

Ad hoc Group on the evaluation of contagious bovine pleuropneumonia (CBPP) status and endorsement of official control programmes of Members

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A virtual meeting of the *ad hoc* Group on the evaluation of contagious bovine pleuropneumonia (CBPP) status and endorsement of official control programmes of Members (hereafter the Group) was held on 5-7 December 2023.

1. Opening

Dr Montserrat Arroyo, Deputy Director General for International Standards and Science of WOAHA, welcomed the Group. She thanked the experts for their availability and contribution to this work and extended her appreciation to their institutes and national governments for allowing their participation in this meeting. Dr Arroyo acknowledged the amount of work before, during, and that would be done after the *ad hoc* Group meeting in reviewing the dossiers and writing the report. Dr Arroyo thanked the Group for its contribution to this important mandate of WOAHA.

Dr Arroyo highlighted the importance of the quality of the report to be scrutinised by Members before adopting the proposed list of countries free from CBPP. She also encouraged the Group to continue providing detailed feedback to applicant Members with negative outcomes in identifying the main gaps and points for improvement to achieve their desired CBPP-free status, as well as providing informative recommendations to those Members with positive outcomes for further improvement in the maintenance of their CBPP-free status.

Dr Arroyo highlighted the sensitivity and confidentiality of the dossiers for official recognition and thanked the experts for having signed the forms for undertaking of confidentiality.

2. Adoption of the agenda and appointment of Chairperson and Rapporteur

Dr Chandapiwa Marobela-Raborokgwe chaired the Group. Dr Musa Mulongo acted as rapporteur, with support from the WOAHA Secretariat. The Group endorsed the proposed agenda.

The Terms of reference, agenda and list of participants are presented as Appendices 1, 2 and 3, respectively.

The Group was informed that declared interests were reviewed by WOAHA, and it was agreed that none represented a potential conflict in the evaluation of the CBPP status of Members.

3. Evaluation of applications from Members for official recognition of CBPP-free status

a. Czech Republic

In October 2023, the Czech Republic submitted a dossier to apply for the official recognition of its CBPP-free status.

The Group requested additional information and received clarifications from the Czech Republic during the evaluation of the dossier.

i. Animal disease reporting

The Group noted that the Czech Republic has a record of regular and prompt animal disease reporting. The Group also acknowledged that CBPP has been a notifiable disease for at least the past 23 years, according to Regulation (European Union (EU)) No 2016/429, Act No 166/1999 and in accordance with Article 1.4.6. of the *Terrestrial Animal Health Code (Terrestrial Code)*.

ii. Veterinary Services

The Group acknowledged that the relevant legislation was in place for monitoring and eradication of animal diseases, animal welfare controls and emergency preparedness and that the State Veterinary Administration was the Competent Authority in charge of Veterinary Services. The Veterinary Services consisted of a Central Veterinary Administration, 13 Regional Veterinary Administrations and one Municipal Veterinary Administration in Prague.

The Group took note of the presence of private veterinarians in the Czech Republic who were collectively associated with the Chamber of Veterinary Surgeons of the Czech Republic and acknowledged their involvement in routine animal preventive and curative activities. The Group also noted farmers' obligation to report suspicions of notifiable diseases to a private or official veterinarian.

The Group also noted that there was an identification system in place, where animals were identified individually, with either two approved conventional ear tags, or with one conventional and one electronic ear tag within 20 days of birth, and that operators keeping bovine animals were required to register their establishments in the “Integrated Agricultural Register” database.

The Group concluded that the Veterinary Services had current knowledge of and authority over the bovine population in the country.

iii. Situation of CBPP in the past 24 months

The Group acknowledged that CBPP has never been reported or diagnosed in the Czech Republic since 1902.

iv. Absence of vaccination in the past 24 months

The Group agreed that vaccination against CBPP has never been allowed in the Czech Republic and that it was formally prohibited since 2003 by Decree 2003/299, which was in force then and later in 2021, by the Regulation (EU) 2016/429 AHL. The Czech Republic reported that illegal vaccinations had never been reported in the country.

v. Surveillance in accordance with Articles 11.5.13. to 11.5.17.

