



17 March 2017

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Dear Douglas,

[WILDLIFE HEALTH AUSTRALIA \(WHA\) SUBMISSION: NATIONAL BIOSECURITY ENVIRONMENTAL RESPONSE AGREEMENT \(NEBRA\) FIVE YEAR REVIEW DISCUSSION PAPER](#)

Please find attached a submission to the NEBRA Five Year Review regarding feral animals, native wildlife and disease. We have structured our submission to provide feedback to the specific questions raised in the discussion paper. We also provide background information on Wildlife Health Australia (WHA).

The NEBRA makes a significant contribution to Australia's biosecurity arrangements and the writing group should be congratulated. However, recent experience with some wildlife health events has **identified gap areas** that require further consideration specifically for **wildlife disease events where an aetiology cannot be identified, the feasibility of eradication is uncertain, benefit-cost cannot be determined or risk assessment is protracted or not possible**. These are very common scenarios in wildlife health incidents, are likely to become more common, and without arrangements that account for them it is doubtful that the NEBRA will be able to be activated for wildlife disease events.

We have made a number of suggestions as to how some of the challenges associated with wildlife might be progressed and are happy to discuss our submission with you face to face should you feel it would assist the review.

Thank you for the opportunity to comment, and good luck with this important work.

Best Wishes,

Rupert Woods
CEO, WHA

WILDLIFE HEALTH AUSTRALIA (WHA) SUBMISSION: NATIONAL BIOSECURITY ENVIRONMENTAL RESPONSE AGREEMENT (NEBRA) FIVE YEAR REVIEW DISCUSSION PAPER

SUMMARY OF KEY COMMENTS AND SUGGESTIONS

- Wildlife can be either a reservoir of disease affecting domestic animals or people (or other wildlife) or impacted by disease themselves. These diseases pose a threat to Australia's natural environment, human health and future biosecurity. Failure to rapidly identify and respond to an incursion can also have flow-on effects upon Australia's trade and market access.
- Changing contact between people and animals is only likely to **exacerbate and increase** the concerns.
- The NEBRA makes a significant contribution to Australia's biosecurity arrangements. **However, recent experience with some wildlife health events has identified gap areas that require further consideration specifically for wildlife disease events where an aetiology cannot be identified, the feasibility of eradication is uncertain, benefit-cost cannot be determined or risk assessment is protracted or not possible.**
- These are very common scenarios in wildlife health incidents and without arrangements that account for them **it is doubtful that NEBRA will ever be activated for wildlife disease events in Australia.**
- **Ensuring that surveillance occurs and a diagnosis is made under the IGAB and allowing NBMCC and NBMG sufficient flexibility to commit their various agencies to contribute funds to the activities required to gather the necessary information to assist them make better decisions for wildlife responses should be considered.** The EADRA sets a precedent for this and could be used as a model.
- A challenge, however, remains with emerging diseases of wildlife that may be unable to be identified. Facility is needed to ensure that these special cases can be managed. **Language used as criteria for consideration of diseases for inclusion within the Aquatics List sets a precedent and could be modified for use as an initiating criterion:** "And any considered to be significant by all members of AHC". Inclusion of such a criterion would allow the flexibility needed to manage the wildlife exceptions, whilst maintaining a transparent and consistent approach.
- The wildlife area presents many challenges for the writing group. We suggest that they consider a **scenario based exercise, looking at recent emerging disease events in wildlife that preceded NEBRA, or are on the horizon, and the facility for NEBRA to have assisted in managing these outbreaks.** A scenario based around the recent Bellinger River turtle mortalities, why the NEBRA could not be activated and how it could be modified to accommodate this scenario could be included. This exercise would assist in better identifying, articulating and developing strategies within the document to address the gap areas for wildlife.

Q2 - Do you think the agreement is a suitable mechanism to respond to environmental biosecurity threats in the future (i.e. 10-20 years from now)?

The NEBRA is a great step forward for Australia and those involved in its production need to be congratulated. However, for wildlife, no.

