NAHIP ADVISORY COMMITTEE MEETING

TUESDAY 22 OCTOBER 2024 | Videoconference

Start: 11:00 | Close: 13:30 (AEST)

MEETING OBJECTIVES:

- Discuss the 2023-24 coordinator reports and AHA status report.
- Receive and discuss any urgent program matters.

🖹 = paper V = verbal P = presentation

PARTICIPANTS	
Bronwyn Hendry (AHA-Chair) Mikhaila Nye (AHA) Sheaaz Sakur (AHA-Record) Emily Sears (AHA) Adam Robinson (DAFF) Emily Sellens (DAFF) Teagen Fitzwater (NAQS) replacement for Guy Geoff Campbell (NSW) Stacey Carnogoy (NT)	Selina Ossedryver (Qld) Callain Howarth (SA) Emma Watkins (Tas.) Julia Sarandopoulos (Vic.) Diana Turpin (WA) Keren Cox-Witton (WHA) Raymond Chia (APL – *Industry Forum representative*) Johann Schroder (SPA – *Industry Forum representative*)

Apologies: James Watson (ACDP), Guy Weerasinghe (NAQS)

Welcome and introductions (B. Hendry):

- The Chair gave an acknowledgement of country and welcomed participants to the NAHIP meeting.
- Participants were reminded of AHA's policy to not record meetings, and that the use of AI chatbots is not permitted.

1. 2023-24 update

1.1 2023-24 Coordinator Reports

NSW (G. Campbell)

- Spoke to the report provided.
- Noted the ongoing complexity of reporting across the multiple data projects, although the work to consolidate the reporting structure will support this moving forward. When there is a disease response ongoing, the dataset gets large and complex quite quickly and is challenging to collate. This will largely need to be addressed through state systems, but an observation to flag with the Committee.
- NSW provided a brief update on the development of its internal dashboard visualisation (via Power BI). Other representatives on the Committee expressed an interest in implementing a similar dashboard within their jurisdictions.
- NSW is supportive and welcomes efforts to progress the data standards and data quality work.

NT (S. Carnogoy)

- Spoke to the report provided.
- Note the very large drop off in numbers of investigations with the removal of *E. canis* from the NND list (late 2023) and NT transitioning to fee-for-service for *E. canis* testing from July 2023.

Qld (S. Ossedryver)

- Spoke to the report provided.
- Noted that as of May 2024, S. Ossedryver was appointed as the Qld NAHIP coordinator.

- Noted that Qld's SCAHLS rep and laboratory manager has taken the lead on the syndrome list review with SCAHLS and is arranging a working group with jurisdictional pathologists to progress the review. Qld reminded jurisdictions to maintain in communication with their SCAHLS representative to keep updated on progress and provide any inputs for consideration.
- Noted the total for Attachment A: Summary of NAHIS – Qld 2023-24 should read 2464 (not 4928).
- E. Sellens noted that DAFF is currently under-resourced and action item #7 from the May meeting (defining negative case definitions) has not been addressed yet. DAFF will take this on notice and progress as a priority.
    - The Committee agreed that negative case definitions will be useful and, if reframed, could provide additional information (no. investigations, definitive positives, etc) and help to reduce potential differences in data reporting among jurisdictions (robust negative data being excluded vs the inclusion of all negatives).
    - Qld proposed that defining negative case definitions could be one of the first tasks for the data quality subgroup, but having a list of priority diseases to start with would help.
    - The Committee agreed that they could assist DAFF by focusing on diseases where differences in reporting have been noticed between jurisdictions and negative case definitions are required (e.g. enzootic diseases such as Johne's).

SA (C. Howarth)

- Spoke to the report provided.
- Thanked Qld for their input in driving the data quality subgroup formation, along with AHA and SCAHLS, and to WHA for providing input into the case report in wild birds for AHSQ.
- Noted it is time-consuming to get the surveillance data, specifically the poultry data, into the current workbooks and that since DAFF identified in the May 2024 meeting that non-clinical surveillance data is outside of suspect disease investigations and is not being used, SA support excluding this data, particularly the planned Newcastle disease surveillance data, from the program moving forward. SA supports progressing with the planned consolidation of reporting from the relevant data projects.
- Noted that concerns regarding inconsistencies in the NNDI list in AHSQ were rectified quickly, but that improvements to the process for updating the NNDI list will mitigate the risk of inconsistencies across jurisdictions. It was noted there is not always timely or proactive communication from AHC and the AHC Secretariat about those changes, but AHA will continue to work to resolve these issues and improve the process for updating the list in NAHIS and subsequently, in AHSQ reporting.