The Group noted that the Czech Republic had a general surveillance system in place for all diseases based on clinical findings, during anatomopathological inspections at rendering plants, and post-mortem inspections at slaughterhouses. In addition, the Group noted that reporting of EU-listed category A diseases, including CBPP, by farmers to a private or an official veterinarian was mandatory, and that non-compliance could result in a three-year imprisonment penalty. The Czech Republic described the three State Veterinary Institutes (SVI) that carry out laboratory testing of samples taken as part of veterinary monitoring of animal diseases. These three laboratories monitor various important veterinary diseases for the State Veterinary Authority, provide consultancy, education, and training activities, and engage in research and development. The Group noted that these three laboratories had been approved for CBPP monitoring.

The Czech Republic relies on ante-mortem and post-mortem inspection and routine anatomopathological examinations for lung lesions carried out as part of bovine respiratory disease surveillance. The Group understood that the slaughter of animals in the Czech Republic happened both domestically and in slaughterhouses and that domestic slaughter was supervised by an official health inspector, just as in slaughterhouses. The penalty for failing to report a slaughter was also acknowledged. Regarding the abattoir surveillance, the Czech Republic reported that in the past three years, 294 lungs were investigated following post-mortem inspection, revealing *Pasteurella*, *Mannheimia*, *Mycobacterium*, *Histophilus somni* and other *mycoplasmas*. However, no CBPP suspicions were reported from 2021 to 2023. The Group recommended that the Czech Republic monitor the performance of the surveillance programme for bovine respiratory disease, including CBPP. Finally, the Group recommended enhancing the training provided for post-mortem examination by including the identification of CBPP-like lesions and targeting all relevant stakeholders (in particular, meat inspectors and veterinarians) to increase the sensitivity of the surveillance system.

The Group reflected on the absence of laboratory diagnosis of CBPP, which was not routinely performed as part of the differential diagnosis of lung lesions. The Group acknowledged that the CBPP-specific PCR test had not been used by any SVI in the Czech Republic and that the laboratories relied on general PCR tests for *Mycoplasma spp.* Noting that the Czech Republic carried out serological tests for CBPP for animals destined for export, the Group advised that SVIs participate in proficiency tests to ensure quality assurance. The Group was also concerned by the absence of formal arrangements, including laboratory procedures for the timely delivery of CBPP suspected samples to a WOA Reference Laboratory in case confirmation of a suspect case was needed, and the absence of documented procedures for collecting, managing, and shipping CBPP-suspected samples. The Group noted with concern the absence of simulation exercises for CBPP and the lack of any plans to do so and recommended the Czech Republic plan one for exotic diseases, including CBPP. Finally, the Group recommended that CBPP be considered in the differential diagnosis procedure for lung lesion follow-up.

vi. Regulatory measures for the prevention and early detection of CBPP

The Group agreed that regulatory measures to prevent and control foreign animal diseases, including CBPP, were in place and that importation of animal species susceptible to CBPP or their products from countries with confirmed occurrence of CBPP was not allowed. While acknowledging that the Czech Republic was surrounded by EU countries not having an official CBPP-free status recognised by WOA and that no border veterinary checks were in place at the border with these countries, the Group considered that given the land-locked situation of the Czech Republic, surrounded by countries which had no reports of CBPP for over 20 years, the risk of introduction of CBPP into the country from its neighbours was low. The Group noted that there were border veterinary checks in place at the Prague International Airport, which is not intended for the importation of live bovines. The Czech Republic provided the veterinary certificates describing the conditions for importations, and the Group was satisfied with the import conditions.

The Group noted the presence of a general contingency plan for exotic diseases and recommended developing a CBPP-specific one which would include procedures for sample collection and processing all the way to receiving results from the laboratory.

vii. Compliance with the questionnaire in Article 1.10.1.

The Group agreed that, taking into account the additional information provided in response to the questions raised, the dossier was compliant with the questionnaire in Article 1.10.1. of the *Terrestrial Code*.