In its current form NEBRA appears quite inflexible as it requires a lot of information before a decision about a response can be made. This includes technical feasibility analysis, cost:benefit analysis (BCA) and risk assessment (RA) (6.7). This is a problem for many (most) wildlife diseases because we know very little about wildlife diseases and these criteria may not be known or take a protracted period to determine. Any delay will potentially increase the likelihood of establishment, spread, impacts and costs.

The jurisdiction within which an event is recognised should be required to make the diagnosis, however there should also be provision to allow the NBMCC to recommend action and NBMG to commit their various agencies to contribute funds to the activities required to gather the necessary information to assist them during the first phase of the response i.e. the information gathering (for RA, BCA and to assess eradicability) plus the necessary delineation and containment whilst this information is being sought. The EADRA tackles this problem through clauses aimed at uncategorised emergency animal diseases (EADs) and could provide useful language:

10.3 Cost Sharing - Uncategorised EAD

(a) Where an Incident has been reported to the CCEAD and, prior to the categorisation of the EAD the NMG determines that an EADRP is to be undertaken, the Parties will engage in Cost Sharing as if it were a:

- (i) Category 1 EAD, in the case of a previously unknown disease; or
- (ii) Category 3 EAD, in the case of a previously known disease which had not previously been categorised unless NMG agrees that there are significant public health issues, in which case the disease will be treated as Category 1, until further determination by the NMG.

(b) If the NMG subsequently determines that a newly categorised EAD in respect of which there is an EADRP is an EAD of a category other than the category under which it has been treated pursuant to clause 10.3(a), the Parties will only make adjustments between them in respect of funds paid prior to the date of that final determination of category if agreed by the NMG.

These provisions are open to interpretation but allow the NMG to commit their various agencies to contribute funds for information gathering as well as providing an exit point or ability to transition to management. The NEBRA needs to be flexible enough that a response can be initiated, and then allow for a decision point (as with the EADRA) where the NBMG can agree to increase the limit for their various agencies, transition to management or terminate the response. Clause 6.7d3 gives scope to:

“approve a plan for one or more phases of a national biosecurity incident response prior to giving consideration to a plan to achieve eradication. A national biosecurity incident response plan may be approved for any phase, including the delineation of distribution and/or initial containment.”

For this approach to work, however, the NEBRA and the IGAB will need to support one another. The IGAB will need to ensure “adequate” surveillance and determination of a diagnosis, not just exclusion, and the NEBRA will need to ensure the facility for cost-sharing and the commitment of agencies to perform RA, BCA and initial containment and surveillance. Proposed changes to the IGAB to ensure the jurisdiction supports this work for the first four weeks are probably inadequate for wildlife, where in most cases reaching a diagnosis, determining eradicability, RA and BCA will take substantially longer.

A challenge remains with emerging diseases of wildlife that may be unable to be identified, and cases where eradication of the organism cannot occur without eradication of the host. Facility is needed to ensure that these special cases can be managed. A back-casting exercise, looking at recent emerging diseases in wildlife pre-NEBRA and how the NEBRA might have been applied would be a useful way of identifying and addressing these gap areas. A scenario based around the recent Bellinger River turtle mortalities, why the NEBRA could not be activated, and how the instrument could be modified to better assist in managing this scenario could be included. (See also our suggestions at Q10 regarding review of initiating factors – Below.)

Q3 - Do you think that the definitions used in the NEBRA are clear and appropriate?

- “Containment” is not defined.
- A process for activating “Transition to management” would improve the document. If this is included a definition will be required.

Q6 - How could an increased, but accountable, role for private beneficiaries and non-government stakeholders be incorporated into the NEBRA?

There may be an opportunity for an increased role for the wildlife community but it would be limited and need to be directed. Consultants could play a role in the initial part of a response by provision of technical advice, RA or BCA. If contracted, arrangements could be used to hold them accountable.

Universities have the potential to be involved but this is likely to be more along lines of surveillance and monitoring rather than response. Existing arrangements Wildlife Health Australia has with universities or their surveillance groups could be utilised to secure some pre-agreement as to their role but this is likely to be challenging given that most wildlife work is done pro bono. Holding these non-government stakeholders accountable would thus be difficult for wildlife.

Q7 - Do you think the NEBRA decision making framework is clear and appropriate? Are the outcomes of these processes reflective of the criteria on which they are based?

