Final report

EFTA Surveillance Authority mission to

NORWAY

from 23 to 27 April 2012

regarding the application of EEA legislation related to

contingency plans for epizootic diseases, in particular foot and mouth disease and classical swine fever

Please note that comments from the Norwegian competent authorities to factual errors in the draft report have been included in underlined italic print in the body of the report. Comments and information on the corrective actions already taken and planned by the Norwegian competent authorities are included in Annex 3 and referred to in footnotes in underlined italic print.
Executive Summary

This report describes the outcome of a mission carried out by the EFTA Surveillance Authority in Norway from 23 to 27 April 2012.

The objective of the mission was to verify that the resources and arrangements put in place in Norway to implement the European Economic Area (EEA) requirements for contingency plans in the event of one or more outbreaks of epizootic diseases, with special regard to foot-and-mouth disease (FMD) and classical swine fever (CSF) were in compliance with the EEA legislation.

The mission team found that the situation in Norway concerning the implementation of the EEA requirements related to emergency diseases situations and in particular contingency plans for FMD and CSF was satisfactory.

With regards to specific requirements, the mission team noted that a clear chain of command was in place and that legal power in peace time and emergency and financial resources to handle crisis were available. Training has been offered to the staff of the Norwegian Food Safety Authority (NFSA) for both epizootic diseases and communication during outbreaks. In the district office visited on-the-spot, appropriate kits to deal with emergencies situations were available and properly maintained. The national reference laboratory had available analytical methods to diagnose FMD and CSF. However, these methods were not accredited. Norway demonstrated close cooperation with the other Nordic-Baltic countries, except Russia, e.g. real time exercises have been arranged across the borders.

The following shortcomings were noted by the mission team in relation to other specific requirements laid down in EEA-legislation:

- The NFSA has not fulfilled the EEA requirements laid down in the relevant directives related to submission of appropriate documentation and information to the Authority;
- Inconsistency was observed in relation to the requirements laid down in the relevant directives for periodical revisions of contingency plans, including practical instructions;
- The cooperation between the NFSA and other authorities at regional level was not always appropriate;
- Certain problems were identified concerning the registration of animal movements in the national livestock registry and in the collection centre visited;
- In the reindeer farming system the absence of a documented movement control during certain operations, allowing several groups of animals of different origin to be manipulated at collection centres, could constitute a serious challenge in the control and eradication of potential epizootic.

The report includes a number of recommendations addressed to the Norwegian competent authority aimed at rectifying the identified shortcomings and enhancing the control system in place.
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1 Introduction

The mission took place in Norway from 23 to 27 April 2012, as part of the EFTA Surveillance Authority’s (the Authority) planned mission programme. The mission team comprised two inspectors from the Authority and one national expert.

The opening meeting was held with representatives of the Norwegian Food Safety Authority (NFSA) on Monday 23 April 2012 at the head office of the NFSA in Sandnes. The meeting was arranged as a video conference, allowing the head office of the NFSA located in Oslo and the Ministry of Agriculture and Food to participate.

At the meeting, the mission team confirmed the objectives and the itinerary of the mission. The Norwegian representatives provided additional information to that set out in the reply to the Authority's pre-mission questionnaire.

Throughout the mission, the mission team was accompanied by representatives of the NFSA head office together with representatives of the relevant regional and district offices.

A final meeting was held with representatives of the NFSA, the Ministry of Agriculture and Food and the Norwegian Veterinary Institute in Oslo on 27 April 2012.

The abbreviations used in the report are listed in Annex 1.

2 Scope and objectives of the mission

The following main European Economic Area (EEA) Acts and related EEA legislation fall within the scope of the mission:


The objective of the mission was to assess the Norwegian competent authorities’ application of the above mentioned legislation and additional legislation. All legislation referred to in this report is listed in Annex 2 to this document.
A particular focus was paid on the evaluation of the resources and arrangements put in place to implement the EEA requirements for contingency plans in the event of one or more outbreaks of epizootic diseases, with special attention to foot-and-mouth disease (FMD) and classical swine fever (CSF).

The evaluation included the gathering of relevant information, and appropriate verifications, by means of interviews/discussions, review of documents and records, and on-the-spot inspections, to verify that Norway has established well-developed and resourced contingency plans in order to be prepared to implement immediate emergency measures.

The meetings with the competent authorities and the visits during the mission are listed in Table 1.

**Table 1: Competent authorities and establishments/sites visited during the mission**

<table>
<thead>
<tr>
<th></th>
<th>Number</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Competent authorities</td>
<td>2</td>
<td>Initial meeting and a final meeting between the mission team and the Norwegian central competent authorities</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>A district office was visited on-the-spot</td>
</tr>
<tr>
<td>Disease Control Centres</td>
<td>3</td>
<td>The National Disease Control Centre (NDCC) and two Local Disease Control Centres (LDCC)</td>
</tr>
<tr>
<td>Central database</td>
<td>1</td>
<td>The meeting was arranged as a video conference</td>
</tr>
<tr>
<td>Other authorities/public bodies</td>
<td>2</td>
<td>The Reindeers Administration Body for West Finnmark attended the meeting in the Regional office for Troms and Finnmark. In addition, a short telephone conference was held with the regional environmental authority (County Governor) in that region</td>
</tr>
<tr>
<td>Animal collection centres</td>
<td>2</td>
<td>One for cattle and pigs and one for reindeer</td>
</tr>
<tr>
<td>Food establishment</td>
<td>1</td>
<td>A seasonal slaughterhouse for reindeer not in operation at the time of the visit</td>
</tr>
<tr>
<td>Livestock holding</td>
<td>1</td>
<td>A dairy cattle farm. One of the three owners of the farm was also a representative of the local farmer association</td>
</tr>
<tr>
<td>Laboratory</td>
<td>1</td>
<td>The National Reference Laboratory (NRL) for FMD and CSF and other epizootic diseases falling within the scope of this mission</td>
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</table>
3 Legal basis for the mission

The legal basis for the mission was:

a) Point 4 of the Introductory Part of Chapter I of Annex I to the EEA Agreement;

b) Article 1(e) of Protocol 1 to the Agreement between the EFTA States on the Establishment of a Surveillance Authority and a Court of Justice (Surveillance and Court Agreement);

c) Commission Decision 98/139/EC of 4 February 1998 laying down certain detailed rules concerning on-the-spot checks carried out in the veterinary field by Commission experts in the Member States; and


4 Background - Previous missions

Relatively recent outbreaks of epizootic disease in previously disease-free territories within the European Union (e.g. FMD in Bulgaria in 2011 and CSF in Lithuania in 2011) and the increase of African swine fever (ASF) in Russia and Caucasus region in 2011-2012 demonstrated the threat posed by the sudden spread of former exotic diseases, and further highlighted the need for well-developed and resourced contingency plans in order to be prepared to implement immediate emergency measures.