Conclusion

Considering the information submitted in the dossier and the answers received from the Czech Republic to the requests for additional information, the Group concluded that the application was compliant with the requirements of Chapter 11.5., and the questionnaire in Article 1.10.1. of the *Terrestrial Code*. The Group, therefore, recommended that the Czech Republic be recognised as a country free from CBPP.

The Group recommended that evidence of the following information be submitted to WOA when the Czech Republic reconfirms its CBPP status (also detailed in the relevant sections above):

- Abattoir surveillance reports capturing all pneumonic lesions and lesions suggestive of CBPP. This information should include data on any suspicions detected, follow-up laboratory investigations covering differential diagnosis, and control measures applied.
- Implementation of more specific awareness and training activities focusing on respiratory diseases, including CBPP disease recognition, particularly targeting abattoir surveillance (meat inspectors and laboratory pathologists responsible for abattoir surveillance and post-mortem diagnosis). This information should include, but not be limited to, a course guide (programme, topics covered), schedule (envisaged frequency) and dates, attendance lists, and duration of the training(s).
- A CBPP-specific contingency plan including control measures, a written protocol for CBPP sampling clearly indicating the responsibilities, tasks, sampling procedures, sample management, storage, shipping of suspected CBPP material to a WOA Reference Laboratory for confirmatory testing, and timelines for reporting results. Evidence that specific training for all laboratories supporting the Veterinary Service have been performed to ensure awareness of the protocol to be followed in case CBPP suspicions should be submitted. Furthermore, evidence of a formal arrangement with a WOA Reference Laboratory for CBPP should be provided.

In addition, the Group advised the Czech Republic to:

- Plan a simulation exercise for exotic diseases, including CBPP;
- Formally monitor the performance of the surveillance programme for respiratory diseases, including CBPP.

Minutes from the Scientific Commission meeting, 12-16 February 2024:

The Commission strongly recommended that should the Czech Republic wish to import live cattle from countries not officially recognised CBPP-free by WOAAH in the future, such imports should comply with Chapter 11.5., (i.e. live animals should only be imported for slaughter following the provisions of Article 11.5.8. or, if not destined to slaughter, cattle should only be imported from countries officially recognised as CBPP free). Otherwise, the Czech Republic should provide documented evidence that Chapter 5.3 has been followed to demonstrate that the alternative measures applied to such imports achieve an equivalent level of risk mitigation as the provisions of Chapter 11.5.

The Commission further noted that the Group recommended developing a CBPP specific contingency plan and training. However, the Commission considered that the existing contingency plan for exotic diseases would only require the addition of a written protocol for CBPP sampling clearly indicating the responsibilities, tasks, sampling procedures, sample management, storage, shipping of suspected CBPP material to a WOAAH Reference Laboratory for confirmatory testing, and timelines for reporting results.

b. Norway

In October 2023, Norway submitted a dossier to apply for the official recognition of its CBPP-free status.

The Group requested additional information and received clarifications during the dossier evaluation.

i. Animal disease reporting

The Group noted that Norway has a record of regular and prompt animal disease reporting. The Group also acknowledged that CBPP has been a notifiable disease at least since 1965, according to regulation 19 March 1965 No 9941 on a list of diseases covered by the Livestock Act of 8 June 1962, and the Animal Health Regulation (Commission Implementing Regulation (EU) 2018/1882 of 3 December 2018), and in accordance with Article 1.4.6. of the *Terrestrial Code*.

ii. Veterinary Services

The Group acknowledged that the relevant legislation was in place for routine reporting of disease outbreaks to WOAAH and that the Norwegian Food Safety Authority (NFSA) was the Competent Authority in charge of Veterinary Services.

The Group also noted that there was an identification system in place, where animals were identified individually, with either two approved conventional ear tags, or with one conventional and one electronic ear tag within 20 days of birth, and that operators keeping bovine animals were required to register their establishments, as well as records of births, deaths, and movements in the NFSA Husdyrregisteret database.

