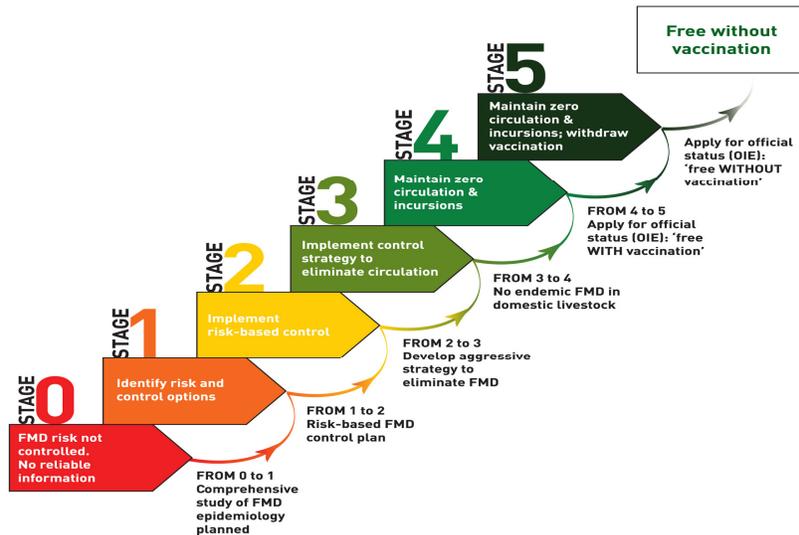


# The Progressive Control Pathway for FMD control (PCP-FMD)

*Principles, Stage Descriptions and Standards\**



\* Accompanying explanatory documents will address specific items such as laboratory support and PVS pathway.

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## I. PCP-FMD Principles and Application

The Progressive Control Pathway for Foot and Mouth Disease (**PCP-FMD**) has been developed by FAO to assist and facilitate countries where FMD is still endemic to progressively reduce the impact of FMD and the load of FMD virus. The PCP-FMD has been adopted by FAO as a working tool in the design of FMD country (and some regional) control programs, and following appropriate consultation it has become a joint FAO/OIE tool. The PCP-FMD is expected to form the backbone of the **Global FAO/OIE Strategy for the Control of FMD** that is under development. Countries usually free of FMD that detect an incursion of the disease would normally not enter the Pathway, but rather would act to eradicate the disease and re-apply directly to the OIE for re-instatement of an officially recognized FMD-free status as soon as possible. The possibility that OIE could “endorse” a country’s national FMD control program at the higher Stages of the PCP is under consideration and a positive decision by the OIE specialist commissions and the OIE World Assembly of OIE delegates is foreseen.

The PCP-FMD is a set of FMD control activity stages (*Figure 1*) that, if implemented, should enable countries to progressively increase the level of FMD control to the point where an application for OIE-endorsement of a national control programme vaccination (in an advanced phase of **Stage 3**) or official freedom from FMD with or without vaccination (end of Stages 4 and 5, respectively) may be successful and the status sustainable.

## A. PCP Principles

The PCP approach is based on the following principles:

- active monitoring for FMDV circulation and understanding the epidemiology of FMD are the foundation of a control program, and therefore activities to meet these requirements are common in all stages. The improved information generated is of benefit nationally and regionally. The monitoring of outcomes (indicators of control effectiveness), within a national FMD management system, is included at the higher stages;
- activities in each PCP stage are appropriate to the required reduction in virus circulation and mitigation of disease risk to be achieved;
- activities and their impacts are measurable in each Stage, comparable between countries, and generate information and potential benefits to national as well as international stakeholders;
- the optimization of resource use for FMD control is achieved through the targeting of measures to the husbandry systems and critical risk points where the impact on disease control and/or virus circulation will be greatest.

## B. Expected progression and monitoring achievements along the PCP and beyond

The PCP is not intended to be prescriptive; rather it is outcome-oriented and acknowledges that the most effective approach to achieve the key outcomes might be different in different countries and regions. It is also recognised that priorities will vary across countries, and therefore there is flexibility built into the PCP. Within the lower stages, countries may choose to focus control measures on certain livestock sector(s), and throughout the PCP each country can decide how quickly and how far it progresses. Eventual progression to **Stage 2** is the logical goal of countries that embark on **Stage 1**.