The last mission to Norway regarding the application of EEA legislation related to the objective of this mission was carried out in October 2005. The final report from this mission can be found on the Authority’s website (www.eftasurv.int).

5 Main findings and conclusions

5.1 Legislation and implementing measures

Legal requirements
Article 7 of the EEA Agreement states that acts referred to or contained in the Annexes to the Agreement are binding upon the Contracting Parties and shall be, or be made, part of their internal legal order.

Findings
According to information provided by the NFSA in its reply to the pre-mission document of the Authority, the legal basis concerning the epizootic diseases falling within the scope of this mission and listed by the Office International des Epizooties (International Animal Health Bureau – OIE) is the Norwegian Act No. 124 of 19 December 2003 relating to food safety and plant and animal health (the Food Act). Proposals of changes to the Food Act would be drafted by the Ministry of Agriculture and Food. Any changes are to be decided by the Parliament. Power to issue regulations within closer defined areas within the scope of the Food Act is given to the Ministry of Agriculture and Food, according to delegation of 19 December 2003 nr.1790. According to delegation of 5 May 2004, power to issue regulations within the scope of some of the articles of the Food Act is given to the NFSA.
According to the information provided by the NFSA all legislation falling within the scope of this mission has been transposed in the Norwegian legislation.

The Norwegian regulations relating to the control and eradication of animal diseases still make reference to the OIE classification dismissed in 2005 (list A, B and C). The NFSA informed the mission team that it is in the process of reorganised the listing of diseases.

**Conclusions**

The relevant EEA legislation concerning the epizootic diseases covered by the scope of this mission has been made part of the Norwegian legal order.

### 5.2 Competent authorities

*Designation of competent authorities and their staff, coordination and cooperation between and within competent authorities*

**Legal requirements:**

Article 4(1) of Regulation (EC) No 882/2004 requires Member States to designate the competent authorities responsible for the official controls set out in the regulation.

Article 4(2)(c) of Regulation (EC) No 882/2004 states that the competent authorities shall ensure that they have, or have access to a sufficient number of suitably qualified and experienced staff so that official controls and control duties can be carried out efficiently and effectively.

Article 4(3) of Regulation (EC) No 882/2004 requires that efficient and effective coordination and cooperation shall be ensured between all the competent authorities involved in official controls; Article 4(5) of the same regulation states that when, within a competent authority, more than one unit is competent to carry out official controls, efficient and effective coordination and cooperation shall be ensured between the different units.

Annex XVII(6) to Directive 2003/85/EC states that Member States shall ensure the cooperation between the NDCC, the LDCCs and environmental competent authorities and bodies in order to ensure that actions on veterinary and environmental safety issues are appropriately coordinated.

**Findings**

According to information provided by the NFSA in its reply to the pre-mission document of the Authority, the NFSA is the only competent authority involved in the control and monitoring of epizootic diseases. The staff met by the mission team was familiar with the framework and roles defined in the documents prepared by the NFSA relating to contingency plans. The NFSA had organised several training courses with program covering contagious diseases (see chapter 5.4.10).

In case of a zoonosis, the district offices of the NFSA cooperate with the municipal chief physician, the regional offices with the County Governor and his staff and the head office with the Directorate of Health, as was the case during the outbreak of swine flu in 2010.

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1 Further information on the organisation of the competent authorities and how official controls are carried out in Norway is given in the country profile available on the Authority’s website: [http://www.eftasurv.int/internal-market-affairs/fields-of-work/food-safety/country-profiles/](http://www.eftasurv.int/internal-market-affairs/fields-of-work/food-safety/country-profiles/)
According to the same information, and in relation to the diseases falling within the scope of this mission, contacts have been established between the NFSA and other relevant authorities. In particular, at regional level, contact has been established through the contingency board of the County Governor. The County Governor has a coordinating responsibility in its county. Its role is to supervise and give advice and information on issues of emergency planning. It is also involved in handling of crisis. The County Governor coordinates activities of the police, the army and the civil defense in crisis. Disagreement between the NFSA and the County Governor is handled by the Ministry of Justice. The LDCCs, established at regional level, may contact the local police directly in order to get the necessary assistance for blocking roads and closing off areas, and the County Governor for assistance for establishment of disinfection posts etc.

The mission team noted that the contingency plans (CP) and the administrative contingency plan (ACP) of the NFSA contain information/instructions on how to contact the County Governor and police in order to implement this cooperation. However, the mission team observed that the regional environmental authorities, which are part of the County Governor’s office, have not been fully involved in the establishment of appropriate measures which should be taken in case of emergencies. In one region, the environmental authorities did not take part in the meeting with the mission team organized by the NFSA although they had been invited; in another region, they participated by phone. In the first region mentioned above, the NFSA confirmed that no agreements had been established with the environmental authorities on how to dispose of killed animals during an outbreak (burial or burning, see also chapter 5.4.9) while in the second one it was clear that outbreak of disease would constitute a force majeure and that the environmental authorities in such case would not oppose plans of burial as disposal of animals.

In one of the regions visited, the mission team met a representative of the Reindeers Administration Body which is responsible for administration of reindeers and grazing areas, control function and count of the reindeers in fall. A particular responsibility is the control of fences along borders with Russia, Finland and Sweden in cooperation with the correspondent authorities of the other countries. During this meeting, the mission team also discussed the role of another public body, Statens Naturoppsyn (SNO) under the Norwegian Directorate for Nature Management. Animal holdings owners (production animals including reindeers) may claim compensation from the Norwegian state for animals that are killed by predators in the field. One of the tasks of the SNO is to assist the owners in providing documentation for cause of death of livestock for such compensation claims. Dead reindeers are reported to the SNO which will carry out random examination of carcasses to verify that the animal has succumbed to predators. If the SNO identifies lesions corresponding to an attack no further examinations of the carcasses are carried out, not taking into account possible underlying causes. No training in looking for underlying causes such as e.g. infectious diseases has been provided to the staff of the SNO.

The mission team noted that a good cooperation was established between the NFSA and the Norwegian Veterinary Institute (NVI) with frequent contacts between the two related to the services provided by the NVI such as diagnosis, risk assessment, scientific advice and detailed maps.

In relation to the coordination within the NFSA, the mission team noted that a suspicion of epizootic diseases in swine had been aroused at local level of the NFSA at least twice in 2012, in February and April. These suspicious cases were not known to the head office of the NFSA, having being assessed by the district offices in cooperation with the NVI
without informing the regional offices or the head office. The head office of the NFSA confirmed to the mission team that they were not satisfied with this procedure.

Conclusions
Competent authorities responsible for the official controls falling within the scope of this mission have been designated in conformity with Article 4(1) of Regulation (EC) No 882/2004.

The NFSA has access to a sufficient number of suitably qualified and experienced staff as required by Article 4(2)(c) of Regulation (EC) No 882/2004.