Regarding part 1 of the question: it is clear, but may not be appropriate, specifically around the area of cost sharing. The cost-sharing formula (7.2c) states that: “...only those jurisdictions affected by the pest or disease must contribute”. This seems an unusual approach to cost sharing for an instrument designed to tackle diseases of national significance. One would have thought that the approach used by the EADRA, where all states have a financial stake, would be a better model because environmental diseases do not recognise jurisdictional boundaries. A more EADRA-like approach to

cost-sharing would not only allow assistance to be given to the smaller states by other jurisdictions, but also enable other jurisdictions to contribute to decision-making, hopefully leading to a more considered and better outcome for the country.

Regarding part 2 of the question: for wildlife the outcomes are reflective of the criteria on which they are based. However, because the criteria do not account for the common scenarios seen, the outcomes are likely to be negative rather than positive.

Q8 - Do you think there should be an increased role of non-government stakeholders in the decision making process? If so, how do you think this might be achieved?

For decision making to improve, it will be important for non-government stakeholders to be consulted. However, this presents a challenge, with the main issue being who can be considered to be representative. Wildlife Health Australia and other peak bodies can bring an opinion for wildlife events, but this would probably best be done using the CCEAD-type model for seeking outside, expert opinion. If the culture for decision-making within NEBRA develops along similar lines to that of CCEAD (i.e. where the Committee/NBMCC looks for information wherever it can be found before it makes a decision), then formal inclusion will not be required. If, however, this cannot be guaranteed, then some language to indicate that they “should” be consulted needs to be included. A broad statement under: 6.8 “Involvement of the parties in NBMG decisions” could be considered e.g. 6.8(d) “NBMG should consider seeking the input of experts outside of government before a decision is finalised”. A similar clause could be included under 6.6 “NBMCC to prepare advice for NBMG” as clause 6.6(e). “Must” is probably a word better deployed for other environment areas when discrete, beneficiary groups can be better identified and will be dependent upon cost-sharing arrangements being in place. Cost-sharing in the wildlife space is likely to be challenging and problematic.

Q9 - Do you think the pre-response requirements of the NEBRA are clear and appropriate? Are they practical for smaller jurisdictions?

Yes, but for the smaller jurisdictions with all their pressures, it is unlikely to be practical unless additional resources (and preferably “new money”) can be found. Though they do a very good job with very few resources, the biosecurity area is already under pressure and has been for many years. The addition of environment will bring additional pressures that may be at least equal to, and probably greater than those for biosecurity. Without a significant injection of new money, it is doubtful that many of the jurisdictions will be able to satisfy the pre-response requirements.

Q10 - Could the guidelines and criteria for the technical requirements of initiating a response be made more clear and appropriate? If so, how?

The guidelines and criteria are very clear and logical. However, they simply do not reflect the reality of what happens on the ground, and the challenges faced for the majority of wildlife disease incidents (See Q2 – Above). In addition, wildlife are the most common source of emerging diseases and diseases with wildlife as part of their epidemiology may not be able to be diagnosed, RA and BCA may require protracted research or not be possible, and the feasibility for eradication be unknown or difficult to determine. There are also tensions between eradication of the organism and the host: stamping out may simply not be possible with an endangered species. As we recently saw with the Bellinger River turtles, national significance criteria may not be able to be applied because the species concerned is not listed, or listing may take a protracted period. For all these reasons, the

current criteria for initiating a response just don't fit for wildlife and if it remains in its current form, NEBRA may never be initiated for a wildlife disease event. With a small amount of tweaking these exceptions could be managed within the current framework, however it would require including flexibility for NBMCC to provide a recommendation, and NBMG to follow it to allow commitment of their agencies to support the necessary information gathering, initial delimitation and control as outlined in Q2 above.

The ultimate need is the ability to be able to act in the absence of information and better manage uncertainty. Facility is needed to ensure that the special cases that wildlife presents can be managed. Language used as criteria for consideration of diseases within the Aquatics List sets a precedent and could be modified for use as an initiating criterion: "And any considered to be significant by all members of AHC". Inclusion of such a criterion would allow the flexibility required, whilst maintaining a transparent and consistent approach. Back-casting, and scenario exercises may again assist.

