Coordinator: Welcome, and thank you all for standing by. All participant lines will be on a
listen-only mode for the duration of today’s conference. This call is being
recorded. If you have any objections, you may disconnect at this time.

I will now turn it back to Miss R.J. Cabrera. Thank you, Ma’am.

R.J. Cabrera: Thank you, and so this is the first meeting of - for you guys - of the
Secretary’s Advisory Committee on Animal Health, and it is now called to
order. I want to welcome everybody again. I want to welcome those of you
who are listening in.

Just a few housekeeping items. Please, please, please put your phones on mute
or - not mute - silent. Not vibrations - silent. They do get picked up. I’m
telling you, these microphones are very sensitive.

And also, even as I speak, I just went over this - be mindful of these little
(font) mics. They are powerful, but we still need to speak loudly for the
benefit of the folks calling in. We have high ceilings in here, so there may be a
little echo-y. Just speak clearly in your normal voice.
For the speakers on the line, please keep your phones muted unless you are speaking. And let me thank everybody now in advance. We’re working high on technology this week. We’re in a remote location. We think it was a good idea to get out and where the people are. I’ve managed other committees where that’s what we do. We go out to other locations, and we actually get people who join us now and again.

A lot of people don’t come to Washington. We don’t know why that is. The - actually the highest attended meeting was outside of the beltway last year. And you’ll remember that. We were in a very small room, and we had more people than we’d ever had.

So the message there was we’ve got to get out where folks are. You’ll see in your - I have folders for you. In those folders are a list of all of your colleagues here around the table.

There is a charter - a copy of the charter now. (Liz) and I haven’t talked about this, but if we have time, we’d like your input on the charter. Whether or not we hit it - especially those of you who are returning, coming back after a couple of turns. Now the (ES) management team will be going over - I’m sorry, the executive team - will be going over the charter over the next month or so - and we’ll be re-upping on the charter in August.

That’s about a five-month process. So we just want your input. And if we don’t get to it today or this week, we’ll do it in an administrative meeting - a call, actually.

We also have in there copies of the summary sheets I sent you in the last few weeks. Now, we committed back in fall to getting those summary sheets to
you at least a month in advance. That’s just not very practical for us. At the outside, we said two weeks. We were a little late. We’re working on it. We’ll be better. We know it takes time to get this stuff out. To get you know, speak with your stakeholders about it. We’re doing better. We’ll get better.

So I’ve put those sheets in your folders just as a reference. When you do begin your deliberations, then you have your questions there. And again, it’s just a reference to kind of keep us all on top of it and on track.

I’ve taken the charter off the agenda because we will have an opportunity to talk about that, perhaps. But we’ll see how it shakes out. You’ll notice in the agenda we carved out time after every presentation for you guys to at least touch upon the topic.

There are also large chunks of time at the end of each day. So we’ll see how that shakes out. You’ll notice there are no specific times on the agenda. That’s on purpose. And this is to give you flexibility to do more in terms of deliberation, or at least beginning to craft the framework of your recommendation.

I’ve been told that you guys may meet again before the end of this fiscal year. That meeting would take place in Washington, D.C. area, if we had it. Probably the latter part of, you know, maybe August - September timeframe.

So that kind of takes the pressure off. We still want you to - of course we’re going to work hard and put the framework together, and if we can get recommendations going, that’s fine. But you will have an opportunity to meet again to flesh those recommendations out and take up any new topics we might bring to the community.
I’ve also included in that folder what I include every time we meet. A one-sheet page on consensus: what it means; what it is. Sometimes consensus means different things to different people. This is what it will mean for this committee.

And also there’s a decision mapping too with sort of our go-to when consensus is just not reachable. And it lays out what we do if we do a majority voting. If we want to entertain a minority opinion, this is more or less what we’ve agreed on in the past. And it serves us well. We don’t use - we don’t have to go to it frequently, but it’s there if we need to.

Today I am with Miss or Dr. (Diane Sutton). She’s helping us out, and (Diane Sutton) is the Director, Unit Leader, Manager of the Sheep and Goat Program. And we’ll be hearing from her at the end of this week. I’m sorry, (Diane), I didn’t get your title correct, but you can help us out with that when you come up. But she’s here as a Deputy DFO of sorts. And so, by the end of the week we’ll hear from her on the scrapie program.

Now let’s see.

Woman: You might lose your projector? (Unintelligible).

R.J. Cabrera: Give me technology. I told you. Excuse me. Good to know.

((Crosstalk))

Woman: There you go. Say no. Uh-oh.

R.J. Cabrera: I turned it off.
Woman: Just hit the power button again.

R.J. Cabrera: Oh, thanks, (Buzzie).

((Crosstalk))

R.J. Cabrera: Those of you who are on the phone, we’re having technology challenges.

Woman: Just make sure you don’t let your computer go to sleep.

R.J. Cabrera: I’ve got it. And I think the way to do that is - it’s a government computer and it shuts off every - I’ll be more conscientious about that.

Okay. Folks on the phone. If you want to submit a comment to the Committee for their consideration, you may do it during the meeting. There is someone following the (SOCA) Management mailbox. So feel free to submit any comments or questions if you want the Committee to consider as we go along.

One note of recognition. Back in the fall, sadly we lost one of our members, Dr. Mark Engel, and I did have an opportunity to speak with him at length when we were getting him up to speed on this committee. And like others of you here today, I was very sad to hear that. So I just want to acknowledge him today.

And one last thing before we start with introductions. I’ve already mentioned about the time. We had a facilitator at our last meeting. I will be assisting with that function this time as best I can with the help of the Chair and the Vice Chair. So we’ll try to stay on track, but we have an obligation to really delve into issues as far as you guys need to go, so we’ll do what we can with that.
And we want to have enough time for you guys to really deliberate and talk and do what needs to be done. Oh my goodness. Okay.

So with that, let’s get going with introductions. On the phone, do we have Dr. (Reed)? (Willie Reed)? Do we have (Wayne Frieze)?

Woman: Wait until (you see me) later.

R.J. Cabrera: Okay. Do we have (Annette Jones)?

(Annette Jones): Yes, I’m here.

R.J. Cabrera: Hi, (Annette). Please start with giving us your full name, the state you come from and tell us a little bit about why you wanted to join the Committee.

(Annette Jones): Okay, sure.

R.J. Cabrera: Tell us a little bit about your background too, (Annette).

(Annette Jones): Okay. So my name is (Annette Jones). I’m the State Veterinarian in California. And I wanted to join the Committee because 1) just to represent a lot of the viewpoints from the West, my State Veterinarian (talking points) in the West.

It’s a large and diverse country, and our issues are - you know, we have a lot of overlapping issues. Ours are more overlapping than non-overlapping, but there are some unique perspectives in the West; it’s viewed as well, mostly the geography and the weather, but also, you know, some of the opinions of Americans who work in the West as well.
So that’s the main reason I wanted to join the group, just to make sure that our voice was, you know, part of the consensus that develops.

A little bit of my background: I have a degree in Economics and Veterinary Medicine, and then also in Veterinary Medicine. I was in private practice for a couple years in a mixed practice, and then I joined the State Department of Agriculture.

And since then I’ve had - unfortunately, we’ve had quite a few different types of outbreaks. I have a lot of emergency response experience that I thought might be helpful to bring to the group as well. So, you know, tuberculosis, DSE, (easiest ones) - Newcastle, Hill, horse diseases that are (unintelligible). That’s probably where a lot of my experience is.

Plus, we have a new - we just (had this) one in California that I was quite involved with dealing with the use of antimicrobials. So that’s a topic of interest to us. We’re just getting kind of a new program started in our department to deal with some of the business (sense) litigation issues the best that we can while still making a healthy animal population. So I thought that area would be interesting.

And then we also have a lot of sheep safety responsibility. You know, that’s commercially - our milk safety program, of course, as well as our egg safety program. We have a small meat inspection program as well. So I thought all those topics would be interesting to participate in.

And just one last note. Unfortunately, though, I had a commitment to be - before we got this meeting on my schedule, I had a commitment to be in another meeting, so today and tomorrow I’ll be off and on the phone a little
bit. And then the last day I’ll be on the phone all day. Just wanted to note, to
give you that warning if you look for me and I’m not there, that’s why.


Woman: (David Smith)?

R.J. Cabrera: Yes. (David Smith)?


R.J. Cabrera: Hi (David), thanks. You want to tell us a little bit about yourself? The state
you come from?

(David Smith): Yes. So I’m a veterinary epidemiologist. I practiced for some time in a dairy
practice, but mostly I now do beef cattle. I’m at Mississippi State University
in Starkville, Mississippi. And throughout my career I’ve been interested in
these topics discussed by this Committee, and so I thought it was important to
become a member of this Committee, just because the topic areas interest me,
and they interest the people that I work with.

I’m on this Committee as a Special Government Employee.

R.J. Cabrera: Great, thanks, (David).

(Liz Wagstrom): I could take over if you need to work with -

R.J. Cabrera: Yes, thank you. We’re going to hand it over to Dr. (Wagstrom), who is
presiding while I get us back online.
(Liz Wagstrom): Sounds great. Yes. I think we lost it now. I think we’ll start going around the room introducing ourselves again. State you’re from, a little bit about your background and why you wanted to be a member of the Committee, and I think we’ll start with (Don).

(Don Ritter): All right. Hi, I’m (Don Ritter). I’m here to represent the poultry industry - commercial poultry industry. I’ve been a vet for Top Ten broiler companies for 30 years. And active - was Chairman of National Poultry Improvement Plan for six years, involved in a lot of policy decisions around commercial poultry, emergency diseases, antimicrobial resistance. There’s a lot of chickens out here, and I wanted to represent them on the Committee.

(Liz Wagstrom): Thanks, (Don). Next, (Blackwell).

(Michael Blackwell): My name is (Michael Blackwell), and I am representing animal welfare organizations which I hope will be better characterized for this group as we go forward. At least, you may (find by) United States.

I spent 23 years with the Federal Government. Most of that time - 20 years - with the Food and Drug Administration, 5 of which as Deputy Director of the Center for Veterinary Medicine.

I grew up about 2 1/2 hours from here - in Southeast Oklahoma. My dad was a mixed-animal practitioner. I became very familiar with the campaign on brucellosis. I learned to work a lot of cattle with a process and get run over, kicked.

But I’ve been involved with animal agriculture all my life. I left the FDA to become Chief of Staff of the Office of the Surgeon General of the United
States, and then on to become Dean of the Veterinary College at University of Tennessee.

I am involved with animal welfare work because over my lifetime, I’ve seen not only the evolution of agriculture, but changes in public health, which is my specialty area, and very, very concerned about not only the misinformation that flows from both sides of this area of tension - that having your fingers on the pulse of the public and the shifted attitudes towards food.

Where food comes from, how the animals are treated, the process - these things are not going to go away. And I find a lot of people involved with good intentions but not necessarily good insights as to what it means to raise animals for food. They’re not dogs and cats. And we hopefully as a Committee will learn to better communicate both towards the public, public officials, and so forth.

One last thing I had a chance to do. I was the Vice Chair of the Pugh Commission on Industrial Farm Animal Production. And I - again, another situation where misinformation has been shared from the veterinary community to animal agriculture.

The Commission looked into the future regarding sustainability, and we see many examples of why we’re not in a good position. (EDBV) - a good example of an industry that is not positioned well from a national security standpoint.

(They’ve got influenzas) that, of course, challenging us now, but I guess I’ll stop by saying we’re going to continue to be challenged. There’s no doubt about it. And global warming, if it is real, will mean new diseases on our
shores, and are we really positioned in a way to best address those new challenges? And I think not, at least the way we’re trending.

So my hope is that I will help to provide a perspective from the animal world for community but also to veterinarians and (unintelligible). Trying to keep some balance in the whole process.

(Liz Wagstrom): Thank you. (Go ahead).

(Charles Rose): I’m from Clovis, New Mexico. There’s a - and I’ve been from an area that’s been involved in - we had a TB outbreak. Also been involved in (the sticker stone Nevada).

There’s - so I’ve seen importance of how we react to these diseases, and this community can - will help us go along the right roads and set up the proper guidelines so we don’t make mistakes when we have disease outbreaks. Or at least we can minimize our mistakes.

And I represent cattle people, mostly, so. But I think that’s the importance of this Committee is trying to minimize mistakes in disease outbreaks, and with all we’re discussing, that’s where we’re headed. And so that’s why I’m here. Thank you very much.

(Liz Wagstrom): Thank you. (Belinda)?

(Belinda Thompson): Hi, I’m (Belinda Thompson). I’m a veterinarian. I work at Cornell University at the Animal Health Diagnostic Lab there, which is also then serves as the New York State Veterinary Diagnostic Lab. I was in private mixed large animal practice for 20 years working with horses, cattle -
primarily dairy cattle - and also small ruminants. A limit number of the pigs and chickens - mostly show animals.

I currently serve as Chair of the U.S. Animal Health Association Animal Welfare - Committee on Animal Welfare, and I am trying to bring to this Committee perspectives from working with farmers who are old enough to have lost herds from brucellosis and TB control, and knowing what they experienced watching the Foot and Mouth outbreak in England and being fearful for our nation.

And working with - daily with - veterinarians trying to control all kinds of animal diseases, from West Nile Virus and plasmosis in cattle to trying to appropriately respond to the needs for scrapie surveillance. So my experience in the diagnostic lab and my consultations with veterinarians really crosses the entire subject matter that we have today. So that’s why I came to the Committee.

(Liz Wagstrom): Thank you.

(Max Ignasius): My name is (Max Ignasius). I’m an open-range sheep herder, and we also run large cattle. Also, I’m here because I want to help for everybody here and everybody listening the importance of animal identification and (herd certificate) identification.

When I work about nine years old, my family’s lost everything due to the foot and mouth disease in (Chile), where thousands of herd of cattle they were slaughtered and buried. And I know what that can do. And the biggest problem with that in America today, the lack of quick way to identify the premises and the cattle where they come from. I hope we can keep working in that. That is all.
(Liz Wagstrom): Thank you, (Max).

(John Mahoney): (John Mahoney). I’m happy to be here. In fact, this is my first opportunity to work with this Committee, obviously. So I’ve had a kind of an interesting background. A mixed animal practice, veterinarian by training in Southwestern Illinois. Mixed animal practice, primarily dairy, but a lot of mixed, different things I did.

About 35 years ago I took a little different approach and joined the industry, and actually I am Director of Veterinary Services for Land of Lakes/Purina Animal Nutrition. During my career, I’ve worked primarily with dairy cattle, diseased cattle.

And one of the reasons I really wanted to get here is to make sure that we get representation for the dairy industry too, because I’m a member of the Animal Health and Welfare Committee for National Milk Producer Federation, and also serve on the Animal Agricultural Liaison Committee for the ABMA.

So hopefully can represent our profession well, and also producers, you know like Pillsbury. Fortunate to have worked with such a great group of people during my professional career. Really trying to do the right thing. A lot of changes, as (Jack Blackburn) indicated. And there will continue to be changes and struggles for the industries we report, but it’s also a great time of opportunity, so most likely I can contribute to that.

(Dan Grove): Good morning. (Dan Grove), and originated from Ohio. I’m a Buckeye. But now reside in Michigan, and I’ve been in Michigan for the past 17 years in the College of Veterinary Medicine there currently, and the Chair of the Department of Large Animals in the College Clinical Sciences there.
My background, though, is in Microbiology - in fact, that I was trained as a virologist, but I’ve used that training basically to work on many infectious diseases over my career, including bovine tuberculosis, BVD virus, Johne’s disease - a whole array of things that affect cattle, primarily.

I think I bring a perspective - a broad perspective. I mentioned foot-and-mouth disease outbreak in the UK. I had the opportunity to spend six weeks there during that outbreak and saw the devastating effects of what a foreign animal disease can do to a country. So I bring that perspective.

I also bring a perspective of representing a large organization. I just came off the presidency of the American Association for (Life) Practitioner Sites bringing the perspective of cow veterinarians across the United States and some of the things that they have to deal with on a day-to-day basis in helping to care for the well-being of animals.

So I look forward to listening and bringing perspectives to this group.

(Mary Ann Knievel): Hi, I’m (Mary Ann Knievel), and I am a rancher from Kansas. We have a registered Red Angus herd, a commercial herd and a feed lot. And I might as well tell you, I’m not a veterinarian, so I bring maybe a different perspective. And that everything we decide here ends up coming into what I have to do, and everything that happens on these shores is going to affect our livelihood, because that’s what we do is ranch and sell and (finish it out).

I do have Master’s in Reproductive Physiology. I did a lot of embryo transfer work around the country and Mexico. I’ve been to quite a few different countries, and seen how they do things, and some experience in track with how we do things in the United States.
I still think we’re far and above better than most places I’ve been, but they’re very scary out there, from someone who makes their living with the cattle and have a paycheck coming from many other places.

Our ranch is 137 years old - the original portion. My kids are the fifth generation, which I think defines sustainability. I’m kind of tired of people telling me what sustainability is. I have a pretty good grasp of what it is.

So, why am I here? Representing producers, and trying to make sure whatever we decide is the best thing to do is actually able to be carried out by those of us who have to perform all the tasks.

(Liz Wagstrom): (Steve)?

(Steve Crawford): I’m the New Hampshire State Veterinarian. Before I was the New Hampshire State Veterinarian, I was a partner in an all-dairy practice in San Joachim Valley, California, and part owner of a couple of dairies there.

And back - moving back to the East Coast to stick closer to family. But I am here, as I was just rotated off the United States Animal Health Committee. For the next, I came out the Association Effective Committee is nominated by the president there. I think it’s valuable for me to be here.

You heard from Dr. (Jones) that the outfit representing the Western states, they don’t have officials. We as a group agree on a lot of things. There are a lot of differences in the way things are done in the East and the West.

In the Northeast in particular, we have to face resource challenges that other folks do, but there it is a difference in the way that the industry - that we feel
that we educate, that we regulate, that we interact with the structure. And that these outbreaks response is dramatically different in the Northeast than it will out West. I think the perspective from that part of the country is valuable to have here, and I hope that I can provide some of that for us as we go along.

(David Fernandez): I’m (David Fernandez). I’m representing the sheep and goat producers from (future) organizations and the extensional aspects, especially at the University of Arkansas, Pine Bluff, where I work with small and limited-resource farmers and ranchers to help them be more productive, more sustainable and maybe to make a little bit of money.

And one of the problems that we face - and I’m sure it’s a problem that we’re going to face here - is reaching out to those small farmers who are not necessarily tuned into understanding a lot of these issues that we’re going to be facing - particularly small ruminant producers.

A lot of them tend to be retirees. At least a lot of ours coming to the Southeast tend to be retirees who finally bought their dream farm, or they’re very young and they’re just getting started. They’re coming out of an urban background, don’t really know what they’re getting themselves into.

And sometimes reaching them - just getting in touch with them - is very difficult. And so I’m bringing their perspective, and also some maybe effective methods of reaching out to them and getting this information in their hands is part of why I’m here.

(Glenda Davis): Good morning, everyone. My name is (Glenda Davis). I’m Tribal Rep, and I’m from the tribe of the Navajo Nation. And I have a background in Microbiology from CSU and an MBA from University of Phoenix.
I’ve worked for the Navajo Nation as a Program Manager for Tribal Service Veterinary Services and was a certified technician for large animals, primarily, so I did a lot of repro work on horses and cattle.

And presently now I’m doing the regulatory side of the veterinary services for the Tribe. So as the Tribal Rep, I just want to try to represent tribes and give an understanding that many tribes - they’re on what’s called “withdrawn land.”

We have open range, a lot of various animal issues from wildlife services, fish, large animals, companion animals - and to provide some type of network or cooperative for the tribe, because we are on a very distinct land base.

A lot of the issues that we need to do, we need to do a lot of commuter type of arrangements. We need to try to secure our premise, our ID. But also remember that a majority of tribes are brand-based. On this portion of the country as we move out towards some of the tribes, their wildlife and their fisheries and some of their land bases - it’s entirely different.

And then on the companion animal side, you know, a lot of reservations have very, very extreme dog populations, roaming dog issues and roaming cat issues. So to provide a little bit more services to them - we all know of the veterinary shortages that we all have.

But I would like to see that the animal health on reservations and on tribal lands is increased and is better, in that they can actually get the services that they need, and see if we can make that a cooperative with this group, and communications with tribes is very difficult.
We were - I was appointed here in July, and I sent out - oh, it was probably over 200 letters. And this trickle of information is coming back. So I’m trying to do Plan B. I’m utilizing specific people - tribal leaders - to get the word out to their people.

So I’m trying to find key people to represent their tribes, and you know, we all have as far as tribal issues, it’s sad to say, you know, as far as priorities, as the animal issues are kind of at the bottom.

And so I’d like for that to be brought up because some of them, they live off their animals, and they should do a whole lot more as productive ranchers and animal owners, breeders, horse trainers - those types of things for the tribal nation. And this will provide a little bit of awareness. Thank you.

(John Fisher): I’m (John Fisher). I’m at the University of Georgia at College of Veterinary Medicine, the Southeast Cooperative Wildlife Disease Study.

I spent my first 12 years in Southern Minnesota. I was Allen’s kid out of 1700. But I spent as much time as possible on my grandfather’s dairy farm, back in the days when you could make living milking 20 cows and farming 120 acres of ground. We had a few chickens there. And that’s where my memories go back to that farm rather than the little town that I grew up in.

I went to school to become a wildlife biologist, and I graduated on a Saturday night in 1979, and went to work on Monday morning. Not because I had worked in wildlife management. And it was not because I had a freshly minted Bachelor’s degree in Wildlife Biology, but because I knew how to drive a tractor. So that got my foot in the door.
After a couple of years, I went back to school and got into vet medicine and graduated University of Missouri, and then was in private practice for a couple of years, and then went back and got a PhD in Pathology and moved to University of Georgia, so that was 23 years ago.

I’ve been very active in U.S. Animal Health Association. On and off. I (picked) wildlife committee, chaired and co-chaired on and off for almost 15 years and I’m on the Board of Directors representing Association of Fish and Wildlife Agencies there.

I’m here representing Wildlife Veterinarians of the State Fish and Wildlife Management agencies and other organizations that they work for. I’m also a member of the Whole (IDs) Wildlife Working Group for nearly 20 years now. And I want to talk a little bit about our organizations. How these in Cooperative Wildlife Disease Study and just relationship with APHIS Vet Services, which goes way back.

We’ve had continuous cooperative agreements since the ‘80s with Vet Services - since 1979 actually - but - and we started in the context of looking at wildlife aspects of a foreign animal disease emergency. And that program - our agreement has broadened considerably since, and we look at - basically, we look at One Health, and the role of wildlife and the epidemiology of domestic animal and human diseases.

We also serve as a liaison between APHIS Vet Services and the State Fish and Wildlife Management Agency. And between the free-ranging wildlife stakeholders, as animal agriculture, we know that it can get a little contentious at times, but we try to keep everybody at the table and everybody speaking with each other in a civil manner.
Our first - I would call it a “One Health” exercise actually, with Vet Services was in 1967 when we posted the first seminar - wildlife seminar - for animal disease preparedness, and that was sponsored by APHIS and the State Fish and Wildlife Agency.

That’s something that we do today, and we convene that seminar every year in May, and it’s an excellent opportunity to get the wildlife people and the animal agriculture people in the same room and in the same bars for about three days, and get - let the people have the opportunity to get to know each other so that when there is an emergency, and they need to pick up a phone and call somebody, they actually know that person on the other end of the line.

And the example that I would cite right now, as far as One Health issues - and I’m very happy to see that we’re going to be talking about One Health today, and also chronic wasting disease, which is very important for ranging wildlife stakeholders and animal agriculture.

Some of the situations today is - that we have not dealt with previously - is the wildlife reservoir of bovine TB in a portion of Michigan. Brucellosis in elk, bison in the greater Yellowstone area. Those diseases, as well, and most recently (ALI-PATHOGENIC DAV-INESS) borne virus.

This gets hard last winter and spring. Those are all big (unintelligible) examples of diseases that affect domestic animals, humans and free-range wildlife. So I think it’s important that we’re all here to discuss those kind of things. I appreciate the opportunity to be here and represent the wildlife side.

Thank you.
(Peter Cuneal): Good morning. My name is (Peter Cuneal). I am in Prevention Veterinary from the University of -Arizona which is in Tucson, not the other school that is up in Tempe - that small junior college up there - Arizona State.

I’ve been at the University of Arizona since 1988. Before that I was in private practice in Northern California - (Mid Stan Upland Primarily Cal Cap and Equine.)

I’m here as a Special Government Employee, or similar. And I think that the reason I really wanted to be part of this Committee is because of some of the unique issues we’re trying to face in the Southwest, and that is issues of border security, transboundary diseases, in particular, and the problems faced by rural practitioners, in particular.

And I hope is that we have a chance as a Committee to look at some of those issues, and particularly some of those issues that are faced by our several Nation partners in Arizona and New Mexico.

One of the things we have done in Arizona that’s different is that we have established a response program that is unique now also in New Mexico, which is a combination of private practitioners, the diagnostic laboratories, and the land grant universities and the Department of Agriculture that allows private practitioners to get out and do enhanced diagnostics, in terms of unexpected livestock losses.

And both of these programs - both in Arizona and New Mexico - are provided at no cost to the livestock owners, so I think that provides a really good model for how we can provide enhanced diagnostics - and especially in rural areas. Thank you.
(Liz Wagstrom): Well, thank you.

(Judith McGary): My name is (Judith McGary). I actually grew up about 15 minutes from here, so welcome to Texas, y’all. Given the fact you can guess I grew up in an urban setting, not really agriculture, but I became very interested in sustainable agriculture about 20 years ago.

My husband and I have been farming for, I think, we’re coming up on 15 years now. And we have a farm with grass-fed lamb and grass-fed beef about three hours from here. We are - although we don’t usually use this term - a vertically-integrated operation. We do our own breeding. We raise the lambs. We take them to the local slaughterhouse, and we sell the meat at farmers’ markets and other direct-to-consumer venues.

So we control every step of the process. As an organization, my organization is the Farmer and Trade Alliance. I also work with a lot of other similar organizations.

And we deal with a wide range of producers - everything from sort of largish scale, if that’s what you call large. But certainly full - making a living at commercial enterprises in the organic sector to smaller-scale - both organic and conventional - to homesteaders and people who handle just a few head of livestock for their own use.

And what is interesting is both - for me - is both the diversity of opinion from that very diverse range of folks, but also the commonality. And very often I find that our homesteaders have many of the same concerns as our sustainable, commercial producers.
They are working very often in different systems with a different perspective on animal health than some of the conventional producers. They have had to find very different answers to how to handle animal health and animal disease issues.

But very integrated in this community is just the automatic - a very core focus - on human health and environmental impact. It’s just - it’s part of every single conversation when we talk about animals and livestock, we’re talking at the exact same time about human health and environmental issues.

So we come at this from seeing animal health and disease issues as part of the whole package. And I’ve been on this committee for a while, but I’ve missed the last couple of meetings, and I haven’t been able to come in person. And it’s good to be able to be around the table and see everyone, and I look forward to working with you all.

(Liz Wagstrom): Thank you. Before I introduce myself, let’s see if either (Wayne Frieze) or (Willie Reed) joined the call? I know (Wayne) emailed me for the numbers, so I know he’s on his way. Okay. Neither of them are there.

Good morning, I’m (Liz Wagstrom). I am a swine veterinarian. I was an older student when I went back to med school. I actually worked for a pharmaceutical company before I went to that school. And so I turned 40 my freshman year of med school and thought I was going to be the run-and-gun swine practitioner, going down the road with multiple phones and radios and things like that.

Graduated that school in the late ‘90s when hard (true body) dollars was not a good time to necessarily be a run-and-gun swine veterinarian. So I actually - although I worked for a swine integrator for a while - had gotten a Master’s in
Preventive Medicine, and my first, well, I had the swine integrator job for a short time until the paychecks were questionable whether they were going to actually be (freight).