The Group also noted that farmers and veterinary paraprofessionals were involved in CBPP surveillance and control and that farmers, veterinarians, laboratories, and the public were obligated to immediately alert NFSA of suspicions of emerging animal diseases, including CBPP. The Group also noted the presence of a day and night telephone service, where field veterinarians could call to discuss suspicions.

Furthermore, the Group took note of the European Free Trade Association (EFTA) Surveillance Authority (ESA) which regularly monitored animal health surveillance and the Veterinary Services of Norway.

The Group concluded that the Veterinary Services had current knowledge of and authority over the livestock population in the country.

iii. Situation of CBPP in the past 24 months

The Group acknowledged that CBPP has never been reported in the country since 1860.

iv. Absence of vaccination in the past 24 months

The Group noted that vaccination against CBPP has never been carried out in Norway and that it was formally prohibited since 1 January 2000 (by Regulation No 1310 of 20 December 1999) on vaccination of livestock and wildlife.

v. Surveillance in accordance with Articles 11.5.13. to 11.5.17.

The Group noted that Norway's passive surveillance system was centred on reports from farmers, veterinarians, laboratories, and the public. The early warning system is also based on clinical surveillance, which consists of good documentable registration systems, and a comprehensive meat inspection of all slaughtered cattle, including registration of all clinical and pathological findings following mandatory examination and testing of suspicious lesions.

The Group noted that Norway relied primarily on ante- and post-mortem inspections and clinical findings to document symptoms and raise suspicions of CBPP and that serological surveillance was not carried out. The Group further noted that Norway monitored CBPP as an integrated part of surveillance aimed at respiratory diseases in cattle. In this regard, the Group took note of the presence of active surveillance for *Mycobacterium tuberculosis complex* (including laboratory investigation) and other respiratory viral diseases such as Bovine herpes virus-1 (BoHV-1) as well as Bovine Viral Diarrhoea Virus (BVDV). The Group also considered the reported number of cattle slaughtered outside a slaughterhouse insignificant to have an impact on the CBPP surveillance programme.

Norway reported that it had never detected a CBPP-suspect case or submitted samples for analysis at post-mortem examination. However, upon request, Norway provided a record of abattoir surveillance on lung lesions, and follow-up laboratory investigations including differential diagnosis.

The Group acknowledged that Norway had a protocol in which CBPP-suspected samples would be collected by the NFSA and submitted to the National Veterinary Institute (NVI), which would ship the samples to one of the WOAHP Reference Laboratories. Nevertheless, the Group recommended that Norway develop clear procedures for the NVI to collect, manage, and ship suspected CBPP material to a WOAHP Reference Laboratory and establish a formal arrangement in place with a WOAHP Reference Laboratory for CBPP diagnosis to enhance its preparedness in case of CBPP suspicion.

The Group noted that meat inspection in Norway was performed by NFSA official veterinarians and auxiliaries who were appropriately trained and evaluated before being approved for the position. The Group was concerned that the training and continuing professional education programmes did not have specific modules for recognising CBPP clinical signs and post-mortem findings and relied exclusively on WOAHP's technical CBPP disease card for disease recognition and the initial undergraduate academic training. The Group was also concerned with the absence of simulation exercises for CBPP and the lack of any plans to do so. The Group concluded that the absence of training and awareness programmes on CBPP in recent years, at least for the meat inspectors and laboratory pathologists responsible for abattoir surveillance and post-mortem diagnosis, may compromise the sensitivity of the surveillance system. The Group recommended that Norway implement more specific awareness and training activities focusing on CBPP disease recognition, particularly targeting abattoir surveillance. In addition, Norway should plan a simulation exercise for exotic diseases, including CBPP.

vi. Regulatory measures for the prevention and early detection of CBPP

The Group agreed that regulatory measures to prevent and control foreign animal diseases, including CBPP, were in place and noted that Norway is surrounded by one country having an official CBPP-free status recognised by WOAHP and two others that do not. The Group further noted that these two countries had no reports of CBPP for over 20 years and that the risk of introduction of CBPP into Norway through its neighbours was, therefore, low.

