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.

We welcome the Science and Technology Committee's inquiry and would encourage careful consideration of how “Big Data” — one of the ‘great technologies’ identified by Government — can be utilised to protect the UK from new and emerging disease in relation to veterinary disease surveillance.

Our particular area of concern relates to the collation and analysis of veterinary surveillance data at a national level in the face of recent changes (and proposed changes) to the network of laboratory and post-mortem services in England, Wales and Scotland.

In December 2013 we responded to the announcement from AHVLA (now APHA) regarding changes to the veterinary scanning surveillance system in England and Wales stating that whilst it was good practice to review current systems with a view to improving them, changes must not be based on cost alone. The cost of disease outbreak far outweighs the cost of providing a robust surveillance system. At the time we welcomed the increased focus on data collection and warned against creating a disincentive for farmers to utilise post-mortem services. More recently we have responded to the consultation from Scotland’s Rural College regarding veterinary disease surveillance in Scotland stressing the importance of robust surveillance and diagnostic outcomes, keeping in mind the wider surveillance picture and recognising GB as a single epidemiological unit.

A systematic use of a wider range of surveillance data sources has the potential to improve the detection of new or re-emerging disease threats but only if the data is reliable and robust and response turnaround times are quick and efficient. This relies on:

- Good local relationships between private vets and APHA staff (and Disease Surveillance Centre staff in Scotland)
- Accurate quality data, particularly from abattoirs and fallen stock centres
- Sufficient experienced staff to collect data, check its validity and analyse promptly
- Systems being in place to enable broader analysis of regional and national data
- Maintenance and development of specialities within the service and the development of clinical expertise to enhance species specialist groups.

The collection, categorisation and interpretation of this data must be carefully managed and standardised to ensure that the quality of data is maintained. Consideration of how data from the private sector is validated needs to be considered. It is also important that all data sources engage and share information with each other so that the bigger picture can be fully understood. The ideal would be a universal portal for all data.

The dissemination of surveillance information is also important and we support any steps to increase feedback to veterinary practitioners and farmers and other industry stakeholders.
Efforts should be made to incentivise the submission of diagnostic material to increase the scanning surveillance capability, and the involvement of local veterinary practitioners remains an important part of improving surveillance across the UK.

A survey of our members (via the BVA ‘Voice of the veterinary profession’ panel) in May 2015 revealed:

- more than half of practitioners who had experienced a change in post-mortem facilities were submitting fewer carcasses,
- large animal vets were significantly more likely to be carrying out their own post mortems than they were a year ago, and
- the vast majority were keeping their own records but only a very small minority were inputting into national surveillance systems.

We therefore remain concerned that Government is losing rather than improving its ability to gather reliable and robust data, undermining the UK’s capacity to identify and respond to emerging and exotic disease threats.

We would urge the Committee to consider how the laudable aims of the Big Data initiative can be achieved in veterinary surveillance if systems are not in place to collect the data.