Q11 - How could private beneficiaries and non-government stakeholders be engaged more effectively in response activities?

Government needs to run the response. With whom it engages is its decision, however there is value in being open to the possibility of engaging with non-government groups. Wildlife Health Australia is a member of the NCN and has assisted CCEAD in the past during responses with provision of information, risk assessment and identification and circulation of talking points to key stakeholder groups. Surveillance groups administered by Wildlife Health Australia could be mobilised to assist in delimiting surveillance activities if required by NBMCC. Wildlife Health Australia could assist in identifying other wildlife stakeholders that could contribute.

Q12 - Do you think existing information sharing networks are utilised effectively for NEBRA-related matters? If not, how do you think this might be addressed?

We have not been involved in a NEBRA response so cannot provide an assessment. As a general principle, the same networks utilised for any other response should be favoured. However, there may be far greater public interest in wildlife events, which may necessitate greater, or more frequent release of information. In addition, some of the stakeholder groups may not have representative bodies, or be connected into the usual communication networks. Recognition of this is important and a number of information sharing networks that target wildlife could assist with promulgation of information during wildlife responses (below).

Q13 - What untapped sources of information may be useful in preparing for and responding to environmental biosecurity emergencies?

There are several peak bodies involved with wildlife in Australia that could be tapped for information before or during a response including Wildlife Health Australia, the Centre for Invasive Species Solutions, the Zoo Aquarium Association, Wildlife Diseases Association Australasian Section and the Australasian Wildlife Management Society. Wildlife Health Australia could assist the Australian government and states and territories in many ways including linkage with these groups, provision of general and targeted wildlife health surveillance information, RA and development of response guidelines.

Q14 - Do you think that the sharing of training and resources among jurisdictions and non-government stakeholders would help to increase preparedness for environmental biosecurity threats? If so, how might this be achieved?

Yes, a response is a response. The structure is the same, but the technical content is different. Training for environment groups could be incorporated into current training programs run by government and the peak bodies. Sharing of technical content would be more difficult, could also be coordinated, but for the best outcome would require a dedicated resource for coordination.

Q15 - What role could the non-government sector play in preparing for environmental biosecurity incidents? How could their involvement be facilitated?

There are a number of areas where the non-government wildlife sector could contribute. These include RA, research to support policy development and response guidelines, education and outreach, and communication during an incident. Recent examples include preparedness activities for white-nose syndrome in bats and assistance to CCEAD with the response to pigeon paramyxovirus, both of which could be utilised as models for other diseases. The peak wildlife bodies could be approached to help.

Q16 - Do you think it is feasible to develop a list of Australia's priority environmental pests and diseases? If so, how might this be achieved?

For wildlife, yes. Public consultation and/or expert elicitation could identify diseases of concern in addition to those with wildlife as part of their epidemiology included on the national and state-lists. However, an important area of concern for wildlife are the new and emerging diseases, and those for which an aetiology cannot be determined. There would need to be facility to include these types of diseases in any list. Language used as criteria for consideration of diseases within the Aquatics List sets a precedent and could be utilised: "And any considered to be significant by all members of AHC". Inclusion of such a criterion would also allow precautionary principle to be applied, whilst maintaining a transparent and consistent approach. Whatever approach is adopted should be harmonised across the various instruments.

Q17 - Do you think current cost sharing arrangements under the NEBRA are appropriate and equitable?

Given that wildlife is largely a public good area it is appropriate that public money fund the response. However, cost sharing arrangements in the NEBRA seem to suggest that only the impacted jurisdiction will be involved (7.2c). It seems illogical to adopt this model for diseases whose management is in the national interest (see our comments under Q7 – above). If this is not the intent of the document, then this clause needs to be re-written such that it more accurately outlines what the arrangements will be.

Q18 - How might private beneficiaries be engaged in cost sharing arrangements?

Wildlife industries could be considered for cost sharing in future, as could levies on tourism, the hunting community and some other sectors. The current models we have (e.g. the EADRA) suggest, however, that should this occur the relevant funding source should be considered in decision making and arrangements be in place before any response is required.