Norway provided the veterinary certificates describing the conditions for importation of bovine animals and genetic material, and the Group was satisfied with the import conditions.

The Group acknowledged the presence of a draft general contingency plan for all notifiable animal diseases and a field manual with detailed information on sampling, postmortem examination, and other field operations. In the event of an outbreak or suspicion of CBPP, Norway would implement the general contingency plan for animal diseases, which required the country to carry out relevant measures laid down in the European Economic Area (EEA) Agreement, EU's R2020/687, implemented in National Regulation No. 634. The Group was, however, concerned that the contingency plan had no mention of CBPP detailing clear instructions on how to proceed from suspicion to disease confirmation or exclusion. On consulting Norway, the country responded that the CBPP-specific plan would be completed by the second half of 2024

and that there were no plans to conduct a simulation exercise for CBPP or any disease with similar clinical signs. The Group recommended that the CBPP-specific plan include the chain of actions from the point of detection of a clinical suspicion, necropsy, submission of samples for laboratory confirmation of disease, and differential diagnosis.

vii. Compliance with the questionnaire in Article 1.10.1.

The Group agreed that, taking in to account the additional information provided in response to the questions raised, the dossier was compliant with the questionnaire in Article 1.10.1. of the *Terrestrial Code*.

Conclusion

Considering the information submitted in the dossier and the answers received from Norway to the requests for additional information, the Group concluded that the application was compliant with the requirements of Chapter 11.5., and the questionnaire in Article 1.10.1. of the *Terrestrial Code*. The Group, therefore, recommended that Norway be recognised as a country free from CBPP.

The Group recommended that evidence of the following information be submitted to WOAHP when Norway reconfirms its CBPP status (also detailed in the relevant sections above):

- Submission of the finalised CBPP contingency plan which should include clear procedures for the NVI to collect, manage, and ship suspected CBPP material to WOAHP Reference Laboratories, including a formal arrangement for CBPP diagnosis with a WOAHP Reference Laboratory.
- An updated record of abattoir surveillance reports capturing pneumonic lesions and lesions suggestive of CBPP. This information should include data on any suspicions detected, follow-up laboratory investigations covering differential diagnosis, and control measures applied.
- Implementation of more specific awareness and training activities focusing on respiratory diseases, including CBPP disease recognition, particularly targeting abattoir surveillance (meat inspectors and laboratory pathologists responsible for abattoir surveillance and post-mortem diagnosis). This information should include, but not be limited to, a course guide (programme, topics covered), schedule (envisaged frequency) and dates, attendance lists, and duration of the training(s).

In addition, the Group advised Norway to:

- Plan a simulation exercise for exotic diseases, including CBPP;
- Formally monitor the performance of the surveillance programme for respiratory diseases, including CBPP.

Minutes from the Scientific Commission meeting, 12-16 February 2024:

The Commission strongly recommended that, should Norway wish to import live cattle from countries not officially recognised CBPP free by WOAHP in the future, such imports should comply with Chapter 11.5., (i.e. live animals should only be imported for slaughter following the provisions of Article 11.5.8. or if not destined to slaughter, cattle should only be imported from countries officially recognised as CBPP free.) Otherwise, Norway should provide documented evidence that Chapter 5.3 has been followed to demonstrate that the alternative measures applied to such imports achieve an equivalent level of risk mitigation as the provisions of Chapter 11.5.

4. Evaluation of applications from Members for the endorsement of an official control programme for CBPP

No applications were received for evaluation during this cycle.

5. Any other business

The Group discussed the need for formal agreements with WOAH Reference Laboratories for confirmation of CBPP suspicions and considered that, as described in the CBPP questionnaire Chapter 1.10. of the *Terrestrial Code*, it was important that the applicant country demonstrated its preparedness to address any suspicions promptly. In addressing Sections 4 and 5 of the CBPP questionnaire, (i.e., Articles 1.10.1. and 1.10.2.), the application should present actions to be taken, by whom, costs, shipping arrangements, and timelines for actions to ensure any CBPP suspicion is managed in a timely manner. Therefore, the Group agreed that it was unnecessary to develop a separate/specific template for this purpose, but strongly encouraged future applicant Members to clearly describe the formal arrangements in place when responding to the questionnaire.