I went to work for the - Minnesota Department of Health doing food-borne outbreak investigations. So really got a look at public health, and after a couple years, at Primary Health, the National Pork Board was opening up a position for pre-harvest food safety. So it gave me a chance to get back to the pig industry that I loved, plus use my skills in food safety.

At this Pork Board for about ten years, grew it from pre-harvest food safety to more of a true public health and worker safety and food safety and a much broader position.

And from the Pork Board, I went to a faculty job in the Center for Food Safety and Animal Health at the University of Minnesota. Taught Public Health Rotation, and really missed being part of the industry - part of the advocacy for the industry. So for the last five years I’ve been Chief Veterinarian at the National Pork Producers Council. Split my time between Washington, DC and Des Moines, Iowa.

I definitely wanted to be part of this Committee because I think we can learn so much from each other’s industries, what we’re facing, what we’re doing. What works for swine might work for poultry - vice versa. What we can learn from different industries.

And one of the things after I got elected Chair that started - I really thought a lot about is that we are definitely the basis of agriculture here. We are very diverse. We are representing a lot of the aspects of agriculture, including wildlife and fisheries and as well as small producers, large producers.
And I want us to concentrate on what we can do that’s best for all of agriculture, so we all have our biases. I am extremely biased for my industry, but I think we need to look and say how can we work together to do what’s right for agriculture as a whole.

And so that would be the challenge as for lots of you all that we can have a productive committee. We can accept our biases that look broader than the boxes that we normally fit in on a daily basis.

And so with that, as we look at the schedule, we have a lot of time on this schedule for discussion. I think we’re going to get to know each other really well by the end of the three days. I think we will probably have some very opinionated discussion, which will be good. And hopefully, at the end, we’ll come out with a great work product.

And so with that, we’ve got the -

(Randy Macmillan):  (Liz)? (Liz)?

(Liz Wagstrom):  Yes, yes? Hey, (Wayne).

(Randy Macmillan):  This is (Randy Macmillan), and I am having to participate remotely. So I probably should introduce myself.

(Liz Wagstrom):  Thank you, (Randy). Sorry I had - two of the three names - so I missed yours. Sorry.
(Randy Macmillan): That’s all right. So I’m representing the U.S. Aquaculture industry. And my day job is as a (Flight) President of Research Technical Services and Quality Assurance for Clear Springs Foods in Buhl, Idaho.

Clear Springs is a seafood company, but we raise an awful lot of rainbow trout strictly for human consumption. And actually, we raise about 26 million pounds of rainbow trout per year, and are probably the largest single trout producer in the world.

As for my background, I have a PhD in Fish Pathology from the University of Washington in Seattle, and I was really an experimental pathologist looking at cellular senescence before I thought I needed to do something a bit more productive, so I was an extension agent in Mississippi.

Well, Area Extension Fishery Specialist working with the catfish industry, and then joining the Mississippi State Veterinary School College as a Professor of Veterinary and Aquatic General Medicine. And then after about eight years there, I thought it would probably be a good idea to go to someplace colder, which was Idaho. And so I’ve been at Clear Springs Foods for well over 25 years now.

The reason I was particularly interested in participating in this Committee was to represent an often underrepresented agriculture industry, and that is aquatic animal farming.

There’s an awful lot of difference, actually, well, of aquatic animals compared to terrestrial animals. Biologically, fish and oysters and shrimps are very, very different than all of the (pteropods) that you all usually work with.
So that provides opportunities, for me anyway, to introduce some concerns about some other types of farmed animals, and I hope that I can bring back to the aquaculture industry some of the wisdom that many of you can provide, and how we can as an aquaculture industry improve the value of our animals and certainly health protected (so how).

We are particularly engaged right now with USDA APHIS on the development of what we call the Commercial Aquaculture Health Program Standards - or CAHPS. And I just relate that CAHPS is somewhat similar to the (MPIT), and it’s different but somewhat similar, and so in that respect, a bit of a model for us.

We approach - the National Aquaculture Association approached USDA a couple years ago for assistance in developing CAHPS, and our particular interest is to improve and verify aquatic animal health and, in particular, to find more efficient ways to satisfy interstate and international aquatic animal health certification requirements.

Certainly to improve aquatic animals’ disease detection for reporting. Develop better infrastructure. So we are - basically, we’re probably 20 or 30 years behind terrestrial animal agriculture that way. So great opportunity for us, and thank you very much, and I apologize for interjecting.

(Liz Wagstrom): Oh, I’m glad you did. Thank you, (Randy). Sorry that when I called out (Willie) and (Wayne)’s name, I didn’t have yours as well. So. Excellent. Well, with that, we have the (CEA) - is that (Chris)’s team now? They’re that management.

Executive team ready to address this and introduce themselves. First up will be Dr. (Jack Spear). (Jack) in the last few weeks has been named the Acting
CEO and Deputy Administrator. But I think we want to congratulate him on that appointment as well as someone we’re looking forward to hearing from and then working with him.

(Jack Spear): Thanks, (Liz). Can you guys hear me okay?

(Liz Wagstrom): Yes, thanks.

(Jack Spear): Okay, great. I’m going to keep this short. First of all, let me say that it is an honor to be following in the footsteps of (John Clifford). He was an excellent Deputy. He was with us since 2004 as Deputy. He had a long and very illustrious (CLICK) career. We’re going to miss him but we’re not losing him.

He is moving on to become our Chief Trade Advisor for National - for (AVIAS) National Import/Export Services. So his expertise in that area will be of great benefit to us as we negotiate with other countries and try to bring them into compliance or to negotiate trade agreements with them in the light of the pathway that we just came down with high path AI. That’s a very important position, and the work that they do is very important for us long-term.

I understand today that you’re going to be talking about One Health with the topic of Anti-Microbial Resistance. That you’re also going to be talking about Emerging (Disease) Response, Animal Health Surveillance, FMD Preparedness and Chronic Wasting Disease as well as the Scrapie Program.

These are all important programs for us. We look forward to your input and your ideas. We have some things that we’re struggling with. Perhaps you can come up with the good ideas that we can move forward. I appreciate the fact
that you’ve come together to help us. We value your input. We also plan on working very closely with you in the future.

So just accept my appreciation, and I don’t want to say anything about the programs themselves because I have (T.J. Myers) here who knows a lot more about that stuff than I do, and he’s going on next. So I’ll stop there and (T.J.) will step up. Okay? Thank you.

(T.J. Myers): Thanks, (Jack). We’re sharing a computer this morning, so we’re trading chairs here.

Good morning, everyone. I just want to say thank you for your willingness to participate on this Secretary’s Advisory Committee. We think this is a really important Committee, and we look forward to your discussions on all the agenda items and giving us some good input and feedback on all of those activities.

I’m Associate Deputy Administrator for Surveillance, Preparedness and Response Services. That’s one of the four main divisions within Veterinary Services.

Our shop covers all of the policy development for animal health as well as all the animal health field activities, so it’s a large chunk of our organization. It covers all of our historic programs, such as TB, brucellosis, scrapie, all of those good efforts that we put out every year, along with dealing with emergency response and One Health activities as well.

I won’t take up a lot of time. I’ll just say that we had quite a year last year in dealing with high path avian influenza. It really consumed a lot of our energy and a lot of our time, and we learned a lot of lessons. We did, I think, a lot of
good planning to be prepared for further occurrences of high path avian influenza. And I think that’s shone true in the most recent case that we had in Indiana. This was an H7 rather than and H5 that we saw last year.

So, unrelated to last year’s outbreak, but it did show that collaborating together - industry, state and federal folks - could respond very quickly and very effectively, and I think the fact that we were able to contain that quickly was a testament to all of the good preparedness work that’s been going on at the industry, state and federal level. So 2016 is probably going to be a lot of catching up on things that had gotten set aside last year.

And then, looking forward into the future, having learned what we did with high path AI, if you’ve seen the President’s budget for 2017, we did include in there a requested increase of about $25 million to bolster our planning and preparedness activities so that we can try and rebuild a little bit.

As you may be aware, from about 2010 to 2014, we saw a lot of budget cuts, and I think that reduced our field force and our resources to the point where we were stretched fairly thin. We started to see our budget come back a little bit, and it shows an increased funding request for 2017. I think will help push us even further along in our preparedness activities.

So with that I’m going to stop. Again, thank you for your service. We look forward to your input over the next few days, and next up is Dr. (Mark Davidson), the Associate Deputy for our Import/Export Services. (Mark), are you on?

(Mark Davidson): I am. Can you hear me

(T.J. Myers): I can hear you. (Liz), can you hear him?
(Liz Wagstrom): We can, (Mark).

(Mark Davidson): All right. Well, good morning, everyone. As (T.J.) said, I’m (Mark Davidson), and I’m with National Import/Export Services, and I’d like to say hello. I’m in South Carolina today, so.

But we’ve really got three broad areas that we work in NIES. We’ve got our safeguarding the health of our animal health industries, and we do that through a couple different ways.

We have the ports of entries and animal import centers and the mitigations we put in place for the trade of animals and products. We also do this through advising on disease status of other countries. We also work in the facilitation of trade. We do a lot of work in trying to remove technical barriers to trade, and I’m very proud of the work that we did during the HPAI outbreak this last year.

We only had a handful of countries that actually banned trade from the entire U.S. A number that didn’t, and over 37 that regionalized the U.S. in some form or fashion, whether it was a state, a county or the control (roam). And that was many years of work to lay the foundation for that.

A couple of the other areas that we do a lot of work - as we’re engaged with the OIE - and that’s the point with Dr. John Clifford joining us as our Chief Trade Advisor and our OIE delegate will continue to work with the International Animal Health standards-setting organization.

And then, finally, a component of NIES that a lot of folks don’t realize is the Agricultural Biological Select Agents and Toxins Program for APHIS for both
animals and plants rests with us, and we do that program in collaboration with CDC.

So I think that’s a general overview of the areas that we work in. A couple just quick highlights for the upcoming year. We continue to work towards electronic certification. We have some electronic certification digital projects going on with Canada right now. We’re making enhancements to our ability to work in the virtual world.

We also have several customer service initiatives. We’re deploying a call center appointment system for our Miami Animal Import Center and some more enhancements essentially geared towards pet exports. That’s a group that doesn’t export regularly and needs some guidance.

And so I think with that, that’s a broad overview of what we are at NIES, and going to turn it over, I believe, (Brian McCluskey) from our Science, Technology and Analysis Services.

(Brian McCluskey): Good morning. Hi (Liz). This is (Brian). Can you hear me okay?

(Liz Wagstrom): We sure can. Yes, thanks, (Brian).

(Brian McCluskey): Okay. Good morning, everybody. As (Mark) said, I’m (Brian McCluskey). I’m the Executive Director for Science, Technology and Analysis Services. Dr. (Lautner) is the Associate Deputy Administrator for STAS, as we call it. She is attending a meeting of the NBAST, the new developing the new Plum Island Laboratory in Manhattan, Kansas and is sorry that she couldn’t be with you all this morning.
What I’ll do is similar to what (Mark) and (T.J.) just provided. Kind of a brief overview of what STAS is about. STAS brings together the Science Centers throughout Veterinary Services, so that would include our Center for Veterinary Biologics, the National Veterinary Services Laboratories, the Center for Epidemiology in Animal Health and then our Office of STAS Interagency Coordination.

Aligning these Science Centers really allows us to leverage the strengths of these three Centers, and then with the Office of Interagency Coordination, that really maximizes the potential of each through collaboration, cooperation and partnerships, both internally and externally, and that allows us to bring the best science to animal and public health.

Just a brief overview of each of our Centers. The Center for Epidemiology in Animal Health - or CEA, as we call it - is located here in Fort Collins, Colorado. That’s where I’m stationed.

CEA’s mission is to promote and safeguard U.S. Agriculture by providing timely and accurate information and analysis about animal health and veterinary public health and agricultural economics.

We do this in a variety of different ways. Through national-level studies to risk identification and assessment through geospatial analyses, through epidemiological modeling, CEA explores and analyses animal health and related AG issues to facilitate and inform decision-making, and we also partner with the OIE and member countries to improve international disease surveillance capabilities and analytic methods supporting trade.

Another of our Centers within STAS is the National Veterinary Services Laboratories, or NVSL. I’m sure all of you are very familiar with NVSL. It
provides a wide variety of information and services really centered on the
diagnosis of domestic and foreign animal diseases. It also supports disease
test and eradication programs, develops reagents for diagnostic testing and
training and laboratory certification.

And really at the very core of NVSL’s mission is customer-based services in
veterinary diagnostic laboratory. The NVSL scientists and support personnel
perform diagnostic tests on nearly a quarter million samples each year, so as
(T.J.) pointed out, we had a large outbreak - a large-scale animal disease
outbreak - last year with high path AI.

And with partnering with our National Animal Health (Quick) Network Labs
and NVSL ran through a lot of testing for AI. A very important aspect of the
National Veterinary Services Laboratories are dealing with outbreaks.

As I mentioned, the NAHLN - the National Animal Health Laboratory
Network - is a cooperative effort between two USDA agencies: APHIS and
NIFA - the National Institute of Food and AG and also the American
Association of Veterinary Laboratory Diagnosticians or AAVLD.

And the NAHLN was formed in 2002, and NAHLN included at that point 12
state and university diagnostic labs. Today, it’s over 60 laboratories and has
really become a very important part of laboratory diagnostics in the U.S.

Our third Center within NSTAS is the Center for Veterinary Biologics - or
CVB. CVB is responsible for regulating veterinary biologics, and that would
include vaccines, bactrins, diagnostic kits and other products of biological
origin, and it’s in place to ensure that those veterinary biologics available for
diagnosis, prevention and treatment of animal diseases are pure, safe, potent
and effective.
The last of the three Centers is the Office of Interagency Coordination, or OCIC, as we call it. And this Center is responsible for coordinating the interagency activities related to the STAS mission. We obviously collaborate with a large number of other government agencies - international agencies, private organizations in a lot of the work we do - both the laboratories and here at CEA.

And so the OCIC group integrates and coordinates animal health issues, and this actually includes things like radiological contamination and carcass disposal. So, a very wide ranging group of organizations that particular Center deals with.

And so that’s really real brief. I will actually be with you all tomorrow afternoon. I have a presentation I’ll be making in person and look forward to having a chance to sit around the table and maybe at breaks get to visit with you all. So I will be there tomorrow. And I think I’m tossing it back to you at this point, (R.J.). Is that correct? Or to you, (Liz)?

(Liz Wagstrom): Thank you. Thanks, (Brian). We do have (Wayne Frieze) that’s joining on the phone, so before we trans over to (Dr. Annelli), maybe, (Wayne), you could briefly introduce yourself, where you’re from and a little bit about why you wanted to serve on the Committee.

(Wayne Frieze): Well, thank you, (Liz). This is - I’m (Wayne Frieze). I’m from Southwest Minnesota, and I’ve been in a large animal veterinary practice for - I hesitate to say - 40 years, and I’ve also been involved with two different vaccine laboratories, and currently am involved in agricultural production too.
You know, I involved for the swine industry, and (PPC), and the AESC, and I’m involved with raising hogs, so I think I can bring a little different flavor at times to the organization, but I appreciate being on because I want to learn as much as I can to bring back to our groups. Thank you.

(Liz Wagstrom): Okay, thank you, (Wayne). So I believe next up we’ve got Dr. (Joe Annelli), who is going to visit with us about One Health and how we can work with both traditional and non-traditional stakeholders.

And you’ll have some Q&A with him. But (Joe) will have a couple of presentations for us, so we’ll have time for discussion. We’ll take a break, probably between his two presentations, but (Joe), are you on and able to - (R.J.) has got your presentation up, so if you’re on, we will turn it over to you.

(T.J. Myers): And (Liz), before you turn it over to (Joe), I just wanted to - as long as you’ve got the VSTAT here, any questions before we sign off?

(Liz Wagstrom): Sure. (Mary Ann)?

(Mary Ann Knievel): This is (Mary Ann Knievel). Can you hear?

(T.J. Myers): Yes.

(Mary Ann Knievel): Okay, good. Actually I guess this is for (T.J.). You said you requested 25 million in funding to bolster preparedness. How much did you get?

(T.J. Myers): That request is included in the President’s Fiscal Year of 2017 budget that was just released earlier this month, so the President has sent that to Congress, Congress will deliberate on that and take whatever action they choose to take, but that’s not a budget that would begin until this October.
Now, being in an election year, I would fully expect that Congress is probably not going to pass the budget October 1. We’ll probably start the year with a continuing resolution. So I don’t really expect them to take any action on that until after the election or even after the Inauguration. So at this point, it is simply a proposal within the FY 17 budget, with no guarantees that we would see that increase of 25 million.

(Mary Ann Knievel): Thank you.

Woman: (T.J.), along those same lines, can you address overall program budget increase in the President’s budget? I know for decades we’ve seen APHIS have decreases in budget, but what is the overall 2017 picture look like? You don’t have to go in great detail, just overall.

(T.J. Myers): Well, there is that $25 million increase that we requested for preparedness. There’s also, I believe, 10 million for antimicrobial resistance. That was included in the FY 16 proposal, but Congress did not fund that this year, so we essentially received no dollars this year for work on antimicrobial resistance issues. So, no increase there.

The rest of the budget, I think, is fairly flat. It’s essentially the same as the 2016 budget.

Woman: And then the 5 million, I believe it was to change the NAHLN laboratories this year - has that been taken out of the 2017 budget, do I understand?

(T.J. Myers): Yes. We believe that’s just a one-time allotment, and we won’t have that in the ’17 budget.
Woman: Okay. Thank you.

(T.J. Myers): You bet.

(Liz Wagstrom): Any other questions for the Executive team?

(John Olney): This is a question - (John Olney) here. Maybe this one’s better for (Mark). We talked about FMD, but I know there was a Congressional hearing on FMD, and presentations were very informative. I think (Jim Roth) has done a wonderful job working at potential economic impact of FMD in the United States.

And of course, one of the key proposals was the vaccine bank, and there were projections that he made that would cost $150 million a year for 5 years to actually get the bank up to the standards we’d like to see.

I’m just curious if USDA Veterinary Services has actually looked deeper into that to determine what it would cost to potentially fund a vaccine bank, and I don’t know if you can give me some idea on that, or if we should wait for a presentation tomorrow. Thank you.

(Jack Spear): Well, we can say this. We’ve worked with the industry and we’ve had several discussions with them. We’ve worked with (Jim Roth). We’re well aware of what his paper says. We’ve worked toward our own decisions and discussions of what the vaccine bank should look like and how we could build that.

It becomes a funding issue, more than anything, to get the money to build the bank the way you need it. There are several options that need to be explored in regards to how to do that. And we’ve looked to industry and to Congress to work on that and help us with that.
So there is different proposals out there about how to do that, and currently what we’re staying on is the ten major (TOFA) types, out of 25 million samples of each. That would be a rotational basis that take five years to build that at the level that we would need it. So at the end, it is an expensive venture. We don’t have the solution yet of how to get there. (T.J.), do you want to add anything?

(T.J. Myers): No, other than I think at this meeting last year - whenever the Secretary’s Advisory Committee met - we did talk with you all about the possibility for a cost-share approach between industry and government. A public-private partnership. And that is still on the table. Our administrator, Mr. (Shea) is thinking that that’s probably the best approach.

So as you have your meeting this week and talk about that FMD vaccine issue, I’d encourage you to consider that and explore that further. Because it is an expensive thing to do to build the type of bank that’s been suggested by (Jim Roth). You could certainly build it that big. You could do something smaller. But really, it does come down to - as (Jack) said - it comes down to the cost.

One of the other suggestions that’s also been made is to put a proposal forward that would be included in a Farm Bill for that type of funding, much like the plant folks have done. I believe they get in the order of 75 million a year through the Farm Bill, and they worked hard to put that into the Farm Bill. So that would be another option that - or direction it could be taken or thought about.

(Liz Wagstrom): So I’m going to take the Chairman’s prerogative and ask one last follow-up question before we turn it over to Dr. (Annelli). You mentioned the ten
(TOFA) types - the 25 million doses. Is that what is going to be in the Request for Information that APHIS will be publishing, or will it be the broader bank you said was Dr. Roth’s suggested in his paper?

(Jack Spear): Go ahead, (TJ).

(T.J. Myers): Requests for Information - or Sources SOT Notice - whatever term you want to use for that would focus on the ten major (TOFA) types. But again, that’s a Request for Information where we’re really just trying to gauge what is the capacity within the biologics industry out there to meet the needs, if we were to go forward with expanding the foot and mouth disease vaccine bank.

So that’s what the Sources SOT Notice will say. But that doesn’t, you know, bind us to only considering those ten as we go forward.

(Liz Wagstrom): Great. Thank you. Thank you to the Executive team for taking this time to visit with us. We do appreciate it. We’re anxious to keep interacting with you on behalf of our industries. And with that, I think we will turn it over to Dr. (Anelli).

(Joe Annelli): Great. Thank you, Dr. (Wagstrom). Let me know how the volume is coming across. If I need to speak louder.

((Crosstalk))

(Liz Wagstrom): It’s coming over fine.

(Joe Annelli): Okay, great. And does (R.J.) have the presentation up - can you see the first slide?
(Liz Wagstrom): Yes.

(Joe Annelli): Okay. Excellent. Let me give you a little bit of background about myself. I was squeezed to - a number of you that I’ve worked with over the years.

But to give you a sense of what brings me to being the Director of the One Health Coordination Center, we can go back to perhaps Dr. (Frieze) knowing me as a graduate student in Minnesota in Swine Health. And also doing a dual Master’s with the School of Public Health at the University of Minnesota.

From there, working with the Pseudorabies Eradication Program, a large, mostly vertically-integrated swine industry, and a national eradication program that took 10 years, maybe 12, to finish it off.

On through to working with our National Animal Health Program staff where I oversaw a number of programs, including the aquaculture program. I also have a previous Master’s degree in Ecology and Marine Biology. So another area of interest of mine.

Then moved on to the Emergency Management staff, where I was the Director of that. And that’s where folks like (John Fisher) and I got to work together on wildlife and various disease overlaps, and foot and mouth disease.

`In fact, I heard one of you had gone to the United Kingdom. It was my staff at the time that helped send 325 veterinarians to the United Kingdom to help with that foot and mouth disease outbreak.

I also then was detailed to our Secretary’s office to work on avian influenza. Our H5N1 outbreak that occurred worldwide - fortunately not in the Western
Hemisphere. And worked internationally on avian influenza and a zoonotic avian influenza, at that.

So that lack of being able to hold a job led to them creating a new group within Veterinary Services for One Health. And I wasn’t sure how much background on One Health I needed to give everyone. We actually have three different presentations that touch upon One Health issues.

There’s this one on Non-Traditional Stakeholders and Industries. Then the one after the break on Zoonotic Diseases, and then a third one tomorrow on Antimicrobial Resistance.

So at first I thought I might have to give everybody a little bit of a background, and then I hear Dr. (Blackwell) is a member of this group. In fact, Dr. (Blackwell) is likely the only veterinarian who has every held the position of Surgeon General of the United States. So I think this multidisciplinary approach at solving problems is something that many of you are familiar with.

One Health is this concept that no one group - no one discipline - has enough of the knowledge to address the complex issues that this world presents to us.

I’ve mentioned the part about my involvement in pseudorabies to demonstrate that we - me and Veterinary Services in general - has had a lot of experience in the past dealing with large industry groups that you might call the sort of standard food production model that we’ve developed in this country.

Yet, as we move forward, we’re realizing that a significant component of our food producing sector is just like one of our representatives on this Committee - and that is, a relatively small operation that does custom slaughter, and while
you said you’re completely vertically integrated, it’s selling at fairs and, you know, other small venues, and that is becoming a larger segment of the agricultural community and one that we have not traditionally dealt with in any sort of depth.

Another thing I want to say about One Health is that we - USDA - is looking at this primarily in a non-regulatory manner. We have an agreement, for example, with FSIS to work together with them.

If there’s an identification of a food-borne illness that is not identified within the slaughter plant as some breakdown in a (hassock) approach, that perhaps there’s an increased burden of whatever that bacteria is coming in with the animal.

And that there might be pre-harvest interventions that producers could use that would reduce that burden of bacteria going into the slaughter plant and thereby providing a safer product that goes out of the slaughter plant to the consumer. What we’re looking at - what we may do on the farm - as a root cause analysis cannot be regulatory in any way.

That there be an agreement between us and the producer that we will work with them on their on-farm practices. We will identify potential causes for something like that spillover, and then provide them with that information so that they can work with their private practitioner, or extension agent, or whoever else they may consult with to apply some of those interventions.

And this can go across the board in many different areas where there’s a non-regulatory approach. It’s not that we need a large national eradication program, but that an individual producer needs some individual help to solve a specific local problem.
And this changes the whole concept of how Veterinary Services has delivered services in the past. And it takes it from a top-down - meaning an industry-wide approach - that then, given all of the stakes, they then implement like CV, brucellosis, pseudorabies, et cetera and really looks at unique local problems and how can we provide our expertise to help stop some of those problems.

Well, in doing that, one of the things that we need to look at is who do we work with to develop the necessary trust, processes and learn the importance to industry for what these issues are. And conversely, consumers are driving a lot of what is now becoming standard practice in the agricultural community.

So how do we understand what the community - the consumer community - is looking for so that we can work with producers to help translate what that future need may be, and how we can keep farms profitable and yet meet some of these external factors that are driving agriculture production into the future?

So before I actually go into this presentation, which is very short - I want to leave time for discussion - let me just stop there for a second, because I can’t really see if people are raising their hands or whatever. Let me see if anybody has any questions before I go on.

(Steve Crawford): I have one question.

(Liz Wagstrom): Go ahead, (Steve).

(Steve Crawford): (Steve Crawford), New Hampshire State Veterinarian. I made a comment about - I thought I heard it correctly - on farm assessments by USDA personnel or others to help with pre-harvest improvements?
(Joe Annelli): Yes.

(Steve Crawford): One of the things that I hear from folks - farmers, producers is 1) a concern about having regulatory officials on their farms, and just a sense that for a non-regulatory event to turn into a regulatory one.

But more frequently, the credibility and competency of that person on the farm. It sounds like your resource needs to be, and how would you address the number of bodies you might need to go onto farms?

And do you have a plan for how that flow of potential hires would be assessed for their - for their background on farms? You know, going onto a farm to talk face-to-face to a farmer. They want someone who understands how things work on a farm, as opposed to just how they work in an office.

(Joe Annelli): That’s right.

(Steve Crawford): Smaller, I think, than it would have been in the past.

(Joe Annelli): Yes. No, I completely agree. Yes, we are working on a set of core competencies that we believe that people working in this area of One Health would need to have.

And it stresses a lot of the communication skills. At the same time, stressing the epidemiological and risk assessment capabilities. So we really need to be careful in developing the appropriate workforce and applying the appropriate skills to what that producer’s problems are.
So we are not there yet. But one of the things that is within the Veterinary Services’ strategic plan is this development of our employees to meet the demands of this next century of agriculture.

So yes, some of that will have to go into careful selection of hirers. And other parts of it will have to go into education. But plus, partnering is a big part of it thought. We would need to partner with universities within the State so that we’re using their expertise as well.

And then the second half of your question - really, the first one you brought up is the ability to keep that information confidential, and we have been working on that.

We believe we have a memorandum of agreement that can be signed between the producer and Veterinary Services that also includes state and local either public health or State veterinary personnel, and it will protect that data from being FOIable so that - that’s Freedom of Information Act requests - so that it doesn’t become public knowledge, but it’s only used by the producer to improve their own production system.

We’re a ways away from that, and we are very much open to listening to your suggestions about how we might get there and also what the limitations are that we have to implementing that, you know, sooner rather than later.