In relation to Article 4(3) of Regulation (EC) No 882/2004 efficient and effective coordination and cooperation was ensured between the NFSA, the Reindeers Administration Body and the NVI, although limits in the cooperation were observed between the NFSA and the environmental authorities, in particular on how to dispose of killed animals during an outbreak (also in contrast with the requirements laid down in Annex XVII(6) to Directive 2003/85/EC) and between the NFSA and the SNO on causes of death for fallen stock.

Finally, efficient and effective coordination and cooperation between the different district veterinary offices and the other levels of the NFSA as laid down in Article 4(5) of the same Regulation was not fully ensured in case of suspicion of a contagious disease.

5.3 Epidemiological situation, disease surveillance and outbreaks

Legal Requirements
In accordance with Council Directive 82/894/EEC, a Member State must notify, to the Authority and to the other Member States, primary and secondary outbreaks of certain diseases listed in the Annex and lifting of restrictions. Similar provisions exist in the different disease control directives.

Findings
Reporting outbreaks of animal diseases to other Member States and the Authority is the responsibility of the head office of the NFSA. The Norwegian authorities report regularly, through the Animal Disease Notification System as well as in the framework of meetings of the Standing Committee for the Food Chain and Animal Health on their situation regarding epizootic diseases. In addition there is an agreement on early warning between the Nordic countries and between these countries and the EU Commission and the Authority in case of suspicion or outbreak of terrestrial or aquatic diseases.

As member of the OIE, Norway also reports outbreaks of animal diseases to the OIE according to the requirements laid down in the Terrestrial Animal Health Code. This includes notification within 24 hours of listed diseases, weekly reports, bi-annual reports and annual reports.

According to information provided by the NFSA in its reply to the pre-mission document of the Authority, animal health controls rely on the passive and active surveillance systems. The passive surveillance relies on the reporting system and all diseases relevant for this mission must be reported in the case of outbreak. According to the Food Act, everyone who suspects an animal disease which may cause considerable social

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2 Further information on passive and active surveillance in Norway is given in the country profile.
consequences shall immediately notify the NFSA. In relation to active surveillance, Norway has on-going surveillance programs for several animal diseases which are not falling within the scope of this mission.

Two suspicions of ASF were reported in February and April 2012 but they were immediately excluded as contagious diseases. No other suspicions of epizootic diseases falling within the scope of this mission have been reported since 2009.

Annual data for 2009 and 2010 (2011 is not yet completed) from surveillance programs in place for other epizootic diseases can be found at the NVI website.

Conclusions
The NFSA has a system in place respecting its notification and information obligation in accordance with the relevant EEA legislation. From the information provided, the current situation regarding epizootic diseases is satisfactory and measures are in place regarding surveillance for these diseases as required by the EEA legislation.

5.4 Contingency plans

5.4.1 Documentation, coverage and distribution of the contingency plans (operational, instruction and diagnostic manuals)

Legal Requirements
Article 72 of Directive 2003/85/EC requires Member States to draw up a CP specifying the national measures necessary to maintain a high level of FMD awareness and preparedness, which should be implemented in the event of an outbreak of that disease. It provides for the CP to be sent to the Authority for approval (Article 92 of the said directive).

Article 22 of Directive 2001/89/EC requires Member States to draw up a CP specifying the national measures to be implemented in the event of an outbreak of CSF. It provides for the CP to be sent to the Authority for approval (Article 29 of the said directive).

A specific article in each of the relevant control directives for epizootic diseases falling within the scope of this mission obliges the Member States to have a CP in place and to submit it to the Authority for approval (Article 21 of Directive 2002/60/EC for ASF, Article 17 of Directive 92/35/EEC for African horse sickness (AHS) and Article 20 of Directive 92/119/EEC for the control of certain animal diseases and specific measures relating to swine vesicular disease-SVD).

Annex XVII(9) to Directive 2003/85/EC requires Member States to have an operational manual available prescribing the details and practicalities of the procedures, instructions and measures to be employed in the handling of an FMD outbreak. Article 72(3) requires the CP to provide for measures in a worst-case scenario as described in Annex XVII(12).

Similar provisions, except for those concerning the worst case scenario, exist for the other diseases falling within the scope of this mission; For CSF and ASF an instruction manual must be provided as required by Annex VII(e) and Annex VI(e) respectively, while for AHS, SVD and other diseases falling within the scope of the mission, the specific provisions are detailed in Annexes IV (6 to 9) of Directives 92/35/EEC and 92/119/EEC.
Article 17(3) of Directive 2001/89/EC and Article 18(3) of Directive 2002/60/EC require the Member State to have a diagnostic manual available for CSF and ASF respectively.

Findings
According to the country profile, the NFSA is responsible for managing a wide range of incidents. The NFSA representatives informed the mission team that in order to ensure effective management, one ACP has been established that outlines the chain of command, the organisation of staff/crisis centre, the warning systems and the system of communication covering all areas for which the NFSA is responsible. In addition to the ACP, Norway has, further to its obligations under the EEA Agreement, elaborated CPs against FMD, CSF, avian influenza and bluetongue. The CPs consist of an administrative and an operational part.

The first CP for FMD was sent to the Authority which approved the FMD CP in September 1995. This has been the only CP approved by the Authority in relation to the diseases which fall under the scope of this mission. The CP for FMD is available on the NFSA’s website.

The official CP for CSF and ASF is dated 2003, however, these plans have not been submitted to the Authority for approval. The mission team was informed that updated CPs for CSF and ASF have been prepared and has currently status as working documents. These are publicly available on NFSA’s website as well as the official CPs dated 2003. Diagnostic manuals for CSF and ASF were also found available and checked by the mission team. For the other diseases falling within the scope of the mission no CPs or manuals reporting the technical specifications have been prepared by the NFSA.

Conclusions
The NFSA fulfilled some of the requirements laid down in the EEA legislation concerning CPs, however, certain obligations have not been met in relation to the preparation of CPs related to the diseases falling within the scope of this mission and their submission for approval to the Authority. In particular, the NFSA has not submitted to the Authority for approval the CP for CSF (Article 29 of Directive 2001/89/EC) the CP for ASF (Article 21 of Directive 2002/60/EC) or CPs for other diseases falling within the scope of the mission (Article 17 of Directive 92/35/EEC for AHS and Article 20 of Directive 92/119/EEC for the control of certain animal diseases and specific measures relating to SVD).

5.4.2 Procedures for review and updating the contingency plans

Legal Requirements
Article 72(8) of Directive 2003/85/EC for FMD requires the Member State to notify the Authority of significant modifications in view of a possible approval of the amended plan. Article 72(10) of the same directive states that in any case, every five years each Member State shall update its CP in particular in the light of real-time alert exercises referred to in Article 73 and submit it to the Authority for approval.

Article 22(3) of Directive 2001/89/EC for CSF and Article 21(3) of Directive 2002/60/EC for ASF state that, in any case, every five years Member State shall update the CP and submit it to the Authority for approval.