However, countries may decide not to progress further than **Stage 2** or 3, both of which provide sustainable management of FMD to a certain level. Moving to **Stage 4** would almost certainly

indicate the intention to attain officially recognised FMD ‘free with vaccination’ status or directly strive for the status of FMD- ‘free without vaccination’ for all or part of the territory. In **Stage 5**, countries may decide to keep vaccinating and not progress to ‘free without vaccination’ status.

### C. Assessment of progress

An evidence-based, transparent assessment procedure that is carried out according to quality standards that are uniform across the world should be applied on a yearly basis to determine each country’s status within the PCP. The countries being assessed must be able to provide clear evidence of the activities performed and progress achieved towards the key outcomes of the PCP.

Although the assessment and resultant Stage assignment would be done on an individual country basis, countries within a region would preferably be assessed concurrently, ideally at a yearly regional meeting. The opportunity for countries to cross-examine progress at regional level should be fostered as it is an essential platform which will encourage greater transparency and accountability for progress, and where common regional problems may be addressed. Such regional interaction and transparency should also encourage the transition to greater use of FMD monitoring to inform disease management as well as improve the identification of preventive actions (such as harmonised vaccine selection/standards or vaccination protocols). The assessment procedure is an opportunity not only to assess and recognize progress, but also to identify areas for improvement and needs for assistance.

The formal assessment procedure will utilize the Global Framework for the Progressive Control of Transboundary Animal Diseases (GF-TADs) in which FAO and OIE cooperate. The key body in the assessment process will be the Global FMD Working Group (FMD-WG) that reports to the Global GF-TADs Steering Committee and the GF-TADs Management Committee. The FMD-WG

will be assisted by the joint (FAO/OIE) Secretariat based in Rome, which will be charged with the daily work.

For continuation along the pathway Stages 1 to 4, countries should provide information on the implementation of the PCP-FMD, in principle on a yearly basis. The FMD-WG will provide a template questionnaire to all countries participating in the PCP-FMD to enable the countries to deliver the information requested in a standardized way.

The PCP-FMD technical assessments will be carried out by experts who may belong to the FMD-WG or Secretariat, or be appointed by and operate under the responsibility of the FMD-WG. Country visits of experts will be undertaken if this is requested by the country or considered necessary to verify the country information provided. The FMD-WG may also field experts to assist during relevant regional PCP-FMD meetings to ensure global coherence and equivalence of PCP stages. The FMD experts will be selected from a list of experts agreed by FAO and OIE.

The reports and recommendations of the experts will be presented to the FMD-WG. The FMD-WG will be responsible for the communication with the individual countries regarding PCP-FMD issues. The FMD-WG will report on the progress of the implementation of the Global FMD Control Strategy on the national, regional and global level to the GF-TADs Global Steering Committee and Management Committee on a yearly basis. This report should contain individual country PCP classification proposals. The decision of the GF-TADs Steering Committee (maintaining the stage, downgrading or upgrading) will be communicated to the country concerned. The country will then have a GF-TADs–supported PCP Stage assignment.

The FMD-WG will maintain close links with the Regional GF-TADs Steering Committees. It is recognized that the Regional GF-TADs Steering Committees should be closely involved in the PCP process since they play an important role in supporting the Global FMD Control Strategy through advocacy and by solving constraints. A briefing on the progress of the FMD-PCP in their region should be part of the agenda of each GF-TADs Regional Steering Committee meeting.

Once a country has entered the GF-TADs–supported PCP-**Stage 3** and has decided it wants to continue along the pathway to **Stage 4** and beyond, implying the intention to eradicate FMD

virus from the domestic animal population, it may ask for OIE-endorsement of its national FMD eradication programme. The procedure for endorsement may be obtained from OIE.