(Judith McGary): This is (Judith McGary). Actually wanted to follow-up, because I saw a disconnect between one point that you raised and the response, because I hear the same thing from my producers that you brought up - the two points you mentioned.
And for us, the producers, when they’re talking about the concern about a non-regulatory discussion that turns regulatory, it’s not the general public they’re worried about. It’s not - I mean, obviously they don’t want the general public to have all that’s on their farm.

Actually, many of them are fine with that. Their farms are open to the public. But the concern is what is USDA going to do. Is someone from Veterinary Services, if decide they don’t like something they see, are going to start talking to FSIS, or start - or invoke - the regulatory side of Veterinary Services. You know. Are they opening themselves up to a problem with the Agencies, more than the public.

(Joe Annelli): Yes. I hear that. You know, my philosophy through my entire career has been that we can accomplish more through education than regulation. And it’s everything that we do in One Health ultimately comes around to trust.

Whether it’s two federal agencies working together, or it’s a federal agency and your state agency working with the producer, there have to be developed a certain level of trust that what we’re saying we’re going to do is actually what we’re going to do.

So again, I would love suggestions on how we can build that level of trust with multiple different groups so that these ideas, if they’re good ones - and that’s another thing that we can use your feedback on - is that whole concept of applying a One Health approach to animal production to improve productivity, food safety, you know, and meet consumer demand while still maintaining a viable agricultural infrastructure.

And I will say that one of the things that, you know, for those of you who know me, I tend to be sort of brutally honest. I think you would rather work
with us in Veterinary Services to work through a problem than not work with us and be subjected to FDA’s regulations.

You know, because that’s what’s going to happen in a lot of this. FDA will make the rule but not based on any practicality, not based on, you know, anything, and then expect industry to just meet that standard. And perhaps that standard is not best for 1) meeting their ultimate goal, or 2) that’s in the best interest of maintaining a viable agricultural infrastructure.

And then I think we’re more of the soft side of what that regulatory approach could be.

(Michael Blackwell): (Joe), this is (Michael Blackwell).

(Joe Annelli): Hello, (Michael).

(Michael Blackwell): I will just say that when I hear One Health, and then I hear siloing information, as a person who is working in the public health realm, it is very disconcerting. I think that the movement of diseases around the planet are such that we have - somehow we’ve got to get beyond the idea that livestock are the personal property of an individual and there is no public interest in what goes on.

That is what’s changed. The public is very much concerned about the lack of transparency. And if Vet Services or any other agency is going to out and work with the producer under the agreement that the information doesn’t go anywhere, there is where we are vulnerable as a nation.

Because there are other agencies, both in the public and private sector - the NGOs - that have the ability to assist with some of these issues. It’s the lack of
information that’s tying the hands of the public health community. And as someone who got involved with antimicrobial resistance as early as the late ‘70s, and to see where we are today, that’s what I fear is going to happen with a number of other diseases.

So I hope you guys will think about how you take a non-regulatory posture - which I think is good - but at the same time, there is a public interest in what goes on on a farm if you’re going to place that product in the food supply.

And I have five grandchildren, and I care about what you’re doing to the food if it’s going to make its way onto their plates. And I don’t think the public is going to give up that position going forward. I think we’ll see more demand for disclosure and transparency.

(Liz Wagstrom): Go ahead.

(John Mahoney): Perfect comment. (John Mahoney) here. You’re representing the Veterinary profession, and as we kind of work out what’s happening out there, we probably spout words like “trust” on the farm, being able to be good on the farm with producers to be able to communicate, train, teach.

Is this really more of an opportunity for the private sector and private veterinary practitioners who already have a relationship on the farm; they already communicate on farms. I think USDA has done a nice job putting together our training modules for certification to do regulatory activities.

Is there an opportunity to create a training program for private veterinary practitioners that would expand their ability to interact with their clients, perhaps get better involved or engaged in areas that are underserved because
of increased opportunities for practitioners to work with producers, small non-traditional producers? Is there any thought around that?

(Max Ignasius): You know what? (There’s no veterinarians around). I think the biggest problem we have -

(John Mahoney): I think that’s it, man.

(Max Ignasius): No, I’m not. And the government, you know, they want to solve any of these problems, we need to solve the problem. Make it easy. Make some kind of arrangement with the young people want to be veterinarians to help them to pay for the school. Right now, the farmers cannot afford to go to a vet. You know, it’s cheaper to kill an animal. (Unintelligible).

(Joe Annelli): Yes, let me answer the first question, and (Michael)’s comment is I completely agree about the data sharing.

And that same thing that I was talking about, any number of groups - the CDC, USDA, FSIS, the producer - can all be part of an agreement where the information from that specific farm would not be shared for fear of some sort of retribution, but that the outcomes, if the interventions are successful, could certainly be shared with others to improve safety outcomes.

So the initial goal, hopefully, would be accomplished in improving food safety, but doing it in a way that the producer is completely comfortable, because otherwise we have producers that are hiding that information or perhaps just not educated enough about the situation to know that something they may be doing is affecting food safety down the line.
Another good example of that in developing trust and working with public health is an influenza in swine surveillance that the swine industry is participating in that’s primarily funded - or at least previously it’s been funded - by CDC, because they are concerned about antigenic drift in influenza viruses to be able to predict potentially the next human influenza and next human pandemic and be prepared for that.

But there is the risk to the producer that if that individual information were to be shared, there might be some group out there that would have a regulatory aversion to whatever gets reported, or a slaughter plant may decide, well now that you’ve tested positive, we’re not going to take your hogs anymore.

Whereas, had they never tested, they likely would have been infected anyway, but nobody would have known about it, so there would have been no repercussions. So we need to work through those issues to really make the One Health concept work.

I believe that another question was about veterinarians in underserved communities. There is still, I believe, a program that’s funded through the National Institute of Food and Agriculture - NIFA - that provides some loan relief for veterinarians who would work in underserved areas that have been identified by NIFA, so there’s a little bit of that.

And a big component of what we’re looking at in One Health is educating the private practitioner through either the veterinary accreditation online courses or opening up other courses to private practitioners that we would be giving to our own employees, because on something like this root cause analysis, the producer’s private practitioner needs to be a critical component of making that successful.
So helping to develop those skills in the private practitioners would also be a way of helping to educate the producer and get some of that same expertise. It doesn’t necessarily have to be a Veterinary Services employee that’s on the farm doing that.

But yes, please, if you could capture these in the minutes of your meeting and in your recommendations, these are all ideas we’ve thought about, but the challenge is with limited resources, how do we prioritize these things with everything else.

And that’s where part of this new collaborations come from. You know, traditionally the support has come from animal agriculture. Yet, what these activities are all about is protecting - and the benefit is derived by the general public.

Yet, you know, for antimicrobial resistance, we put in a request for $10 million last year. It remained in the President’s budget, and when it went to Congress, USDA’s money for antimicrobial resistance was removed, but FDA, and CDC and so on - their budgets increased for their work on antimicrobial resistance.

So it’s tough for us to develop the necessary data to make wise decisions on the farm when we’re not getting the funding to do it, but the human health side is.

(Liz Wagstrom): Hey, (Joe), before we go into your presentation, we have one more question from (Peter) and then - so, two more - (Mary Ann)’s and mine too, and then we’ll get going on the presentation.

(Joe Annelli): Okay. And just so you know - the presentation only has six slides, so.
Okay, so I was just curious. You gave an example, in terms of some of the areas that Veterinary Services might be moving into as, for an example, pre-harvest bacteria loads that you’d find at harvest plants.

Do you have - what is the mechanism you’re envisioning for identifying those crucial issues and how you determine where you’re going to focus these efforts through the FDA Veterinary Services?

One of the ways would be by educating producers and their veterinarians that this is a service that we are willing to deliver to them, that we have epidemiologists and risk assessors and so on that might be able to help in a situation that they self-identify.

The other way that that may occur is through a human outbreak that’s traced back and its potentially the, you know, the finger gets pointed at a farm or group of farms, that we may be able to offer that service to farms that are either being implicated or may have been traced back by FSIS so that we can - if those farms are creating those issues - work with them in ways that they can reduce that burden.

And those are the two ways that I can think of, you know. If you and others have other thoughts on how we might get involved in those kinds of activities, I’d sure love to hear them.

I guess my question was, what other areas besides, say for example, outbreaks - from a bacterial outbreak from food - what other areas are you looking at in terms of where you might be involved with this semi-voluntary intervention?
(Joe Annelli): I think some of the others - and I’m - one of my challenges is that we do not have an environmental person on our group. We’re all veterinarians. So we tend to all think zoonotic diseases. But there are a lot of other areas that are of potential concern and interest from, you know, contaminated water sources - cryptosporidium was an issue a number of years ago.

Those are the kinds of things that have - once thought Veterinary Services would say, “Well we don’t do that. We only do our large eradication programs.”

And now what we’re saying is, “We have expertise which could be applied to a wide range of problems. And it no longer needs to be one of these national disease programs. We’ve changed our funding mechanism so that we have a swine health area, we have a zoonotic disease area, we have an equine health program.”

So that anything within those that are of concern to the public and the industry are things that we would be willing to look at and engage in if there’s a way that our expertise could be used to assess it.

(Liz Wagstrom): And (Mary Ann)?

(Mary Ann Knievel): As you talk about working with the producer outreach, I’m sure you’re familiar with programs like the Beef QA, the Beef Quality Assurance. We already have a lot of these producer-driven initiatives in place trying to address overall management issues. I hope you’re not going to reinvent the wheel, and you would go ahead and start with these programs working with producers.
(Joe Annelli): Yes. In fact, one of the things we thought of early on that might be of assistance there is to - I know now some of these have sort of an internal quality assurance check. We had proposed at one time that what we could do is propose that we could do some independent audits for the industry.

(Mary Ann Knievel): You said use a government veterinary services would do independent audits for the industry?

(Joe Annelli): Yes.

(Mary Ann Knievel): So if there’s quality assurance programs?

(Joe Annelli): If that is something that would lend credibility to those quality assurance programs, because perhaps there’s an international market that someone is looking to open, and there’s some need to have a different kind of audit process of that quality assurance program, then that’s something that we would be willing to discuss and see if that’s to the industry’s benefit to use our folks in that way.

And that’s just one example of things we’ve been kicking around.

(Liz Wagstrom): So thanks, (Mary Ann). As much as that sounds out of the box, APHIS actually does - I don’t think - they don’t accredit, but we use for Quality Assurance Plus program to assure trading partners that trichina is not a risk in U.S. pork.

And so APHIS can actually verify that packing plants are buying only from PQA-plus certified producers and then SSIS will sign an export certificate, so it’s an audit of the plants’ procurement. Not necessarily the prime audit.
(Mary Ann Knievel): But it’s more like the third-party verification that many people seek?

(Liz Wagstrom): Yes.

(Mary Ann Knievel): And is it free?

(Joe Annelli): Yes, it would be free from us. Isn’t it, (Liz)?

(Liz Wagstrom): It is. Yes. Free.

(Joe Annelli): Yes, see that’s the thing. We have a lot of people who are already on salary, and if we can expand the areas they get involved in, it really doesn’t cost us or you as the taxpayer any more to have them involved in those other activities as well.

(Mary Ann Knievel): What - and I apologize if I’m very uninformed about this, but what you’re talking about is going to require quite an influx of people to be able to handle this, yet we get no additional funding for anything else. How are you going to be able to supply these people? Where is the funding going to come from?

(Joe Annelli): Well, I don’t know that it would require an influx of funding. And it depends on how wide-scale something like this gets to be. But we are already funded for a certain infrastructure. So those folks could certainly spend some of their time on other things that are not directly related to our national eradication programs, and so on. There is some time within their schedules to do those kinds of things.

It’s what priorities we put on them to work in these areas. Now as we reduce diseases and don’t need to spend as much money on programmatic disease activity - for example, pseudorabies - that funding that formerly went to
pseudorabies eradication can be used in some of these - a salary can be used for people’s time to work on other areas that are important to the swine industry that would help improve marketability, quality, et cetera.

(Mary Ann Knievel): Thanks.

(Liz Wagstrom): (Joe), I think we’re fed up. I’d like you to give your presentation, and then we’ll talk some more.

(Joe Annelli): Okay. So let me just see where we were here.

Well, within the Veterinary Services Strategic Plan, one of the things that’s in there is to build new collaborations and partnerships while sustaining existing ones.

So I think we have fairly decent relationships with the traditional industry groups within agriculture. The challenge is whether or not we have the same sort of constituent base outside of agriculture, whether that’s public health, whether that’s in the small sort of non-traditional industries that are increasing more and more. Whether that be an urban agriculture that’s cropping up now.

So we’re looking at - and looking to you - to help address what some of those sort of non-traditional partners might be that we should be reaching out to. And the other part about the question which you just asked about funding is that if there is a significant need from one of these non-traditional groups, perhaps it’s their efforts at obtaining funding for those needs that might provide those kinds of funds - resources for those other activities.
I put this in here because I wasn’t sure how much of this One Health activity people would know. But it’s this idea of multiple disciplines working together to obtain optimum health of people, animals and the environment.

So we’ve been involved in questions about Flint, Michigan and whether that water supply has gone to livestock or not. And the answer that’s come back from the folks in Michigan is no, that is not a source of water for livestock in the area. There is a concern, however, about pets and whether or not there are long-term effects in pets as a result of exposure to that water.

The other thing just to keep in mind - we can’t be all things, you know, at all times with One Health. It almost defines everything. So we are looking at some very specific activities, and that is in zoonotic disease surveillance.

So we know about TB and brucellosis. But things like avian influenza that have a zoonotic potential or influenza A in swine that, again, might have a zoonotic potential.

We’re working with CDC on epidemiological investigations for, say, Q fever or a major outbreak of salmonella in people that resulted from hatching chicks purchased at a farmer’s supply store, and folks that were purchasing these might not understand poultry production and salmonella and need to be educated about that.

Antimicrobial resistance - there’s collaboration with Veterinary Services, Agricultural Research Service Center and Food Safety Inspection Service. There’s also a national plan called (CARB) countering antibiotic resistant organisms. Unfortunately, the funding for that was pulled out by Congress. So we’re continuing to move ahead with what we can, but also looking to get additional funding this next year as well.
We have subject matter expertise that can be applied to a number of issues. For example, we may have never thought that we were going to get involved in Ebola with swine, but one of our lab folks in Plum Island developed an array that would test for multiple diseases at the same time.

So the Philippines was having a problem with what they thought was (PRRS), and they wanted us to look at it to see whether or not it was a unique strain of (PRRS) that was causing this problem. So we put that sample on this array to test it for multiple viruses, one of which was Ebola. And it turned out that this swine sample from the Philippines had Ebola Reston in it.

Ebola Reston is the strain that doesn’t affect people. However, that caused some concern within the agricultural community if they can be - if pigs can be infected with Ebola Reston, could they be infected with Ebola Zaire? So there was a study done to infect pigs with Ebola Zaire to see what happens.

Lo and behold, those pigs not only got sick clinically, but shed virus and were able to infect by some aerosol transmission, primates that were in the same room with the infected pigs. So at least theoretically, swine can be infected with Ebola Zaire and can go on to infect people and pigs.

So when the Ebola Zaire outbreak occurred in West Africa, we started working with CDC and AVMA to look at the potential effect of Ebola Zaire in petting zoo situations. Somebody who came back with exposed to pigs in a petting zoo situation, or what would we do on farms if - heaven help us - the Ebola Zaire were to be introduced into a swine farm. How would we handle that?
So there’s some of the ways that this One Health concept is looking at issues in new and different ways.

And then the last one on this list is laboratory support for salmonella outbreaks to look at typing to try and develop relationships between outbreaks and where they may have come from.

So our Center is very small. We have five people. We do help provide this One Health subject matter expertise. But primarily, we build alliances, and we coordinate partners and networks so that we bring together the multidisciplinary teams necessary to address problems. And one of my key principles in One Health is I don’t know what I don’t know.

So I have to bring together multidisciplinary groups, present the problem, and have people self-identify where they may have expertise that can be brought to bear.

We also now have an Outreach Coordinator that helps us with communication about One Health. And that’s where we’re hoping to further develop some training modules for private practitioners and also just deliver other One Health training activities.

So the question, then, for you all is what are the preferred methods of outreach to not only the traditional industries but the non-traditional stakeholders to both identify and address One Health issues of mutual concern.

We had a bunch of people within Veterinary Services develop a very extensive strategic plan about what we would do on One Health, and this is where some of the ideas I’ve been talking about come from.
But we are really now at the point where we need to ground (troop) all of this. Does this make sense to industry? And when I say “industry,” who are we really talking about?

Is it just these cattle, dairy, swine, poultry - or are there subsets, as some of the folks on this Committee represent - that we really need to focus more attention on and work with because the One Health issues that face them may be greater challenges than they are to the large, you know, vertically integrated operations that we traditionally work with.

So that’s my last slide, (Liz), if we want to open it up to some discussion now, and I don’t know if you then will come up with recommendations on the last day of this meeting, or what. So I’ll end it there and turn it back to you, (Liz) for discussion.

(Liz Wagstrom): Great. Thank you, (Joe).

Yes, I’ve listened to the presentation, and I kind of came up with a couple ideas on what I think APHIS is asking. What is perhaps a bit of help in prioritizing One Health activities? Even though that wasn’t explicitly stated in the question, and then secondly, once you come up with some prioritization, that maybe helps you decide who your stakeholders are that you need to outreach to - both the traditional and non-traditional.

So I think I’d like maybe to open it up first to saying are there some real priority areas you think that we ought to suggest to USDA, and then what are those stakeholders that would be a part of that area?
Does that work for you, (Joe)? We’ll probably take just ten minutes, or five or ten minutes here to talk a little bit. After break, do your second presentation. And then before lunch we can have a full-blown discussion.

(Joe Annelli): Sounds good to me, (Liz).

(Liz Wagstrom): So, (Michael Blackwell).

(Michael Blackwell): I would just like to re-emphasize that One Health, including humans, and animals and the environment, by design requires that we have the appropriate people in the room. So it’s good to hear that you’re trying to access the staff, especially from an environmental standpoint, but I think that I’m back to the information-sharing piece, that we really have to figure out how we’re going to share information with the various partners.

Right now, it seems like veterinary medicine - the primary one it talks about One Health - I was on the task force that set up this Commission, and how to define it, and from the very beginning we started with people from the public health community and from human medicine along with veterinary medicine.

And including environmentalists. But every way you go across this nation, it’s just veterinarians talking amongst themselves about One Health. Now you think about that. You have data that’s normally higher position, especially Veterinary Services

So I think that to be realistic about One Health as it was intended, we’ve got to get away from the 20th century model of agencies that were built not to change the government, but understand that we built a system based on a lot of ignorance that we don’t have today. And we have to make some hard decisions about who we talk to and about what.
And I think it's very important to start communicating to producers that the consumers of this country view their food as a consumer product, and they believe they have a right to be able to trace back where that came from, just like I can with everything on this iPad or in my car. We really need to be honest about that. People don't want to hear about you know (unintelligible) business will be banned, of course you're afraid that your business will be banned, so is (Joe Motors) making cars. So I think that I want re-emphasize that I will continue (unintelligible) to me is more realistic than just veterinarians and agriculture people sitting together talking about it and using that word. It really needs physician community, it really needs public health, it really needs environmentalists if we're going to get this right.

On an environmental front, air and water quality we know that we're seeing more and more contamination, we know that we're going to see more and more animals farms because of the demand for animal protein which will continue to rise. So we've got to get the environmentalist into this mix in a very, very quick way before we find ourselves too much further down the road.

(John Fisher): Yes, (John Fisher), (unintelligible). I just want to echo Dr. (Blackwell)'s statements. Many of the discussions on One Health, there have been physicians involved and veterinarians but that environmental component has largely been left out and I know some people who are involved deeply with this who refer to it as 2/3 health rather than One Health because of the lack of the environmental component there. And that basically boils down to a discussion of (unintelligible) diseases and One Health is a much bigger issue than that.
Woman: I would like to comment on that too and that is a lot of people in veterinary medicine that are frustrated because when they invite the people on the public health side to the table sometimes they're not willing to cooperate. So there's also the saying that One Health is one way and that everybody wants transparency on the part of agriculture and there's no transparency coming from the other direction.

Man: What does that mean? No transparency.

Woman: Well for example everything in health is confidential and yet everybody wants to know the (GIF) coordinates of the farm with a particular contagious disease that way as far as (unintelligible) disease outbreak. The New York State cattle health assurance program is a really good example of one of the collaborative efforts where regulatory agency, New York State Department of Agriculture and Markets, developed a program to provide value added to their producers to teach them about best management practices and plans and even focus on regulatory diseases focused on the things that were effecting production, try to teach best management practices. That's 10% of the (heard) to volunteer to be part of the program in the third largest varying state in the country. And of those 10% of the (heard) represented a significant portion of the milk supply because of larger farms.

And have agencies like PETA foil them for maps of the farm and their plans for controlling (unintelligible) disease and for their (unintelligible) disease diagnostic results. And had to go and battle report to protect the farms own plan against people trying to ruin the farm because they don't believe in animal agriculture. And so that's what they're talking about and protecting the farms. They're not talking about protecting the farm from having to report a reportable disease.
They're not talking about protecting the farm when a (unintelligible) residue is found. They're talking about protecting the farm for their business plans, their maps, their - how they control fertilizer spills, where they locate their fertilizer tanks relative to their animal agriculture. They're talking about really basic information that the farms should not have to share with the general public. And protecting those business plans so that those farms can stay in business.

Man: That - that really becomes I think a, and I appreciate your comments, a fundamental piece for this committee. Do we view agriculture projects as consumer products or not. If they're consumer products understand what the model is, the products in the 21st century. You don't have the ability to do all of these protections that I think we've enjoyed in agriculture. And I understand I mean I grew up in it. I was born a long time ago.

And I understand that property laws drove agriculture for so long but now that we have such a small globe and products moving all over the globe and we are not winning the battle with infectious diseases nor are we winning the battle with environmental impact that demand for this group of consumer products having more clarity about their origin and handling is not going to go away.

Woman: I agree with you. I think that farmers are participating in producing food and there's certain standard that they need to be held to for their products to enter commerce. And I think some of the paradigm on that is going to have to change. Some of the challenges with animal agriculture, some of the challenges with premises ID, the actual things that relate to the origin of the food. I still don't think I'm privy to the business plan of that farm, their financial arrangements to their...

Man: I agree.
Woman: But that's not what you said.

Man: Pardon?

Woman: But that's not what you said. You said you want total transparency.

((Crosstalk))

Woman: And some of the things that we do on our ranch are none of your business.

Man: Where the products came from and how they're working. In other words, I don't care about how much money you make, I don't care about who is on your board and all of that. What I care about is whether your products is safe. But more importantly from a public health standpoint we need to be able to respond quickly when some of these problems emerge.

Woman: I agree with you 100%. But if you the consumer want an organic product or you want to know the name of the cows that that steer came from you have that option. It's going to cost you a lot but there are those venues out there to buy your food that way if that means something to you. And so when - I get tired of hearing this the consumer act, well yet who's the consumer? I mean I'm a consumer, I sell my meat to individuals, we also own part of a processing plant, I do have you know conception to consumption production. When you start looking at sometimes who the consumer is it's not individuals coming up and asking.

Man: Well I'm just saying...

Woman: And so...
Man: Mark my words today this is coming.

((Crosstalk))

Man: I think one of the important things is that we're kind of - one of the big areas that we've overlooked already in this discussion is non-traditional stakeholders in all this.

Man: Yes.

Man: Because they're the ones that, I mean we do have quality assurance programs that are working very well. We do have FSIS and others that are reaching into those areas but how do we reach out and identify those non-traditional stakeholders or even smaller productions (unintelligible) or however you want to look at it. I think one of the things we have to recognize is there has to be an expanded area of cooperation not only to maybe include a consumer but also recognizing that we do have (unintelligible) universities and others that have extension and outreach that it's already going out there and doing that. And I think that we need to have, what was pointed out earlier was that this cooperation needs to incorporate that kind of outreach to ensure.

Because I think for example extension - and being extension veterinarian I'm very biased in this area but I think that one of the things that extension has always been trying to do is reach out to all aspects of agriculture and identify those kinds of issues and help deliver that type of assistance and support. So I really commend veterinarian services about this but I think that's one area that we really need to work on and expand.

Woman: So (unintelligible) I'll let you have your comment and then we're going to take a quick break.
Man: You know I have really (unintelligible) you know we've got our expectations for American farmers and producers but what about the (unintelligible) come to America. Nobody checks that, nobody cares, I think now we're needed even (unintelligible) meat mixed with the chicken meat - the chicken producers are killing and sending all the chickens to be processed in China, no labels of origin.

Man: Right.

Man: You know I really think we better get serious and be taking care of (unintelligible). Quit talking and get everything you get from overseas needs to be as good as the ones that we produce here otherwise just don't let it come in. Even if (unintelligible) the fruit producers - the workers have to use gloves to pick the apples. I came back from Chile they (unintelligible) down here we are, yes. You know it's crazy what we expect - we're our own worst enemies, I'll put it that way.

Man: (Unintelligible) food supply. Are we one of the safest food supplies of any country (unintelligible)? I mean we've got federal inspectors at meat plants. Do we really know what we're getting when it comes overseas, no we don't. We know what we're getting when we get it from this country, it's being inspected. It is considered a safe food supply.

Woman: So (unintelligible) is going to take us to break.

Woman: Well I'll keep it short and I'll probably have more to say after break. But I did want to at least sort of start open this which was you know I was glad to see this on the schedule because a lot of people I represent are like what you
would refer to as non-traditional stakeholders. And there are two big points when I listen to this.

One is, a lot of the folks in our community are already - we don't use the term One Health but it is part of what we talk about at every conference in our publications, we are talking about this integration of systems. The other part is most (unintelligible) don't deal with USDA in any form or fashion when they can avoid it and actually (unintelligible) even extension, having extension engaging with our folks is still a relatively new thing. We're seeing more partnerships with extension, we're seeing it happen more but it's actually fairly new still.

And part of what's happened with extension that's been very positive is extension shows up to our events. There are conferences put on for what you guys are calling non-traditional stakeholders. There's a (unintelligible) heavily on live stock. Some of these are more produce, some of them are heavy on live stock. You know extension is starting to come to some of this and that's how those relationships and that communication is built. If USDA wants to work with non-traditional stakeholders it's got - there's got to be some physical presence at something where those stakeholders are coming anyway.

Because otherwise it's the federal government and they don't understand what we're doing and it needs to be a discussion because it needs to be that there needs to be a sense that there's some interest in what our community has developed because our community is looking at alternatives to (unintelligible) you know how do we keep animals healthy on farms without antibiotic use. How do we do you know reduce or (unintelligible) environmental or even improve the environmental condition with farming. This is what we're looking at so I think - and I think I know our stakeholders would be looking for USDA
to actually pay attention to what we're doing as well and engage it as a partnership, so.

Woman: Excellent, great, with that thank you yes let's do 15. We'll do 15 minutes. (Sarah) can we go on mute or hold or...

((Crosstalk))

Woman: What we'll do is (Joe)'s got another (unintelligible).

((Crosstalk))

Woman: (Unintelligible) you still there?

(Joe): Yes I am.

Woman: So (Joe) I think what we'll do is have you go into kind of your second topic and then at the end we will circle back and touch One Health around both the stakeholder traditional and non-traditional as well as zoonotic diseases.

(Joe): Okay is - is RJ going to put up my second presentation?

Woman: Yes, I am. You're not frozen anymore, I can see you moving.

(Joe): Yes I think your side is frozen though.

Woman: Yes I think it is.

((Crosstalk))
Woman: Okay well we've got your presentation up (Joe).

Woman: Wave to the crowd.

(Joe): Do (unintelligible) or something to keep everyone entertained while we do this.