Findings
After the NFSA was established in 2004, a revised ACP for FMD was prepared and sent to the Authority in spring 2005. A real-time alert exercise took place in autumn 2005. However, no revised versions of the CP have been received by the Authority since that exercise.
According to information provided by the NFSA in its reply to the pre-mission document of the Authority, there have been no further revisions since 2005 but the plan has been supplemented with several documents covering a wide range of measures as result of ongoing work and outcome of real-time alert exercises in the last years (see chapter 5.4.10).

The NFSA has produced a preliminary updated CP on CSF and ASF (still a working document) after nine years since the last CP.

Conclusions
The procedures for review and updating the CPs were not in conformity with the requirements laid down in the EEA legislation, in particular relating to the submission of revised version to the Authority (Article 72(8) of Directive 2003/85/EC, Article 22(3) of Directive 2001/89/EC and Article 21(3) of Directive 2002/60/EC) and the frequency of their updating (Article 22(3) of Directive 2001/89/EC for CSF and Article 21(3) of Directive 2002/60/EC for ASF).

5.4.3 Organisation, chain of command and resources
Legal Requirements
Annex XVII (2 and 3) to Directive 2003/85/EC requires the CP to contain provisions regarding resources and to establish a chain of command guaranteeing a rapid and effective decision-making process for dealing with FMD epizootics. Point 8 of the same annex states that provision must be made for adequate resources to ensure a rapid and effective campaign, including personnel, equipment and laboratory capacity.

Similar provisions exist for the other diseases falling within the scope of this mission.

Findings
According to information available in the country profile, crisis management is managed at two levels: a NDCC located at the head office and LDCCs which are located at the regional offices of the NFSA. At the local level the organisation in a contingency situation establishes that field commanders organise and manage the crisis in each district involved, under direct command of the LDCCs.

The LDCCs may contact the local police directly in order to get the necessary assistance for blocking roads and closing-off areas, and the County Governor for assistance for establishment of disinfection posts etc. (see chapter 5.2).

The mission team noted that the organisation of the NFSA and chain of command are clearly described in the ACP. The ACP contains the necessary detail on available staff and equipment. In particular the ACP contains indication of the members of the expert group. The chain of command in the NFSA is the same in peace time as in emergency situation.

A permanently operational coordinator of the NDCC was appointed and met by the mission team; other positions in staff includes responsible for epidemiological investigations, logistics, personnel, action group etc.

Up-dated contact lists for local organizations/operators etc who may be contacted during an outbreak are available on NFSA’s intranet.

A national on call duty staffed by officers from NFSA has been established. The procedures for the national on call duty are available on the NFSA’s intranet, including
instructions on how to freeze the situation and on the legal competence to adopt decisions (collective legal powers of NFSA when on call). The national on call duty receives all phone calls directed to any of the offices of the NFSA outside regular working hours. If the call concerns contagious diseases, the national on call duty should notify the regional levels of the NFSA. If the national on call duty fails to reach the first name(s) on the contact list, further calls are made until representatives of the relevant offices have been informed of the situation. According to representatives of the NFSA, normally the Regional Director General is reached, and the situation is evaluated in order to activate any emergency measures. Once the information is assessed the head office and the relevant district office may or may not be informed. It is the district officer which ensures the visit on-the-spot and the first assessment in the field. After that, information may be brought forward and staff established. However, as already explained in chapter 5.2.1, two suspicions of swine fever in 2012 have not been reported to the head office and have not been notified to the NDCC or to the LDCC.

Conclusions
The relevant provisions of the different EEA directives regarding organisation, chain of command and resources were complied with.

5.4.4 Communication

Legal Requirements
Article 74(3)(h) of Directive 2003/85/EC foresees the NDCC to be responsible for liaising with the media, while Article 76(2) requires the CP to foresee that the LDCCs be equipped with communication lines and information channels.

Similar provisions exist for the other diseases falling within the scope of this mission.

Findings
All NFSA regional offices, including some district offices, and all sections at head office who own outbreaks were offered training in communication skills. The numbers of persons that have attended communication courses are: eleven in 2009, 144 in 2010 and 125 in 2011.

NDCC and LDCCs have been equipped with the necessary communication tools (see description in chapter 5.5).

The NFSA website is regularly updated and provides information to the consumers including information related to the scope of this mission. The NFSA also published several leaflets concerning contagious diseases aiming at communicate to the public the risks of such diseases.

Conclusions
The requirements regarding communication in the event of disease outbreaks have been catered for in a comprehensive way.

5.4.5 Legal powers in "peace time" and in emergencies

Legal Requirements
Point 4 of Annex XVII to Directive 2003/85/EC foresees that the Member State must ensure the legal powers of the implementation of the CP and allow for a rapid and successful eradication campaign.

Similar provisions exist for the other diseases falling within the scope of this mission.
**Findings**
The NFSA keeps the same legal powers during “peace-time” and emergencies. Legal provisions are in place to ensure that the Ministry of Agriculture and Food may adopt regulations establishing zones during emergencies without public hearing. Provisions are also in place that entitles the NFSA to order staff and private veterinarians if necessary.

The mission team did not have any indication that there would be a lack of legal powers as these are granted to the NFSA by the legislation in place which allows the following within the three levels of the NFSA:

- the head office establishes the NDCC when needed, decides upon strategies to combat diseases (stamping out or vaccination) and prepares regulations that establish zones (protection and surveillance) for the Ministry of Agriculture and Food;
- the regional office establishes the LDCC when needed, an LDCC will have the legal powers to adopt decisions at regional and local level and adopts decisions in accordance with the strategy decided by the NDCC (vaccination or stamping out);
- the district offices may adopt decisions for movement restrictions.

In addition, as mentioned in chapter 5.2, there is a good collaboration with the police authorities which can be called upon if any problem were to arise.

**Conclusions**
The requirements regarding legal powers in “peace time” and in emergencies have been adequately addressed.

5.4.6 **Financial provisions - eradication, compensation**

**Legal Requirements**
Point 2 of Annex XVII to Directive 2003/85/EC foresees that the CP must make provisions for ensuring access to emergency funds, budgetary means and financial resources to cover all aspects of the control and eradication of the epizootic.

Similar provisions exist for the other diseases falling within the scope of this mission.

**Findings**
In case of outbreaks of diseases falling within the scope of this mission, compensation to livestock owners is ensured by provisions laid down in the Food Act (Section 22). The procedure will be administered by the Norwegian Agricultural Authority based upon data collected by the NFSA, responsible for the “kill and count” process.

The Norwegian State budget contains specific chapter for extra funding in case of emergencies. The NFSA head office has established a procedure that outlines how to apply for extra funding.

**Conclusions**
Procedures complying with the relevant legal obligations are in place to ensure the necessary funding in the event of diseases outbreaks.