6. Adoption of the report

The Group reviewed the draft report and agreed to circulate it electronically for comments before the final adoption. Upon circulation, the Group agreed that the report captured the discussions.

.../Appendices

Appendix 1 Terms of reference

VIRTUAL MEETING OF THE *AD HOC* GROUP ON THE EVALUATION OF CONTAGIOUS BOVINE PLEUROPNEUMONIA (CBPP) STATUS AND ENDORSEMENT OF OFFICIAL CONTROL PROGRAMMES OF MEMBERS

5-7 December 2023

Terms of reference

Purpose

The purpose of the *ad hoc* Group on the evaluation of contagious bovine pleuropneumonia (CBPP) status of Members (the Group) is to evaluate applications from Members for official recognition of CBPP-free status and for endorsement of official control programmes for CBPP.

Background

In accordance with the [procedure for official recognition of animal health status](#), Members can be officially recognised by WOAAH as having a CBPP-free status or an official CBPP control programme endorsed by WOAAH through the adoption of a resolution by the World Assembly of Delegates (the Assembly) in May every year. A Member wishing to apply for the official recognition of its CBPP-free status or for the endorsement of its official CBPP control programme by WOAAH should complete and submit the relevant [questionnaire](#) laid out in Chapter [1.10](#) of the *Terrestrial Animal Health Code (Terrestrial Code)* and comply with all requirements specified in the *Terrestrial Code*. The Scientific Commission for Animal Diseases ([Scientific Commission](#)) is responsible for undertaking, on behalf of the Assembly, the assessment of Members' applications for their compliance with WOAAH standards. The assessment carried out by the Scientific Commission is based on the recommendations formulated by a relevant *ad hoc* Group. *Ad hoc* groups are convened under the authority of and report to the Director General.

Specific issues to be addressed

The Group will evaluate Members' applications in detail on their compliance with the requirements specified in the *Terrestrial Code* for CBPP. Based on the evaluations, the Group will provide its conclusions and recommendations to the Scientific Commission.

Prerequisites

The Group members should:

- Sign the Undertaking on Confidentiality of information (if not done already);
- Complete the Declaration of Interest Form;
- Understand that the membership of the Group may be retained between its meetings to ensure continuity of the work.

Actions to deliver

Before the meeting

Upon reception of an application from a Member, the Status Department (SD) conducts a preliminary screening to check the conformity of the dossier (structure of the dossier in accordance with the SOP and with the questionnaire under Chapter [1.10](#) of the *Terrestrial Code*, main sections of the questionnaire, regular notification to WOAAH, payment of the fee, Performance of Veterinary Services (PVS) report, etc.). If an information gap is identified, the SD requests additional information from the Member.

As the PVS reports are bound by the rules on confidentiality of information of the WOAAH, the SD and experts will consider for the evaluation the available PVS report(s) if not obsolete (PVS reports from more than five years ago) or confidential.

The SD will send the working documents to the Group, including the dossiers received from applicant Members, at least one month before the Group meeting (i.e., **6 November 2023**).

The experts can request support from the SD at any time.

The SD suggests the nomination of a Chair and Rapporteur for the Group's consideration.

The SD can suggest a preparatory meeting with the Chair, the Rapporteur or all experts to address specific points in advance, if needed.