Woman: Okay you're up.

(Joe): Okay let's see - yes what I'm seeing is half a - just multiple pages. I don't know if you're seeing it one at a time or what but we'll go with it. The topic - there we go. The topic now is to focus on zoonotic diseases. While that's not the only thing that One Health is about, it is one of the things that most people can relate to when we talk about One Health. So within the (unintelligible) strategic plan there is a goal to protect the health of the US agriculture resources by addressing zoonotic disease issues by implementing surveillance preparedness, response and control programs not just for these major programmatic things but for smaller zoonotic disease situations to monitor health of animals. And I guess I can actually expand that monitor the health of animals and people.

And let me give you an example. During the (unintelligible) influenza outbreak most recently in Indiana we were working with CDC previously to develop a responder monitoring program with people who were in poultry houses with infected chickens had exposure to influenza viruses. And we know that H5 and H7 and H9 are known to infect people. We and CDC were considering we monitor our employees to ensure that they have not gotten infected with the (aviant) virus and if they do to make sure that they get the appropriate recommendations for treatment because it's a novel influenza
strain that they may have picked up. So we were doing human health monitoring in association with CDC in that case.

Insure effective preparedness and response systems so that response systems extended to the home state that somebody was traveling to and for ten days after leaving the infected area their home state was monitoring to make sure they didn't become ill. So when we look at One Health and zoonotic diseases we have a whole bunch of things that are cropping up. You know we've got (aviant) influenzas, we've got SARS, we have MERS so it's bottom picture here with the camel. A (unintelligible) organism in camels that is making people in Saudi Arabia sick and there have been people who have been infected with MERS who have left Saudi Arabia and traveled back to South Korea for example and there was a hospital center outbreak of people in South Korea from this camel virus obtained in the middle east.

So there are a number of infections that are coming from different animal species that we need to be concerned about. So the challenge here is what do we need to be concerned about? We tried looking at a common list of zoonotic disease (unintelligible) and of course we looked to CDC and there really is no common prioritized list of zoonotic disease agents that we might want to prioritize and establish some kind of surveillance monitoring for or potentially work with some sort of intervention strategy. So while we'll involved in a lot of zoonotic disease issues we end up getting pulled into ones that are not for example Zika virus is causing a lot of concern worldwide. There is no known animal reservoir or you know animal vector involved. I mean yes there's a mosquito.

So really from a One Health perspective we shouldn't have much involvement in Zika virus but we end up having involvement because (Asus) at least has equipment to spray insecticides to reduce mosquito populations and so on. But
is that a priority? We've put together a field guide for zoonotic diseases. If we
told our field force that we will now do diseases that are not the traditional
major eradication activities and we will do that in all species from pest to
livestock and so on.

What do we get involved in and what do we not get involved? There is - and
I'm going to be talking about this tomorrow, a global health security agenda
which is a multi-disciplinary activity that is both domestic and global that
looks at what the standard should be for a One Health response. And it uses
the term One Health, it's primarily human health and it was primarily written
for implementing the international health regulation but there's also now links
the international health regulation with the OIE recording requirement and
they've looked at this in a One Health multi-disciplinary approach.

And one of the standards that's set up now as an international standard is
developing a list of prioritized zoonotic diseases and establishing surveillance
activities around them. Something that we sort of have on a state by state basis
but perhaps not really. So we're working with CDC in perhaps doing that on a
state by state basis. We have a tool that we call (unintelligible) which stands
for One Health systems mapping and analysis tool that would help bring
together on a state level the multiple disciplines that would need to be
involved in any One Health issue. In particular bring in wildlife and
environmental and public health and so on. So it would bring together a group
that maybe don't ordinarily meet together and it will ask them to first map out
what their lines of communication would be and it would give them a bit of
scenario to do that around.

And then we'd have them present to each other what their various sort of
(unintelligible) groups would ordinarily do and then they develop a more
appropriate multi-disciplinary way of approaching that. And at the end of this
process they've come up with developing their own strategic plan for implanting One Health in their states. And then a second component of that is going to be attempting to be a prioritization of the zoonotic diseases important to that group of people in that particular state.

So there is a national list of reportable animal diseases and it gives some uniform definitions that are based on science and policy and it has a standardized list. It's consistent with uniform definitions for case findings and reporting, it helps facilitate state, local and international commerce by having a common reportable list.

And this is what that global health security agenda is leaning toward as well. It assists (unintelligible) in meeting the world organization for animal health, the OIE, reporting requirements. It would help support approval of export certificates to say that a particular disease does not exist in a particular location in the United States. And it would help to facilitate the identification of emerging diseases should that occur and be able to have a more collaborative approach to responding to them as they occur.

So I've given you some reasons that we should be looking at zoonotic diseases from a One Health perspective it seems like the no brainer to start with because it should be easy to identify zoonotic diseases and be able to see the multi-disciplinary vested interest from the various routes that they should work together to reduce occurrence of these things. But when we looked at it there may be a (unintelligible) program that CDC has personnel that work on, there may be a number of other things including food borne diseases that would be considered zoonotic as well. But it's pretty much segmented now. So what we're looking for help with is how do we identify sort of the critical few zoonotic diseases of concern to this group and to the greater agricultural community. And to the various stakeholder groups.
So we just talked about non-traditional stakeholders, is that list of zoonotic diseases different for different sort of stakeholder groups and should we have multiple lists then. And then once we identify kind of what our prioritized list of zoonotic diseases should be, what energies should we put into doing surveillance prepared and some of the (unintelligible) planning to those particular zoonotic diseases. So there's one question.

The second one to provide a list of zoonotic diseases that you would recommend that we include in this national list of reportable animal diseases. And also then what sort of surveillance prepared and (unintelligible) we might be able to do how would we justify including those in this required reporting. And then recommend a process for us to receive input from various stakeholders and this goes back to the confidentiality piece.

If we ask producers for (unintelligible) surveillance based on you know zoonotic disease what process do we use to receive that information so that it may be able to be shared appropriately like with public health and so on but still maintain some levels of confidentiality for the producer so that there is (unintelligible) in the reporting.

And again how do we reach out to these non-traditional stakeholders for example for here we have organic farmers I don't remember the lady's name that is - that basically that small integrated producer that's selling at farmer's market.

Woman: Hi it's (unintelligible).

(Joe): Hi, I don't know whether you produce under the USDA organic guidelines but this could certainly be an issue if one is producing chickens without the use of
any antibiotics and there're free range chickens. Are there other zoonotic diseases that we need to worry about in that type of operation and how might we reach out to folks to provide through extension or us directly or the state educational materials to help those folks. So there's the question about zoonotic diseases, what should we do, how do we prioritize them? And what kind of groups are we looking at, is it a homogenous list or do we need to look at multiple groups independently when we look at zoonotic diseases?

So I'll leave that there, it's relatively short but it's been an important question to us that we're working with CDC on and neither of us have come up with some good answers to it.

Woman: So (Joe) before we start our discussion could you further explain to the committee where we are in the process of development of the national list to report animal diseases. I know there was a discussion draft but go through the process of actually developing the list and rule making and timelines and things like that.

(Joe): Yes I don't know the timeline for publication of this but there have been a couple of years in - spent in the development of a national list of reportable diseases. Believe it or not we never actually had that. There has been a requirement that accredited veterinarians report what we were turning as farm animal diseases and there's this sort of short risk of like 12 of them. But beyond that there was not a national reporting requirement around this. So this is really the first time that we've taken all of the diseases that have a programmatic basis as well as non-programmatic connection and publish them in one place with case definition and standards around what would be called a particular disease or not.
And that is going to be published in the (unintelligible) to federal register so that it becomes a requirement to report those diseases. I know that we're about at the point where we're doing that may be possible. I also know that there were discussions about this being an election year and whether or not we're going to be able to get ahead of what might be a moratorium on publishing new regulation. So I'm hard press to say whether that's going to happen in the next month or six months but I would think somewhere in that range.

Woman: Okay one more question before we turn it over to (unintelligible). In the (unintelligible) there is - there are monitored diseases and there are notifiable diseases. And I'm wondering if you could - how that impacts the question you're asking and how it might impact producers depending on if the disease is notifiable versus monitored.

(Joe): I'm not sure I can because the things that I'm talking about in zoonotic diseases are really not in there yet. So we would have to define that and then come up with their standard definitions and determine whether they are monitored or reportable. I would assume at least initially they would be reportable meaning you would tell us about them but that there would not be some ongoing programs to identify them.

Woman: Okay so questions - other questions for (Joe)? We've got a whole (unintelligible) so we'll start with (unintelligible).

Woman: Oh I have multiple, can I go down my list?

Woman: Sure.

Woman: Sure.
Woman: So we're approaching the noon hour and I want you guys to keep in mind that while we may not get every comment, question and everything in now you guys get to revisit this over the course of the three day period. So it's not as if we stop talking about it now and we never bring it up again. Just be mindful of that.

Woman: Okay.

Woman: We said we'd go...

Woman: Are we bound to noon and that's it?

Woman: Well no I said plus or minus so we're not bound. I just don't want it to go too far and cut that down.

((Crosstalk))

Woman: And because of that maybe we want to for sure get questions for (Joe) you know where he's on the phone for sure asked and then we can maybe go to some of the others as well.

Woman: Yes so I have from a priorities perspective zoonotic diseases. I think rabies needs to be a priority because I think it's not until recently that we may have developed the tools for eradicating (unintelligible) rabies in the United States. And even though we're all - even though everybody in the world is scared of rabies even that as a reportable disease is hard to get people at the table reporting those cases and following up on the diagnostics.
And you know even animals that are vector species, it's a challenge for agencies and state animal health officials and diagnostic labs. Even on that one disease that stands out to get that done. So I think rabies needs to be a priority. I think Cache Valley Fever needs to be added to the domestic zoonotic disease priority list because we have now you know Zika virus is mosquito born now potentially in the United States. We've seen West Nile virus go from Kennedy airport to all 50 states basically and Cache Valley Fever would have the same mechanism of spread.

The comments about should we do the mosquito surveillance for Zika virus, we shouldn't do it for Zika virus but when we know there's zoonotic diseases like West Nile and Triple E and Cache Valley Fever and others have the same mechanisms of transmission. Our tools are serving One Health purpose regardless of the agent. And so we really need to when we do these - you know you asked if there should be lists for various species and probably there should be but there also should be lists for routes of transmission. The agents that are all transmitted the same way, the same kinds of surveillance can be used to understand the risk. And I think those are really important.

And the last comment on zoonotic diseases that I have - well the next to class, you asked you know you mentioned Q fever multiple times in your talk and once again the select agent list was examined and once again (unintelligible) was not listed and was left on the select agent list. This organism is (imbicudous), it's found in soil and birds and reptiles and in salamanders, in sheep's and goats, in dogs and cats and either somebody is keeping a big secret about how this is an effective (bioterris) agent because routinely Q fever, most of us at the table may have been exposed and never known it. I mean realistically for most people it's a very milk illness.
And the continued listing of that as a select agent stops diagnostic labs from developing diagnostics. The (unintelligible) diagnostic lab is one of the few that has a Q fever PCR fast. We get examples from animals from all over the United States and every single time we get a positive we have a raft of paperwork we have to do for the CDC. And we should be charging three or four times what we're charging for the test because of the headache involved. And we were really looking forward to the fact that this time it was going to be de-listed.

And all the comments that I saw supported de-listing so I don't understand why that agent stayed on the list. So if there's a you know I don't know, somebody knows something about that, maybe that they're not telling the rest of us but...

((Crosstalk))

Woman: The last comment I have is about the reportable (unintelligible) disease and my question is will the public health side report the human occurrences of the same diseases to federal and state animal health officials?

(Joe): Yes good point and yes we need to be working on that.

Woman: Okay.

Man: Can I just say something real quick, isn't (unintelligible) on the proposed to be removed right now?

((Crosstalk))

Woman: Yes and they just released the list and they didn't remove it.
((Crosstalk))

Man: I thought that public comment wasn't opened yet.

Woman: They closed it and they just released it.

Man: Thank you.

Woman: Okay (Stan) and then (Diane).

(Stan Groom): (Joe) this is (Stan Groom). You mentioned that you've been working with CDC on potentially coming up with a list that you know both agencies could agree to. Tell me about that process because it seems like that's where it ought to start. You know what impacts human health and what impacts animal health that are on that zoonotic disease. What's that process been? Why haven't you been able to kind of come up with a starting place at least?

(Joe): The - well the reason we haven't come up with a starting place is that within CDC the zoonotic diseases are not ranked against each other but are divided up among a number of divisions. And each of them is funded independently of the other. So depending on who you're talking to, they believe theirs is you know the most important. And they're not actually looking at them sort of compared to each other as to number of days you know or you know this sort of thing.

So the process that CDC has developed is more one of an expert opinion on a state by state level to find out within a state collectively across multiple disciplines which diseases these people think have the greatest impact and there's sort of a formal process that they've developed to look at different
impacts. And then at the end of that process the group to sort of come to consensus around the list for that particular state. And we just have not gotten out and started doing that in each state. CDC is doing it internationally under the global health security agenda but they've not really started it domestically and we're working closely with the CDC's office of One Health.

Woman: (MaryAnn).

(MaryAnn): Hi this is (Maryann) (Unintelligible). In response to your preparedness and response planning I don't think like you said there's still a whole lot of coordination between agencies and how they interact with things. I think (John)'s discussed how the fish and wildlife down in the South East work together on some different scenarios. We recently had an exercise in Kansas pulling everybody together you know if something hit today what do we do. Trying to get agencies to understand how they're going to work together and I'd like to see more of these collaborations and exercises done to encourage that kind of working together and hope that we would use the secure food plans that are in place in some of those planning.

(Joe): Okay in fact I would love to see a recommendation come from these folks to do more of those either exercises or some other collaboration method that (unintelligible) collaboration tools that we have would be a great way of doing that on a state by state basis.

Man: (Joe) can I just ask you to clarify to make sure I heard what I thought I heard.

(Joe): Yes.

Man: When you responded to (unintelligible)'s question a minute ago about working with CDC. I thought I heard CDC either has or doesn't rank diseases by
priority rather they rely on state by state assessment to get that done. And when talking about the national list of reportable animal disease what is USDA’s approach? Is USDA still going to approach it as a national list? Or are you sort of moving towards CDC’s approach and going state by state?

(Joe): Well I know that we've got it established as a national list now. So I'm not quite sure once we do it on a state by state basis how consistent we may be with zoonotic diseases. There may very well be a climate issue here where the zoonotic diseases along the Gulf Coast would be significantly different than those along the Canadian border. So we'll have to see how many diseases are actually on this list overall and to see whether all of them go into this reportable disease or we do it separately with zoonotic diseases. So I don't quite know yet.

Man: Okay.

(Liz): (Joe), (Joe) this is (Liz). We - you know in talking to my stakeholders about some of the questions around this, a lot of discussion about you know just monitored which would be reported quarterly to OIE and is reportable but you just have a kind of a monitored you know it's there versus notifiable means any time you have an instance you immediately have to notify an official. You know those things whether something's on a list or not were somewhat less important to my stakeholders than understanding the impact of such a notification.

So what happens you know there's a black helicopter shows up, do you shut down your farm, do you lose all markets, do you say oh that's interesting but life goes on? You know I mean so there's a whole range of potential responses. And so from our stakeholder's point of view without understanding the responses in the emerging disease plan will be discussed on Thursday. But
you want to see stakeholder buy in into notifiable or reportable zoonotic
disease is going to depend a lot of potential response to those (unintelligible).

Woman: So I was going to pick up on something very similar but first to answer your
earlier question (Joe) there is some certified organic livestock production
certainly among our stakeholders. There's also a lot of non-certified organic
production. So folks using organic production methods but whether it's for the
cost of certification, acts as a certified slaughterhouse facility or you know
what other barriers they are to actually certify. But they're using those
production methods.

And I don't think it would be necessarily - I don't see a reason there'd be a
different list of zoonotic disease as a concern. I certainly haven't heard from
any of my folks about diseases that they're concerned about that the
conventional industry isn't concerned about. In fact the issue for our
stakeholders when we talk about whether it's zoonotic disease as a concern or
any of these diseases of concern is an angle of (unintelligible) - a timeout
which the concern is how is this handled, you know what does it really mean.
Our folks focus very heavily on prevention, I mean that is the fundamental
principle is prevention of disease. There's also a lot of interest in treatment
rather than kill responses. And a lot of the objections that you'll find from
smaller stakeholders and organic stakeholders to working with USDA
stemmed from the default position on various diseases to stamp out.

When you know a disease poses a significant human health threat that's
different. But their diseases are on that kind of a list that aren't. And so you're
just going to have you know that's going to be an issue in getting buy-in and
getting communication and getting people to work with the agency is if the
response is going to be well if we bring up the disease that means it gets listed
and our heard of 25 gets stamped out the second that it's found because small
farms are expendable and they're not big enough to have to worry about vaccination or another approach. There's just not going to be a lot of cooperation.

(Joe): Yes thank you I hear that. We're going to have to do a much better communications effort.

(Liz): The other question (Joe) that I'd like to ask is we're working right now with client health programs to try to get (unintelligible) the notifiable disease list instead of a portable for trade implications. We don't understand the process for getting the disease either on the list, off the list, change from monitored to notifiable. So I know (unintelligible) is not your program area but I think that's a message that would be from our stakeholder point of view would be good to know is how does it get on the list, how does it get classified on the list and if there's a reason to how would you get it off the list.

(Joe): Yes those are good questions (Liz) I can bring those up with the folks that are more directly working with that and try and get back to you.

(Laine): (Liz) could I interject a question, this is (Laine).

(Liz): Go ahead (Laine).

(Laine): Yes (Joe) you know I don't think it's just transfer is the issue that producers worry about. You know we've got (unintelligible) or (unintelligible) that don't know how to react to certain things. An example at (unintelligible) I'm not sure a lot of plants knew exactly how to handle it but producers were told they'd have to bring pigs in with leashes. And then as time goes on there wasn't any unintended consequences but there was a lot of concern initially. So I think that you've got your food groups that are of
concern that the producers all know what to do with some of these. So that should be addressed too.

(Joe): Yes that's a good point yes.

Woman: One last question before the lunch break and then we'll...

((Crosstalk))

Woman: I would just like to comment on the non-traditional and traditional outreach and I'd like to second (Peter)'s comments about cooperative extensions. Cooperative extensions through the (unintelligible) universities has traditionally been the outreach for farm to farm education, small holder education, home setters, small farms, they play a role in animal husbandry and animal agriculture in many areas that are underserved with veterinarians. And they have lists of stakeholders that aren't reached by anybody else.

The added advantage of using cooperative extension is that they don't just address agriculture. They address human health issues, food safety, home economics. Since most schools has stopped teaching home economics to girls and since many homes the moms don't stay home anymore and they're in the workforce there's really nobody who understands food safety, hygiene and - there's nobody teaching that. And if the outreach could combine the food safety and hygiene and all the things that (unintelligible) cooperative - but all the cooperative extensions have focused on for almost 100 years it seems like that would be the ideal you know outreach mechanism. And then using feed distributors and food - farm supply source as well. That's been an effective technique for reaching because anybody with livestock or animals has to buy food for them.
(Joe): Yes the place we've started is with 4H. So we at CDC are collaboratively working with the 4H programs to develop sort of a comic book, coloring book thing to help explain food safety issues and (unintelligible) disease issues and so on. But we'll need to figure out a better way to engage cooperative extension service nationally. I think one of the positions we've discussed is that there seems to be less emphasis placed in cooperative extension translating to fewer people, fewer resources. That may not be right but that's kind of what we're hearing for...

((Crosstalk))

Man: Well I've got an alteration to tell you all. In the west extension agencies they (unintelligible), they have no money to keep it open and the 4H (unintelligible) that's what they are. It's a big problem you know it's (unintelligible) for many other things but the most important thing is the money is not there.

(Joe): So it sounds to me like that could be another recommendation it's not an (Asus) veterinary services sort of issue but it is a USDA issue that there's the need if we're going to build upon a One Health approach that cooperative extension service needs to be key to that and that the resources for that have been declining when in fact the future of agriculture would indicate that that needs to be expanded today more than ever. And I'm thinking about the smaller producers, the more local agriculture that we're in fact emphasizing.

Woman: I know we're trying to break for lunch but I do just want to add an addendum to that. It's not a disagreement but it's a point which is - and I think it varies state to state so I think you'll see differences state to state. But I will say in quite a few areas the level of trust among - or not trust, that's an
overstatement, the belief that extension understands the issues for small scale and sustainable producers is fairly low.

And that's slowly in repair like I can say Texas state level we're seeing that being repaired and we're seeing extension engaging with us. But again I'll hit the same one more time like I said before which is part of it is it also has to be a discussion, it has to be whether USDA or ag extension engaging with the producers in a way that indicates that there's something to be learned on both sides. And that when we've seen that happening we've seen the level of trust and engagement with Ag extension increasing significantly.

(Liz): Thank you, (Joe) we will be picking up this discussion (unintelligible) later on this afternoon but I think we're going to go ahead and take a break now. Can we do a 45 minute break and come back at one?

Man: Sure.

(Joe): And (Liz) did you want me back on or I'm going to be back on tomorrow.

(Liz): Yes we can probably adjust any further questions when you come back tomorrow (Joe) if that's alright.

(Joe): Yes that would be fine.

Woman: Okay and I just got told that 1:15 is probably better, it gives us an hour to get to the restaurant and stuff like that.

(Liz): (Unintelligible) come back, we don't have anyone from...

((Crosstalk))
Man: 1:15 or 1:30?

Woman: Well let's do 1:15.

((Crosstalk))

Man: My wife is retired.

Woman: Really?

Man: Yes.

((Crosstalk))

Woman: Dr. (Nable)? Dr. (Nable) are you on?

(Alicia Nable): Yes (Alicia) is on.

Woman: Okay (Alicia) we've got a couple members that are trickling in so I thought if we start your presentation maybe we would go ahead and have you introduce yourself, those of us in the room will get to know you and then those people coming in later will hopefully be here by the time you get into the...

((Crosstalk))

(Alicia Nable): Sure I'm happy to do it. So I have to start by saying you know RJ did a great job last week of having me practice the video and we were like oh this is so nice, it's so easy, it's going to work so great. And today I can't seem to get my webcam working. So my apologies there but you know we'll have a good
conversation anyway. Maybe it's good that you can't see me, I don't know. So my name's (Alicia Nable), I'm the director of the sheep, goat (unintelligible) and equine health center within veterinary services.

And I've been in this role for about two years now and today I'm going to be talking with you a little bit about our (served) health program and getting some feedback back from you about that program. And then later in the week Dr. (Sutton) who's there in the room with you is also on my staff and she's going to be visiting with you about our scrapey program which also falls under the sheep, goat, (unintelligible) and equine health center.

I'm based in Riverdale Maryland and so that's where I'm calling you from today. Is that what you guys were thinking of for an introduction before we get started?

Woman: Yes. Yes that's great and everybody's back in the room too.

(Alicia Nable): Okay great very good. So we can go ahead and get started and let's see. Aha I can drive the slide so at least that part's working. So what I thought I would do with everyone today is give you a brief overview about this evaluation process that we're using for our (served) health program right now and describe how we think you might fit into that and describe how other stakeholders are going to fit into that process. I'll share with you a brief overview of our (served) health program because I think it's really important for you to have that high level overview and then we'll work through a series of questions where I'm really interested to hear feedback from your perspective, the groups that you represent perspective and hopefully those questions can be used to guide the recommendations that you provide back to veterinary services related to this particular patient.
So to get started the name of the process that we use is the process is the program continuous evaluation process. And this is a standardized ongoing process that we use to do our evaluations of programs within veterinary services. And there are a couple to keep in mind when we talk about this process

Number one, it's internal within veterinary services. Number two, we use this to really help us get an idea of whether the goals that we have for our different programs and the strategies are appropriate relative to what our internal and external stakeholders think they should be. So it really is a bit of a high level review process. Also, the key point here is that it's standardized so we're doing basically the same steps regardless of the program that we're evaluating and it's ongoing. And the real intent here is to identify areas for improvement and to make improvement.

So why do we do this? What do we stand to gain from doing one of these regular evaluations? Well first of all it's regular and it allows us to look at those goals and strategies and it allows us to assess them based on resources and maybe other health priorities that might be new on our horizon. It also kind of gives us that forward thinking ability so that we can kind of look out 5, 10, 15 years and think about where does the program need to be in the future. It allows us to constantly and strategically realign the programs and the services that we do to make sure we meet the needs of agriculture and global animal health. And then finally it gives us some veterinary services an opportunity to better evaluate our performance and actively improve what we're doing. And perhaps a better word is to proactively improve what we're doing. So we're not waiting for other bodies to come in and audit us per say, we're doing it proactively so we can make improvements as we go.
So when we do one of these piece up evaluations there are five criteria that we look at and they're listed here. Today our focus really is going to be talking about criteria one, two, and probably five. Each criteria, and again there's a systematic process for doing this so there's certain questions that we ask, internal, external stakeholders, program managers, people that participate in implementing the program in each of these different areas. And the first thing that we have to do is we have to really start engaging our internal and external stakeholders. And those are the people or organizations that have a vested interest in what we will learn from the evaluation and what we will do with the knowledge.

So I think clearly the secretary's advisory committee members fit that definition of stakeholders when it comes to this piece up process. So again you know the key things we're going to talk about today, a little bit about one although I have it grayed out but mostly two and five that we'll talk about.

And what we're going to do is I'm going to share with you the exact same process that we used with a group of (unintelligible) industry stakeholders yesterday and we'll walk through the similar overview that we use with them and walk through the exact questions that we shared with them yesterday to frame our discussions today.

So currently our (served) health program has five objectives. Prevent and control chronic wasting disease in the farmed (served) population. This is really important distinction. When we talk about our (served) health program we're specifically talking about farmed (served) population, we are not talking about disease control or disease prevention and wildlife.

Similarly a second objective is to eliminate both (unintelligible) in farm service, conduct a comprehensive disease surveillance for farm (served), to
develop an emergency preparedness and response plan for both foreign animal diseases, emerging diseases and even some (unintelligible) diseases in (served). And finally to conduct safe holder communication outreach and education. The last three objectives are consistent and similar across many programs and veterinary services. So they are not unique just to (served) health.

So there are two real focuses of our (served) health program today currently. And currently the funding that we have really focuses in on two of those objectives, the National Chronic Wasting Disease Herd certification program and the purpose of that program is to establish minimum standards for states that develop their own herd certification program that would have minimum requirements for interstate movement of those susceptible species. So CWD is a huge focus for our program right now as is tuberculosis in (served) and that's part of our comprehensive approach that we use to eradicate TB in domestic cattle and bison. Captive service fall under that same program as well.

So in twenty-sixteen our whole line item for equine (served) small (unintelligible) health they're all combined in a single line item and for twenty-sixteen our funding was $19.5 million. Of that in their appropriations bill congress included specific language that said no less than $3 million of that should be spent on (served) health activities. Within veterinary services we allocate that $3 million approximately this way. $1.1 million goes to (unintelligible) for CWD and TB, the bulk of that money goes for (unintelligible). We spend about $200,000 to support CWD related research and this specifically goes to fund a researcher in (unintelligible) wildlife services who work at the national wildlife research center in Fort Collins. So while it says research it's really for you know a specific body that helps conduct research related to CWD.
And then any of the remaining money of that $3 million are used to support the program more generally. It pays for salaries, it pays for field activities, things like that. So that's the breakdown of the amount of money that we have to support our program when we attempt to complete those five objectives.

So we currently are really in an interesting time in our (served) health program and we faced just a number of challenges and their complex challenges. We continue to have CWD detection both in free roaming service, wildlife, as well as captive (served). And over the past couple of years we've identified cases of CWD in states that previously had not reported cases before. We also have faced several large multi-state investigations that have involved tracing hundreds of animals across multiple states and this has been for CWD and it's resulted in numerous herds being held under state quarantine.