5.4.7 **Epidemiological capacity, laboratories**

**Legal Requirements**
Point 8 of Annex XVII to Directive 2003/85/EC foresees that the CP must make provisions for having laboratory capacity.
Similar provisions exist for the other diseases falling within the scope of this mission.

Article 12(1) of Regulation (EC) No 882/2004 states that the competent authority shall designate laboratories that may carry out the analysis of samples taken during official controls. Article 12(2) states that competent authority may only designate laboratories that operate and are assessed and accredited in accordance with the European standards; in Article 12(3) it is mentioned that accreditation and assessment of testing laboratories may relate to individual test or groups of tests.

**Findings**
The CPs checked by the mission team gave an overview of the diagnostic capacities for FMD, CSF and ASF. In addition, the operational manual for FMD and the working documents for CSF and ASF, including diagnostic manuals, contained detailed information on diagnosis as well as an epizootiological inquiry forms. The mission team visited a district office on-the-spot and found that a form for epizootiological inquiry in case of suspicious of CSF was available in the contingency field kits checked.

The diagnosis and confirmation of some of the animal diseases covered by the present mission is done exclusively in the NVI which acts as national reference laboratory (NRL) for the diseases covered by this mission. The NVI carries out tests for FMD, CSF, ASF and SVD. The NVI has an agreement with the Technical University of Denmark regarding FMD and cooperation with Danish and Swedish NRLs in relation to other contagious diseases. The NVI did not have analytical methods available to perform diagnosis of diseases as AHS and the exotic disease listed in Annex I of Directive 92/119/EEC (except ASF). However, the responsible person of the NVI informed the mission team that contacts with the relevant Community Reference Laboratories (CRLs) would be promptly established if the epidemiological situation in Europe were to give to raise concerns in relation to those exotic diseases.

The analytical tests available at the NVI for some of the diseases falling within the scope of this mission are the Reverse transcription polymerase chain reaction (RT-PCR) for FMD, CSF and SVD, PCR (for ASF) and the Enzyme Linked Immunosorbent Assay (ELISA) for FMD, CSF, SVD and ASF.

The mission team met the staff which, at the different sections of the NVI, who would deal with an emergency situation concerning animal diseases; more than 20 scientists and technicians are employed in each of the section for virology and immunology with a relevant number of them familiar with the methods of analysis in use. If a situation should occur, more staff would rapidly be available.

The immediate capacity for RT-PCR/PCR is 44/day (for FMD, CSF, ASF and SVD). The maximum capacity (which will be achieved after one week) is twice the initial capacity. The immediate capacity for all ELISAs is 600/day which also is the maximum capacity.

The NVI, including the Sections for virology and immunology, is an accredited laboratory, but the analyses for FMD, CSF, ASF and SVD are not accredited. The mission team was however informed that the NVI is in the process of getting approval for operating under the flexible accreditation regime.

Personnel at the NVI have participated in meetings at European level, both regarding laboratory methods and regarding alertness and control. The departments of the NVI participate regularly to ring tests arranged by the CRLs.
The NVI took part to the following real time alert exercises: in 2011 for ASF/CSF, in 2008 for Bluetongue and in 2005 for FMD and relevant reports have been issued by the NVI in relation to their participation.

The NVI handles a geographical information system producing detailed maps which could be made available to the NFSA on request and in case of an emergency situation.

Conclusions
The epizootiological inquiry forms which should provide the necessary information concerning outbreaks and contact herds were found available in the CPs checked by the mission team and in the contingency field kits checked on-the-spot.

The NVI is well prepared and competent personnel are employed. The use of analytical methods that are not accredited which could be used by the NRL in the context of official controls is not in conformity with the requirements laid down in Article 12(2) of Regulation (EC) No 882/2004.

5.4.8 Killing of animals in disease outbreaks
Legal Requirements
Point 9 of Annex XVII to Directive 2003/85/EC establishes that an operation manual should be available describing all actions and procedures needed to deal with an outbreak.

Similar provisions exist for the other diseases falling within the scope of this mission.


Findings
The instruction on killing animals in the context of disease contingencies contained description of animal welfare consideration as well as procedures to be respected during the killing. The mission team visited a district office on-the-spot and found that equipment for killing in contingency field kit was available. The Food Act (Article 13) specifies that staff from slaughterhouses could be required to intervene to kill animals during an outbreak bringing their own equipment for killing.

Conclusions
The necessary precautions have been taken to comply with the relevant requirements of the EEA legislation concerning killing of animals in disease outbreaks.

5.4.9 Cleaning and disinfection, disposal
Legal Requirements
Points 13 and 14 of Annex XVII to Directive 2003/85/EC require the CPs to include the necessary arrangement for disposal of the carcasses and animal waste resulting from the stamping-out operations.

Similar provisions exist for the other diseases falling within the scope of this mission.

Findings
In the district office visited on-the-spot, the mission team found available disinfectant which could be used for initial disinfection in case of an emergency situation. The mission team was also informed by the NFSA that a written agreement exists with a private
company to provide the competent authorities with appropriate quantity of disinfectant in case of needs. Three stores of this company are located nearby airports allowing the transport to the relevant sites in case of need and within a reasonable time. A revised version of the agreement valid from 1 July 2011 was presented to the mission team.

With regards to the disposal of animals, the NFSA confirmed to the mission team that rendering possibilities were limited in the country since only two establishments are approved for Category 1\(^3\) in Norway and that burning could be an unsuitable option from an environmental and public opinion point of view. The third option (burial) has been considered in the visited regions. The mission team pointed out inconsistencies in the implementation of such a procedure by the NFSA. As already mentioned in chapter 5.2, a limited cooperation has been until now put in place between the NFSA and the environmental authority of the County Governor in the pre-identification of appropriate places where burial could take place in case of urgent disposal for epizootic reasons. Furthermore, in both the regions visited, no preapproved sites had been identified and there had been no procedures established to ensure that possible runoff from burial sites was assessed by either the NFSA or other authorities such as the County Governor or municipalities.

Conclusions
The relevant requirements of the different directives in relation to cleaning and disinfection were complied with; however, the lack of appropriate arrangements for disposal of carcasses and animal waste resulting from the stamping out operations are not fulfilling the requirements laid down in Annex XVII(13 and 14) to Directive 2003/85/EC.

5.4.10 Training and real-time alert exercises

Legal Requirements
Point 11 of Annex XVII to Directive 2003/85/EC state that CP should contain provisions and arrangements for regular training of staff involved in contingency operations. This includes the organization of real-time exercises (Article 73 of the same Directive) and information to the Authority on their main results (Point 3 of Article 73).

Similar provisions related to training exist for the other diseases falling within the scope of this mission.

Alarm drills should be organized at least twice a year as laid down in Annex VII(g)(ii) to Directive 2001/89/EC and in Annex VI(f)(ii) to Directive 2002/60/EC for CSF and ASF respectively.