Progression from **Stage 4** to 5, and from **Stage 5** to Pathway completion, would be through the existing official OIE recognition processes of freedom from FMD with or without vaccination, respectively.

Within the country, different areas might attain different levels of FMD control. This is reflected in the PCP through the principle of 'zoning', in which different PCP Stages might be assigned to distinct geographic areas (called zones) within a country. Because the early PCP Stages focus on a general understanding of FMD risk and control within particular livestock sectors, the concept of zones of higher FMD control level within a country usually only applies to PCP Stages 3 and higher. In some exceptional situations, zoning might be applied in **Stage 2**, for example if targeted control is only applied to dairy cattle within one area of the country. In order to consider a geographic area as a 'zone' within the PCP, the country must provide convincing, evidence-based rationale for the decision. The zoning structure should take into account the structure of the livestock industry including animal movement patterns at a national and regional / international level and fulfil the corresponding OIE Terrestrial Animal Health Code regulations.

Since progression from **Stage 3** to **Stage 4** requires evidence that FMD virus is not circulating endemically in the domestic animal population of a country or zone, countries may well use **Stage 4** designation as a means to enable safer trade. It should be noted, however, that **Stage 3** and the beginning of **Stage 4** are not associated with any official OIE recognition of disease-free status. However, since the PCP assessment process is carried out transparently and to high standards and once the national eradication programme is endorsed by OIE, countries may benefit in preparing trade agreements.

#### **D. PCP and alignment with current regional FMD Control initiatives**

In some regions, there are already existing bodies and programs established to promote and harmonize regional FMD control efforts. The main examples are the EuFMD Commission, involved with the European neighbourhood and the West Eurasia Roadmap, the 2020 Roadmap for Foot and Mouth Disease Control in South-East Asia and China (SEACFMD) and the Plan Hemisférico de Erradicación de la Fiebre Aftosa (PHEFA) for South America. The PCP is intended to assist those regions without such current programmes, but could also be used in relation to the current regional programs by the GF -TADs Steering Committees to report on the regional progress. The concepts and assessment indicators may also have their application within these existing programmes, for example to progress towards the development of control zones as used in some regions and improved understanding of critical control points as well as risks.

## II. PCP and stakeholders

It is fully recognized that true progress in FMD control is not feasible without the support of the owners of the animals and the other stakeholders in all steps from production to marketing. Therefore strong and continuous efforts will have to be made to get and maintain such support. Particularly for the higher stages of the PCP-FMD pathway, evidence that the national FMD Control Plan is backed by stakeholders will be necessary for a proper assessment of what has been achieved and the potential sustainability thereof.

## III. PCP and use of information

The gathering of data in the framework of the FMD-PCP is subject to the privacy rules of FAO and OIE.

Countries taking part in the PCP accept that the data they provide will be used by FAO and OIE and their experts for an assessment to classify the country in one of the PCP-FMD Stages. The result of this process is in the public domain and will be published on the website of the FMD-WG. The underlying data, however, will not be freely available unless agreed to by the country concerned.