Our program standards specifically for the CWD program are quite complicated. They've been in place for several years now, we've observed that there's some inconsistency in how they're being implemented by states. And there's certain aspects that are just really complicated. I think it's obvious that when you look at the amount of money that we have available for indemnity I think it's fair to say it's very minimal. Currently it's not unusual, over the last three years where we had the million dollars available to us indemnity we've expended all of that money in the fiscal year and we actually were able to add a little bit additional money to remove some herds but every year we have many more exposed animals and in some cases many more infected herds with CWD that we cannot remove federal indemnity.

Already this year in FY twenty-sixteen we've identified uses for all of our available indemnity funding and we have no additional funding available should there be new herds detected for the rest of the year.
Another important factor is that we lack an approved (anti-mortum) test. So as for all of the (unintelligible) diagnosis is a difficult challenge. We currently do not utilize some of the (anti-mortum) test in the CWD program that are utilized in the scrapey program. I think we're making good progress in utili - figuring out ways we can use those tests but admittedly we really only have (post-mortum) tests available to us right now.

We have limited herd management options and often times when we identify herds that are implicated in these epidemiology investigations we don't have enough indemnity money to depopulate the animals in the herd yet the only way we can remove quarantine and really understand the epidemiology is to depopulate those animals. So it's a bit of a catch 22 and as a result many herds are left with no option other than for their herd to remain under quarantine for at least five years.

Then we've seen some changes in the industry that I think just really compound some of those challenges. Just like we've seen in our other agriculture livestock industries we've seen herds increase in size, we're seeing increased animal movement between and among herds and some of the movements that we're seeing in the (served) industry are quite extensive, several hundred movements in and out of a herd over a three to five year period of time.

The last thing I'll say about the industry is some of these animals are quite valuable. Over the past year we have been aware of several animals that were worth hundreds of thousands of dollars and currently our regulations for CWD allow a maximum of $3000 per animal to be paid for indemnity. So not only do we really not have enough indemnity to purchase all of the animals and
herds that we should, stakeholders often express frustration that they receive far less than what is documented fair market value for those animals.

So that is the overview of the program and I think the best way to proceed is to take a break and I'm happy to answer any general questions about the (served) health program, what we do, how we're structured and then I'd like to spend the rest of our hour sharing with you the questions that we've shared with other stakeholders and using that as a means to facilitate our discussion. So I do want to pause though and take this opportunity to answer any questions about the program that folks might have before we go into the interactive part of our session.

Woman:  (Unintelligible).

Man:  Yes, (unintelligible), how many (served) operations and how many animals do you estimate in the US?

(Alicia Nable):  Yes that's a really good question. I don't have - I'm going to look for that data, I don't have that right at the tip of my fingers to share with you, it's in the tens of thousands of herds in the US. Yesterday one of the stakeholders indicated that of all the (served) in the US considering wild and captive (served), they said that captive (served) would represent less than 1/2 of 1%. So admittedly the farm (served) population in the US is relatively small.

Man:  So let me follow-up on that with what are you considering a farm (served)? Define for me what that means.

(Alicia Nable):  So those are animals that are raised in captivity for marketing and agricultural prefaces. So we consider both breeding facilities and in some states, not all, but some states some of the shooter facilities fall under their regulation.
Woman: (Unintelligible), I have a very basic question which is what are the theories on the cause of these factors for CWD?

(Alicia Nable): So CWD is considered one of the (unintelligible) and just like (unintelligible) in cattle and (scrapey) in sheep and goat. And the current theory that is favored in the scientific community is that the cause of agent of CWD is a prion, it's one of those misfolded proteins.

Woman: Sorry let me clarify my questions because, sorry, I understood that much. It's more if we're focusing on farm (served) is there - are there any theories about different things that farms are doing that increase the likelihood?

(Alicia Nable): Right so your question is are their known risk factors for transmission of disease? Okay, so yes I think that whenever you talk about infectious diseases in livestock we know that movement of infected animals from place A to place B is always a risk. So certainly we believe there's a possibility and we have some documented evidence of where infected animals have you know transmitted infection from one herd to another by being moved between them. We also know that there's some instances where it appears that the close proximity of wild (served) and the farm (served) appears to be associated with disease transmission right? Whether that's through contaminated environment we know is a big issue whether it's through contaminated speeds, definitely the proximity to other infected animals regardless of the route of transmission is going to be a risk factor.

Woman: Any other questions for (Alicia)?

(John Mahoney): Maybe one more question, this is (John Mahoney). Objective number four does that refer only to farm service or does that also include wild population?
(Alicia Nable): Yes in this particular - our objective focuses on the farm service population. Now clearly to be able to do that we may need to engage stakeholders from you know the wildlife community, right. So your point's well taken, I think - well what I think is your point is well taken, right. To really do emergency preparedness and response in captive (served) you also have to look at the wild population as well. And certainly our focus would be around assisting the farm (served) industry but we would have to collaborate with our wildlife stakeholders to be able to develop such a plan.

(John Mahoney): Okay thank you.

Woman: I don't see any other hands so if you want to start into the...

(Alicia Nable): Great thank you for being my eyes there. So although I have to admit even if I have my webcam I'm not sure I could see it very well, so maybe it's for the better. So again to share with you when we talk about this piece up process, engaging stakeholders and getting their opinions and their thoughts about how we're doing against those objectives is critical. And as I mentioned yesterday we had a meeting here in Washington DC where we had about 15 representatives of the farm (served) industry visiting with us. And we spent an hour with them working through these exact questions and I'd be really interested to hear the advisory committees thoughts on these same questions and again you know as you identify the recommendations you're going to make to (Apus) certainly you know feel free to use these as a guide in thinking about what you might offer to us.

So the first couple of questions really address that first - that second criteria and how are the objectives for the program important to stakeholders and what do they mean to stakeholders. So - and you have these in your white paper that
you got for the meeting as well. The first question ask us to think about are those current objectives appropriate and are there any revisions that would be important to the (served) industry to make.

And so yesterday we spent a bit of time just generally talking about those objectives. And I think the key thing there is there anything missing, are there things that we've got in there that we're really not focusing on and should focus more on. So I'm going to pause here and see if the committee members have any feedback that they'd like to give about those current objectives and whether those appear to be appropriate for (unintelligible) program in (served) health.

Woman: So can I ask a question about your comprehensive disease surveillance?

(Alicia Nable): Yes.

Woman: I don't know enough about (served) diagnostics and how often diagnostic samples from service enter laboratories. But you know my thought of comprehensive surveillance tends to be both you know taking the sample and running many, many tests on it looking for multiple things and that either comes into the laboratory and it's a convenient sample or going out and trying to get samples proactively. And so what is - I guess what are your goals of comprehensive surveillance and how are you trying to develop that?

(Alicia Nable): So comprehensive disease surveillance is really a major initiative across veterinary services and this particular objective as I mentioned before is an objective that our other animal health programs have as well. So there Dr. (Sutton) in the room she could talk to you about what we're doing for - about what we're thinking about doing for comprehensive disease surveillance in
sheep and goats. So one reason that this is included is that we know it's a major focus that we need to take in all of our programs.

For us what comprehensive disease surveillance and farm (served) would mean is that we've worked with the industry to identify the major disease issues of concern, we've identified effective targeted cost efficient methods to be able to collect appropriate surveillance information and then report that and do something about it. Now you'll notice that I didn't mention any specific diseases, I didn't mention any specific strategies or any approaches because this is an objective that in our program right now we have not yet addressed. There's several reasons that we haven't yet addressed it.

One is a resource issue and the second one is much of our time quite honestly with our limited resources causes us to focus on items one and two before we get to items three and four.

Woman: Thanks.

(Belinda Thompson): So this is (Belinda Thompson) and I was going to comment on the comprehensive disease surveillance issue as well. We have about 400 (served) herds in New York State and when somebody has a bunch of dead deer the diagnostics are paid for by the (served) farmer or in some cases they're paid for by the discretionary funding of the state veterinarian because they feel that some of the cooperation in participating in CWD and TB surveillance that cooperating in a non-regulatory fashion to help (served) farmer get some added value is worth a few dollars in diagnostics. So if we're talking about trying to engage stakeholders we have to come up with value added reasons for them to submit samples for CWD and TB and this would be one of those categories where it would actually encourage cooperation with regulatory programs. It could help them find diseases.
And another comment I receive from stakeholders is that in item four that maybe it's already implied but to add, prevent the introduction of novel pathogens from farm (served) into free ranging wildlife population and they use the example of (PB) and Michigan and the still back cost for the industry over time, decades even. And an unrelated not really a captive wildlife issue but you know the movement of wild raccoons under permit that led to the East coast rabies (unintelligible) as examples of not including that in your plan.

(Alicia Nable): Right I think those are good - I think those are really good points and they're really good examples of you know the issue, a gentleman brought it up earlier and I think this issue of the intersection between farm (served) and wild (served) and how that interplays with this program can't be underestimated. That's a really, really, it's kind of an elephant in the room honestly.

Woman: Go ahead (Steve).

(Steve Crawford): I guess, (Steve Crawford) New Hampshire State Veterinarian.

(Alicia Nable): Oh hi (Steve).

(Steve Crawford): Along that same line, I had a question about the same thing, you talked (unintelligible) disease surveillance but what I wrote down is disease surveillance go and do something about it. Can you comment on that what you mean by the and do something about it piece? Is that in share with producers to improve their practice or are there other things that you guys have been thinking about?

(Alicia Nable): Yes so (unintelligible) is a classical epidemiologist right? That's part of the definition of surveillance. It's more than about just collecting information to
me. And if you're just collecting information and you're not doing anything about it then you're kind of missing the boat. Right now our surveillance in farm (served) only really includes CWD and bovine tuberculosis and to some extent (brucellosis) in (served) as well.

So right now most of our do something about it is regulatory in nature, right, those are all three regulated diseases. But you know one disease that's not on the list that has really significant impacts in the (served) industry is (unintelligible) disease, right, and that's not on the list. So one might hypothesize that you know perhaps in the future if (EHD) were included in some kind of comprehensive surveillance for farm (served) perhaps we could start getting people kind of sentinel information about where we're starting to see cases and then producers could perhaps consider using insect control as a management practice in their herd.

So we're not there yet but I certainly think that you know that's why we do data collection is so that we can do something about it and it doesn't always need to be a regulatory outcome.

(John Fisher): Hi (Alicia) this is (John Fisher).

(Alicia Nable): Hey.

(John Fisher): On your first objective prevent and control CWD I couldn't agree more with the prevent. But between prevent and control I think we need the word detect and I mention that because we continue to detect the disease in free range and captive (served) population including captive (served) and herd that have been certified as being low risk of having CWD and have been monitoring some of them for 10 and 12 years. So I think we need to emphasize detection in that
gap between preventive control. Obviously controlling it implies that we are detecting it but I think it would be better to state it clearly.

Woman: Say that again (John) I missed it.

(John Fisher): I think that the first objective if we were to add the word prevent detect and control because we continue to detect it, we need to detect it in order to control it. And then in - those weren't all legal (unintelligible).

((Crosstalk))

(Alicia Nable): So another thing that I'd like to pick your brain about a bit is we had a comment come up yesterday about the emergency preparedness and response plans and there was some concern about whether that is something that would be helpful to that industry or not. And you know I might be biased because of who I work for and what my background is but I'm interested to hear thoughts from you about how important do you think objective four is when you look at it in relation to some of these other objectives.

Woman: Go ahead.

Woman: I mean we're worried in New York State about spillover of foot and mouth disease into both free ranging and farmed deer and we're I don't think we've done a good enough job yet with emergency response plans for our other domestic livestock but I think the farmed deer need to be - need to have them also I mean it needs to be there.

Man: Go ahead.
(Peter): Hi this is (Peter) (Unintelligible). I guess the question I have kind of links three and four and that is under your comprehensive disease surveillance what are your plans for enhancing the collection of that data? Where are you going to go out and get the information about the diseases that the incident of these diseases that you're looking for? And the same thing with number four under disease emergency prep, how are you going to build in the capacity to even handle the diagnostics in that kind of situation?

(Alicia Nable): And that really is an interesting question for us, right, because I shared with you a couple slides ago what our annual budget for this program is, right? So one question that we ask as part of this evaluation is you know is the program sufficiently addressing these objectives and if they aren't, why aren't they? And in this case I mean I will share with you in my opinion we're not addressing three right now and we're not addressing four and the reason is lack of resources.

Woman: Certainly something even as predictable as (unintelligible) disease virus moving north with climate change could result in hundreds of deer carcasses that need to be disposed of.

Woman: Right.

Woman: And just not even having an emergency preparedness and response plan for those kinds of typical logistical issues...

Woman: Right.

Woman: Is an issue.
(Alicia Nable): And you know - and one of the things that I shared with folks yesterday was when you look at those plans I mean there's some elements in those plans that are helpful to an industry regardless of whether they're in the midst of a response or not, right. Like you commented about understanding some of the options for disposal. Bio security is often a component of those plans and you know there can be far reaching benefits of producers understanding good bio security practices.

In the process of exercising those plans you develop relationships between different organizations and you're kind of ready to respond should that then occur. So I agree, I agree with you.

Woman: (Unintelligible) or someone had a question.

Man: I did, I guess I'm not going to disagree with what (unintelligible) said but maybe offer my spin on it. I do see value in having the emergency response plans but maybe less so by (unintelligible) and more so by (unintelligible). It (unintelligible) by industry but wrap service into what (unintelligible) not just for specific thing.

Woman: Yes.

Man: That's how I would approach it.

Woman: Yes.

Woman: That's what I was thinking because every slide we looked at with the question has the same number four and number five.

Woman: Right.
Woman: For absolutely everything we've seen so far. And you don't have to reinvent the wheel for each species.

(Alicia Nable): And that's a really good point and veterinary services if you look at our foreign animal disease prep materials we certainly do a disease by disease approach there. And the thing that I would point out though is that much of those plans have really focused on some of the major livestock species and as a result there are some things that are unique about working with (served). Dr. (Sutton) can tell you there are some things that are unique about the sheep and goat industries so your points well taken, having a disease specific plan is a first step but in some of these industries there's enough uniqueness about them that you kind of have to look at things a little specifically for their industry as well.

So I've moved to the next question and what we asked yesterday, we asked our stakeholders to say okay so in light of those objectives that we just talked about are those suitable to what you need and we actually asked them to rank them, high, moderate, minimal, poor. We had them turn in their worksheets yesterday. So I encourage you to think about what you know about the (served) industry and the (served) program from my description, from what you've learned prepping for this meeting and help us determine are those the right objectives and if they aren't what are better objectives.

I'm going to quickly move to three as well. Question three is a monster question. We approached it in this matrix and I think you all probably have the matrix in front of you. And what we asked the (served) industry to do yesterday and they were very uncomfortable with this I mean I will be the first to tell you they were uncomfortable with this. And we basically asked them to rank each of those goals in rank order which is the most important of those
five goals to you, rank it number one, which is the least important of those five goals to you, rank it five. And so that's the first part of question three.

Then we asked them to say okay so in light of your ranking, how do you think we should allocate those limited resources for the (served) health program between those goals. And we wanted them to come up with like basically a pie chart, right, like your totals should come to 100 and tell us what proportion and what percentage of our money and our people and our time should go to each of these goals. And then we asked them to do a comparison and say what do you think we are actually allocating for that.

So that's question three part two, question three part three. So I'd be interested to hear your thoughts since we've spent a couple minutes talking about the general value or lack of value for some of those objectives, what are your thoughts about importance from what you know and what you know about the (served) industry and what you know about animal agriculture in general.

Are those the right goals and do we have them in the right order? If not what do you think the order should be? Where should we focus our effort?

((Crosstalk))

(John Mahoney): (Alicia) it's (John Mahoney). Just out of curiosity should we answer this from the point of view of the commodity groups that we represent versus (served)?

(Alicia Nable): Yes I would answer them for - so that - you bring up a really good point because I had this great idea that kind of didn't translate to working with this committee. Clearly this is how we ask the (served) industry what they wanted. I would ask you what you think an animal industry in general and then if you feel comfortable commenting for the (served) industry what do you think their
priority should be? I heard that some of you might have done some homework and kind of checked in with some (served) industry folks before you came. So clearly because this is going to inform our program we're most interested in hearing about like what we should do for the (served) industry. But if he was a representative of a different industry, have a different perspective we need to hear that as well.

(Alicia) this is (Liz), I'd like to begin. I think one thing knowing that resources are tight across all of USDA is that as stakeholders you need to evaluate what we can bring to the table whether it's planning capabilities, whether it's exercising capabilities, whether it is the ability to say what are - what diagnostics are we already paying for that we could perhaps pull into a program by sharing data. So I think in addition to what USDA can do for us as stakeholders, you need to USDA ask what we can bring to the table and partner with you on.

And I love that (Liz) because if you follow this matrix through the very last piece of that is for each program goal we asked the (served) industry folks yesterday how would you support this goal with that kind of end in mind, right. What is it that you're able to contribute to help us get there?

So can I ask a question?

Certainly.

So I represent veterinarians and veterinary professional organizations and not necessarily just those serving the captive (served) industry. And some of the feedback I've gotten is that the veterinarians feeling with the farm (served) industry have a very different risk perception for chronic wasting disease than the actual (served) farmers who think the risk is much lower. And that - so
veterinarians may value the program to the industry very highly and maybe the industry doesn't agree with that. Did you get that kind of sense from the stakeholders?

(Alicia Nable): So that's kind of a loaded question (Liz), right?

(Belinda Thompson): That was (Belinda Thompson), sorry.

(Alicia Nable): Put me on the spot there. So you know I would say, I'll be honest, I would say and I don't and you know I don't - and I don't think any of the folks that we spoke with yesterday would pull any punches here. There are some real frustrations particularly when it comes to the CWD program with our (served) industry. Some of those - and I - so I think there is a general desire that when you talked to the (served) industry folks they view the value of the (served) program as that herd certification program, right. They view the value in being able to move their animals and interstate commerce.

And I think where the friction is right now with our CWD program is that as (John) alluded to, when you detect disease, in this case CWD, the expectation is you do something about that disease, right. So unfortunately as I described at the beginning of the hour right now that means misses restrictions. And so I think the industry folks are really struggling with the fact that the reason that they believe in this program and they think there needs to be a program is to facilitate their interstate movement of animals yet as a result of detections that have been found through the program were prohibiting interstate movement of animals. So it's a really interesting kind of - just a position I guess.

I think they would absolutely say they are frustrated with us and that was very clear yesterday. I think some of their objectives might be a little - and the
purpose in that objective might be a little different then maybe those of us that have a more traditional solely animal health viewpoint.

(Belinda Thompson): So is the end goal, the ultimate goal to actually eradicate CWD and farmed captive service?

(Alicia Nable): No so clearly the current goal of the herd certification program is around prevention and control. It is not intended to be an eradication program.

Man: And that changed since it was first published as a proposed rule in....

((Crosstalk))

(Alicia Nable): That is correct.

Man: It was eradication then but it's more of the...

(Alicia Nable): And you know (John) has a lot of history here too and he can - I think he'll bring an important perspective to this discussion because of the history that he has.

(Glenda): This is (Glenda) with Tribal Rep. My question is it appears that you have a very targeted population that you're dealing with here and that you're able to pull registrations and you're able to pull all this information. And then based on your discussion with the group you talked with yesterday the communication as far as fulfilling the continuous evaluation process needs to be ongoing all the time. So in my suggestion goal number one should be education and following up with education at the end. It's just - it seems like this is doable because you have an audience that's already there, they want to be herd certified, they want to keep their certifications. But also as a
government entity I could see that it could be a challenge because they're feeling that the big government is looking in on all of their activities and what they're doing.

So I could see how this could be very successful quickly and right away and could be a model. But the communication needs to be there otherwise you're going to have a lot of fear and a lot of people that are going to not want to participate and not want to go through this process because they don't understand what's in it for them.

(Alicia Nable): And I think that's a really good observation and that was some of the discussion that we actually had yesterday. There were several stakeholders in the room that felt that the focus should be strictly working on these disease programs and helping them access the interstate markets for animals and perhaps even international markets but there was another set that said you know what no the foundation is doing the stakeholder communication outreach and education and without that we have nothing else. So that's a very well aligned with some of the conversation we had yesterday (Glenda).

We want to clarify that we do not pull registration certificates in any way shape or form as part of the (served) health program.

Man: As a follow-up to that (unintelligible) and I represent (unintelligible). If you do that education and outreach component first I think you'll develop an awful lot more support on the industry side to comply with what you're asking to do. And perhaps as (Mary Ann) pointed out earlier when we were talking about some other programs you've got programs that are industry support programs already upon which you can build a model.
You've got the beef quality assurance program that the beef people have used very successfully to a lot of issues with carcasses to help improve the - or to reduce the pathogens that flow through the entire farm to table process. And there's no reason why something similar might not be adopted by the service people if they had the models put in front of them, if they understood what the goals were, if they understood how they were affected and the impacts they could have just some fairly small things that they could do on their own plate.

(Alicia Nable): Yes I think that's great, that's a great suggestion.

(Belinda Thompson): One of the biggest, this is (Belinda Thompson) again, one of the biggest pieces of feedback that I got was the objection that the only stakeholders being surveyed here was the (served) industry and while we need programs to serve them there's a component of CWD control that is stewardship of wildlife and the environment. And that while USDA isn't responsible for the control of CWD and wildlife, it should be responsible for controlling the spread of it in the captive (served) industry and some components of the program even if the captive (served) industry objects to them it might be necessary. And so many of the veterinarians that I communicated with were very concerned that stewardship component didn't appear to be represented in the questions that were being asked.

(Alicia Nable): And that's a legitimate observation and the way we're seeing the stakeholder feedback as part of this evaluation process is we're really doing it in more of a focus group way, right. So legitimately you're only seeing what we presented to the (served) industry representatives because we felt like that was the closest probably equivalent for what we could share with you. Plus we just did it yesterday and it allowed us to you know piggy back one conversation with the other. You raised a really good point and our intent would be to have a similar focus group with some of our wildlife stakeholders. And I think you
know (John) will attest to the fact that we do try to bring them to the table whenever appropriate.

(Liz): So this is (Liz) and I'm going to have one quick comment and then I think we have somebody from (served) in the back of the room that may want to comment. But if we go back to surveillance I understand it's a (VF) wide goal but I think we need to stress that (Asus) needs to support data management options that will allow messaging from laboratories, from laboratories, use the standard format that we have the ability if there is a finding in surveillance that might cross species that we have the ability to reach across silos between you know species via programs. But you know as we looked at what happened with us during the message, positive findings of (PED) when it started and they were sending in Excel spreadsheets and unable to electronically message out of the labs. Now trying to look at developing some standardized codes for spine diseases.

Without (unintelligible) and non-laboratory support of those initiatives you're still going to have some piece mail surveillance activities going on. And I think that if surveillance, comprehensive surveillance is indeed a (VF) goal we need to have the IT infrastructure to support that.

(Alicia Nable): Thank you.

(Liz): And then...

Man: (Liz) can I say one thing.

(Liz): Sure.
Man: Before we go to (unintelligible). In the comment of what (Belinda) was saying, from 2002 until about 2011 or '12 the (Asus) line for CWD was around 12 - around $15 million to $18 million. When they had that money they split it down the middle between captive (served) and pre-ranging (served) for CWD related work on both sides of the fence. So there was some stewardship there. There was also a lot of politics in 2002 and some heavyweights from Wisconsin had some significant influence that the disease was found in pre-range in animals there. So it's one of these obvious situations where everybody's got to work together to have any chance at all of (unintelligible).

(Alicia Nable): So do we have one other comment before I move onto some of these other questions?

(Liz): Actually we've got an observer in the room that I believe is with - has (unintelligible), or...

Man: I can wait until she's done though.

(Liz): Oh okay, sure.

Man: (Liz) could I ask one more thing.

(Liz): You bet.

Man: About the objective. I have - this is probably a tough question but the second objective, the elimination of Bovine tuberculosis from (unintelligible) how realistic is that as an objective because the prevalence appeared to be so low right now I don't know how appropriate it is to have that rated as a really strong objective. And what it would take to eliminate on top of every one in a
while now and then at a very low level. Unfortunately sometimes in cattle as the service (unintelligible). So I don't know if that's a question you can answer (Alicia) or not. With the tools that we have how realistic is it to consider elimination of Bovine TB?

(Alicia Nable): So I'll tell you why that says eliminate Bovine TB. It says eliminate Bovine TB because right now that's so kind of the language that we use in the larger Bovine TB program in cattle and bison. But that argument around is eradication a viable goal for TB is a long standing one, right. And I will be honest, when I came into this program and inherited those objectives I had a kind of reaction to the word eliminate myself.

I would work through - is it (unintelligible) that's in the room with you all?

Man: Yes.

Woman: And we've got one more...

((Crosstalk))

Woman: A clarification I guess.

(Alicia Nable): Yes?

Woman: You said the value really is a producer within the certification interstate right?

(Alicia Nable): Yes.
Woman: Okay so what happens if they come up with a positive animal? Are they then - do you take the whole herd out? Do they - can they ever regain with such an insidious disease, can they ever regain movement?

(Alicia Nable): Yes so a couple things. So if we do identify an infected herd with CWD our primary go to would be a whole herd depopulation. And if at all possible we provide federal indemnity to do that. But as we talked about earlier that's not always possible. Under that circumstance there's a period of time that we usually require the ground remain fallow, we require cleaning and disinfection of facilities. But in theory at some later date (served) could be raised on those premises again.

The complication comes when we don't have sufficient federal indemnity money to immediately remove the herd and perhaps the state does not have indemnity money to them either. In those situations we frankly maintain infected herds of animals from the ground, we have environmental contamination as an issue and it really kind of - it changes the risk of exposure long term, right. So our goal would be to try to get producers you know back into status as quickly as we could. Some of the status complications though come when they're tied up in these (epi) investigations that we talked about before as well.

So in the interest of time I want to move on and I'm sure (Shaun) can give you his perspective on what that means to a producer in a moment. So (Shaun) these probably look familiar to you. So questions four and five we asked those yesterday and I'd ask you what do you think is working? Are there things that are beneficial to your industry? And then question five is what's not working? What are the things we really need to focus improvement on? Or things that just aren't beneficial at all and we should reconsider whether they're an objective or not.
((Crosstalk))

Man: Oh I have one question this is (unintelligible).

(Alicia Nable): Yes.

Man: As you find that you must work with fallow like services and as we look at population control, how likely is it that you would (unintelligible) and maybe you already do into (unintelligible) issues such as population control given that they approach the (unintelligible) is also a population of controlled issue.

(Alicia Nable): Right, so certainly I think if you look at some of the mitigations in place in Michigan where we've seen TB in wild deer and then domestic or captive service and cattle we have used some population control as a way to mitigate for animal disease, right. Some of that has been feeding bands so we don't allow feeding to allow for congregation, density reductions in certain areas. You know right now not to say that we would never utilize those tools in our toolbox if they're appropriate, right now that really is not an area that we envision going right now.

Man: Thank you.

Woman: (Unintelligible).

Woman: Feedback that I received was that in general the TB control program has worked actually pretty well and now we're down at such a low level that it's getting harder and harder to detect it. And that what's not working is actually preventing the spread of CWD among captive deer facilities and we're repeatedly identifying it in new places.
And specifically some of the feedback I received is that some individual states have loopholes that allow herds to become certified in shorter periods of time than perhaps the guidelines call for. And that in some cases the indemnity payment when they actually incentivize an outbreak rather than compliance and that rule changes in some areas to minimize the actual control measures like reducing quarantines or reducing the requirements for appropriate fencing may actually encourage spillover into wildlife.