Findings
The mission team received a list of training sessions attended by staff of the NFSA. In particular five veterinarians from the epizootic disease competence group within the NFSA have attended the FMD training courses in Turkey and Kenya organized by the European Commission since 2009. Two of them have also been there afterwards as instructors. One of these veterinarians has also attended a field course on CSF in Germany. 40 veterinarians from the NFSA attended a three-day course in serious contagious and vector borne diseases. A course for veterinary inspectors in the NFSA was

\(^3\) Animal by-products not intended for human consumption as defined in Article 4 of Regulation (EC) No 1774/2002.
conducted in November 2011 where some of the topics were personal equipment and disinfection procedures. About 110 veterinarians attended this course.

According to information provided by the NFSA in its reply to the pre-mission document of the Authority, the regional offices should hold one real-time alert exercise annually involving district offices. These annual exercise can cover any topic and it is for the individual regional office to decide the scenario of the exercise based on a risk assessment identifying the most probable risk in that region. Contagious disease may not be identified as the most important risk in the region. According to information provided in the reply to the pre-mission document, five regional real-time exercises have been held in four different regions since 2007. According to the same information, the NFSA’s regional offices have been told by the head office to hold alarm drills in order to ensure contact with their external partners upon whom they rely on cooperation to handle an outbreak. Most times, these drills include an outbreak they wish to highlight to their external partners. In some cases, the drills conclude with a telephone conference in which handling of such an outbreak is discussed. They are also told to practice the logging system and in some cases an outbreak is included. A representative from the head office of the NFSA informed the mission team that alarm drills had been held to test the response time of the national on call duty outside regular working hours. However, these tests had not included the time needed for the national on call duty to establish contact with other relevant staff in e.g. the NDCC and the LDCCs.

At national level most sections at the NFSA’s head office which is responsible for outbreaks and incidents have held special training courses for their designated personnel. Many of them were involved in Nordic-Baltic exercises. In particular, the last Nordic-Baltic exercise for FMD took place in 2005 while, in 2011, a similar exercise was organized for ASF. The scenario in Norway included confirmed outbreaks. The Authority was not informed by Norway of the real time exercise on ASF in October 2011. The Authority received information of the exercise from the European Commission.

National real time exercise did not take place in Norway in the last decade apart from the Nordic-Baltic exercises mentioned above. However several exercises have been organized at regional level for FMD (in 2007, 2009 and 2012) and CSF (2007 and 2009).

Alarm drills have not been organised in Norway in relation to CSF and ASF.

Conclusions
Specific training has been provided to the NFSA’s staff and several real-time alert exercises have been organised concerning FMD, however the Authority has never been informed as required in Article 73(3) of Directive 2003/85/EC; furthermore provisions laid down in Annex VII(g)(ii) to Directive 2001/89/EC for CSF and in Annex VI(f)(ii) to Directive 2002/60/EC for ASF have not been fulfilled concerning the organizations of alarm drills.

5.5 Disease control centres and expert groups

Legal Requirements
Point 4 of Annex XVII to Directive 2003/85/EC states that each Member State must be prepared to immediately establish a functional NDCC in the event of an outbreak, while point 5 requires the Member State to be prepared for the immediate establishment of LDCCs. Articles 74 to 77 define the functions and technical criteria for these centers,
including a herd identifier, an animal location system (Article 75(2)(a)) and the prompt implementation of the measures relating to tracing (Article 77(1)).

Article 78 of the same Directive requires the Member State to create a permanently operational expert group.

Similar provisions concerning NDCC and LDCCs exist for the other diseases falling within the scope of this mission.

Findings

According to information provided by the NFSA in its reply to the pre-mission document of the Authority, the NDCC, depending on the kind of outbreak, is located in Oslo, Sandnes, Bergen and/or Ås. A permanently operational coordinator of the NDCC has been appointed and NDCC/LDCCs staff has been nominated and are listed in a document available on NFSA’s intranet. Additional staff members for the NDCC and the LDCCs could be provided depending on the type of outbreak, e.g. veterinarians for epizootic diseases.

The NDCC for diseases falling within the scope of this mission is in Sandnes. A conference room with video link is reserved in Oslo and another one in Sandnes. They are booked on a set timetable of meetings between the Director of Controls in Oslo and the Section for land animal health and feed in Sandnes, the LDCCs at the regional offices, the NVI and the industry. The NFSA electronic log could document the handling of an outbreak. The staff at NDCC and LDCCs has a designated room with TV, video, fax, maps, telephone, whiteboards and projector. The staff personnel are all equipped with portable PC’s and mobile phones. The chief of staff and the Director of Controls have their own telephone conference numbers.

The LDCCs are located at NFSA regional offices in Kautokeino, Sortland, Steinkjer, Bergen, Sandnes, Bø, Brumunddal and Ås. A conference room with video link is reserved in each LDCC. They are booked on a set timetable of meetings between the Director of Controls in Oslo and the main body of the staff in Sandnes, and the NVI. The LDCCs could also book meetings with their district offices on video link or telephone conferences and the same electronic log could document the handling of the outbreak.

Up-dated contact lists for local organizations/operators who may be contacted during an outbreak could be found on the NFSA’s intranet. Each district office has designated a field commander to handle outbreaks.

A permanently operational expert group composed of staff from NVI and Norwegian Veterinary School is established at national level. The meetings takes place if a situation should occur, and in relation to alert exercises. The members of the groups, as well as their duties, are listed in the CPs for the NVI which is also available to NFSA staffs. In addition, the NFSA is establishing an expert group within with competences on epizootic diseases. The group consists of five experienced veterinarians appointed and being trained in contagious diseases. The group will reinforce local personnel in the field and will be deployed to relevant districts/regions in case of an outbreak.

In MATS, the internal quality control system, all NFSA employees have access to up-to-date lists of private veterinarians; direct access to the information available in the national livestock registry is also allowed providing information on animal holdings and their animals. The mission team observed however the following:
- Delays in deleting inactive farms/animals holdings;
- Bovine: delays in registration. Movements to summer grazing were not registered;
- Swine holdings: numbers of animals updated once a year based on data reported to the Norwegian Agricultural Authority. No movements registered in the national livestock registry. No information were reported from slaughterhouses;
- Small ruminants: animal number updated once a year based on data reported to the Norwegian Agricultural Authority on 1st of January. No movement registration in the national livestock registry.

The mission team was informed by the responsible of the national livestock registry that it could be technically possible to register movements also for swine and small ruminants; however and according to the NFSA head office it would be difficult to enforce such a recording system for the time being.

During a visit to a collection centre for cattle and pigs, the absence of an appropriate recording and registration of movements of animals physically introduced and redistributed to and from the centre was pointed out by the mission team.

The mission team also visited a collection centre for reindeers and noted the absence of a documented movement control at the centre. The collection centre was used for operations such as counting and marking, collection for movement to summer/winter grazing etc for several groups of animals of different origin.

