

NAHIP ADVISORY COMMITTEE MEETING

WEDNESDAY 30 AUGUST 2023 | Videoconference

Start: 14:00 | Close: 15:00 (AEST)

MEETING OBJECTIVES:

1. Discuss the 2022-23 coordinator reports and AHA status report.
2. Receive and discuss any urgent program matters.

 = paper V = verbal P = presentation

PARTICIPANTS	
Bronwyn Hendry (AHA-Chair)	Jo Mollinger (Qld)
Madeleine Leyden (AHA-Record)	Emma Watkins (Tas.)
Mikhaila Nye (AHA)	Julia Sarandopoulos (Vic.)
Elias Christofi (AHA – AusPestCheck)	Diana Turpin (WA)
Sharon Roche (DAFF)	Keren Cox-Witton (WHA)
Guy Weerasinghe (NAQS)	Charley-Rose Ford (APL – <i>Industry Forum representative</i>)
Geoff Campbell (NSW)	Johann Schroder (SPA – <i>Industry Forum representative</i>)
Cindy Dudgeon (NT)	Alissa Hampton (SA-Proxy)
Greg Williamson (Qld)	

Apologies: Callain Howarth (SA), Andrew Breed (DAFF)

Welcome and introductions (B Hendry):

- The Chair welcomed participants to the meeting.
- The Chair noted that AHA is trialing a short, one-hour virtual meeting to receive updates from the past financial year as per agreement at the June 2023 NAHIP Advisory Committee meeting. AHA welcomes feedback from the Committee on this approach.
- The Chair proposed that the 2023-24 teleconference is planned to be held in October 2024 (rather than August) to allow the Committee members longer to prepare their reports following the end of the financial year.

1. 2022-23 update

1.1 2022-23 Coordinator Reports

NSW (G Campbell)

- Spoke about the report.
- The Committee accepted the report.

NT (C Dudgeon)

- Spoke about the report.
- Noted that *E. canis* has become widespread in dogs and that the NT is not receiving reports from private vets.
- There has been a decline in the number of private vets in the NT and a decline in the number of submissions to Berrimah laboratory.
- Research farms and biosecurity inspectors have been providing most of the samples to the laboratory.
- The Committee accepted the report.

Qld (G Williamson)

- Spoke about the report.
- Noted the upsurge in *E canis* cases. The first confirmed case of *E canis* in Brisbane was on 29/08/2023. A domestic pet dog contracted *E canis* in east Queensland after holidaying with its family in northern Australia. *E Canis* is not listed as a notifiable disease in Queensland although it is a nationally notifiable disease. Veterinarians are encouraged to test and to report. Qld provides free testing for *E canis* in clinically affected dogs and provides veterinarians with a diagnostic fact sheet.
- It was briefly discussed whether *E Canis* should remain on the national notifiable disease list.
- The Committee accepted the report.

SA (A Hampton)

- Spoke about the report.
- The Committee noted that discussions on the case definitions for flaviviruses was considered by AHC out of session earlier this year, but consensus was not reached.
- The Committee accepted the report.

Tas (E Watkins)

- Spoke about the report.
- Noted that Tasmania frequently relies on the National Significant Disease Investigation Program budget to support investigations.
- Noted that there has been an increase in equine neurology cases. Overall findings included poor welfare, with NNDIs excluded. Some neurological horse cases in Tasmania occurred at a similar time to the Victorian horse cases. It was concluded that there was no overlap between the Tasmanian and Victorian cases.
- There has been an increase in investigations for Japanese encephalitis virus, including exclusions conducted post-mortem, when brain tissue was available.
- The Committee accepted the report.

Vic (J Sarandopoulos)

- Spoke about the report.
- Noted that flaviviruses are often under reported in NAHIS as the database only captures positive or negative results, and doesn't allow for the complexities of flavivirus results, particularly in equine investigations which often result in inconclusive, possible, or probable results.
- Requested that the ACDP data check step for data upload be circulated three weeks before data is due, and includes a column with the sample collection date, if this date is available. Noted that there are differences between jurisdictions on whether the date the laboratory received the sample, or the date the sample was taken, is used as the primary date for the sample.
- The Committee accepted the report.

WA (Diana Turpin)

- Spoke about the report.
- The Committee accepted the report.

NAQS (G Weerasinghe)

- Spoke about the report.
- The Committee accepted the report.

WHA (K Cox-Witton)

- Spoke about the report.
- The Committee accepted the report.

Action/s

1. AHA to confirm with ACDP whether the date of sample collection as well as the date received at the laboratory can be included in the NNDI data crosscheck.

1.2 2022-23 Status Report (M Nye)

- M Nye spoke about the draft Status Report, noting that the financial figures were not available at the time the paper was circulated.
- Provided a verbal financial update. Total expenditure for 2022-23 was \$589,376, which was within budget (\$654,618). Under-expenditure was due to contractor costs being less than budgeted, with the AHIA Annual Report design and delivery processes streamlined.
- The Committee accepted the draft Status Report.

Action/s

2. AHA to circulate the updated Status Report and final Business Plan.

2. Other Business

2.1 Other Business

- The Committee noted the update on the AUSPestCheck® (APC) project and the status of the NAHIP data standards work. AHA confirmed that all changes to the data fields in the transition to APC are being documented.
- AHA raised that a jurisdiction had requested that the decision to not transition non-clinical NAHIP data be elevated to Animal Health Committee for consideration, and that AHA is preparing an AHC paper in response to this request.
- AHA confirmed that changes to data fields can be made in the future if required.
- The Committee supported that until an updated syndrome list is agreed to (and this will require input from SCAHLS) it will continue using the current syndrome list in the transition of data standards to APC.
- WA raised that their LIMS system is connected to the current syndrome list and would require changing if a new syndrome list is adopted.
- NAQS raised that they have scripted solutions for data extraction and offered to share these with other jurisdictions.
- Discussion on whether NAQS data inclusion in APC is within scope for the current development phase of APC. Further discussions on NAQS data inclusion within APC will occur out of session.
- The Committee noted that an overarching 'data sharing agreement' will be circulated to the jurisdictions in relation to data sharing in APC across the national animal health surveillance programs and the NAHIP data standards will be captured in a NAHIP Data Management and Use Policy under the overarching agreement.

Action/s

3. AHA to develop an AHC paper about the scope of NAHIP data to be collected under APC (i.e., whether only clinical NNDI or also some non-clinical from the other current NAHIP data sheets).
4. WA to talk to Qld, NSW and Tas about its LIMS system and its relation to the syndrome list.
5. Jurisdictions to approach NAQS about scripted solutions for data extractions if interested.
6. AHA/PHA and NAQS to hold further discussions on the inclusion of NAQS data within APC.

NAHIP ADVISORY COMMITTEE MEETING AUGUST 2023

ACTION REGISTER

#	ACTION	WHO	BY
1	Confirm with ACDP whether the date of sample collection as well as the date received at the laboratory can be included in the NNDI data crosscheck.	AHA	Completed
2	Circulate the updated Status Report and final Business Plan.	AHA	Completed
3	Develop an AHC paper about the scope of NAHIP data to be collected under APC (i.e., whether only clinical NNDI or also some non-clinical from the other current NAHIP data sheets).	AHA	October 2023
4	Discuss its LIMS system and its relation to the syndrome list to Qld, NSW and Tas	WA	December 2023
5	Approach NAQS about scripted solutions for data extractions, if interested.	Jurisdictions	December 2023
6	Hold further discussions on the inclusion of NAQS data within APC.	AHA/PHA & NAQS	December 2023