Tas (E. Watkins)

- Spoke to the report provided.
- Noted that semi-automated data flows have been implemented to support data upload using the AUSPest*Check*® jurisdictional funding grants. The funding also has the potential to make a significant difference in capacity to look at improving data quality at the jurisdictional level, but the data standards work needs to be finalised to inform that work.
- Noted that the questions from the consultant for the evaluation of Tas's system might be of benefit to upcoming work on data standards.
- Introduced Jennifer Voss, the new Tas NAHIP coordinator who is transitioning into the role.

Vic (J. Sarandopoulos)

- Spoke to the report provided.
- Noted challenges in data collation concurrently with an ongoing emergency disease response.

  Noted the current complexity in transmissible spongiform encephalopathy (TSE) reporting in AHSQ but are working with AHA each quarter to crosscheck.

WA (D. Turpin)

- Spoke to the report provided.
- Informed the Committee that D. Turpin will be going on maternity leave for 12 months from December. A new coordinator for the period will be identified soon.
- Currently looking at alternatives to Sample Manager for their LIMS. WA has been utilising Power Query to get data out of Sample Manager, however this has been found to be labour intensive with a lot of manual checking.
- WA is seeking further information around the scope and cost of not progressing AUSPest*Check*® and any available information on plans to create an alternate data management system and the type of consultation that will go with that process.
- Qld sought an update on the WA Priority Reportable Animal Disease Project work. This has been circulated to AHA and will be provided to the Committee with the record from this meeting.

NAQS (T. Fitzwater)

- Spoke to the report provided
- Noted that NAQS are currently transitioning their information management into a new system and that reporting is fragmented during the transfer period.
- The information management transition has impacted the generation of Attachment A to the coordinator report and the attachment will be circulated when available.

WHA (K. Cox-Witton)

- Spoke to the report provided.
- Acknowledged the milestone of 20,000 records in the electronic Wildlife Health Information System (eWHIS).
- Informed the Committee that WHA is working with a consultant to build a data hub for eWHIS reporting and data analysis (currently done externally to eWHIS). This will automate charts, figures, tables and maps to reduce manual workload. Initially this will be for WHA internal use to support reporting including in the AHSQ, but in the future WHA will consider expanding access (with approvals).

Conclusion

The Committee accepted the coordinator reports as written. Discussions focused on the challenges in timely communication around the update of NND list through AHC and the need for further information on pathways forward for the database system and impact of not progressing AUSPest*Check*®. The Committee also noted the importance in continuing to progress the data quality work.

Action items

1. DAFF to progress a priority list of disease as per Action Item 7 from the May 2024 meeting.
2. AHA to organise a data quality subgroup meeting to progress data quality discussions.
3. AHA to consult with jurisdictions and advise DAFF of and differences in disease reporting that have been noticed between jurisdictions and where negative case definitions are required (e.g. enzootic diseases such as Johne's).
4. Tas to share with AHA the queries that their database consultant raised on the draft data standards (when available).
5. AHA to keep the committee briefed on the plans for scoping and consultation regarding the future data management system and relevant financial implications.
6. AHA to share the WA priority disease case definitions document with the Committee.
7. NAQS to provide AHA with Attachment A to its 2023-24 Coordinator Report for circulation to the Committee.

