

ANNEXES

ANNEX I

Structure and Contents of Contingency Plans

1. Legal, administrative and financial framework
 - (a) Reference to relevant Union and national legislation.
 - (b) Description of legal powers and supporting national legislation.
 - (c) Framework contracts proportionate to the needs identified through an assessment of different epidemic scenarios, including those involving widespread disease outbreaks, and must provide for predefined intervention timelines.
 - (d) Compensation schemes and procedures for compensation.
2. Management, Responsibilities and coordination:
 - (a) A defined chain of command at all administrative levels.
 - (b) Central regional and local disease control centers, operational expert groups, stakeholders and coordination protocols.
 - (c) Communication protocols and information channels
 - (d) Interagency and cross-border cooperation agreements.
3. Resources and infrastructure:
 - (e) With a clear description of how the procedures listed below will be fulfilled, for the following animal health emergency services:
 - i. culling, killing, cleaning, and disinfection.
 - ii. rendering and carcass disposal.
 - iii. supply of materials, equipment, and personnel for the management of diseases in wild animals.
 - (f) Including framework contracts in case those activities are not performed by public authorities but by private companies.
 - (g) Inventory of:
 - i. slaughtering and rendering facilities.
 - ii. processing plants for animal products and ABPs.
 - iii. official laboratories.
 - iv. sites for storing and or disposal of manure and carcasses of culled animals and other materials.
 - v. sites for storage plant material from affected farms.
 - vi. emergency logistical support, including transport, equipment and supplies.

- (h) List of establishments designated by the competent authority for the slaughtering of animals and processing of animal products and by-products.
- (i) Adequate stocks of biocides and equipment adapted to the different types of pathogens and scenarios, or framework contracts with private companies to supplement those materials.

4. Human resources

- (a) Contact lists including arrangements for coverage during absences, roles, responsibilities of veterinarians
- (b) Staff mobilisation plans and operational expert groups.
- (c) List of official and private veterinarians, draft agreement and procedure for their mobilisation.
- (d) Procedure for mobilisation of civil protection services at national and EU level.
- (e) Mechanisms for mobilisation of law and enforcement and the military.
- (f) List of public health officials and procedure for contacting them

Updated organigramme including contact details (phone numbers, email and organization) of the personnel in charge of all the relevant actions.

5. Training and Simulation Exercises

- (a) Program and the designated authority responsible for organisation of the simulation exercises at national, regional and local level
- (b) The contents and the designated authority responsible for the training programme referred to in Article 9 for all authorities and concerned stakeholders.

6. Communication and awareness:

- (a) Internal and external communication plans.
- (b) Public information tools, channels and stakeholder awareness campaigns.

7. Evaluation and feedback:

- (a) Procedure for after-action reviews and lessons learned including all concerned authorities and stakeholders.
- (b) Procedure to integrating evaluation results into future planning, training and updating of the contingency plan.

8. Cross-border coordination:

- (a) Arrangements for collaboration with neighbouring Member States and third countries, where appropriate.
- (b) Protocols for specific mechanisms for alert exchange.
- (c) Scenario-based planning for cross-border wildlife outbreaks.
- (d) Scenario-based planning for cross border health threats and pre-pandemic events.

9. Mechanisms to ensure sharing of information, best practices and interoperability of emergency plans.

10. Recovery:

- (a) Procedure for progressive lifting of disease control restriction measures after the outbreak.
- (b) Restocking of establishments.
- (c) Regaining disease-free status.

ANNEX II

Operational Activities per Implementation Phase

- (1) During the planning and preparedness phase, the competent authority shall at least:
 - (a) conduct risk assessments.
 - (b) develop, test and revise contingency plans and instruction manuals.
 - (c) train personnel involved in disease prevention and control measures.
 - (d) establish coordination mechanisms and communication procedures with other relevant authorities.
 - (e) ensure the availability of necessary resources.
 - (f) develop and implement communication strategies, awareness campaigns and information tools.
- (2) The alert phase shall include at least all actions in accordance with Articles 5 to 10 of Delegated Regulation (EU) 2020/687.
- (3) The emergency phase shall include at least all actions in accordance with Article 9(2), (3) and (4) of Delegated Regulation (EU) 2020/689 and include all the actions in accordance with Delegated Regulation (EU) 2020/687 and Delegated Regulation (EU) 2023/361.
- (4) The recovery phase shall consist of actions to restore normal operations and the disease-free status of the affected area. In this phase, the competent authority shall at least:
 - (a) Gradually lift control measures based on scientific and epidemiological evidence.
 - (b) Define restocking procedures, where relevant.
 - (c) Carry out post-outbreak surveillance including regaining of disease-free status as appropriate.
 - (d) Review and evaluate the outbreak response to improve future preparedness and response.
 - (e) Provide financial and technical support, where appropriate, to affected operators and other stakeholders.