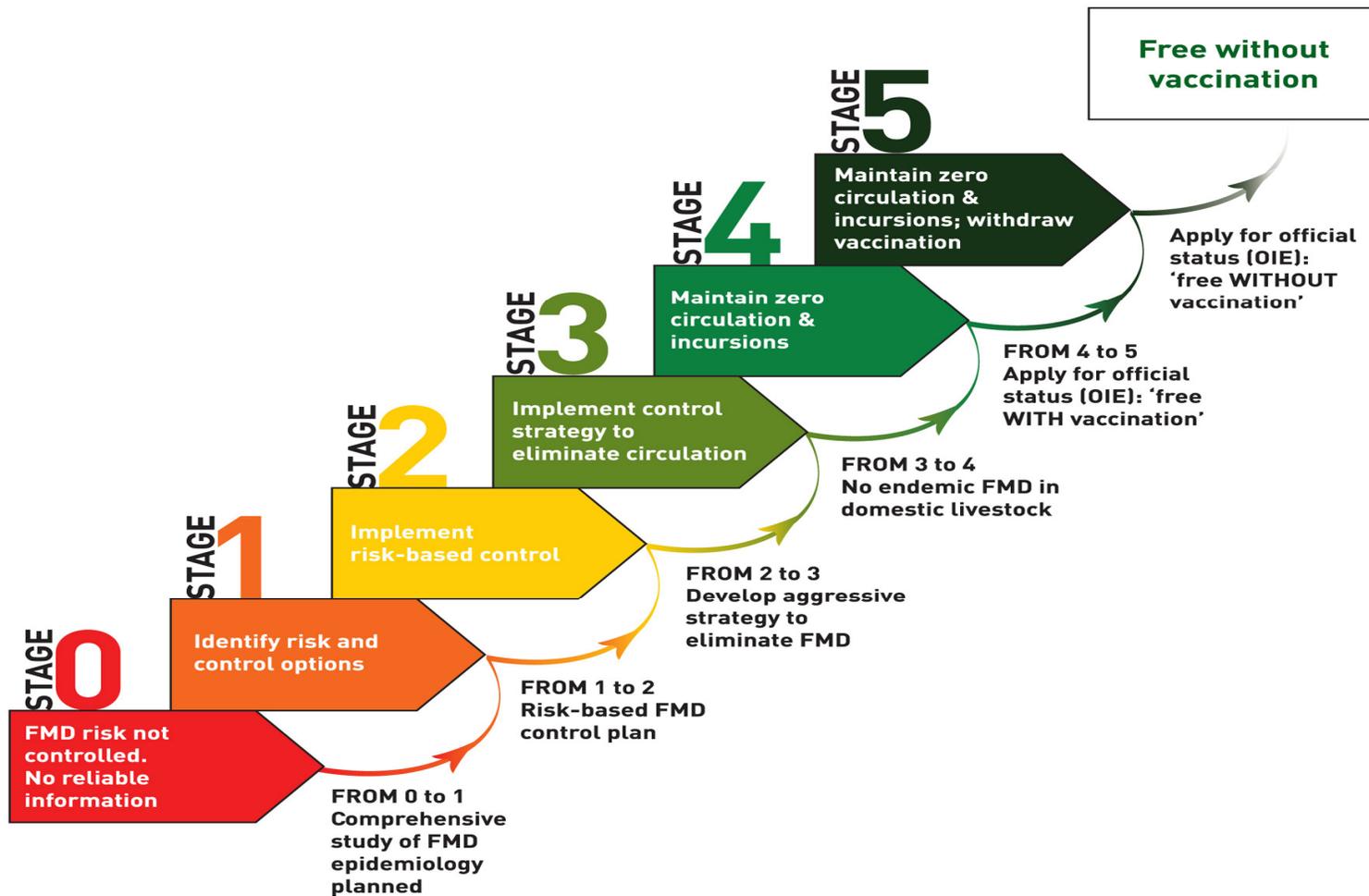


Figure 1: Stage progression in the Progressive Control Pathway

(1) Once in this stage, a country may apply for OIE-endorsement of its national FMD programme, provided its strategy objective has moved from control to eradication (see page 4)

#### IV. PCP Stage Description and Minimum Standards<sup>1</sup>

The PCP stages are summarized in Fig. 1 and described below. The ‘Stage Focus’ represents the usual overall objective or aim of the stage, and the numbered points outline the ‘key outcomes’ necessary to achieve that aim. Countries are able to decide for themselves how far, and how fast, it is appropriate for them to progress along the PCP. The Stage Focus therefore does not necessarily assume that a country will progress to the next stage.

In order to be placed in a Stage, the country must have achieved all of the key outcomes from the previous Stage, *plus* have met the minimum requirement for inclusion in the current Stage as specified below. Completion of a Stage depends on the attainment of a specific ‘indicator’ outcome that the country is ready to move to the next Stage. The indicator for each Stage is described in Fig. 1.