1.2 2023-24 Status Report (M. Nye)

- M. Nye spoke to the report provided.
- The Committee queried the process around any underspent NAHIP funds and whether there was a way in which under expenditure could be carried forward and used in subsequent years. AHA confirmed that as NAHIP and NSDIP are core funded programs of AHA, underspent funds do not carry forward to the following year.
- Qld acknowledged that the formation of the data quality subgroup and the SCAHLS meeting (March) should be considered an achievement and recorded in Table 2. The Committee supported this.
- The Committee discussed the graphs included in the report and suggested the addition of proportions of NND exclusions, that are consistent with the program requirements, by species population (e.g. per million head). Data relative to the denominator may represent the relative contribution of small jurisdictions, with lower populations, as a more meaningful comparison. Noted that this would be for interest within the Committee as records are generated by passive surveillance.

Conclusion

The Committee accepted the report. AHA will look to include the proportions of NND exclusions, that are consistent with the program requirements, by species populations in the next report.

Action items

8. AHA to update and recirculate the status report with addition of the data quality work and joint NAHIP/SCHALS workshop as key achievements.

2.1 Other Business

- Data quality subgroup:
  - The Committee reconfirmed the importance of progressing the work on data quality and the importance of reconvening the subgroup
  - G. Campbell (NSW), S. Ossedryver (Qld) and D. Turpin (WA) expressed an interest to be part of the subgroup. Other jurisdictions expressed that they would check their internal availability and resources and will advise AHA on their involvement on the subgroup.
  - The Committee agreed that a DAFF representative is important to be involved in the subgroup.
  - The Committee discussed a potential central place for information regarding the subgroup to be collated for members to view. AHA noted delays in implementing the Surveillance Extranet due to lack of resources but expect the platform to be rolled out in 2025.
- Coordinator reports:
  - Discussion on what should be included in the coordinator reports as the level of detail and data varies between jurisdictions.
  - AHA noted that the commentary provided in the reports is useful, particularly regarding what is happening relevant to the program in each jurisdiction, as well as any challenges or opportunities. Data presented are often a repetition from what is available through NAHIS so isn't as useful to include. Noted that once the database reporting structure has been updated, if a format can be agreed, AHA can set a report up in NAHIS to run for each jurisdiction based on the data uploaded for inclusion in the jurisdictional reports.

Conclusion

The Committee agreed that members are to reach out to AHA if they want to be part of the data quality subgroup. AHA has also taken note of the inconsistencies between jurisdictions in the coordinator reports and the possibility of an agreed format once the database reporting structure has been updated.

Action items

9. AHA to progress the development of the extranet and include the jurisdictional data quality documents as resources.
10. Committee members to advise AHA on availability to be part of the data quality subgroup.
11. AHA to consider providing further guidance on the information/level of detail expected in jurisdictional annual reports (including to potentially supply a summary table of data extracted from NAHIS), to improve consistency of reporting.

3. Data collection and reporting (E. Sears) – joint item with the NAHIP and NSDIP Advisory Committees

- E. Sears provided an update on developments with the national animal health surveillance databases since the meeting in May.
- AHA has been in ongoing discussions with Animal Health Committee and the wider AHA member representatives, including industry. AHA hold major concerns about the suitability of AUSPest*Check*® for animal health, and as such AUSPest*Check*® is not AHA's preferred solution for our members. At this stage, in agreement with DAFF, the pilot of AUSPest*Check*® as a replacement for the Central Animal Health Database (CAHD) has ceased.
- AHA acknowledged that concerns have been raised regarding the longevity of the CAHD and reassured the committee that the CAHD will be available for the next 3-5 years, with possibility of extension. AHA has invested in critical security and stability updates to the CAHD, and these are scheduled for completion by the end of the year. This will enable AHA members to thoroughly investigate and scope all options for a future system, with adequate time and reduced risk of database failure while this work progresses. The Committee asked for the details and timing of the completed security updates to be shared when available.
- AHA will utilise the data standards and data quality work already undertaken and implement them in the CAHD, with an information paper being circulated to AHC.
- The Committee expressed concerns around the financial impacts of not progressing with AUSPest*Check*® and queried if there was any information available on what a future database project may cost.
- The Committee suggested that a review of the AUSPest*Check*® animal health project should be conducted to inform future database discussions and direction.
- Jurisdictions sought clarification on what would happen to the grant funding that was provided under the AUSPest*Check*® project. AHA noted that this would be an area for DAFF to advise on in due course.
- AHA has undertaken an initial review of the Data Management and Use Policies and updated them to be less specific to a particular database to support their initial implementation into the CAHD and any successor databases. These were circulated as part of the meeting papers.
- AHA aim to implement the agreed changes in reporting structure into CAHD for the 2025 calendar year reporting (commencing with Jan-Mar data, due in May). This will enable jurisdictions to progress and implement any adjustments to internal workflows and remove the requirement to report testing outside of suspect national notifiable disease investigations in NAHIP. The timing of initial implementation will also provide an opportunity for reflection and any additional updates to be discussed during the NAHIP/NSDIP Advisory Committee meetings in May.
- The Committee noted that the NAHIP data quality work is still to be progressed, and the subgroup has not met since the last Advisory Committee meeting. The intent is that the Data Management and Use polices be reviewed at least annually and can include relevant outputs, in consultation with the Advisory Committee, once this work is complete.
- AHA have circulated the updated version of the data management and use policies to both NSDIP and NAHIP committees. Where changes are needed, suggested alternatives/proposed wording is requested to be provided in the next two weeks. Following this a workshop will be held with each committee to finalise an initial version of the policies for implementation in the CAHD.

