BVA AND SCOTTISH BRANCH RESPONSE TO SRUC CONSULTATION ON VETERINARY DISEASE SURVEILLANCE IN SCOTLAND

1) The British Veterinary Association (BVA) is the national representative body for the veterinary profession in the United Kingdom and has over 15,000 members. Our primary aim is to represent, support and champion the interests of the veterinary profession in this country, and we therefore take a keen interest in all issues affecting the profession, including animal health and welfare, public health, regulatory issues and employment matters.

2) BVA’s Scottish Branch brings together representatives of the BVA’s territorial and specialist divisions, government, academic institutions and research organisations in Scotland. The Branch advises BVA on the consensus view of the Scottish members on Scottish and United Kingdom issues.

3) We have also consulted with our specialist partners, in particular the British Cattle Veterinary Association, the Pig Veterinary Society, and the Sheep Veterinary Society.

4) BVA, Scottish Branch, and the species groups were pleased to have been given the opportunity to contribute to the Scottish Rural College’s consultation on veterinary disease surveillance in Scotland. We understand that the proposals within the paper come in response to the recommendation of the Kinnaid Review, published in November 2011, that the number of Disease Surveillance Centres (DSCs) should be reduced. The Scottish Rural College presented the Strategic Management Board for Veterinary Surveillance and Scottish Government with a series of options for change to the disease surveillance structure in Scotland. Our comments centre around those options relating to the DSCs at Inverness, Ayr, and Aberdeen, where the most significant changes are proposed, however, we also wish to stress that it is essential that any decisions on closures or changes to the current provision must:

- be based on robust surveillance and diagnostic outcomes, not on pure financial savings
- protect against loss of expertise by retraining and redeploying existing staff
- ensure a good balance of species expertise at the appropriate locations, taking into account local need
- avoid at all costs undermining Scotland’s capacity to identify and respond to emerging and exotic disease threats
- be thoroughly tested and risk managed before any irreversible dismantling of the existing system takes place
- consider the wider surveillance picture, recognising GB as a single epidemiological unit

5) We understand that the Drummondhill Campus which houses the current DSC may be sold with a view to vacating entirely by the end of January 2016. Although the region served by the current Inverness DSC contains 25% of Scottish holdings, a great number of those holdings are crofts and the livestock population density in the
Highlands is by far the lowest of any region of Scotland. The centre carries out fewer post mortems than most of the other DSCs, receiving the lowest number of farm animal submissions, some 7.5%. Although in terms of national disease risk management the Highlands are the least likely area of the UK to be exposed to the threat of exotic disease incursion, it’s essential that adequate alternatives are put in place and thoroughly tested before any steps to dismantle the Inverness facility are taken.

6) We support the proposed exploration of the two options detailed in the paper: a tender for carcase collection services, and further discussion with veterinary practices in the region with regard to the feasibility of acting as carcases collection points. However, regarding carcase collection, there have been frustrations with this approach within England and Wales and it remains to be seen what the long term impact will be on submissions. In order to be an effective substitute for local post mortem facilities such a service must be affordable and we are yet to be convinced that a financially viable service, particularly given the distances involved in Scotland, would offer sufficiently good value that submissions would not be negatively impacted. Our colleagues working within the pig veterinary sector are particularly concerned regarding the loss of the DSC at Inverness as there are two commercial pig breeding units and a large private unit in the area. It is felt that producers are unlikely to submit carcases to Aberdeen, and live submissions would not be feasible.

7) We are unable to comment on the proposal that veterinary practices in the region could act as carcase collection points as this will be a decision for individual businesses and will be dependent on a range of factors, not least adequate biosecurity and bio-containment.

8) We would like to suggest that a third option is considered and explored, namely the development of a suitably located post mortem and pathology facility supported by a practitioner CPD centre at the new HIE Inverness Campus where SRUC Research and SAC Consulting Solutions will be moving to in early January 2016. Access to the expertise of SRUC staff would be invaluable in up-skilling private veterinary practitioners, and long-term could help increase and future proof the surveillance capacity of Scotland. Consideration should also be given to how rapidly evolving technology could contribute to and support a network of PM trained private veterinary practitioners covering remote areas.

9) We strongly support the principle of a close working relationship between SACCVS and the University of Glasgow Veterinary School in the provision of disease surveillance for the west of Scotland. Whilst the option of modifying the facility at Auchincruive may be worth further exploration we believe that the proposed relocation to the Glasgow Garscobe Campus (supported by a carcase transportation service) may ultimately prove a better and more sustainable long term investment. There are some concerns amongst our members that such a move could result in a significant reduction in the number of submissions from the area south of Glasgow, where the cattle density is relatively high, so it will be important that this risk is managed effectively. Provisions such as a carcase collection for the region may present the same issues as those discussed above with regard to Inverness. In any event, the facility, must be able to offer parasitology and bacteriology and be sufficiently well staffed that it offers a credible, coordinated approach to surveillance, along with teaching facilities for both veterinary medicine and veterinary bioscience students from Glasgow.
Aberdeen

10) We understand that staff have already been informed of plans to move the activities of the Craibstone Campus Aberdeen to a new campus at Thainstone and that no difficulties have been anticipated. We believe every measure should be taken to retain the expertise of current staff, particularly as it is likely that Aberdeen will be expected to absorb some of the workload from the current DSC at Inverness.

Conclusion

11) In conclusion, we are broadly supportive of the proposed changes, subject to due consideration of the criteria detailed at paragraph 4. We warmly welcome the principle of bringing both the Scottish vet schools into the surveillance network as a means of strengthening the core expertise in pathology and epidemiology, and concurrently improving undergraduate exposure to VI work. The affordability and sustainability of carcase collection services on a regional basis will need to be carefully considered. We would like to see the changes complemented by suitable investment in training for private veterinary practitioners in post-mortems and pathology, and the retention, retraining and redeployment of existing expertise.