(Alicia Nable): Thank you I do want to comment about a couple of those items. We have seen inconsistency between and among states with regards to how they're implementing the program. So we believe that's an area that we need to look at moving forward. Indemnity is an incentive to get the disease. That may be true if our indemnity were more generous. I think the fact of the matter is the value of some of these animals far out sees the amount that we're able to pay.

So you know we heard that argument in other programs for sure and there may be a subset of the population where that could be true. But I think generally what we're hearing is the worst thing that could happen to you is to be detected with this disease because it's devastating to your livelihood. But clearly there's always that question about whether indemnity incentivizes or not. Thank you that's very helpful.

((Crosstalk))

(Alicia Nable): Any other what's working, what's not working before we move to the last two questions which we're almost sort of hitting on as well.

((Crosstalk))
Man: I was just going to mention to (unintelligible) comment. In Michigan which is really the hotspot of TB in the country if you think about it. We haven't had a (unintelligible) farm that's been (unintelligible) since 2009 so it's been over almost seven years now. But it's mainly because of good implication of the TB program there in the captive (unintelligible). So it does work when implemented well.

(Alicia Nable): Anything else about what works, what not work - what not works - what isn't working?

Woman: Nobody's got their hands up, so.

(Alicia Nable): Okay so the last two questions yesterday - well the next question is we asked them to literally rate the value and (Shaun) can tell you he was there yesterday, we made him circle a level and tell us how they thought the program provided value to them. And then at the end we specifically spent time talking about the CWD HCP program. And this really was a foundational questions yesterday. What does it mean or should it mean if you say you're a certified herd in the CWD HCP?

And then the eighth question was - can I scan down here? The eighth question was what was the one most important thing that must be changed to improve the CWD HCP? Because you know again that's really where a lot of our activity is, that's really where a lot of the challenges have been over the last several years. So you know we knew that the group would really want to provide us some specific feedback about CWD and we wanted to make sure that we got that from them and we get that from you. So I'll open it up again for any comments or thoughts there and then I'll turn it back over to you in the room to facilitate questions from visitors.
Woman: Well in regards to question number seven in the what should it mean, the feedback that I received said that what it should mean is that the - that a purchaser of (unintelligible) should be confident that the animal they're purchasing is from a producer that's followed the rules, conducted the testing and is as low a risk as can be defined with our current testing. And regarding the what should be changed, I know that I received two comments, so I know that you're asking for one thing but I received two comments from two different people.

One is that the two tier system was certified and monitored allowed to some owners to keep the system and have questionable animals removed prior to mandatory testing. And they thought that that should be eliminated. And the second input I got was that the record keeping should be standardized across states because there hasn't yet been a CWD trace out that isn't brought with holes and unknowns.

(Alicia Nable): Thank you.

Man: (Unintelligible). One of the most important things that came through the program might not be something that I think could live animal testing. What I heard that may not be something that's feasible right now but as a goal.

(Alicia Nable): That would definitely be a game changer wouldn't it, right, it would be a game changer and I think the challenge you know as we know when you do diagnostics for the (TSC)'s in general, timing is an important issue right because it's a chronic disease so there's that latent period where even though the animal's infected you couldn't detect it.

With (anti-mortum) testing you know there are also issues with getting the right samples, right, because usually ideally we would be collecting from the
(unintelligible) and the brain, we can't do that on a live animal so we have to use peripheral tissue generally to get that sample. So some of our sensitivity might be reduced there. And it's definitely a big challenge. It's really - one of our program's primary focus this year is to identify with existing (anti-mortum) tests are there ways that we could appropriately use them with an acceptable level of sensitivity in the program.

Woman: Anybody else with information on what it should or what it means or should mean for...

((Crosstalk))

Man: Question.

Woman: Sure.

Man: With (unintelligible) so how big of a driver is the fact that these animals are intended for consumption? And I know it sounds weird to ask that question but I’m wondering how much (unintelligible) potential plays into (unintelligible) into the question you're asking.

Woman: I think that’s certainly an interesting question, right. Currently no evidence to support that but it’s clearly a concern. And we have that similar concern really across all the TSEs. At this point it’s really not - it’s by no means is it a primary driver of the discussion. I think it’s more of a secondary consideration. Should it be valued higher? You know, I’m not sure.

Man: Well, I would suggest that maybe part of the discussion should be on what extent that should drive the thinking going because I think you come up with
different strategies or factors that are more or less important as you put it in a context of some sort.

Woman: Can I comment on this?

((Crosstalk))

(Linda Thompson): So New York has the great CWD experiment going because 10 years ago a deer was fed to a whole bunch of people at a game dinner and then after the game dinner the CWD test came up positive. So the CDC has been involved and all the people at the dinner were enrolled in a longitudinal prospective study and tracking all those people. And we’re 10 years in and nobody has gotten any related illnesses. But a couple of people have died of (parylogic) disease so it was scary because they got other things.

And so the CWD is involved and the New York Public Health is involved. So to my knowledge it’s the only study that’s going on to determine any answer to your question.

Man: Given (unintelligible) and, you know, it may take 20 years...

((Crosstalk))

(Linda Thompson): It might, absolutely.

Man: And if we don't start out understanding that (unintelligible) you're doing this then you end up with - holding your hands up.

(Linda Thompson): Right.
Woman: How many people were at the dinner?

(Linda Thompson): Over 100.

((Crosstalk))

Man: ...comment on Dr. (Bledsoe)’s statements there, the drivers - I see four potential drivers. And the one that USDA has the authority and response to deal with is the meaning of the disease to the (unintelligible) industry. Then we get outside the fence and what are the implications for free ranging wildlife populations and all of those stakeholders and the economies that are associated with them.

And then the last two drivers are the big game changers and that is if we would see transmission of the disease to traditional livestock species, and then the big one you mentioned, transmission to humans, the latter two which we hope we never see. But those are the drivers. And again, (AFIS) just has a responsibility for that first driver.

Man: Well, I’ll finish on this one note. I think one of the - I’ll call it frustrations that we’ve had in the public health community is that many of the drivers in the USDA program (unintelligible) just about the animals and so there’s not a public health component. But I can remember many conversations where it seemed like it was (unintelligible) public health with USDA people.

And that was a frustration because while I care about the animals and I want them to be healthy I think the biggest concern would be the impact upon humans and with agents that take years and years to show themselves but can kill you, you know, (unintelligible) highest degree of prioritization of how you go about monitoring or surveying the environment.
(Alysha): So that was - I really appreciate the conversation and the feedback that you all shared with me today. Definitely some different perspectives than we’ve heard before and that’s why we did it. Certainly some things that we’ll also think about as we continue to implement this program continuous evaluation process to make sure that we get a well-rounded input from multiple stakeholder communities.

I’ve shared with you my email as well as the email of one of our staff officers who’s helping coordinate the evaluation and the staff individual that’s leading the evaluation in case you have questions or other things to share. I will get back with you through RJ later today with some demographic information with the gentleman’s first question about the demographics of (unintelligible) in the US so that you can have that to inform some of your deliberations and your recommendations.

And, again, just really appreciate your time and your thoughtfulness and look forward to seeing recommendations from you about the objectives and the priorities for our (unintelligible) health program. So that’s all I had so I’ll just listen to any further discussions for a bit.

((Crosstalk))

Woman: We're going to hear from our - oh.

((Crosstalk))

(John): This is (John), (Alysha), you probably expected I would bring this up but I think it would be interesting for you to comment on the progress on the US (AHA) resolution from a year ago last October when the farm service industry
and other stakeholders, including the wildlife - the range and wildlife interests - asked (AFIS) to put together complete epidemiological information on the herds that have been - captive herds that have been positive for CWD in the US and also free ranging herds to inform possible revisions of the herd certification program, especially to answer questions like how are we missing the disease when we detect it in a herd after 10 or 12 years of monitoring.

I know you were set back quite a bit with the (HVA) outbreak but I think it would be interesting for you to tell the group...

((Crosstalk))

(Alysha): So I’m happy to share that with you. So there was a resolution from 2014 US (AHA) that asked (AFIS) to conduct a retrospective epidemiology study about CWD cases. And we’ve made more progress on the cases and farm service, as you would imagine, right, then we have on the wildlife. What we’ve done is every year - and states that participate in the herd certification program are required to submit an annual report.

So when they submitted their annual report for last year we provided a epi summary worksheet if you will, and asked them to provide additional epi information about some of those cases that were detected over the last 10 or so years I think is where we focused.

Currently, I think next week we’ve got a meeting scheduled with (John) where we’re going to try to identify some ways we can get similar information about cases in free ranging populations. And, again, the goal (unintelligible) really provide a descriptive summary of CWD cases in recent history.
I do want to say, (John), I do not think that an objective - I don’t think that an appropriate outcome of that kind of retrospective work would be - is to assess essentially the sensitivity of the surveillance system, which you just asked. To me, that assessment about how effective are the current testing mechanisms that we’re using in our certification program at identifying infection, that question would need to be addressed through another mechanism. That’s not really an objective as we set up that retrospective summary study.

I think it could give us, the numerous times that we have identified disease or infection in infected herds, but I don’t think it will give us a good idea of the sensitivity of the surveillance.

Woman: Can I ask a question about that? What if the disease isn’t failing from a sensitivity perspective but it’s related to animal movement? I mean, I think talking about the epidemiology of transmission may uncover, you know, animal movements that weren’t recorded prior to the detection of CWD and that it actually wasn’t a failure of the test.

(Alysha): And so often these retrospective studies are used for those kind of hypothesis generation ideas, right?

Woman: Yes.

Woman: Okay so we’ll hear from (unintelligible) say your names loudly and clearly, your full name...

Man: (Unintelligible).

Woman: That will be great.
Shawn Schafer: I think many of you from around the table do know me from I guess the years I’ve been involved in the animal health industry. A quick introduction, Shawn Schafer, Executive Director for the North American Deer Farmer Association. I have served on the North Dakota State Board of Animal Health. North Dakota is my home state (unintelligible) 12 years, I got 2 years left to go on this last term here of that Northwest State Board of Animal Health but I’ve been very involved in the animal health industry for a lot of years. And I was on the advisory board I guess years before that.

I also sit on the North Dakota State Veterinary Diagnostic Laboratories advisory board and I sit on the external advisory board for Kansas State University’s and Homeland Security (unintelligible) Center for Excellence in Emergence Zoonotic Animal Diseases. So in the grand scheme of things I get involved in this - the animal health of it with a lot of different diseases, a lot of different species. I (unintelligible) Washington DC yesterday. (Alysha) did an excellent job and an excellent job today as well.

I’m just going to kind of go right down the list here of some of the questions I’ve heard probably make it a lot easier I guess to get some of this and maybe open it up for discussion at the end. But the TB - I’ll start with that because it’s probably the smallest and easiest of the ones to tackle.

Quick to point out, the Michigan TB was not spillover from deer because of deer or deer to the cattle. The deer were the victim there. It was a cattle strain that was picked up. There is a (unintelligible) strain, as (John) had mentioned that we have fought (unintelligible) that came over from New Zealand possibly or - in early 80s I guess. But anyhow the strain in Michigan is unique to Michigan. (Unintelligible) Michigan either.
But we do have two herds up there, hunting ranches, with (unintelligible) wild deer that have had the disease. We’ve never had a breeding herd - we have some certified herds within the (unintelligible) management area, has yet to ever become, you know, infected with the disease. So we do have control methods in there that are working.

Anyway (John) was talking about eradicating TB. You know, I agree, when it gets down to this level it’s tough to say are you really going to be able to eradicate it.

But a thing to point is the failures we’ve had in this disease and where we’ve had the spillover from the cervid strain into the livestock, into the cattle industry, we were using the skin test - the single (unintelligible) is all we had and failed us miserably. Failed us miserably. I mean, we have a herd - the last one that really - maybe the straw that broke the camel’s back was in Nebraska here.

Herd just went through an accreditation and then even when they - and we blame a lot on accredited veterinarians that they’re not doing it correctly, they're not finding enough percentages, you know, of positives. And well in that situation, you know, the (AVIC), the state vet, everybody else, when they went out there to see what went wrong they themselves couldn’t find any responders in that herd. But yet when they took it to slaughter it was crazy like 70% infection or something. It was terrible.

So in recent years we have moved to the (DPD)s, the dual (unintelligible) blood test, (unintelligible) test and it’s, you know, we think it’s working great. We don’t know, we have found any disease yet. But, you know, we hope that it’s a better test. We know that the skin test failed us so I’ve got great confidence that hopefully maybe the blood test will take us to that next level
of hopefully getting rid of any of the cervid strain and thank God this ain’t something we’re ever going to stop. I think we will always test for TB.

So the exposure, you know, we have a producer that has dairy cattle, roping steers, rodeo cattle, whatever, there’s always exposure to TB from other sources. You know, we want to make sure we’re not getting and spreading and moving any other strain. So with that we’re very (unintelligible) with the TB program.

Moving on into the - some of the questions about emergency preparedness.

Man: Can I ask you a quick question about TB?

Shawn Schafer: Yes, please.

Man: Has anyone tried to take a look at the human population since we have a resurgence of TB in the US? And that certainly can be (unintelligible).

Shawn Schafer: I don’t know if I’m even able to (unintelligible) last case of TB in our dairy herd was from the humans.

Man: Yeah.

Shawn Schafer: It was spread from a migrant worker from Mexico. So we have not experienced that in the cervid industry.

(Alysha): Hi, this is (Alysha). And, yes, our TB staff particularly our folks in the laboratory at National Veterinary Services Laboratory, we utilize the same genotyping techniques as they do at CDC. We share those - what are they
called, (dendigrams). So absolutely are well looped in and coordinating with CDC on those areas.

Shawn Schafer: I know that (unintelligible) and the DNA-ing I guess of the TB has been very beneficial to the cervid industry as well. It’s amazing with some of these last cases we’ve looked at and, you know, (unintelligible) it’s amazing what she can do and tell you where that traces back to and how many states or years or generations ago it went back. I mean, so, yeah, so we are using that same - a lot of that same technique and same...

Man: The blood test you're talking that’s available, is that being used also in cattle?

Shawn Schafer: No, it’s different than the gamma interferon that they're using, it’s a (bola) gam - ours is a different technique - and I don’t know - I guess why they haven't pushed it over to the cattle side but apparently it mustn’t work as well with them. But, no, they're using (unintelligible).

(Alysha): So again my understanding is that the Idexx Corporation does have an (alisa) that there was some preliminary work I believe that the cattle health team worked on using that particularly in herds that were identified to be infected or traces for TB so they could better use test and remove in those herds. So there are some other screening serologic tests for TB that are in use in other species but they’re usually very prescribed uses.

Shawn Schafer: We have a (unintelligible) well and at this point their (unintelligible) test is working on the cattle doesn’t work on the cervids, it’s not very (unintelligible) specific. So we haven’t quite got there yet. Ours - the (DBP) that technology is being used - the elephants, and then also primates, I know they use it as well so those two species it works well in.
On the emergency preparedness one thing that we looked at, you know, is a lot of the emphasis, you know, through the (unintelligible) group that’s been on, you know, we look at all these foreign animal diseases come, I mean, there’s no doubt of putting (unintelligible) this country and got into our reservoir, got into any of the wildlife would be a terrible thing.

We look at a lot of the (unintelligible), you know, look at what that did to Europe. EHD-7, what’s that - we know what that has done to a lot of the foreign countries. And what would happen if they get, you know, this country? Well we had a similar thing happen with EHD-6 which was an exotic strain of EHD, which now they consider endemic, it’s here, it’s been all over.

But in 2011, 2012, 2013, we lost cattle, yaks, elk, other species that normally don’t die of EHD, you know, South Dakota, Iowa, Nebraska, Colorado, we lost lots other livestock to EHD and (unintelligible) really said anything about it, we were worrying about these other foreign ones but it was happening right there on our country, on our soil.

So what we - kind of turned around and start looking at, you know, there’s a lot of older viruses out there that are - could be devastating if they hit this soil but maybe we should work on controlling the ones we have right now with the - the 13 different bluetongue strains and the three different EHDs that we have let’s work on those a little bit here so one of those other one hits us maybe we have a vector control, maybe we have, you know, a way to fast track a vaccine, you know, because right now the vaccine - the (unintelligible) vaccines we worked with have failed us miserably.

You know, it seems like it works for a year, two years then all of a sudden, wham, we get devastated again when something changes. So (unintelligible)
gene is not the route to go. And it’s a quick Band-Aid but that’s it. So that’s our emergency preparedness work on some of those and not just with the bluetongue and EHD but MCF, malignant catarrhal fever, for our sheep friends and goat friends in here.

I mean, I tell you what, that’s a devastating disease to us. I just lost a producer this year in Pennsylvania within - within 7 days he lost 90 head, I mean, killed them. I mean, he had like 10 left over and he was done so basically puts a man out of business in days because his neighbor, you know, across the road brought in three sheep for a 4-H project, you know. So what a shame. So that’s something - and I don’t know how ever address that. The industry is working on it but, you know, there’s pretty good tests for MCF, you know, malignant catarrhal fever, but nobody does it.

You know, and I question how many of the - how many wild deer do we lose around this country to MCF that we blame on EHD? That probably isn’t, you know, probably is MCF, we just don't know. We blame it on EHD - because if you don’t find it right away in a fresh sample it’s tough to type them, you know. So that’s our emergency preparedness is trying to work with all the viruses we have, you know, and the problems we have here so when one of the other ones were to get us we’d be ready for it.

Moving on to CWD, we do feel the program is working. You know, I've been in this now for 18 years, I guess going on my 19th year, and I was there for the very first meeting with (Beth Williams) and (Mike Miller) when they acknowledged that they've been having issues with the wasting disease and they think it got, you know, (sold) in our industry as well.

And at that point in time they did the (un intelligible) and I think that’s what (John) and I have been asking for here for several years is to get the
(unintelligible) how the disease has moved. We could trace it all, and we show where it went from, you know, Fort Collins over to, you know, the Denver Zoo and from the Denver Zoo to producers in South Dakota to the Toronto Zoo, you know, everyone’s forgot about that dot, you know.

And so we track down a lot of animals, killed like 39,000 or something it was and stopped a lot of disease. You know, and but they’ve been with kind of a five-year lockdown and since that time the program, you know, someone said earlier about is it failing, is the testing failing, we’re having certified herds that (unintelligible) breaking the disease out to many years, it’s something else broke in the program.

Some other movement of this disease, whether it’s environmental, the scavengers, crows and ravens, the dirt, the hay, the movement within the (unintelligible), something else is coming into play here and that’s what we really need to find out because myself as a producer, small industry, if, you know, if (Steven) was - had a problem in his herd, you know, I would be tracking and watch. I won’t buy animals from him, I want to make sure he's got a clean herd because I got a lot of money invested in mine.

The neat thing about this disease is, you know, it’s a time factor. When I look at all the different outbreaks we’ve had, and I look at where did they ever get, where did they ever get, I’m looking back, you know, five years and I look at everybody they bought and sold from and I look at all the genetic lines, we have a DNA registry that tracks everything. The herds that they bought from still haven’t ever broke with the disease. The neat thing about this disease is you can’t hide it, not very darn long, it’s going to bust. It’s going to bust bad. And all of a sudden your herd is going to crash.
So we're not seeing that. So I don't think we've had a breakdown in the program for not detecting disease soon enough. I think we're finding it when we get exposed. But where the breakdown to me is in the prevention and the management of how do we stop from getting it especially in producers in endemic areas. That's - there's no doubt it's been a big hit to us as producers in endemic areas.

At the same time some of the producers in endemic areas like Colorado, Wyoming, not Wyoming I guess but Colorado, they're managing a little bit different and instead of eradication and coming in and spending the money in indemnities, they're just letting them - letting the producers manage it, moving the animals at a younger age, try to prevent the environmental contamination or environmental load. And they're just staying in business doing commerce. So there are other ways to manage the disease.

I think the big thing is as (Alysha) talked about, the live testing, we've got several lives tests now on the immediate horizon, they have a pilot project going on in the state of Ohio right now, Texas the state I'm in, I'm going to be going to a meeting tomorrow. We have a couple herds here that are going to be looking at doing some live testing. I hope that's going to push us over the hump to explore new things, new research possibilities far as the - the genetic resistance, (unintelligible).

We're seeing some genetic resistance. We know there's a - some genetic resistance but, you know, they still get it. So now we could use it as a management tool, selling them animals earlier, we could breed that in. But there's also other genetics that we're looking at that we're just now seeing that possibly would get us to the point of a truly resistant animal, not one that's just going to be - get it eight years down the road, you know, we want to be truly resistant.
So hopefully that live testing that take us into that part of it where we can start - instead of coming in, you know, we come in and we wipe out a herd. Right now, the answer is kill all the animals, including the healthy ones. So if we could step back sometimes and maybe find out why did the healthy ones not get it, you know, maybe that’ll take us to that next level.

Man: May I just say...

Shawn Schafer: Yeah.

Man: ...you were not here I don’t think earlier today but we were talking about one health and transparency. This is exactly what I was trying to get to. It’s not about people’s finances or private business, it’s about the fact these are complex issues with many factors, many variables that are very dynamic. And the more we limit the sharing of information or access to information, the further behind we will be on this. Because whatever the answer is today next week it’s going to probably be a little bit different because these microbes are not static; they’re moving and they're changing.

And I just wanted to reiterate for the committee, I really think we - we have a long ways to go to share information a lot better (unintelligible).

Shawn Schafer: I totally agree. And I’m winding up here and I’ll turn it back over to (unintelligible) apologize for taking so long. But the question on the indemnity, you know, and I’m one of the big pushers for indemnity, you know, and I go out to, you know, Congress every year and lobby for this funding because when it hits you it hits your livelihood.
We are not - and I think (Alysha) said that after so many years you can get back into the industry. You know, and (John) and I will test - we can’t. I mean, so far it’s not ever proven to work. You know, no matter how long they let it set, you know, it’s like each (unintelligible), you know, pastures, you can’t put sheep back on them until you figure out the genetic end of it. You know, and so at this point we don’t have a way to get back into the disease, you’re just out of a job, looking for a new one.

So that’s a huge thing. So the first - you know, the (unintelligible) they think some of us are trying to get, you know, to get the indemnity, boy, it’s a drop in the bucket compared to the investment. And then how do you go out and buy a diseased animal? I mean, if it’s (unintelligible) we’ll buy a, you know, they’re...

Woman: Yeah.

Shawn Schafer: ...I mean, so. The zoonotic end of it you mentioned earlier here. And I know you guys talked about the less reportable diseases, I don’t know why (unintelligible) that. I mean, at this point in time you mentioned New York has got the study going on. New York study is a drop in the bucket, that’s little. We’ve got tens of thousands of people that are eating these deer every day, every year. Colorado and Wyoming have been eating them for 50 years. Some places in Wyoming they got 45% infection rate. You think about that, every other deer that gets shot, every other elk that gets shot, is positive. And they all get eaten. They all get taken home and consumed.

Wisconsin are getting, you know, some places are up to, you know, 20% infected. And, you know, every one of those animals is consumed. So we got a lot bigger project than them 200 people that ate that one deer. I mean, there’s people are eating these animals all the time now. I don't ever condone
eating any sick animal, we don't ever want to do that. But at the same time it has been shown that is not a human health risk to this point that we know of. So, you know, we just - there are a lot (unintelligible) looked at that.

And then the livestock, I know (John) had mentioned too at Fort Collins (unintelligible) facilities they house cattle with these animals for over a decade. And to this day have never shown anything so hopefully we never do as well.

With that I’ll offer up - take any questions. I’m here as a resource to you guys. I’ll leave you my contact with the chairman there and then whatever I can do to help or assist I’m here for.

Woman: Thank you very much.

Woman: Thank you.

((Crosstalk))

Shawn Schafer: Any questions. Sure. Thank you for your time.

Woman: Okay, (Alysha), do you have anything that you’d like to say anything more?

(Alysha): No, just to thank you to everyone. And again, if - I’ve sent to RJ some of the demographic information you were asking for. And so if there are any other questions I’m happy to help answer those. And we look forward to seeing your recommendations.

Woman: Okay, thank you very much.
(Alysha): Sorry the video didn’t work out, the best laid plans, right?

Woman: That’s all right.

(Alysha): Okay. May I go ahead and disconnect then?

Woman: You may.

(Alysha): Okay great, have a good day everybody.

Woman: okay.

Man: Thank you.

Woman: So I think now is the time for a break just (unintelligible) then we’ll come back and we’ll start with deliberations. (Unintelligible) okay good. So let’s take 15 (unintelligible).

((Crosstalk))

Woman: (Sara), (unintelligible).

Coordinator: You are back on.

Woman: Thank you very much.

((Crosstalk))

Woman: Okay so I think we’re going to go back into the One Health questions. I think that was one of the areas that we had a lot of discussion around. We’ve got a
lot of questions to answer. We had I think a need to come up with some consensus ideas.

And one of the things is that when we talked about the original how to reach out to stakeholders that Doctor (Nelly) asked us to talk about, we thought perhaps the things - first would be to say what are some of the prioritization around One Health activities? And then that would lead us to who are your stakeholders and how should you perhaps reach out to them.

And so the bullet points on the screen - and I apologize for those who are on the phone. I don’t know - (Wayne Cruz), are you still on the phone? Okay I know (Randy) has dropped off. (Annette)?

((Crosstalk))

Woman: How about (David Smith)? Are you still on?

Woman: No, (David) had to get on a plane.

Woman: (David) had to get on a plane. So it doesn’t sound like we need to read this to anybody. I think you’re all capable of reading. So these were the points we picked up. And this last bullet point on aqua culture is actually an email we received from (Randy) while he was - during the discussion of the aqua culture route.

So I - this one?

((Crosstalk))

Woman: Didn’t do any different…
((Crosstalk))

Woman: So you want me to get rid of this? I can get rid of that. (Unintelligible).

Woman: To be imported instead of important product in the big problem with higher expectation.

Woman: (Unintelligible) the second to last bullet point.

Woman: Right below the...

Woman: Right there.

Woman: That bullet point.

Woman: (Unintelligible) imported

Woman: I get it right in the last slide but not in that line.

So I think what we need to do is take a look at some of these and kind of develop some wordsmith language or some bigger concepts and we can wordsmith over emails and reports.

But if we can come up with some general ideas of what are our priorities we think around One Health. And then we can get into how would they reach some of those stakeholders.

I thought I heard very clearly is that wildlife and the environment tends to be the third of One Health isn’t always addressed.
And I think you also have some of the veterinary places that use it and say, veterinarians are talking about how important One Health is but medical doctors may not buy into the veterinarians’ point of view either.

So I don’t know if we want to try to just capture that as a background concept. That if we are going to deal with One Health it needs to fully address all of those concepts.

Man: I mean I think that makes sense and the USDA leadership better position to help drive some of that.

Woman: And I would say the phrasing needs to be (unintelligible).

Woman: Okay.

Woman: It need (unintelligible) all the topics and all the stakeholders because I am trying to think of how to phrase this in a short way and I won’t so I will go with the long way and we will go from there.

What we want ultimately would be to have the stakeholders in animal health, human health and environmental each one of those also thinking about all three aspects.

So the idea is to cover all three topics and engage all three sets of stakeholders and not simply have them come to the table looking at it as their specialty.

Woman: (Unintelligible) programs and activities? Programs and activities and not alliances or coalitions but, you know...
Woman: Working relationships?

Woman: Working relationships thank you.

Man: Maybe (Joe) mentioned it but I didn’t catch it. (Alicia) bared her soul with her budget. Do we know what kind of budget (Joe) and (Ellie) have for the One Health program?

Woman: I know that five people...

((Crosstalk))

Woman: One of the things that, you know, the stakeholders (unintelligible) felt very strongly about was it is very good for USDA to work with human health, work (unintelligible) so I think they believe (unintelligible) obviously part of USDA.

You will work around and across One Health to realize that USDA’s mission for animal health they have to advocate and lead the animal health discussions around what health does the committee feel comfortable.