Conclusions
The conditions for establishing the NDCC and the LDCCs are complied with and NDCC and LDCCs are clearly defined and equipped, but the problems identified in recording and registration of movements of animals (including reindeers) could delay an immediate and effective tracing back and forward of animals which is not fully in conformity with the requirements laid down in Article 77(1) of Directive 2003/85/EC.

6 Final meeting
The final meeting was held with representatives of the NFSA, the Ministry of Agriculture and Food and the NVI in Oslo on Friday 27 April 2012. At this meeting, the mission team presented its main findings and some preliminary conclusions of the mission. At the meeting the mission team also explained that, based on a more detailed assessment of the information received during the mission, additional conclusions and recommendations could be included in the report.

The NFSA did not have any objections to the observations made and the preliminary conclusions presented.

7 Recommendations
Norway should notify the Authority, within two months of receiving the final report, by way of written evidence, of the corrective actions taken and a plan for corrective measures and actions, including a timetable for completion of measures still outstanding, relevant to

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4 See Annex 3 for comments from the NFSA.
5 See Annex 3 for comments from the NFSA.
all the recommendations hereunder. The Authority should also be kept informed of the completion of the measures included in the timetable.

<table>
<thead>
<tr>
<th>No</th>
<th>Recommendation</th>
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<tr>
<td>1</td>
<td>The competent authorities should ensure full compliance of Article 4(3) of Regulation (EC) No 882/2004 and Annex XVII(6) to Directive 2003/85/EC concerning efficient and effective coordination and cooperation between the Norwegian Food Safety Authority and other authorities involved in official controls in case of epizootic diseases and within the NFSA’s units as laid down in Article 4(5) of the above mentioned Regulation.</td>
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<tr>
<td>3</td>
<td>Norway should ensure that procedures for review and updating the contingency plans are in conformity with the requirements laid down in the EEA legislation, in particular relating to the submission of revised version to the Authority for foot and mouth-disease in line with Article 72(8) of Directive 2003/85/EC, for classical swine fever in line with Article 22(3) of Directive 2001/89/EC and African swine fever in line with Article 21(3) of Directive 2002/60/EC. Furthermore, Norway should ensure that the frequency of their updating contingency plans is in line with Article 22(3) of Directive 2001/89/EC for classical swine fever and Article 21(3) of Directive 2002/60/EC for African swine fever.</td>
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<td>4</td>
<td>The competent authorities should ensure that the Authority is informed of the main results following the carrying out of real-time alert exercises as laid down in Article 73(3) of Directive 2003/85/EC; furthermore their staff should regularly take part in alarm drills organised at least twice a year in line with requirements laid down in Annex VII(g)(ii) to Directive 2001/89/EC for classical swine fever and in Annex VI(f)(ii) to Directive 2002/60/EC for African swine fever.</td>
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<td>5</td>
<td>The competent authorities should ensure that the requirements laid down in Annex XVII (13 and 14) to Directive 2003/85/EC in relation to the appropriate arrangements for disposal of carcasses and animal waste resulting from the stamping out operations are fulfilled.</td>
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<td>6</td>
<td>The competent authorities should ensure that the requirements laid down in Article 77(1) of Directive 2003/85/EC concerning the prompt implementation of the measures related to the tracing of animals in case of epizootic diseases are fulfilled.</td>
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<td>7</td>
<td>The competent authorities should ensure that the analytical methods used by the national reference laboratory in the context of official controls are accredited as laid down in Article 12(2) of Regulation (EC) No 882/2004.</td>
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# Annex 1 - List of abbreviations and terms used in the report

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>ACP</td>
<td>Administrative contingency plan</td>
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<td>AHS</td>
<td>African horse sickness</td>
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<td>ASF</td>
<td>African swine fever</td>
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<td>Authority</td>
<td>EFTA Surveillance Authority</td>
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<tr>
<td>CP</td>
<td>Contingency plan</td>
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<td>CRL</td>
<td>Community reference laboratory</td>
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<td>CSF</td>
<td>Classical swine fever</td>
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<td>EC</td>
<td>European Community</td>
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<td>EEA</td>
<td>European Economic Area</td>
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<td>EEA Agreement</td>
<td>Agreement on the European Economic Area</td>
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<td>ELISA</td>
<td>Enzyme Linked Immunosorbent Assay</td>
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<td>(The) Food Act</td>
<td>Norwegian Act No. 124 of 19 December 2003 relating to food safety and plant and animal health</td>
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<td>NRL</td>
<td>National reference laboratory</td>
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<td>NVI</td>
<td>Norwegian Veterinary Institute</td>
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<td>OIE</td>
<td>Office International des Épizooties (International Animal Health Bureau)</td>
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<tr>
<td>PCR</td>
<td>Polymerase chain reaction</td>
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<td>RT-PCR</td>
<td>Reverse transcription polymerase chain reaction</td>
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<td>SNO</td>
<td>Statens Naturøppsyn</td>
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<td>SVD</td>
<td>Swine vesicular disease</td>
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</table>
Annex 2 - Relevant legislation

The main EEA Acts on the official control on contingency plans for epizootic diseases and related topics applicable to Norway are:

Legislation relating to animal health and contingency plans


c) The Act referred to at Point 3.1.3 of Chapter I of Annex I to the EEA Agreement, Council Directive 2001/89/EC of 23 October 2001 on Community measures for the control of classical swine fever, as adapted to the EEA Agreement and in particular Article 21 thereof;


Legislation relating to animal welfare


Legislation relating to certification, the production of feed and food and official controls

g) The Act referred to at Point 1.1.11 of Chapter I of Annex I to the EEA Agreement, Regulation (EC) No 882/2004 on official controls performed to ensure the verification of compliance with feed and food law, animal health and animal welfare rules, as amended and corrected in the EEA Agreement;

Legislation relating to animal by products not intended for human consumption

Annex 3 - Reply from the NFSA to the draft report

ROYAL NORWEGIAN
MINISTRY OF AGRICULTURE AND FOOD

EFTA Surveillance Authority
Rue Belliard 35
B-1040 BRUSSELS
Belgium

Your ref
Case No 71088 Ev No 635990 A Our ref 201101377/ADO - 29
Date 04.07.2012

Subject: EFTA Surveillance Authority mission to Norway from 23 to 27 April 2012 related to contingency plans for epizootic diseases, in particular foot and mouth disease and classical swine fever - draft report.

Please find enclosed the Norwegian Food Safety Authority’s response to the draft report from the above-mentioned mission.

Yours sincerely,

Bente Odlo
Deputy Director General

Anne Felde Doser
Adviser

Enclosures: 2
EFTA Surveillance Authority  
Rue Belliard 35  
1040 Brussel  
Belgium

Att: Luca Farina

Statens tilsyn for planter, fisk, dyr og næringsmidler

 COMMENTS TO DRAFT REPORT REGARDING THE MISSION TO NORWAY 23-27 APRIL CONCERNING CONTINGENCY PLANS FOR EPIZOOTIC DISEASES IN PARTICULAR FMD AND CSF AND PLAN FOR CORRECTIVE MEASURES AND ACTION TO BE TAKEN.