Q19 - How important is it that the NEBRA is consistent with other biosecurity response deeds and agreements? Are there any particular inconsistencies that should be addressed? For example, do you think that transition to management provisions should be incorporated into the NEBRA?

They should be consistent where possible. The current inconsistencies seem to be in cost-sharing for the jurisdictions and inability to activate the initial part of the response to assist with information gathering, delimiting surveillance and control.

Transition to management provisions should be incorporated. However, to ensure an orderly transition, it will need to be recognised that for wildlife this may take a prolonged period, for example 12 months or more.

Overall, the greatest inconsistency, however, is the fact that the criteria for national significance can be clearly met for the majority of important wildlife diseases and yet because they may not be eradicable the NEBRA cannot be activated. To the person in the street this would seem illogical. If something is considered to be nationally significant it would seem reasonable that we would have arrangements in place to be able to do something about it. Public scrutiny is often very great for wildlife responses, NEBRA appears quiet on this, and more clarity is required around how this type of situation will be managed. To have to have every single wildlife response pushed to “Affected parties determine the appropriate response” (Schedule 1 Flow Chart) seems to defeat the purpose of having national arrangements. Back casting, and scenario-based planning would assist.

Q20 - Do you think the requirement for an ongoing NEBRA administrative group is practical?

Yes. This will become more important as NBC and the IGAB takes a greater interest in environmental biosecurity. There may be increased interest in harmonising approaches across the different areas and the experience of the group will become more and more important. It will be important to ensure that resourcing for this group keeps in step with any increase in its activities and scope.

Q21 - How efficient and appropriate are the NEBRA custodian processes? How might they be improved?

There are a number of options for where NEBRA might sit. However, the DAWR custodians are doing a good job in a new and difficult area, and there doesn't appear to be any other easy fit. Until we have a clear idea of how environmental issues will be tackled through IGAB and NBC's position on the deployment of other organisations such as AHA, PHA and WHA to assist, it is probably wise that oversight stay with DAWR.

ABOUT WILDLIFE HEALTH AUSTRALIA

Wildlife Health Australia (WHA) is the peak body for wildlife health in Australia and operates nationally. The head office is located in Sydney, NSW.

WHA activities focus on the increasing risk of emergency and emerging diseases that can spill over from wild animals and impact on Australia's trade, human health, biodiversity and tourism. We provide a framework that allows Australia to better identify, assess, articulate and manage these risks. We provide the framework for Australia's general wildlife health surveillance system.

Our mission is to develop strong partnerships in order to better manage the adverse effects of wildlife diseases on Australia's animal health industries, human health, biodiversity, trade and tourism.

WHA directly supports the Animal Health Committee (AHC), Animal Health Australia (AHA), the Animal Health Policy Branch and the Office of the Chief Veterinary Officer (OCVO) within the Australian Government Department of Agriculture and Water Resources (DAWR) and Australian governments in their efforts to better prepare and protect Australia against the adverse effects of wildlife diseases. It provides priorities in wildlife disease work, administers Australia's general wildlife disease surveillance system as well as facilitating and coordinating targeted projects. Wildlife health intelligence collected through the National Wildlife Health Information System (eWHIS: <http://www.wildlifehealthaustralia.com.au>) administered by WHA is provided to members of AHC and the Australian Government DAWR, and Departments of Health (DoH) and Environment and Energy (DoEE), on issues of potential national interest, potential emerging issues and significant disease outbreaks in wildlife. The information is provided in line with the agreed policy for data security. WHA supports the NAHIS by provision of quarterly reporting and the ACVO by hosting the OIE Wildlife Health Focal Point.

WHA is administered under good organisational governance principles. An elected management group, chaired by an appointment from DAWR, and including an AHC representative provides strategic direction and advice to a small team, which oversees the running of WHA. It is important to note that WHA involves almost every agency or organisation (both government and NGO) that has a stake or interest in animal and wildlife health issues in Australia. There are over 35 member organisations and more than 600 wildlife health professionals and others from around Australia and the rest of the world who have an interest in diseases with feral animals or wildlife as part of their ecology that may impact on Australia's trade, human health and biodiversity.

More information on WHA is available at: <http://www.wildlifehealthaustralia.com.au>.