Because obviously CDC does not have an animal health mission. EPA doesn’t have an animal health mission. So I think they wanted to remind FDA that their mission is animal health (unintelligible).

Man: But CDC does have a One Health initiative.

Woman: Right.
Man: Right and so my question would be are people (unintelligible) One Health idea? And so I didn’t hear that. I heard what can USDA do around One Health? My thought would be USDA needs to talk with the CDC One Health and all the other folks and start working together as a team around this idea.

They need to lead and demonstrate what One Health is a governmental agency.

Man: They do it at the top level.

((Crosstalk))

Man: They think it is important.

Woman: Plus they have their own ASIST strategic plan through 2019 and the veterinary services’ new perspective plan that requires them to consider One Health. And so while it is their obligation to manage agricultural livestock species they have yet another mandate that is requiring them to consider One Health.

Man: (Liz) I heard kind of a wide range I guess list of topics that (Joe) mentioned during One Health discussions.

(Unintelligible) antimicrobial resistance, food borne illness, (unintelligible), water air quality were all mentioned. That whole thing is what (unintelligible) supposed to be looking at on an as requested voluntary basis.

I mean I (unintelligible) tomorrow or maybe Wednesday but I mean I don’t know - I guess in my head I want to have more clarity about what we are talking about when you say the word One Health initiative.
Because the first thing that comes to mind is (unintelligible). You know things that affect people in (unintelligible). So he was (unintelligible) maybe food borne illness. I mean I don’t know are other people confused or do you understand the (unintelligible) talking about as we say the word One Health or not?

((Crosstalk))

Man: So if we go back a little bit further we were talking a lot about One Medicine, One Health. And then it became pretty clear a little late for the dance if you are talking about medicine. The idea was health and prevention. Mitigating problems as early as possible before they got really out of control.

And so One Health kind of gained traction but it is really three things. It is reasonable approach to (unintelligible) among animals, among humans and environmental health.

So water and air is part of that environment. And if you have got unhealthy water we know there are many consequences to that.

The thing that is so great about your question is you go from here all the way back to the (unintelligible) and you encounter 100 people you are probably going to get 150 different responses to that question. And (unintelligible).

Similar stakeholders as it is (unintelligible) but a (unintelligible) frankly has representation from all three sectors (unintelligible).
Man: You know the only time I been known truly on committees to talk about One Health was when I was (unintelligible) hospitals (unintelligible) and they had the environmental people but that is the only time.

Man: Well we could (unintelligible) our agencies of government is not built around that concept of and we can just look simply at the food (unintelligible) and how broadly (unintelligible) federal agencies. The EPA, FDA, USDA, and I can keep going from there.

Or just take a cow and how many times that cow switches agencies as it moves from the farm through transportation to slaughter and out to retail. I mean so really what we are trying to do is come up with policies that will enable us to circumnavigate (unintelligible) government model that we built.

Because it is so hard to reorganize the government. I think this committee is in a position to (unintelligible) as we see it to be positioned. And it may be different from (unintelligible).

Woman: That dialogue helped me put into words something. And I have to say (Liz) when you first brought up the idea of priorities first and then stakeholder outreach recommendations I don’t like that idea and I can’t figure out why.

And I think for me the reason is why is I don’t think we have the right group of people around this table as diverse as we are within animal agriculture. I don’t know that this the right group of people to set the priorities for One Health.

I think this is a great group of people to say, here are things that animal agriculture and wildlife and related things are worried about. Here is to, you
know, we think needs to be at the table having these discussions and maybe some guidance for like - I wouldn’t (unintelligible) USDA.

Man: Who was the right kind of people for it?

Woman: Well I think we are some of them but not all of them. I don’t know that we set priorities by ourselves because to me that (unintelligible) idea of what One Health is and the idea of talking about how animal health works with human health and works as environmental health matters.

So we should be at the table but I don’t think we can set the priorities if only one third of the people need to be at the table.

Man: (Unintelligible).

Woman: (Unintelligible).

Man: Try it on. Maybe the FDA (unintelligible) other people (unintelligible).

Man: Maybe it is time to add the other people.

Woman: Yes. So...

Woman: To me that would be the first recommendation and let’s make sure and say, we really need to engage. It doesn’t need to be USDA (unintelligible) figure out that outreach (unintelligible).

Woman: Well we could make a recommendation that USDA asks public health, food safety and other people for recommendations in this regard as well.
Man: (Unintelligible).

Woman: We can make that recommendation.

Man: It would be probably better if these people you are talking about are all in the same room. (Unintelligible) when one group makes a recommendation and then there is a group a month later makes (unintelligible).

Woman: Too late for that. We are here.

((Crosstalk))

Man: Maybe I didn’t say very well before. Everybody at the government level (unintelligible) talking together on this initiative. It is not just one group saying this is what we need to do because we are not going to come to the same answer if we don’t talk together.

Woman: So I guess that is part of that question is what do they mean by non-traditional ASIST stakeholders? So they say traditional industry and then they say non-traditional ASIST stakeholders.

Are they including non-traditional animal agriculture stakeholders or are they including the whole gamut of non-traditional stakeholders that public health is a stakeholder and wildlife is a stakeholder and the environmental people are stakeholders?

Woman: (Unintelligible).

Woman: And public health is a stakeholder. I don’t know. I honestly don’t know if that is what they are including when they say non-traditional stakeholders.
((Crosstalk))

Woman: You know we don’t really have our own definition.

Woman: It began with the (unintelligible).

Woman: I thought there was the one big One Health Commission and you were part of that. And I think there is still some figureheads somewhere that (unintelligible).

Man: The commission recommends this (unintelligible) and I can tell you what I think has been disappointing. I am not criticizing individuals. What I am saying is we think together and then we sort of look back to our own sandboxes to have (unintelligible).

And it will take a committee like this going back to what everybody is saying to say we are going to figure out ways to get parties from the three sectors. You know human health and the environment into the same room to talk about (unintelligible) that was the intent.

Right now it is just (unintelligible) and animal related people getting together and (unintelligible).

Man: Well I will disagree in a sense that if you look at many of our (unintelligible) institutions there is a very strong effort to bring together all of these groups. Medical students, veterinary students, public health and environmental in different environmental studies that may be represented within (unintelligible) colleges.
And I think that that movement if you want to say has yet to be (unintelligible) because these students are still coming through the system. But I mean you look at a lot of tools in the Web. Davis, Washington State University have very strong One Health programs that fully integrate all of this.

And when these people start getting into those positions you won’t be around to see it but it is going to change the culture because it is going to change how their foundation was laid and how they look at things.

And I think that is really important that we not only acknowledge (unintelligible) get USDA to recognize if those are those initiatives out there and they are very important because they are laying a fundamental groundwork that will bear fruit down the road.

Man: There are some good examples to use and say, hey this thing (unintelligible) but you need to get that message out and start to encourage that behavior elsewhere.

Man: (Unintelligible) what that is because we started that (unintelligible) partnering with the public health school and other institutions (unintelligible) as well. So I do appreciate your comment.

We are teaching people about the concept of One Health. I don’t know that you have seen a lot of papers out of that process. A lot of teaching going on. The difference what you are describing and us is we are here to advise the government on how the government can improve. They can’t do that for us.

Some of those people you know (unintelligible) but right now taking people like us who have been asked to advise to just be clear about that.
And (unintelligible) training that is going on but I think that is all we are seeing is training. I mean 25% of the (unintelligible) students are (unintelligible) public health degrees is unheard of when we were in med school.

But that is why I became a dean because we were afraid of (unintelligible) school funding (unintelligible) and make it happen there. There were three schools, veterinary schools in this country before 2001 (unintelligible).

It was after 9/11 that the schools got (unintelligible) on needing to better focus on public health. And we still haven’t been attacked through our (unintelligible) unfortunately.

So I think any group that is supposed to be telling the government our opinions about practical applications of this that is us. I don’t know if anybody else is going to do it at least (unintelligible).

Man: For sure you can (unintelligible) environmental they won’t let you do anything.

Man: You know too much don’t you?

Man: You guys don’t know what it is to deal with them. I seen a lot of professional (unintelligible) quit their jobs because you don’t get nowhere. (Unintelligible) environmentalist are against everything (unintelligible).

Woman: Some are but not all.

((Crosstalk))
Woman: Some animal welfare groups are, you know, (unintelligible) a lot of them don’t. So you work with the ones who are willing to work with you.

Woman: So we talked about outreach to the other advisory agencies - government agencies working on One Health. What about do we want to consider outreach to advocacy groups? Let’s deal with I am thinking about you know I don’t know if the Sierra Club or...

Man: (Unintelligible).

Woman: I mean you know it is one of those things that you have got advocacy groups that you can work with and ones that you can’t. And I mean I just (unintelligible) because I couldn’t think of any other names offhand. I mean I think that and we have had some (unintelligible) with them as well. But I mean is it up to us to recommend USDA identify the groups they can work with and reach across the (unintelligible). I mean is that more than five people can do? I am pretty sure (unintelligible).

Man: (Unintelligible) active and organized approach to working with other regulatory agencies on their level in the federal government to address One Health. (Unintelligible) that they regularly meet with those groups but I don’t know.

Woman: I know they have got the One Health group that (John Clifford) was on but I thought they dealt a lot more with just the antibiotic resistance issue.

Man: (Unintelligible) concrete recommendation to them from us because we are the animal health advisory committee as opposed to the One Health advisory
committee. Would be to actively engage the appropriate federal agencies whoever they are in a regular One Health discussion.

I am reluctant to recommend that we encourage USDA to (unintelligible) to AMA and to other stakeholders (unintelligible). We tried that with USDA four years ago.

I invited a bunch of organizations that were not (unintelligible) organizations to come. To come to our meeting and talk to us. The only one we got was the stakeholders (unintelligible). The others all (unintelligible) we don’t really you guys. We will deal with our (unintelligible).

I don’t think that USDA is going to get a lot of response or active engagement from private organizations that are not in their (unintelligible) health already. I think recommending to them to meet with their folks or their counterparts in the federal government and actively encourage them to do exactly what they have been engaged to do.

You know (unintelligible) One Health group to (unintelligible) and then maybe as a group they can gather that stuff together. I think that is a more effective approach.

Woman: And I suggest (unintelligible) but I will make it explicit. Compared to what you were saying that maybe they need a round of antimicrobial because they need to have the regular communication line that is not limited to a specific topic or emergency that is happening. It needs to be what are we doing with this topic generally?

Woman: (Unintelligible).
Woman: Where is (unintelligible) in this for the environmental piece is there any?

Woman: I am not aware of (unintelligible) but I am not aware of it.

Man: I know for a fact that many environmental groups they work very closely with the USDA. Very closely in all the phases that you can imagine. Health, (unintelligible), water, land use and whatever and that is a fact.

Man: (Unintelligible) question I would comment. So it is fair to say that those agencies are communicating on a regular basis and that is by the nature of the business. It is not always pretty because...

Man: It shouldn’t be.

Man: I know from FDA’s standpoint as a regulatory agency we might be sitting there talking to ASIST which is not regulatory about something that is really needed in order to assist with the regulatory.

And the EPA in those discussions while regulatory or having a regulatory mission that is so political it never does anything with anything. And I am not being critical. It is just that department was screwed from the beginning.

And so I think what they don’t have is this. If FDA is trying to understand for example what is going on on a farm for drugs. There are huge barriers to getting to that information.

But almost everybody agrees well if the USDA opens that door to the producers, you know, we can get information that might be helpful in understanding some public health problem.
But that is where it all can go south. And the extension folks have been the most important in that equation because they were the folks that you can look to who had the relationships and so forth.

I guess what I am saying is up here they (unintelligible) and it is also issue driven because everybody is busy. What I think is missing is where we start talking about how do we understand more about what is going on in our world?

But do it in a way that nobody feels threatened well they hopefully shouldn’t feel threatened that witch hunt or that sort of thing. If we can figure out a way to get corporations on the ground in the community where real life takes place I think that is where we will find some answers.

I mentioned the cow on the farm unprocessed foods (unintelligible) concern for livestock as far as the FDA is concerned and there are different definitions (unintelligible) as you know.

So I would hope that a committee coming together to advise any agency would be with the intent of ensuring that we appreciate different missions but the need for better information, earlier information in order to make the decision for health of human and animals and environment.

The agencies won’t do it and if you can’t spend the money on the animals (unintelligible) have enough money that they can get more if they (unintelligible) public health.

Man: You know the problem is the (unintelligible) and they need the education. You know I don’t know if you people ever live in small town. And it is a lot of issues. A lot of (unintelligible) and a lot of calls just mainly (unintelligible).
(Unintelligible) somehow you know (unintelligible) disappear. But I got to tell you, you want to know any information about anybody (unintelligible).

((Crosstalk))

Man: (Unintelligible) they know everything about how much money you have in the bank? What you are doing? Where you are going? As (unintelligible) the people who delivers the mail they keep track where the letters come from (unintelligible).

Woman: (Unintelligible).

Man: I tell you they (unintelligible) bad one because (unintelligible) ranchers, you know, they are married to all these ladies who work there. The same thing the rancher is married to the women who work in the back and they (unintelligible).

Woman: So to pull us back I think we have got a lot of good philosophical discussion here and we have talked about we are in an advisory group for ASIST.

And other agencies will have other advisories groups and other (unintelligible) committees and I tried to capture that in I think this Number 4. So is there and heaven forbid because I know they are expensive. Is there a - would there be a place for a (unintelligible) committee to cut across agencies and try to deal with One Health (unintelligible).

Woman: I was going to suggest that. I was going to say that they at least consider trying to convene, you know, work with a joint advisory committee. There
were two things that came to my mind trying to put some of this more into concrete and one of them moved us slightly back.

To (Linda’s) question I think it was about are we talking with non-traditional stakeholders about you know public health and environment or are we talking about some of the non-traditional, you know, agricultural (unintelligible) USDA hasn’t engaged with.

And I think the answer for me was (unintelligible) and so I mean I would like, you know, I was going to say, you know, that development of the joint advisory committee.

And then also with (unintelligible) others said is we need the agency (unintelligible) we need that happening. And then the question comes up how does the USDA start engaging down to the people on the ground? And I think there is already a fair amount of that happening with the larger industry groups.

You know USDA goes to the (USHA) these are meetings that agencies are involved in. They go and get engaged with the organic industry, the small (unintelligible) industry. And I know from past conversations on this committee it hasn’t come up so much yet today but I suspect it will in later topics.

There is always this concern of like oh my god what if we have, you know, (unintelligible) what about all these backend poultry producers? When we have (unintelligible) what about the small (unintelligible) guys, you know, who got five heads.
And if we want communication during the emergencies there has got to be communication beforehand. And I think One Health is really one of the ideal places to do that because it is non-regulatory. It is not a place where the USDA coming in as the heavy hand of the government telling small holders what to do.

It could be a place where USDA could actually learn from some of what the non-traditional stakeholders are doing in coming across lines on public health and environmental health.

And, you know, engage and start developing those relationships that are going to be across the board in working with non-traditional stakeholders.

I think, you know, I don’t know how specific we would want to get - the committee would want to get in that for a recommendation. You know, I’m happy going down to the (deep) and quick, you know, engage in specific conferences - is probably not named - that’s not appropriate for this.

But, you know, engage in the conferences for these - for their organic, agriculture and the small holder.

Woman: If you read the paper that’s been handed in our folders, it says to have better in services - integrate One House and non-traditional stakeholders into our activities -- it is important that we clearly identify the goals of our collaboration.

And I think that’s what they’re asking for - for food safety to security, health and well-being - all that kind of stuff - from our perspective, from the veterinary services (confer) with the USDA side. What do we do?
I think all the stuff is very true but from our perspective, what are things that we would suggest be done, and I think you just hit on one of the big ones. It’s that whole that note to - call it number 4 or number 5, but every one of them has the same thing.

Woman: What do you...

((Crosstalk))

Woman: (Salmonella) there’s an emergency - no but some of the best methods to work with traditional industry and non-industrial takeovers. Every one of these they talk about in all the summaries that we got are all developing an emergency preparedness and response plan.

We have nothing in place on anything. To me that’s one of the problems that needs to be done and you - from the - a general plan of what happens with (FMD) - or whatever you specifically add what you need from the (service) - what you need from the (sheet) that doesn’t have to reinvent every wheel.

You’ve got an emergency preparedness plan and we have none. That needs to be one of the first things we need to do - that’s my opinion. Because that’s part of what they’re asking for.

Man: I would only maybe make a comment and that is that as the USDA starts looking at this and maybe assessing how well they handle all of this, is they do have the National Animal Health Monitoring System (the “NOM”) system.

And I think that they think about as they formulate future NOM studies to expand the scope to insure that non-traditional stakeholders within those
groups are included. And some of these topics they are already talking about in terms of the NOM surveys.

Such as One Health - emergency preparedness diagnostic capabilities - better in-services. Those are only the important areas for them to be able to benchmark how well they’re moving in those directions.

It’s a vehicle they already have there -- they already do this. And so maybe expanding the scope to include some of these things we’re talking about with all other surveys would be a good vehicle for them to utilize.

Woman: Okay, so as I understand NOM is a vehicle - we’re benchmarking what product?

((Crosstalk))

Woman: A minute - I would say a ((Crosstalk))

Man: It wasn’t particularly well thought out but it was the idea was that if we start talking about incorporating some of these concepts that USDA should be applying to animal health, we’re talking about a (lottery) for species that these NOM studies cover a lot of different species, and...

Man: We need to start somewhere - is in (antification) of this animal is (antification). Education - those are the base and everything will come along later on, but if we run without those things, we don’t have anything -- this is what I think.
Woman: I understand you (exactly) and I can tell your staff from the starting point of the communication to core producers then you’re going to alienate 99% of all (ventures) - then they’re done.

Man: Well, but we don’t want - so what? Something going to have to be done - you’re going to have a lot of people mad at you.

Woman: But - let - because I don’t think I can actually solve anything or (you with my fall producers) but...

Man: In some states they’re already working - Michigan you ran in problems to (ratify) who got (cow) - no.

Woman: But (David) if you were to have kind of capture in a - I’m sorry - Peter, I’m sorry. If you were to capture what you just said in a nutshell, then...

Man: What I think seems hidden is - that some of the general things you’ve been talking about today which has been incorporating or reaching out to non-traditional stakeholders in these NOM studies, addressing producer - different perspectives in NOM studies utilized.

So talking to them about their assessment of One Health - go ahead - question.

Woman: Question, how long has the NOM studies circulated right now - like how is...

Man: That’s really done by the people of (Procarmon) - they are the ones that designed the questionnaires, they designed where they go and how they are applied.
Woman: Then they utilize their field force and they utilize the state veterinarian to volunteer their appeal for - to help complete surveys and the visits with the stakeholders.

Man: Right.

Woman: And it actually helps withdraw the samples so that national statistics - they’ll say we want, you know, producers who represent this percent of history. We want X number of big ones, X number of small ones and, yes, but of course, it’s voluntary so if somebody calls you on the phone and says, “Can we ask you some questions from USDA, are you sure of the answer?...

Woman: No.

Woman: I’m sorry - (unintelligible). There’s kind of another concession.

Woman: Oh, okay, and that goes back to - you, you know, I don’t want to beat a dead horse - but I do want to say, you know, let’s link that with, you know, initiatives of going out and actually meeting with the non-traditional stakeholders in a situation where - no there, we’ve probably not regulating them but we’re also not asking them about their personal (fee) or even their business interest.

First we have to have the relationship and then when they get the call from USDA asking about more help - they’re more likely to answer.

Woman: From what I’m hearing that it is...
Man: We need (unintelligible) - is that they’re sort of a different partner to access (unintelligible). So few people trust the government any more - rightfully so - bad - bad really.

But as I understand producers are having some heartburn over that but we really should figure out who might be best and then some of the producers can share, or who would you be comfortable with.

Maybe someone sworn to certain secrets - you know, but so that you protect your business interest.

Woman: Well academic institutions are somewhat more trusted. I mean we have had success in getting our producers to respond to surveys from the universities.

Man: With the public health - (growth change) - they don’t have that (extra) and that’s the big missing element. I don’t know any public health group that has been able to make it exactly (culture) and yet they’re such a big deal because everybody eats - everybody.

Woman: I still have this question about who they meant by non-traditional stakeholders, because (Joe) started out in his introductions talking about ways to get in with non-traditional stakeholders, and suggesting working on farms in a non-regulatory approach.

And maybe that was the way to kind of get them on board and maybe using collective expertise as the way to solve, you know, animal health issues that may be the stakeholders were facing, so that they are already on board when and if some of these bigger issues become a problem.
And he talked about that a little bit and I didn’t really know where he was going with that and that was one of the things that motivated me to bring up the New York State Cattle Health Assurance program as an example, because that was how it started.

It started by the state veterinarian as a way to develop credibility with stakeholders in a non-regulatory fashion, in a way to help them and provide value to them and to develop safe time in their relationships so that when and if - worst case scenario happens, he was already a welcome - or his field staff were already welcome parties on the farm.

And I think that’s an appropriate approach to reaching stakeholders, but that’s not the way to work with public health agencies or (CC’s). So I think the scope of this question is a little broader than I had imagined before I came here today.

You’ll give it two different answers - you can give an answer for (add stakeholders) and then the answer - a different answer for the others.

(((CROSSOVER)))

Woman: And I work...

Man: The entire members are directly with the (DD) - but even talk about non-traditional, he was talking about the organic on this, you know, a lot of producers, (packer) producers go for this (unintelligible).

Some of these, you know, the back yard - pretty much (cold trane producers) and not so much the public health or other. He was talking particularly about animals, agriculture - this is non-traditional.
((Crosstalk))

Woman: That’s what I imagined - then coming here today, yes.

Man: Not having addressed the public health crisis.

Woman: I would - to say that...

Man: How does veterinarian services feel about where they’re at with One Health?

Woman: I think who you talk to is in (NPS). I think - depends who you talk to within the - I would also say I thought that that was a very naive assumption that in the middle of a trace back of a food borne illness, somewhere that USDA could in a nonthreatening way show up at a farm and say, you know, “We’re from the government - we’re to help.”

You’d better have those relationships way before something like that happens or, you know, cause it’s - still it could be in a very difficult situation and so I’m not sure how to build those relationships.

But I’m not sure that knocking on the door when you’ve got - trying to do a trace-back on a fodder house contamination is the way to build the relationship.

You know, that’s like building an emergency preparedness plan after you get your first positive (infomalent) - you know, it’s too late.
Woman: Well I think USDA has had some people scared of the conflict of interest that they’ve had regulatory oversight and responsibility for helping sustain agriculture and production.

On the other hand, it’s their activities to help sustain agriculture and production could develop the kind of trust necessary to assist in regulatory activities and so it’s two sides of the coin.

Woman: We actually had a really interesting situation last Fall, where Summer maybe, I don’t know - where there was an outbreak in Washington State. It’s a facility where they were finding Salmonellas, ill-post chill, but they had in a custom fodder that they also had five (huddard red camp) colonies and a producer in Washington that delivered largely their tail-end pigs there as well.

They were - it was a huge outbreak but there was a lot of pressure to go to the farm although there was no idea of what’s going to the farm would accomplish other than say, we want to know where it’s coming from.

Well, in the first case was in April and you want to go to the farm in August, who is to say that if you have pass the farm but you didn’t bring it back from the plant.

And it was a One House exercise and that actually the state veterinarians in those states were advocating for not going to the farm because there were no on-farm interventions that are known to be (sig PO) consistent to control Salmonella at a farm - pig farm especially when you come to (Larry) and have rapid contamination.

So, you know, at that point in time, to me it was a fascinating One House concept because you actually had agriculture and CDC and public health
talking to each other, looking at the same data and not being able to say, “What is a reasonable goal for actually going to the farm?”

And curiosity was not enough of a reasonable goal - and so I think with - you know, we’ve built some relationships, some are not great - some are pretty good but I think without having those relationships ahead of time and reasonable goals and objectives for what on-farm interactions with public health are.

You’ll just - there’s going to be a lot of that mistrust and a lot of hard feelings and so this is the long way of me saying is in the work around these things, and in the interest in what happens on the farm, perhaps one of the One Health goals is to develop what are our objectives, what are our reasonable goals for on-farm interactions.

If it’s got to be more than just academic curiosity - but what are the goals and maybe that’s something a One Health advisory spot could address their - or whatever - I mean - I’m rambling here - I’ll shut up.

Man: No, good point.

Man: Look I’m here - I think I’m (revived) to suggestion for (Joe) and (Ellen) to have a multi-prong committee to help point that -in the right direction, but part of the curious - probably put in there for (Molly).

Man: But fish and wildlife - at least.

Man: And I guess I would add that if we come back to what ones that were part of what we’re trying to do is advise them on how best to work with the folks at
the ground level, so the producers, whether it’s a small producer or whether it’s personal producers.

In my mind and this is based on experience in Michigan dealing with TB, our best success in dealing with the Bovine TB has been when the regulatory - the USA as well as state farm (unintelligible) has worked cooperatively with - and they’re on the same page with cooperative extensions, with milk cooperatives because it’s a cattle disease with (eve) conduction when they all work together - things happen a lot better.

And so my encouragement would be that they work closely with those groups to try to educate, to try to do whatever they want to do - to try to come in and just say, “Work with the USDA and we want to help you - that’s when the door gets closed, right?

Woman: Yes, cause that’s - I’ll add another line there so they also...

Man: Fighting back up - but as to say - if they come to the door with folks and cooperative extensions, what folks can coop - something like that. If they were here - the team works together to try to help you, then it makes a lot more probable.

Woman: I will - I agree - I do think that part of that team then needs to still be the non-traditional stakeholders.

Man: Oh no, I agree.

Woman: Show up with a team of - from the Beef Council - our approach is still going to be like that. We don’t actually trust some much more than we trust you to the end.
Man: Fair enough, but admit you’re going to already bring to the team back, a team approach. That’s worked really, really well for my CD. Initially this worked well because it was just regulatory.

Once everybody started working together to solve the problem, then things worked well.

Woman: So does that fit somewhere under this concept of Number 6 and using One Health platform to develop communication channels. I note these - I need help with words.

Man: What is the preferred method for that reasoning? I think I had something similar written. Use a trusted liaison... Give them someone they can trust - that’s how we handle things.

Man: I think that - and they probably do but they need to understand - this is not something that’s going to happen the next day here to develop that. This is a long, long view to develop this trust to take it on - no. Engage folks.

It sounds like it’s not going to be right away. You know, I show up with our extension agent, and I don’t show up with - they had invited me - whether that’s the way it’s going or not, that’s how it’s presented upon the farm.

That meant to say, you know, this is (Steve), this is what’s going on - so we talk. I took it in because they trusted them - it means that they know them. They trust the guy that owns the feed store, whoever it is - they have to have someone that they trust.
I think it’s the same kind of understanding a relationship - you got to have someone that they trust to make the introduction.

Woman: Who would that be?

Man: As far as I can from our folks, it’s (gathered) enough that I don’t know that there is a substitute for showing up at the conference, or having some presence that - like this conference - is there some of that.

Because honestly like the people they see - the people in our communities trust are going to look for that too. I mean it’s our community - I think (Linda) was the one who said something or different (noble) fit than (foreign) lines of (unintelligible) that you USDA part of it is promoting agriculture.

What our community has seen is about promoting the large scale of agriculture, not our community that - and until there are some signs that you engage treating our community as being crusade cultures, I don’t know if any trusted liaison is going to work.

Woman: I mean there’s got to be some real ground level engagement. So the initiatives that they had - does your farmer know your food?

Woman: With One.

Woman: Is not a higher (unintelligible) to them.

Woman: Oh, it appeals to them and it’s got one staff person and not much actually happened on the ground. I mean it was a good thing when we were - people were glad and saw it happened, but compared...
((Crosstalk))

Woman: .. to happen - I’m confused - what did they want to happen?

