdf

[28] Rapid Alert System for Food and Feed (RASFF). (2023). European Commission. https://food.ec.europa.eu/foodsafety/rasff_en

EU trade and EU exports of animals and certain animal products[29]. Access to TRACES would allow APHA to verify an animal's true origin, the journey history or health status.

One Health approach

49) As expressed in point 14, factors such as climate change and the rise in AMR could lead to an increased risk of animal diseases. It is crucial that the Government approaches resilience to animal disease from a One Health perspective as greater disease resilience in general should have a positive environmental, public health and animal health impact.

50) BVA has long advocated for a One Health approach, and for professionals to work together, using an interdisciplinary approach[30]. This could also help to mitigate some of the current workforce pressures on the veterinary profession if a more collaborative approach is rolled out.

51) There is potential for strengthening and improving the current links between medical and veterinary sectors, and between UK departments (e.g., DHSC, Defra, UKHSA, APHA and EA).

52) In 2023, we conducted the BVA's Voice of the Veterinary Profession survey which revealed that almost 90 percent of UK vets are concerned about losing the ability to treat infections in animals as a result of antimicrobial resistance[31]. The UK has made substantial progress on AMR particularly in the agricultural sector[32], and vets play a vital role in championing responsible antimicrobial use. While BVA will continue working on this area, it is crucial that the Government continues to address this risk too.

53) Antimicrobial resistance is a particular concern in minor livestock species, such as goats and camelids. Resistance often emerges first in these species, but there is for example only one licensed parasiticide product for goats, which also happens to be one of those with the highest resistance profile, and none at all for camelids[33]. This impedes our ability to reduce use of these critical products and prevent resistance from affecting other animal species and humans.

54) NAO's report on resilience to animal disease identified that Defra does not have a long-term strategic approach to address the lack of availability of animal vaccines and identified a need for such strategy. The Veterinary Medicines Directorate (VMD) said that the situation has become more acute in the last two years, in part due to "structural market issues and limited incentives on the private sector to produce animal vaccines"[34].

55) Animal vaccination is an effective way to reduce disease and maintain animal health and welfare, which may be of crucial importance to manage everyday endemic animal diseases including PRRS, but also to help control outbreaks of diseases such as FMD - recently identified in Germany, Hungary and Slovakia. FMD is a highly transmissible transboundary animal disease (TAD) and a notifiable disease that deeply affects the production of livestock and disrupts regional and international trade in animals and animal products.

56) Vaccine security is a particular problem for FMD due to the epizootic nature of the disease, the variable nature of FMD virus and the difficulty in creating or sustaining an economic market for the vaccine[35]. While vaccination against FMD is crucial to protect animal health, it is only one tool in the armoury and may be used strategically with a "vaccinate to kill" policy - ring vaccination around an outbreak and then slaughtering from the outside of the ring inwards- or

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[29] TRACES at a glance. (n.d). European Commission https://food.ec.europa.eu/horizontal-topics/traces_en

[30] https://www.bva.co.uk/media/3145/bva_one_health_in_action_report_nov_2019.pdf

[31] https://www.bva.co.uk/news-and-blog/news-article/vets-fear-they-could-lose-ability-to-treat-infections-due-to-antibiotic-resistance-survey-shows/

[32] https://commonslibrary.parliament.uk/research-briefings/cdp-2023-0012/#:~:text=The%20UK's%20use%20of%20antibiotics,the%20Government%20on%20its%20implementation.

[33]https://www.pure.ed.ac.uk/ws/portalfiles/portal/13589862/Genetic_control_of_resistance_to_gastro_intestinal_parasites_in_crossbred_cashmere_producing_goats.pdf

[34] https://www.nao.org.uk/wp-content/uploads/2025/06/Resilience-to-animal-diseases.pdf

[35] Prequalification Veterinary Vaccines (2023). Food and Agriculture Organization of the United Nations; The European Commission for the Control of Foot-and-Mouth Disease (EuFMD) . https://www.fao.org/eufmd/globalsituation/vaccine-prequalification/es/

indeed a “vaccinate to live” policy - animals are retained but this will affect a return to international trade. This must be clear at the outset and communicated to all stakeholders if vaccination is to be considered.

57) However, the same lack of resilience in animal vaccine research, development and supply applies across all of the significant animal disease. We note the globally significant work of the Pirbright Institute in animal vaccine research including for FMD and ASF.

Optimising deployment of veterinary workforce

58) In our response to the FSA consultation on early proposals for a future delivery model for FSA-delivered official controls in the meat sector[36], we expressed our strong support for the aim of developing a more skilled and resilient workforce and agree that the current recruitment and retention landscape for OVs, necessitates innovative solutions.

59) As expressed in point 21 the published NAO report identified an issue with the lack of capacity and skills and expertise in Defra and APHA which will limit their ability to manage a severe outbreak of exotic disease.

60) APHA conducts both active and passive surveillance, but passive surveillance by veterinary surgeons and laboratories has been impacted by recent cuts to laboratory capacity. These cuts could have compromised the efficacy of this functionality.