The PCP approach is not intended to be prescriptive and particularly in the lower Stages it is usually possible to realise the key outcomes through different activities or combinations of activities. Therefore, ‘typical activities’ are listed below each key outcome, along with a description of ‘quality indicators’ that are intended both to better define the key outcome, and also to facilitate the transparent assessment of achievement of each outcome. It is essential to address all of the key outcomes to fully complete the Stage and progress to the subsequent Stage.

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<sup>1</sup> *Explanatory Notes about the re-defined PCP stages: A Consultative Group meeting was held at the WRL FMD from 4-6 October 2010, in which the definitions and criteria for the PCP stages were reviewed. As a result of this meeting, it became clear that Stage 4, previously called “Freedom from FMD with vaccination” would more appropriately be described as “Working towards recognition as free with vaccination”, with the official recognition of “Freedom with Vaccination” marking the division between stages 4 and 5. During Stage 5, the country maintains the official “Freedom with vaccination” status, and may decide to go further and prohibit vaccination and apply for “Freedom without vaccination”. The awarding of this status also marks the end of the PCP, and ‘automatic graduation’ from Stage 5.*

## **Stage 1:**

- **STAGE FOCUS: “To gain an understanding of the epidemiology of FMD in the country and develop a risk-based approach to reduce the impact of FMD ”**
- **Minimum requirement for inclusion in Stage 1:** There is a comprehensive plan in place to gain insight into the epidemiology and socio-economic impacts of FMD in the country, and results are available from activities working towards Key Outcomes 1 & 2 below.
- **Key Outcomes:**
  1. All husbandry systems, the livestock marketing network and associated socio-economic drivers are well described and understood for FMD-susceptible species (value-chain analysis).
    - *Quality indicators:* This should include an overview of all systems involving FMD susceptible species from input suppliers, through producers of animals, to the marketing system, processors and consumers. Importation of relevant animals and animal products as well as movements of animals associated with transhumance or nomadism should also be described. As these are dynamic processes, the information available should be regularly reviewed and updated.
    - *Typical activities:* Participatory rural appraisal, stakeholder consultation workshops, analysis of existing data.
  2. The distribution of FMD in the country is well described and understood and a ‘working hypothesis’ of how FMD virus circulates in the country has been developed.
    - *Quality indicators:* It is important that all regions of the country and all husbandry systems involving FMD-susceptible species are considered at this stage. Because the FMD situation can change rapidly, the information made available should be current (i.e. collected within the previous 12 months). The information should provide indications of the spatial and temporal distribution of

FMD and normally should include, in addition to monitoring based on clinical signs, a serological survey designed<sup>2</sup> to identify differences in risk between animal populations or production systems and which can act as baseline for future monitoring.

- *Typical activities:* Passive and/or active FMD monitoring system, serological survey to assess prevalence of FMD in different husbandry systems, participatory epidemiology studies, risk assessment including description of risk pathways to identify important risk hotspots for FMD transmission, where appropriate including wildlife.
3. Socio-economic impacts of FMD on different stakeholders have been estimated.
- *Quality indicators:* A complete economic impact assessment is not expected at this stage, but the different types of losses should be described and the impact of at least direct losses in key husbandry systems due to FMD should be estimated.
  - *Typical activities:* Analysis of secondary data, key informant interviews, primary data collection and analysis.
4. The most common circulating strains of FMDV have been identified.
- *Quality indicators:* Samples should be representative of different production sectors and geographic regions. Because the FMD situation is constantly evolving, samples should be collected and analysed regularly over time.
  - *Typical activities:* Sampling and laboratory testing for FMDV, ship samples regularly to an International reference Laboratory for virus characterization.

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<sup>2</sup> In accordance with the PCP Stage Monitoring and Surveillance Guidelines [GCF - Ref: ...]

5. There has been progress towards developing an enabling environment for control activities.
  - *Quality indicators:* This is important if the country plans to progress to **Stage 2** of the PCP. In **Stage 1**, FMD should be a notifiable disease and reporting of suspect cases should not be discouraged.
  - *Typical activities:* Training as needed to support field and laboratory activities, develop information system to support field activities, outbreak reporting and decision making, assess effectiveness of legal framework to allow the Veterinary Services carry out FMD control activities.
  