- AHA clarified that at this time, progress on the NAMP Data Management and Use Policy is on hold while a subgroup discusses the testing protocols and the subsequent reporting structure. AHA will be in discussion with the Screw Worm Fly Surveillance and Preparedness Program to progress and implement reporting updates within the CAHD, although as a non-subscription program at AHA has different governance arrangements and will follow a different process to NAHIP and NSDIP. AHA is also working with to confirm any required updates for the National TSE Surveillance Program

Conclusion

The Committee noted the update on the database system and plans to progress with interim updates into the CAHD while a broader scoping and consultation process is undertaken with the wider AHA membership on future database needs across all projects.

Action items

12. AHA to provide update to members upon the completion of scheduled CAHD updates.
13. Committee to review the revised Data Management and Use Policy and provide AHA with any suggested changes with proposed alternative text.

NAHIP ADVISORY COMMITTEE MEETING OCTOBER 2024

ACTION REGISTER

#	ACTION	WHO	BY	STATUS
1	DAFF to progress a priority list of disease as per Action Item 7 from the May 2024 meeting.	DAFF	MAY 2025	
2	AHA to organise a data quality subgroup meeting to progress data quality discussions.	AHA	EARLY 2025	
3	AHA to consult with jurisdictions and advise DAFF of any differences in disease reporting that have been noticed between jurisdictions and where negative case definitions are required (e.g. enzootic diseases such as Johne's).	AHA and jurisdictions	LATE FEBRUARY/EARLY MARCH 2025	
4	Tas to share with AHA the queries that their database consultant raised on the draft data standards (when available).	TAS	JANUARY 2025	
5	AHA to keep the committee briefed on the plans for scoping and consultation regarding the future data management system and relevant financial implications	AHA	EARLY 2025	
6	AHA to share the WA priority disease case definitions document with the Committee.	AHA	DECEMBER 2024	COMPLETE
7	NAQS to provide AHA with Attachment A to their 2023-24 Coordinator Report for circulation to the Committee.	NAQS	JANUARY 2025	
8	AHA to update and recirculate the status report with addition of the data quality work and joint NAHIP/SCHALS workshop as key achievements.	AHA	DECEMBER 2024	COMPLETE
9	AHA progress the development of the extranet and include the jurisdictional data quality documents as resources.	AHA	MARCH 2025	
10	Committee members to advise AHA on availability to be part of the data quality subgroup.	NAHIP Advisory Committee	JANUARY 2025	
11	AHA to consider providing further guidance on the information/level of detail expected in jurisdictional annual reports (including to potentially supply a summary table of data extracted from NAHIS), to improve consistency of reporting.	AHA	OCTOBER 2025	
12	AHA to provide update to members upon the completion of scheduled CAHD updates.	AHA	EARLY 2025	
13	Committee to review the revised Data Management and Use Policy and provide AHA with any suggested changes with proposed alternative text.	NAHIP Advisory Committee	NOVEMBER 2024	COMPLETE