The experts are expected to:

- Be familiar with Chapters [1.10](#), and [11.5](#), of the *Terrestrial Code*;
- Evaluate and study in detail all dossiers provided by WOAAH;
- Take into account any other information available in the public domain that is considered pertinent for the evaluation of the dossiers;
- Summarise the dossiers according to the *Terrestrial Code* requirements by completing the summary tables provided by the SD (the summary tables will be provided at a later stage along with the working documents for the meeting). Experts are expected to capture and summarise in each corresponding section of the summary table the main gaps as well as strengths identified during the assessment of the dossiers, using extracted texts or reference to pages/annexes from the application;
- Draft questions to the applicant Members whenever the analysis of the dossiers identifies incomplete or unclear information;
- Submit to the SD the completed summary tables for each application together with possible questions for the applicant Members at least 10 working days before the teleconference and preferably by **20 November 2023**;

The SD will compile the summary tables and the questions to be forwarded to the applicant Members before the teleconference. All subsequent information and material provided by a Member will be forwarded to the Group.

During the meeting

- Agree on the appointment of the Chair and Rapporteur of the meeting (the Chair will lead the discussion and the Rapporteur will ensure that the report reflects the discussion and captures the detailed assessment of the dossiers);
- Mention any potential conflict of interest and, if relevant, withdraw him/herself from the discussion;
- Contribute to the discussions;
- Provide a detailed report in order to recommend, to the Scientific Commission, the Member(s) and/or zone(s) to be recognised (or not) as free from CBPP and/or the official control programme of Member(s) to be endorsed by WOAAH and to indicate any information gaps or specific areas that should be addressed in the future by the applicant Members.

If during the teleconference the Group decides that additional information should be requested from an applicant Member before an informed conclusion can be drawn, the SD can request it and forward the additional information to the Group at a later date. The Chair is responsible for coordinating the finalisation of the assessment and for ensuring that the views of all members of the Group are taken into consideration.

Should the Group not be able to complete its Terms of Reference during this meeting, experts' contributions will be solicited after the meeting, including by teleconference if needed.

After the meeting

The SD will circulate the draft report after the teleconference is over. Experts are expected to contribute to the finalisation of the report within approximately one week.

The SD will circulate the final version of the report to the Group once endorsed by the Scientific Commission and is published online.

Deliverables

A detailed report to recommend to the Scientific Commission whether an applicant Member(s) should be (or not) recognised with an official CBPP-free status or an official CBPP control programme endorsed by the WOAAH. The report should indicate any information gaps or specific areas that should be addressed in the future by the Members.

Reporting / timeline

WOAH will circulate the draft report no more than seven days after the teleconference (no later than 14 December 2023) and the Group will finalise its report within ten days (indicative deadline: 22 December 2023).

Appendix 2 Agenda

**VIRTUAL MEETING OF THE *AD HOC* GROUP ON THE EVALUATION
OF CONTAGIOUS BOVINE PLEUROPNEUMONIA (CBPP) STATUS
AND ENDORSEMENT OF OFFICIAL CONTROL PROGRAMMES OF MEMBERS**

5-7 December 2023

AGENDA

1. Opening
 2. Adoption of the agenda and appointment of Chair and Rapporteur
 3. Evaluation of applications from Members for official recognition of CBPP-free country status:
 - a. Czech Republic
 - b. Norway
 4. Any other business
 5. Finalisation and adoption of the report
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Appendix 3 List of Participants

AD HOC GROUP ON THE EVALUATION OF CONTAGIOUS BOVINE PLEUROPNEUMONIA (CBPP) STATUS AND ENDORSEMENT OF OFFICIAL CONTROL PROGRAMMES OF MEMBERS

5-7 December 2023

List of Participants

MEMBERS

Dr Ahmed el Idrissi MOROCCO	Dr Flavio Sacchini Istituto Zooprofilattico Sperimentale dell'Abruzzo e del Molise ITALY	Dr Musa Mulongo International Livestock Research Institute KENYA
Dr Lucía Manso-Silván CIRAD FRANCE	Dr Chandapiwa Marobela- Raborokgwe Botswana National Veterinary Laboratory BOTSWANA	Dr Marcelo Fernandes Camargos Ministério da Agricultura e Pecuária BRAZIL

REPRESENTATIVE OF THE SCIENTIFIC COMMISSION

Dr Silvia Bellini
Istituto Zooprofilattico Sperimentale
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