We have received the draft report from the mission to Norway 23-27 April regarding contingency plans for epizootic diseases, in particular Foot and Mouth Disease.

Comments on the factual content of the report:

Regarding point 5.5. Disease control centres and expert groups

Reporting of movement of swine:
There is a solution for reporting movement of both swine and small ruminants in the national livestock registry (computerized database). Searches in the database returns data on movements. However, we will pursue that these events are registered correctly.

Regarding point 6 Final meeting:
NVI was also represented in this meeting.

Please find enclosed the plan for corrective measures and actions to be taken regarding the mission.

Yours sincerely

Kristina Landsverk  
Deputy Director General

Copy:  
Siri Margrete Løvseth  
Sonja Kluge-Berge
<table>
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<tr>
<th>No</th>
<th>Recommendations/subject</th>
<th>Anvendig enhed</th>
<th>Action</th>
<th>Time aspect</th>
<th>Enclosures</th>
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<tbody>
<tr>
<td>1</td>
<td>The competent authorities should ensure full compliance of Article 7(3) of Regulation (EC) No 89/1004 and Annex XVII(b) to Directive 2001/18/EC, conceding efficient and effective coordination and cooperation between the Norwegian Food Safety Authority and other authorities involved in official controls in case of epizootic diseases and within the NFSA's units as laid down in Article 6(3) of the above mentioned Regulation.</td>
<td>SLD and SF5</td>
<td>NFSA will ask the Ministry of Agriculture and Food if the following can be included in the Ministry's annual official assignments to the County Governors. The County Governors are asked to coordinate their relevant departments - environmental protection department, agriculture department and emergency department - to appoint suitable sites for burial of carcasses in accordance with the carcass regulation for the control of serious infectious diseases in animals and fish. The County Governors will also be requested to contact the NFSA's regional offices in this work. NFSA will in turn include this in the BES to the regional offices. The NFSA will contact The Norwegian Directorate for Nature Management and through them The Norwegian Nature Inspectorate to inform them about relevant exotic animal diseases in wild animals. The NFSA will establish guidelines to the district and region offices on when and how to register suspicions of exotic diseases.</td>
<td>01.07.2013</td>
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<td>2</td>
<td>Norway should submit to the Authority for approval the contingency plans for classical swine fever in line with Article 29 of Directive 2001/18/EC, for African swine fever in line with Article 2 of Directive 2002/60/EC, and for other diseases in line with Article 7(3) of Directive 92/33/EEC for African horse sickness and Article 20 of Directive 92/68/EEC for the control of certain animal diseases and specific measures relating to swine vesicular diseases.</td>
<td>SLD and Heda</td>
<td>Norway will, pursuant to formal procedures, submit the following contingency plans to ESA for approval: African swine fever, Classical swine fever, African horse sickness and diseases listed in directive 91/19/EEC. Time limit for implementation: ASF and CSF 01.07.2013, African horse sickness and diseases listed in directive 91/19/EEC 01.01.2014.</td>
<td>ASP and CSF 01.07.2013, MKS and AHS 01.01.2014</td>
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<tr>
<td>3</td>
<td>Norway should ensure that procedures for review and updating the contingency plans are in conformity with the requirements laid down in the EEA regulation, in particular relating to the submission of revised version to the Authority for foot and mouth disease in line with Article 72(e) of Directive 2003/18/EC, for classical swine fever in line with Article 22(2) of Directive 2001/18/EC and African swine fever.</td>
<td>SLD and Heda</td>
<td>NFSA will develop procedures that ensure updating of the CF in accordance to the mentioned Directives.</td>
<td>01.01.2013</td>
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<td>4</td>
<td>The competent authorities should ensure that the Authority is informed of the main results following the carrying out of real-time alert exercises as laid down in Article 7(3) of Directive 2001/18/EC. Furthermore, these should regularly take part in alarm drills organised at least twice a year in line with requirements laid down in Annex VIII(b)(ii) to Directive 2001/18/EC for classical swine fever and in Annex VII(b)(iv) to Directive 2002/60/EC for African swine fever.</td>
<td>SLD and Heda</td>
<td>The NFSA will prepare a list of exercises and the outcome of these and submit the list to ESA annually.</td>
<td>annually evd. after the exercises.</td>
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<td>5</td>
<td>The competent authorities should ensure that the requirements laid down in Annex XVII (13 and 14) to Directive 2003/15/EC in relation to the appropriate arrangements for disposal of carcasses and animal waste resulting from the stamping out operations are fulfilled.</td>
<td>SLD SF5</td>
<td>See Recommendation 1. The NFSA will make a list on predefined burial places when they are identified. In order to ensure correct disposal of carcasses and animal waste, the Regional Offices will receive instructions from the Head Office to put into negotiations with the County Governor for the purpose of getting an overview of pre-defined and appropriate sites for entombment of the above mentioned contaminated organic material.</td>
<td>01.01.2014</td>
<td></td>
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<td>6</td>
<td>The competent authorities should ensure that the requirements laid down in Article 7(7) of Directive 2003/18/EC concerning the prompt implementation of the measures related to the tracing of animals in case of epizootic diseases are fulfilled.</td>
<td>SLD SF5</td>
<td>Delays in deleting inactive farms/animal holdings: The Head Office will within short time send out information to our District Offices on how to use the data registered in the Central Database to delete holdings that no longer keep animals. Delays in registrations of louse events in the database: Norway is currently working on improving the timely reporting of events into the database. NFSA are working together with farming organisations on how to get farmers to report events within the time limit. Norway has not defined areas of summer grazing, but we are working on a solution, and we will within 2015 at the latest, define these areas. Registration of movements to and from collection centres: Within this autumn, we will improve the solution to register these movements in the database. We have informed dealers that keep animal in collection centres about this.</td>
<td>Continuous</td>
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<td>ID</td>
<td>The competent authorities should ensure that the analytical methods used by the national reference laboratory in the context of official controls are accredited as laid down in Article 12(2) of regulation (EC) No 882/2004</td>
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<td>The Section for Virology at the NVI has worked out all documentation necessary for the application for flexible accreditation for use of real-time PCR for virus diagnostics. The application is based on the method for detection of avian influenza virus, which has been accredited for more than one year according to the ISO 17025 standard, and where the one-year post-accreditation follow-up inspection was conducted in January 2012. The application is to be sent to the Norwegian accreditation body by the end of June 2012, and the analyses for detection of FMD and swine fever viruses are expected to be run accredited by the end of the year. With regard to serology the NVI is accredited for analysis of antibodies in milk and serum against bluetongue virus using ELISA methods. An application for flexible accreditation for ELISA analysis in general is pending on the outcome of the real-time PCR accreditation process.</td>
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