6. The country demonstrates transparency and commitment to participating in regional FMD control.
  - *Typical activities:* Outbreaks notified to OIE, participate and share results of PCP activities at regional level, e.g. Regional Roadmap meeting.
  
7. Important risk hotspots for FMD transmission are identified.
  - *Quality indicators:* The analysis should use information in relation to key outcomes 1 and 2 above. The hotspots should be prioritised and gaps in knowledge that are required to effectively mitigate the risk of FMD entry/spread identified.
  - *Typical activities:* Analysis of data about the epidemiology of FMD and husbandry systems and, when data allow, conduct a preliminary risk assessment to identify critical points for FMD entry and spread.

➤ **AND TO PROGRESS TO STAGE 2**

8. A strategic FMD control plan that has the aim of reducing the impact of FMD in at least one zone or husbandry sector is developed.
- *Quality indicators:* The plan should be endorsed by the government veterinary authorities and clearly based on the risks identified through other **Stage 1** PCP activities.
  - *Typical activities:* ‘Risk hotspots’, defined as points in the production system and marketing network where there is a high risk of FMD entry and/or spread, should be identified. Control measures to mitigate the risk at these points are selected on the basis of both their feasibility and expected impact. Risk assessment techniques, particularly the description of risk pathways, will be useful to accomplish this.
  - This is required for the country to progress to **Stage 2**.

**Stage 2:**

- **STAGE FOCUS: “To implement risk based control measures such that the impact of FMD is reduced in one or more livestock sectors and/or in one or more zones ”**
- **Minimum requirement for inclusion in Stage 2:** Completion of previous Stage, and results are available from activities working towards Key Outcomes 1 & 2 below
- **Key Outcomes:**
  1. Ongoing monitoring of circulating strains and risk in different husbandry systems.
    - *Quality indicators:* The country should maintain activities described in **Stage 1**, with data and analysis updated as required to keep the information current. Additionally, critical gaps in understanding should be identified and filled, with particular emphasis on acquiring knowledge that could assist in more effective implementation

- of control measures. Thus, the understanding of both the epidemiology of FMD in the country and feasible mitigation options are progressively enhanced.
- *Typical activities:* As for **Stage 1**, plus targeted research studies implemented to address gaps in knowledge (e.g. targeted serological surveys, active surveillance, participatory epidemiology studies, risk assessments etc); awareness and communication.
2. *Risk-based control measures* **are** implemented for the sector or zone targeted, based on the FMD strategic control plan developed in **Stage 1**.
- *Quality indicators:* Control efforts should be targeted at critical risk control points, and will most likely include *both* vaccination and enhanced biosecurity measures.
  - *Typical activities:* The development of vaccination delivery mechanisms and cold chain, introducing measures at markets to reduce transmission of FMD, enhancing awareness of FMD transmission mechanisms and behaviours that can interrupt transmission, improving border controls, movement controls, implementation of good biosecurity practices, hygiene, cleaning and disinfection routines at critical points all along the production and marketing networks (typically where animals are being moved, and marketed through the country or region).
3. It is clearly established that the impact of FMD is being reduced by the control measures in at least some livestock sectors and /or zones.
- *Quality indicators:* It is important to demonstrate both that control measures are being appropriately implemented, and also that they are achieving the desired impact.
  - *Typical activities:* Serological surveys to assess vaccination coverage of the target population(s), laboratory evidence that the vaccine used is appropriate for circulating strains of virus, analysis of surveillance data to assess the change in FMD prevalence over time in the target population(s), assessment of control measures

(cost effectiveness, degree of implementation, impact), outbreak investigation of selected outbreaks (including some outbreaks that have occurred despite control measures), documented inspections showing compliance with biosecurity and hygiene requirements.

4. *There is further* development of an enabling environment for control activities.