61) During the 2023 HPAI outbreak, there was a high amount of reliance placed by Defra and APHA on private vets due to under resourcing. Lessons from this outbreak should be learnt so that there is more emphasis on training of vets in these areas and better communication and coordination. Consideration should be given to the use of vet-led veterinary technicians to support disease control and surveillance. We reiterate the point around the importance of using ‘peace time’ to ensure that a cohort of private veterinarians are trained and ready to step up quickly and effectively in the event of a notifiable disease outbreak.

62) There could also be a review of technician input in a veterinary team structure to support veterinary workload pressures, including continued work to explore which tasks can be delegated to trained and regulated non-veterinary members of the veterinary team to allow vets to focus on work that can only be done or is best delivered by veterinary surgeons. This is of relevance to the ongoing review of the Veterinary Surgeons Act, and arrangements for Allied Veterinary Professions (AVPs), something which should be accelerated. This is particularly relevant for mass blood-sampling and for mass culling. The latter will likely be prone to media interest and related disquiet among the general population, rightly with concerns for animal welfare, if arrangements are anything other than efficient, competent and humane.

63) The impact of impending and actual outbreak and aftermath of notifiable disease on farm staff and their families, private vet teams and government vet teams should not be underestimated. More could be done to integrate the consequence of outbreaks into planning and to strengthen the support available.

64) In order to ensure that the value of veterinary surveillance and animal health and disease monitoring is embedded in the mindset of the veterinary workforce and that veterinary graduates are equipped with the knowledge to participate in and navigate surveillance networks, consideration should be given to how animal disease surveillance and outbreak preparedness across species areas is incorporated into the RCVS Day One Competences, the RCVS Professional Development Phase and current undergraduate curricula[37] and the code of conduct. The Government and the RCVS should also look at how to reposition this important part of veterinary work so that it is seen as a desirable job by more veterinary surgeons.

65) Simulation exercises provide valuable insights into weaknesses, gaps and redundancies of

[36] https://www.bva.co.uk/media/4276/bva-and-agv-response-to-fsa-proposals-for-an-fdm-for-delivery-of-official-controls-final.pdf

[37] https://www.bva.co.uk/media/3115/bva-position-on-veterinary-scanning-surveillance.pdf

contingency plans. The Government could invest in updating its contingency plans – some of which are outdated, such as the ASF contingency plan, working with industry as they often carry out practical simulations, providing scope for collaborative work.

Conclusions

66) The UK government should ensure improved investment in Defra and its executive agencies so that adequate resilience to animal disease threats is established. This should include continued support for the Weybridge renovations, recruitment and retention of the veterinary workforce.

67) There is a need for further collaboration between private and public animal sectors at multiple levels, including awareness of diseases, and roles, and communication channels.

68) The negotiation of a veterinary agreement with the EU could provide the UK with a new opportunity to ensure our biosecurity is protected by better coordinating with European counterparts and having access to the necessary databases. However, it is crucial that the UK Government works with each sector to understand the specific risks; and it must ensure that it retains the ability to diverge on biosecurity-related legislation in order to safeguard the UK from disease incursion from the EU[38].

69) The reform of the Veterinary Surgeons Act which may bring allied professions into regulation is of crucial importance as it will ensure consistency across the veterinary field and enhance the role of the allied professions which play a key role in disease surveillance, prevention and mitigation in case of an outbreak.

70) Whilst BVA recognises that there are financial implications to improving disease surveillance networks, data collection and sharing platforms, there is an opportunity to work with the veterinary profession and other key stakeholders to modernise and optimise the existing surveillance network.

71) The Government would benefit from developing new approaches to data collection, analysis and feedback, utilising emerging technologies, including AI, optimising the skills of the current veterinary workforce so they are better prepared to deal with an outbreak, working with all sectors of the veterinary profession to better understand the risks and working with stakeholders nationally and internationally.

72) The Government must look at the impact of animal disease on One Health and Defra must prioritise setting a long-term strategic approach to address the lack of availability of animal vaccines.

73) The NAO report is broadly critical of the under-resourcing of the Government Veterinary Service (GVS) with regard to disease surveillance, biosecurity and the ability to respond to the incursion into the UK of economically, and animal health and welfare impactful exotic animal disease. The Government must adequately resource all parts of the GVS such that there is:

a. A suitably qualified, trained and resourced veterinary workforce available to maintain the UK's biosecurity and respond appropriately to disease outbreaks.
b. A plan is developed, funded and delivered to suitably train a contingency veterinary workforce from the pool of private veterinary surgeons that can be deployed to support the GVS response in the event of a significant exotic disease outbreak.
c. The GVS is provided with adequate financial support to meet its requirements to prevent exotic disease incursion and react appropriately should a disease outbreak occur.
d. The deficiencies in the operational aspects of GVS should be ameliorated as a matter of urgency particularly those issues identified in the NAO Report related to systems of working, databases and IT systems.

[38] https://www.bva.co.uk/media/6272/eu-uk-vet-agreement-policy-position-final.pdf

74) The Government should consider reviewing the current going rate applicable to veterinarians of £49,500 per year, as per the recent statement of changes in immigration rules[39] and lower the threshold.

[39] https://assets.publishing.service.gov.uk/media/68629c9b3464d9c0ad609d33/E03394848_-_HC_997_-_Immigration_Rules_Changes__Web_Accessible_.pdf