Woman: Well, certainly it never had any fund - any significant funding to promote the program for Know Your Farmer on the East Coast. I mean - just it was a nice thing - there is some nice fact sheets posted on the website and it was a nice recognition.

But in terms of on the ground engagement in promoting local farms and local foods, just not much happened.

Woman: Well, we know there’s no funding for hardly anything. From what we...

Woman: Even within the context of funds but when we talk about no funding for anything, when you look at the funding that was given to that compared to any other program, it was still very small.

I recognize funding’s a problem for every industry and every segment, but there is no funding and there is really no funding. So what I’m saying is that - that’s the best we’ve seen is one staff person with pretty much no funding to do much.

There needs to be more engagement on the ground. So as I - and I gave an example. They use (scale) with some personnel to the U.S. Animal Health Association’s conferences.

I - just on the rounds - I’ve - winter’s is our conference season, back in that (acres) - I’ve been at Western Pride. I’ve been at two different organic conferences. I was at (Mother) too, which is the health centers (coral).
There was no cooperate (ex) top Texas organics who were cooperative extension agents which was a big improvement for me even three years ago.

I’m not - we’re not seeking engagements.

Man: (Liz).

(Liz): Yes.

Man: You can (unintelligible) if three or five or - I just wanted to comment about... and

(Liz): Is that inappropriate? I can be as - I want to be appropriate...

Man: Oh no-no-no-no - I just want to - at the (rift) you’re getting into the week a bit here. We’re talking about nothing but federal agencies. I’m talking about things that will impact a lot of states.

On the (wildlife) set of things, although the department over two years has the authority, responsibility for the federal trust. Most wildlife out there are under state managed and so also the USDA is built on cooperative - corporate relationships with state departments of agriculture.

So I think maybe we had - I need to do little work with some things - something besides federal agencies, because that’s the best way to get pushed back from the state. It’s not a good federal agency’s chair that are calling the shots.

(Liz): Have all those such (unintelligible) (vendors) (unintelligible).
So we’ve got this in - this could be one of those things where we’ve got a very discreet one that says, “Develop a joint - darn - there - I got a new computer and my keys are in different places.

So if you treat number 3 - it says you should have a joint advisory committee. But, you know, what’s in 4 right now is kind of the preliminary of what we talked about before we said, “This is the Seven Joint Advisory Committee”, instead of saying they should bring One Health to their appropriate advisory committee.

But I do agree we were - right - you’re just to the federal level for a great government agencies. So the advisory committee advise the federal agencies. But before could engage - yes, I mean in here in the one page sheet, they call it multidisciplinary and multi-sectorial.

So we’ve got engaging - do we - then needs the last sentence in Number 4 that says, “Encourage the agencies to bring up One Health Priority to sessions that their appropriate advisory group...

Woman: I think we can take that out - that was before we went to Number 3?


Woman: What about 5?

(Liz): So I cross out 5 because I felt like that was also captured in Number 3 and Number 4, and but before I delete it - before I spontaneously delete it, I thought I’d ask you guys. So - okay - delete.
And then I kind of combined your consider the attendance and venues as non-traditional stakeholders inside 5 along with the trusted liaisons.

Man: I think they’re both part.

(Liz): And then in 6 - I really strongly agree with (Marianne) about the emergency planning - I mean there’s nothing more One Health when you consider the emotional devastation. It’s potential to have to kill the environment by killing large numbers of animals - things like that.

Woman: Not to mention just plain food security and (hungry) people.

(Liz): Exactly, exactly.

Man: And everything that’s involved.

(Liz): Yes, but then I don’t know if the second sentence belongs in Six. I think it belongs in the conversation, but I don’t know if combining them is appropriate.

But you know I do believe that to make progress at a grass roots level on One Health, you have to help define mutually beneficially goals for any on farm activities.

And they may be two totally separate concepts that should be separated and I don’t know who developed those mutually beneficial goal. I kind of gathered out there is - they will rain down from above, but I do think that there needs to be - whether it’s us - whether it’s - you know.
I don’t know - it’s like somebody has to look at those mutually beneficial goals and maybe that’s part of what we would consider that the, you know, an advisory committee would do. I’m not sure.

Man: I think that’s - that’s - it’s a good thing to happen that in reality is what happened last year with the high path (AI) stock. How do you deal with (totals of) this month. We need it to protect the environment but we need to engage environmental agencies - people who is appropriate.

But I think that that happens by having it stated but if it happens all the time and not just in a message -- I think that’s reasonable.

Woman: I think it makes sense - I actually think it possibly makes sense for with Point 2, with this idea that, you know, it’s top USDA - the role in animal health, in One Health - if we’re going to start to segregate roles, is about ((Crosstalk))

...as animal health and it’s a reminder that as they are working with the other - the other stakeholders and gave them these initiatives, USDA’s role point out to them - hey, if you guys are going to be on the farm, you need to work with us in developing things that make sense.

(Liz): Well I also think that once again if sometimes if you can add value-added activities to the stakeholders, so not everything about animal health is One Health, if it doesn’t really tremendously threaten food security.

I mean not every animal disease is (unintelligible), you know, if but if single farmers are going to go out of business - that’s not going to affect food security for the nation.
But if we can combine (five) security plans for mouth disease control with (five) security programs, it controls the normal every day diseases that farmers face, then we’ve helped them and we’ve helped sustain them and we’ve done it in a way that prevents.

So thinking of value-added ways to use programs and give back something to the farmer for their cooperation and control, it goes a long way to gaining that trust and that cooperation.

And that was like the - that was the basis for the New York State program and that was kind of the way (Jill) started out talking is - how do we get on the farm and work with farmers in a non-regulatory approach.

So value-added and I think it could fit in with this whole how-to-develop communication channel. So Number 5 is the value-added activities and non-regulatory approaches to on farm collaborations, or on farm activities, as you’ve used in that last point.

Man: I agree with you 100 percent - I think that’s where you get the benefits. Argue though that anything we do that affects animal health affects human health, because if we control Johne’s disease, all of a sudden we’re using less antibiotics to people, and so it all has a One Health matter - no matter what we do.

(Liz): Just saying that’s some things less obviously - One Health.

Man: I agree - that’s okay.

Man: Just saying a One Health responsibility, are we - wouldn’t it be not a (way) from the USD to One Health?
Woman: They were specifically were asking about the tracking also with non-traditional stakeholders as one of their sub points of One Health.

One Health is one of your key duties - these are not noted in your charter. Just had another look - here if I looked at that - I’m going to look - I know we said we weren’t going to visit the (chartered) ground.

It’s actually in your folders and briefly we haven’t nearly visited One Health. This part of your chart, as we are looking at, so really quickly I’ll just read it - it’s (unintelligible) as advisory in nature and it has to will and encompass the following - first four points.

One Health (flexible) focus on animal, human and environmental aspects, as matter as it relate to goals and objectives of the USDA.

So it does kind of, you know threw down on how you deal with the task of One Health. Got to go back to USDA - our goals and objectives. So this thing is one, four primary..

Man: Well I have a question of if and how USDA is organized is this committee’s recommendation today (unintelligible) recommendation is it intended just for (Asus)?

I guess what I’m asking here because the extension agents, the extension (unintelligible) comes under a different part.

Man: Part of SSIS.
Man: And that gets down to budget issues and but it reflects how much art
government probably needs to be organized for the 21st Century.

So to what extent should are recommendations be crossing organizational
lines...

Woman: Within USDA?

Man: Yes.

Woman: But...

((Crosstalk))

Man: Just like our - you look at what they wrote.

Man: Yes.

Man: So basically one leg of the three-legged stool. You got animals even in this
environment. They want us to focus on they on animal human environmental
aspect of matters as it relates to the goals and objectives of USDA. So clearly
we’re in the animal bucket.

Woman: Right.

Woman: But to your point

Man: But the animal bucket is subdivided further even with the USDA...

Woman: Correct.
Man: But its mission is not going to (unintelligible) FFIS or ARS or any (unintelligible).

Woman: So trying to if you look at - I just added a word to 23 that might be somewhat helpful. And it was talking about the USDA agency so that it wouldn’t be just a...

Man: But I still once I - is there an answer to the question?

Woman: There is.

Man: Are we advisory?

Woman: Well the animal health so necessarily, you know, veterinary services will take your advice. But it’s (unintelligible) is all the way up.

Woman: Fixed rate of agriculture.

Woman: You know, and these, your recommendations are publicly available, you know.

Man: If we advise if we might need more extension agents and a stronger system to work with producers is a nonthreatening number it looks already (unintelligible) that’s a perfect kind of recommendation...

((Crosstalk))

Woman: You’re free to make the recommendations as they relate to
Man: Animal health.

Woman: And that’s what I’m trying...

((Crosstalk))

Man: (Unintelligible) the secretary not to...

((Crosstalk))

Woman: Well yes. Yes.

((Crosstalk))

Woman: (Unintelligible) Is that one of few committees that have secretaries.

Man: But really that’s...

((Crosstalk))

Woman: You know, you - subject matter experts in animal health are in (unintelligible). And so they’re the first line. And, you know, and it goes up the channels. It does. And, you know, but make your recommendations without thinking in (unintelligible) silos.

And we’re working on getting out of the silos thinking. We’re working on it. And you know if you just had a reorganization...

((Crosstalk))
Woman: (Unintelligible).

Man: I thought you worded it pretty well.

Woman: So is that kind of, you know...

((Crosstalk))

Woman: ...implementation recommendations because we’ve got...

((Crosstalk))

Woman: ...we’ve got benchmarking. We’ve got educational initiatives, implementation, more expense.

Man: More expense.

Woman: Can you say (unintelligible)?

Man: No I’m too old.

((Crosstalk))

Man: I say that - and this is paraphrasing but that we - and I believe we need a strong corporate extension program. And I know it’s frustrate - it’s really taking me all over. But maybe mainly we’re talking about an entity that can act in a fairly independent way for the benefit of the producer as well as the public. And you know, it used to be that individuals developed those relationships, maintained those relationships and when they showed up they wanted a threat which is why we often work through them.
But that’s going away and I don’t think it should go away I guess is what we have. But because we don’t have any taxes we’re really seeing (unintelligible) in the department it needs to reallocate its funding with more priority in their area. So that nontraditional as they call it stakeholders are actually benefiting from the whole field.

Woman: That’s really awesome.

Woman: That works.

Woman: Yes it’s been working.

Man: And if you ask me to repeat that again it’s going to be a whole lot...

((Crosstalk))

Man: (Unintelligible) those funds really dependent upon actual specifics and can really have an effect on how they count with (unintelligible).

Woman: Well if that’s the case then I mean that’s - are they just looking at total numbers of funds? Are they only looking at certain size funds when they allocate those resources? Probably the last...

Man: (Unintelligible) political I mean.

Woman: Well it’s hard to count people if you don’t know that there.

Woman: No I know that.
((Crosstalk))

Woman: But even when they - that becomes a really big issue with smallholders and homesteaders because if they’re not on anybody’s radar and they’re suspicious to the point where they don’t want premises IDs and they don’t want to engage they also don’t get counted.

Woman: Right.

Woman: And that’s hard for them.

Woman: Hold on, you were missing what I was saying though. I hear what you’re saying and...

Woman: Right.

Woman: Undercounting of smallholders. But even with what we have what I was typing out was when he was saying that funding was based on statistics there are statistics on lots of multiples..

Woman: Well yes. Yes there are.

Woman: But so the question was will the funding be based on total number of farms, you know, being counted by now or what they’re based on farms of other certain (unintelligible).

Woman: To what?

Man: Allocation of resources within your USDA (unintelligible).
Woman: I want to know...

Man: ...that are dependent upon agricultural productions...

((Crosstalk))

Man: I would like to mention (unintelligible) to you all the small farmer in a homestead is like you somebody calls those are the ones they never get any help because those are like little immigrants, you know. They are there but they’re not there. They don’t receive any (unintelligible) from their (unintelligible). And they are afraid many of them to go to the office what you call it, the university office?

Woman: (Unintelligible) extension?

Man: Cooperative extension.

Man: But for (FSA) office the small farmers are non-existent because they don’t qualify for anything that the office will provide. I will let you guys know that.

Man: Well a couple (unintelligible) things in my opinion. We regularly commiserate amongst ourselves that we are the best kept secret in the states okay? We try to get our word out that we exist and we have a lot of trouble with people (unintelligible) where we are and where to find us and that we’re there to help. Once they do find out they’re excited about it and they’re ready to have (unintelligible) help.

Then other problem especially when we’re talking about nontraditional farming that the experience or the knowledge is not necessarily there and we
have to go back and retrain a lot of agents. I think that, you know, you could be great at one thing. (Healthcare) isn’t everything.

And so we have a huge area in our customer (unintelligible), you know, the (unintelligible) more livestock, more trees -- that kind of thing. And so if you’ve got livestock over here the Delta areas they (unintelligible). You don’t know very much about it. You’re not going to get as much (unintelligible).

But this is a pass-through program. The funding is federal but it goes to the state. The states delegate it but the county agents have to go to the county governments and get more. They have to stand up in front of their judges or whatever it happens to be that your state offers at the county office and ask for more money. And they have to show that their programs are relevant. So it’s important that they’re getting feedback from their local (producer).

Certainly as word gets out that they’re willing to help non-traditional groups (unintelligible) a non-traditional group can ask for that help and get it because I’ve certainly been doing a lot more things all around the state at had the request of agents now. It used to be groups that would ask me. Now it’s agents who are asking me because the group just found out hey we’ve got (unintelligible) we just talked to the agent and the agent will talk to me.

So this is a complex thing and it’s not something that’s just going to come down to the FDA and change. And, you know, I know that we’ve got something like one in ten of our offices not filled so we don’t - because we don’t have a month to fill it right? It’s at least that because it’s probably more.

So we’ve got look at me right now we don’t have to hire because we can’t afford them. But developing of that trust (unintelligible) understanding that the knowledge base is there by the constituents, the producers in the area
saves time. They have to know that the extension is there and that they’re willing to help them and they often don’t.

Man: Okay.

Man: They’re not unintelligible careless. It’s not like we can do anything. We don’t report anybody. We show up we tell them what we think and we go home and that’s it. So I don’t ever have any - I’ve never had anybody (unintelligible) then report something to somebody. I don’t (unintelligible). But the fact that the money’s not there and this has to be worked through the state and not just the USDA (unintelligible) the state level.

Woman: Does this (Dave) address it, this will top down and bottom up funded?

Man: Sorry

Woman: So that’s last sentence there you need both top-down and bottom-up funding?

Man: Well we certainly need bottom-up funding yes. And that’s going to be something the USDA is going to have to work with the state to explain why that’s a priority.

Man: Then correct me if I’m wrong the actual funds are for actual USDA for to pay those salaries is that correct...

((Crosstalk))

Man: They’re state employees.

Man: You’re state...
Man: We’re state employees. I wish I were a federal employee.

Man: In Tennessee I think...

Man: Well I think University of Tennessee a lot of those agents were federal.

Man: Yes.

((Crosstalk))

Man: (Unintelligible) are federal.

Man: Yes.

Man: We still have one of two or those floating around. We have one left and one (unintelligible) come backs.

Woman: In New York State they’re Cornell employees.

Man: Yes. And that’s the thing they’re - they are - so the university employees....

Woman: And university...

Man: ...which are state-level employees so it goes through...

((Crosstalk))

Man: Should it be federal?
Woman: No.

Man: No, probably not, no. These are county extension agents.

Woman: These are county extension agents and...

Man: There (unintelligible) local people who know their community and are part of that community.

Woman: On the county level, you know, we work with them on 4-H or whatever, you know, the same issues we have here trying to say how do you get information out from the federal side folks who are state there know the same thing. We go through this at our state level of our trade commission or our (unintelligible) commission -- all that kind of stuff. But how do you get this information out to people? And we try to use a lot of the extension agents to do that. But we’ve had a lot of because of funding issues had a lot of them go to partnerships where several counties go together and create you know, just...

((Crosstalk))

Woman: Yes.

Woman: It’s the poor. But the Internet has hurt that too. People don’t go to the extension agents like we used to because you go Google it. And you do everything else. And so there has to be a push for extension agents or whatever to get some information on the Web that comes up to go to the extension agency rather than, you know, it’s on Google (unintelligible).

Man: (Unintelligible) every extension office (unintelligible). All of them (unintelligible)
Woman: And it’s a start. Of course you know most of the guys I work with are in their 60s and 70s they’re not (unintelligible).

((Crosstalk))

Man: (Unintelligible) older people.

Woman: I think you can get a restriction...

Woman: A grandma.

Woman: In the need for extension agents if we do some things a little differently.

Woman: That’s not (unintelligible).

((Crosstalk))

Woman: And I was going on a university level trying to...

((Crosstalk))

Man: (Unintelligible).

Man: May I just close this and (unintelligible) just for you to think about?

Okay largely we’re going with interstate commerce issues that translates federal (unintelligible). what I’m getting at here. And we also know that not all states will necessarily recognize their important place, yes. And, you know, we’ve got states fighting over (war) examination and, you know. So the
reason they’re not going to recognize the state lines and I just wonder if this committee shouldn’t think further about whether they should be trying to recommend a whole new approach to helping producers. And I’m not talking about multinational corporations as much as I am small producers who are going to continue to be part of the equation going forward.

Woman: Thank you. I hear what you’re saying. The extent is specifically about extension. I have to - (unintelligible) how I think. You know, our folks often don’t go to extensions because they don’t think that extension has the answers that they need for small-scale and production.

But they are in the (phrase) of extension and they don’t dislike extensions because they’re like well if they don’t have answers we need we’re going to go elsewhere. I think it given the political, you know, given the way people view the federal government right now I think that creates another layer of less likely to go some.

Man: What is...

((Crosstalk))

Man: ...an NGO independent outside of, you know, where some funding is provided from the feds and some from - I guess where I’m going with this I’m thinking of diseases. That’s my only reason to talking about this.

And the disconnect that we have with what’s going on in various places in our country and how long that takes us to figure that out and to try to solve it. You’re a sitting duck for a major problem within our industry. We’re going to collapse this industry if we’re not careful. And we’re getting all these
warnings. And I just think we’ve got a do something different than what we’ve done in the past.

By the way that probably use to be veterinarians who held that role back when my dad was (unintelligible).

Woman: Extension agent.

Man: Being on the farm the first...

((Crosstalk))

Woman: It still is. It still is.

((Crosstalk))

Man: Many of us.

Woman: Yes.

Man: I think it still is but producers that have that regular relationship with veterinarians.

Man: Yes I mean I think that was (unintelligible).

((Crosstalk))

Man: New Hampshire is still is the only state in the country I believe that still that (unintelligible) with tuberculosis. We do that because (unintelligible)
momentum. But more importantly it gives me and my people onto every farm that has cattle in our state every two or three years. People (unintelligible).

Man: Yes.

Man: My farmers know me by name. They know my (unintelligible) when I get called here and there because (unintelligible) but because they know me. and they know I’m the guy with the stick so if I’m (unintelligible) really bad. But my first hope is to help (unintelligible) that we can figure that out.

But it’s - so it’s the point is (unintelligible) you know trust is because I know you or because I know you like me in some way and we have something in common. No (unintelligible) approach (unintelligible). But the nontraditional folks. You either know them or they have to move it there some (unintelligible).

Woman: Well let me jump in because we’ve got about 20 minutes to the day. And I wanted to know specifically are there any questions I can get to (Bill) tonight and, you know, anything you think of that you might - you would ask (unintelligible)?

Man: You know, I’ve been thinking about for some time every farm raised with the USDA the number. That number could be used to identify the farm in case of diseases. Yes every farm they are numbered and that is every person who has a number is a person that he gets not welfare but subsidy from (unintelligible). And on that I think it will be a good way to start to at that point at the beginning. And then whatever happened last time we met a few years ago with the animal identification?
Woman: There’s a final rule in place when you cross that with state lines. That’s the rule that...

Man: Well that’s it.

Woman: Yes.

Man: Nothing else.

Woman: Yes, and that’s what the committee discussed last time we (unintelligible).

Woman: I’m going to see that there are no - I mean, there aren’t any questions to share with them. There’s (unintelligible) from (unintelligible). I think it’s - it captures pretty much what you guys have been talking about in the last (unintelligible) successful infrastructure (unintelligible).

Woman: Yes.

Woman: But the goal this is an interesting goal that we have now.

Woman: But I still - I feel like we’re reiterating his question. We’re saying he should develop relationships but we’re not saying how.

Woman: Yes.

Woman: And they’re specifically asking us how. So what mechanisms can they use to do this? I think cooperative extension is the one mechanism we talked about.

Man: Yes we talked about going to those processes for the (unintelligible).
Man: If they are forming a joint advisory committee...

Man: Yes.

Man: ...of the different mechanisms.

Woman: Yes.

Woman: And they also say they need to develop better develop information projects. And that might be an area of collaboration between BSMC State Cooperative Extension that say that both of their stamps be on the fact sheets you know the Center for Food Safety and Public Health now has fact sheets on animal disease. And the CDC on some of them has their stamp on them. The OIE has their stamp on them. The Center for Food Safety and Public Health sometimes USDA has their stamp on them.

So in these collaborative relationships using that trust to develop some of these information products that are owned by more than the USDA. So it becomes - so cooperative extension has traditionally had a lot of important animal husbandry fact sheets. They’ve had plans for a poultry barn in the backyard and the beehive dimensions and, you know, their documents tend to be substance. So in these collaborative relationships they could use that to potentially develop some of these information products as well as that potentially the stakeholders could use.

And I would also like to reiterate that I think the feed dealers and the nutritionists and the farm supply businesses should be explored as a way to reach out to nontraditional stakeholders because the backyard poultry people, the people with six goats, the people with a couple of mama cows they all buy their feed. But we’ve had tremendous success in New York State in reaching
the backyard poultry growers by putting cards, single paid postcards in all the feed stores that sell chicken feed in the state.

When AI hit it clearly had been successful because the stats office starts getting phone calls about every sick chicken in the state. It was more successful than they even wanted.

Man: I think you totally (unintelligible) most people get small few animals get better relation with the people who sells the feed to them that’s how they get the medicine at their...

Woman: I don’t have a vet.

Man: That’s right.

Woman: They’re buying their feed there, they’re buying their antibiotics there.

Man: I still think though we should - our private practice in there should be an important part of it.

Woman: Yes.

Man: Because they do reach a lot of people.

Woman: Yes.

Man: They may not reach everybody. They reach a lot of people...

Man: Yes.
Man: ...and everybody trust the guys that comes out to the farm. So...

((Crosstalk))

Man: He’s important. Yes he’s a big help in education. He’s a big help in education and we are ready - they’re already there to tell us when they see something and they do that.

Man: Well (unintelligible) while but to reach the large amount of groups I think as go through in your agencies...

Woman: Yes.

Man: ...(unintelligible) turkey federation, the chicken council, the (unintelligible) association, the pork producers I don’t know that they have - because (Joe) and I know who (unintelligible)? I hope so.

Woman: Yes.

Man: Maybe.

Woman: And I think if you look at all of those entrants I’ve been talking - been trying to - you know all those commodity groups have appropriate committees that are made up of...

Man: LLP’s usually.

Woman: ...you know, numerous stakeholders. And, you know, well we try to have both small and large. You know, it’s skewed more towards large.
Woman: Yes.

Woman: So...

Man: When I agree with 10, 11, 12 13. Are those all specific examples of (unintelligible) number five (unintelligible)?

Woman: You know, I kind of look at them and more of implementation. I don’t know if but I could be talked out of it.

Man: No. I think that’s perfect. I don’t know but it ends up we’re here we’re standing with (unintelligible).

Woman: We could talk about research I would say state and species (unintelligible)...

((Crosstalk))

Woman: ...the whole (unintelligible).

Woman: Because sometimes vets aren’t using the conventional that’s - on the new holistic veterinary medical association out there.

Woman: That gives us (unintelligible).

Woman: Yes.

Woman: Different polls. So how do you feel? Do we want to sleep on this? Do we want to let’s...

Woman: Let’s (unintelligible) and maybe restructure (unintelligible).
Woman: Yes and then tomorrow we still need to talk about the zoonotic questions you asked him. We haven’t touched DWD much so...

Woman: We have?

Woman: I don’t know if any (unintelligible).

Woman: Well probably (unintelligible).

Woman: They’ll probably.

((Crosstalk))

Woman: Maybe well we’ve got the (unintelligible) recommendations too. We can’t really change the concept.

Woman: Well can we start at 8:00 and we had discussed what we were (unintelligible)?

Woman: We can have an admin.

Woman: I mean how do you feel about starting at 8:00 and discussing our recommendations from the rest of today?

((Crosstalk))

Man: (Unintelligible) recommendations.
Woman: How about this? Let’s not work at (unintelligible) tonight. At 8:30 we come in, we have them up on the screen, no discussion. Everyone gets to (unintelligible) and think and ponder and 9:00 AM we take off running?

Woman: Right.

Woman: So you guys send me yours. Tomorrow I will be (unintelligible) and that, you know...

((Crosstalk))

Woman: I actually (unintelligible)

Woman: (Unintelligible) one morning and have...

Woman: Yes.

Woman: But tomorrow we start putting up these (unintelligible) availability. And then we look at the (unintelligible) recommendations and the agency (unintelligible).

((Crosstalk))

Woman: I don’t know how much time you guys really want to spend on that. Maybe, you know, you have some flexibility there. But we can always revisit that at a later...

((Crosstalk))

Woman: ...at the meeting.
Woman: Right.

Man: Since it’s not deliberation.

Woman: Exactly. And know it’s been shared with the public.

Woman: Are we to offer any input? I mean it...

Woman: Sure.

Woman: Like the last time (unintelligible) recommendations and then the agency responded know. Now we’re responding to the agencies response. Is that - I mean...

Woman: No.

Woman: ...is that the intent or are we just doing that far own information...

Woman: The agency...

Woman: ...so we understand?

Woman: Well the agency doesn’t often respond like this recommendation. You take them and in and they’re - take it under advice. So in this instance you actual replies from subject matter experts and their new service (unintelligible).

((Crosstalk))

Woman: Some of them at least I thought we (unintelligible) asked...
((Crosstalk))

Woman: ...they posed other questions here so...

Woman: Good point.

Woman: ...again this is something you guys could take, you know, we’ll bring them tomorrow but we may not have to spend this much time on just something that’s been ongoing...

((Crosstalk))

Woman: And then in the afternoon we have (John Clear McCuskey). He’ll be here (unintelligible) and well (unintelligible).

((Crosstalk))

Woman: Microbial resistance (unintelligible). But maybe you can revisit some of the (unintelligible) start process, you know, we left it open for him to come back.

Man: (Unintelligible).

Woman: That’s the day tomorrow and...

((Crosstalk))

Woman: It looks pretty full. I don’t have a whole lot of ideas. But if we can get a framework down on paper okay (unintelligible) flushed out a lot of your
points. You know, you might have two overarching recommendations and a lot of the points you made here today will fall under that.

So, you know, it’s good that we got it down on paper and (unintelligible) on it and then me again for another meeting (unintelligible). So just keep that in mind, you know, and we’ll try to, you know, no, I’ll put up with that. So we’ve got a full day tomorrow to carve out as much time as possible. We’ll visit this again first and go right into zoonotics and then (unintelligible).

Man: So try to be here at 8:30 then right?

Woman: Yes.

Woman: Yes. And we’ll have it up on (unintelligible).

((Crosstalk))

Woman: Okay well...

((Crosstalk))

Woman: Here’s something. Let me...

Woman: (Carol) Verizon?

Coordinator: Yes?

Woman: Oh we are through. Thank you very much. Talk first thing in the morning.

Coordinator: Okay very good. Have a great day.
Woman: Thank you.

Woman: Thank you.

Coordinator: (Unintelligible) conference. Thank you for participating. You may disconnect at this time.

END