- *Quality indicators:* The legal framework should ensure that control and surveillance activities can be carried out, there should be evidence that the country is committed to developing an effective and sustainable control program.
- *Typical activities:* As for **Stage 1 plus** assess legal framework and operational capacity of veterinary services and revise as needed to allow activities such as vaccination and outbreak investigation (e.g. rights to enter premises, examine animals, collect samples and question owner), diversification of vaccine delivery mechanisms such as development of Public Private Partnership (PPP), further development of the information system to include geo-referenced data for *analysis and mapping, introduction* and enforcement of necessary regulations to mitigate risk of disease transmission associated with movement and marketing of animals (e.g. regulations on markets and transporters).

### AND TO PROGRESS TO STAGE 3

5. A revised, more aggressive control strategy that has the aim of eliminating FMD from at least a zone of the country has been developed

- *Quality indicators:* This plan should be endorsed by the government veterinary authorities. The plan should contain provision for rapid detection of and response to outbreaks in order to limit the spread of infection.

- *Typical activities:* Development of contingency and emergency preparedness plans. Compared to the control strategy implemented during **Stage 2**, this strategy is more aggressive. The plan should address the requirement that disease should be rapidly detected whenever and wherever it occurs and every outbreak should trigger a response to limit the onward spread of FMDV. The focus moves from control in a key livestock sector or zone, to elimination of FMD in all susceptible livestock in the country or zone.
- This is required for the country/zone to progress to **Stage 3**.

### **Stage 3:**

- **STAGE FOCUS:** “Progressive reduction in outbreak incidence followed by elimination of FMDV circulation in domestic animals in at least one zone of the country”. **Minimum requirement for inclusion in Stage 3:** Completion of previous Stage, and results are available from activities working towards Key Outcomes 1 & 2 below.
- **Key Outcomes:**
  1. Ongoing monitoring of circulating strains and risk in different husbandry systems.
    - *Quality indicators:* Enhanced understanding of risk is applied to progressively eliminate the impact of FMD in domestic animals through the effective use of available control options.
    - *Typical activities:* The country should maintain activities described in Stages 1 and 2, and analyse the resulting data to ensure that control measures are feasible and effective. Further, control measures should be changed or refined if they are not as effective as expected.

2. The disease control plan developed at the end of **Stage 2** is implemented, resulting in rapid detection of, and response to, all FMD outbreaks in at least one zone in the country.
  - *Quality indicators:* Compared to the control strategy implemented during **Stage 2**, this strategy is more aggressive and the focus moves from a key livestock sector or sectors to include all susceptible livestock in the country or zone. In this Stage countries may request formal OIE endorsement of their national FMD control programme.
  - *Typical activities:* As for **Stage 2** control activities, plus enhanced focus on disease reporting and response – e.g. public awareness campaigns, provision of reporting incentives, free phone lines etc. Every outbreak should trigger a response to limit the onward spread of FMDV (culling of infected livestock, tracings, movement restrictions, tactical [e.g. ring or other barrier] vaccination). Full epidemiological investigations into all outbreaks should be carried out, generating full reports that specifically address the source and spread (spatial, temporal) of infection and develop conclusions as to the most likely mechanisms of disease transmission responsible.
  
3. The incidence of clinical FMD is progressively eliminated in domestic animals in at least a zone in the country.
  - *Quality indicators:* Credible epidemiological evidence that FMD virus is progressively being eliminated in domestic animals and that control measures are effectively reducing the risk of the incursion and/or spread of FMD from wildlife or a foreign country.
  - *Typical activities:* Analysis of data from surveillance system (active and/or passive) including serological surveys.
  
4. There is further development of an enabling environment for control activities

- *Typical activities:* As for Stages 1 & 2 *plus* legal framework is in place to restrict the movements of animals to prevent the spread of an outbreak. Reporting of suspect FMD cases is encouraged and accepted by all stakeholders. Legal framework covering compulsory culling of livestock is in place as well as arrangements for compensation and/or insurance when this culling is a necessary part of outbreak response.

**NB:** As explained on page 4, once a country has entered the GF-TADs–supported PCP-**Stage 3** and has decided it wants to continue along the pathway to **Stage 4** and beyond, implicating the intention to eradicate FMD virus from the domestic animal population, it may ask for OIE-endorsement of its national FMD eradication programme. The procedure for endorsement may be obtained from OIE. In this Stage the results of a recent PVS analysis will probably be necessary to support the country application for endorsement of its FMD eradication programme.