ANNEX III
Roles of Disease control centres and Operational expert groups

1. The central disease control center shall:
 - (a) Coordinate and implement the disease control measures.
 - (a) Coordinate with neighbouring and other trade partners, and international organisations.
 - (b) Coordinate with other authorities, especially public health authorities, for zoonotic threats.
 - (c) Maintain regular and transparent communication with stakeholders and the public to ensure cooperation and compliance.
 - (d) Supervise post-outbreak recovery activities.
2. The regional disease control centre shall:
 - (a) Coordinate the regional response in cooperation with the national and local levels.
 - (b) Coordinate post-outbreak recovery at the regional level.
3. The local disease control centre shall:
 - (a) Implement local operational procedures based on the national contingency plans.
 - (b) Implement the local response in cooperation with the national and regional levels.
 - (c) Implement the post-outbreak recovery measures at local level in cooperation with the national and regional levels.
4. The operational expert groups shall include experts who have knowledge and expertise on the control and diagnostics of the specific disease, on the animal species concerned and the possible vectors of the disease, on terrestrial or aquatic kept animals and terrestrial wild animals.

ANNEX IV

Contents of Instruction Manuals for Category A Diseases:

1. Description of the disease including at least: description of disease agent, clinical aspects and diagnosis, epidemiology, pathogenesis, and resistance to biocidal products of the disease agent.
2. Notification procedures to notify the suspicion and the confirmation of the outbreak at national and international level.
3. Operational procedures: schemes and protocols with the description of the control measures to be taken by the competent authority and other operational partners in case of suspected or confirmed disease.
4. Instructions on types of samples and sampling procedures: (i) instructions on the animals to examine during the clinical examination, including at least which animals must be sampled and the minimum number of animals to be examined and sampled; (ii) instructions on the animals to be selected for laboratory testing, including at least the minimum number of animals to be sampled, the nature of the samples to collect and the sampling methods to be used; (iii) instructions on the selection of establishments to sample, including at least which establishments must be sampled and the minimum number of establishments to be included;
5. Procedure on how to carry out the epidemiological enquiry, including:
 - (a) template of checklist for the epidemiological enquiry
 - (b) list of relevant information and documents to be collected
 - (c) scheme for post outbreak surveillance for recovery phase.
6. Description on how the restricted zones will be established, implemented, including the options for geographical demarcation, including the use of administrative boundaries or other means for demarcation of the protection, surveillance, further restricted zones and infected zones in case of wild animals.
7. Tracing and epidemiological enquiries protocols for animals and animal products and other products at risk.
8. Procedures to ensure that culling and killing and safe disposal of carcasses are conducted in a manner that minimises the impact on animal and public health, animal welfare and the environment.
9. Procedures for cleaning and disinfection and waste management, including product types, active ingredients, concentration, application, user protection and biosecurity.
10. Vaccination strategy or vaccination plan relevant to the disease.
11. Procedure for restocking and regaining disease-free status.

ANNEX V

Types of simulation exercises

For the purpose of implementing simulation exercises under this Regulation, the following formats shall apply:

1. **Tabletop**

A tabletop exercise is a discussion-based activity. It shall:

- (a) Examine procedures, roles, responsibilities, and coordination mechanisms under a simulated outbreak scenario.
- (b) Identify gaps, weaknesses or inconsistencies in plans and procedures.
- (c) Facilitate awareness and understanding of the contingency plan among key personnel and enhance communication.

2. **Drill**

A drill is a focused, operational simulation conducted to test a specific technical or procedural aspect of the contingency plan and instruction manuals. It shall:

- (a) Involve the practical execution of one defined task or procedure.
- (b) Be limited in scope and not require activation of the broader contingency plan or command structure.

3. **Functional**

A functional exercise is a scenario-based simulation to test one or more functional components of the contingency plan and instruction manuals under time-constrained conditions. It shall:

- (a) Test operational coordination, communication flows, and decision-making processes among involved authorities.
- (b) Test procedures and information flow.
- (c) Involve activation of control centres but excluding physical field deployment

4. **Full-Scale**

A full-scale exercise is a comprehensive, real-time simulation involving the actual mobilisation and deployment of field personnel, equipment, and resources in response to a simulated outbreak. It shall:

- (a) Test the implementation of all relevant components of the contingency plan, including coordination, communication, logistics, biosecurity, and operational response.
- (b) Replicate the operational conditions of a real outbreak as closely as possible.

Include the activation of national, regional and local disease control centres, of the operational expert groups, concerned stakeholders and where appropriate, cross-border cooperation with other Member States or third countries