#### AND TO PROGRESS TO STAGE 4

5. There is a body of evidence that FMD virus is not circulating endemically in domestic animals within the country or zone.
  - *Quality indicators:* There is evidence of high-quality FMD surveillance activities over all regions and husbandry systems – surveillance activity must be demonstrably capable of detecting FMD outbreaks should they occur (e.g. consistent with OIE Terrestrial Animal Health Code on surveillance standards). Incidence of FMD is reduced to zero except for occasional incursions from other countries or wildlife. All outbreaks can be traced to incursion from the outside or wildlife and are quickly resolved. Monitoring of vaccination programmes and of population immunity is successfully implemented.

- Typical activities: Analysis of virological data, analysis of outbreak investigation data including identification of outbreak source, and analysis of serological survey data
- This is required to progress to **Stage 4**.

## **Stage 4:**

- **STAGE FOCUS:** “To maintain ‘zero tolerance’ of FMD within the country/zone and eventually achieve OIE recognition of ‘FMD free with vaccination’.
- **Minimum requirement for inclusion in Stage 4:** Completion of previous Stage, and results are available from activities working towards Key Outcomes 1 & 2 below.
- **Key Outcomes:**
  1. Continued surveillance for FMD and monitoring of risk in different husbandry systems.
    - *Quality indicators:* Enhanced understanding of risk is applied to reduce the impact of FMD through the effective use of available control options.
    - *Typical activities:* The country should maintain activities described in previous Stages.
  2. A plan is developed to fulfil the requirements for OIE recognition of “FMD-free with vaccination” status.
    - *Quality indicators:* The plan reflects the requirements specified in the OIE Terrestrial Animal Health Code.
  3. The risk of FMD entering the country or zone is mitigated.
    - *Quality indicators:* Increased attention to border security is evident.
    - *Typical activities:* Border controls are strengthened, risk mitigating measures to prevent FMD transmission between susceptible wildlife and domestic livestock are improved.
  4. FMD incidence is very low and limited to occasional incursions from outside (which must eventually cease if successful application for recognition of “free with vaccination” is to be achieved).

- *Quality indicators:* Credible epidemiological evidence that FMD incidence is very low and that there is no endemic circulation in domestic livestock.
- *Typical activities:* Active and passive surveillance, serological survey, thorough outbreak investigations.

5. The environment enables the full implementation of control measures.

#### AND TO PROGRESS TO STAGE 5

6. The OIE requirements for recognition of “free with vaccination” are fulfilled and a dossier is submitted to OIE for recognition of this status.

- *Typical activities:* Effective surveillance activity to prove zero disease incidence over the required period as specified in the OIE Code
- This is required to progress to **Stage 5**.

#### Stage 5:

➤ **STAGE FOCUS:** “To maintain ‘zero incidence’ of FMD within the country/zone and eventually achieve OIE recognition of ‘FMD free without vaccination””.

➤ **Minimum requirement for inclusion in Stage 5:** Completion of previous stage and OIE recognition of “FMD-free with vaccination” status

➤ **Key Outcomes:**

1. Zero incidence of FMD outbreaks is maintained in domestic livestock.

- *Quality indicators:* Credible evidence required that FMD is not circulating and that if an outbreak occurred it would be detected (i.e. vet services competence, surveillance programme working well, reporting of suspect cases is encouraged).

- *Typical activities:* Active and passive surveillance, serological surveys, all suspect reports are immediately and thoroughly investigated.

**AND TO EXIT STAGE 5 AND COMPLETE THE PATHWAY:**

2. The OIE requirements for recognition of “free without vaccination” are fulfilled and a dossier is submitted to OIE for recognition of this status.
  - *Typical activities:* Effective surveillance activity to prove zero disease incidence over the required period as specified in the OIE Code.
  - This is required to complete **Stage 5** and the Progressive Control Pathway.