

## **Cattle Health Certification Standards (CHeCS)**

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### **Abstract**

Cattle Health Certification Standards (UK), abbreviated to CHeCS, is a self regulatory body for the Cattle Health Schemes in the British Isles. It is not itself a Cattle Health Scheme. This paper describes its formation, who owns it, what diseases it covers and its future aspirations.

Key words: CHeCS, Cattle, BVD, IBR, Lepto, Johnes

### **What is CHeCS?**

Cattle Health Certification Standards (UK), abbreviated to CHeCS, is the self-regulatory body for the nine Cattle Health Schemes currently operating in the British Isles. It is a non-trading organisation established by the British cattle industry for the control and eradication of non-statutory diseases by a set of standards to which all licensed Cattle Health Schemes must adhere.

These standards ensure that herd health status in one scheme is equivalent to that in all other schemes operating under the CHeCS umbrella in the UK. A further requirement has been that all the participating laboratories have also agreed to adhere to ISO 17025 for all the tests for each disease for which they have CHeCS accreditation with effect from December 2010.

Close collaboration by CHeCS with other European countries ensures that the licensed cattle health schemes are as good as any in the world.

### **The Governance**

CHeCS is owned by the British Cattle Veterinary Association (BCVA), Holstein UK, the National Beef Association (NBA) and the National Cattle Association (Dairy), the umbrella organisation for the dairy breed societies.

CHeCS received start-up funding from the Milk Development Council (now DairyCo) when it was established in late 1999 and the administration is kindly provided by the Royal Association of British Dairy Farmers (RABDF).

To ensure that CHeCS is operating to best practice and takes into account the latest available science a Technical Group comprising representatives from the CHeCS licensed cattle health schemes plus a number of recognised international experts on the diseases of interest, meet to review the Technical Document. This CHeCS Technical Document sets out the rules to which all schemes and their members must adhere in order to meet the CHeCS standards. These rules have been agreed and found to be acceptable to the cattle industry. The latest version of the Technical Document updated in August 2010 can be found at [www.cheecs.co.uk](http://www.cheecs.co.uk).

## **The Diseases Covered**

There are currently programmes for the monitoring, control and ultimate eradication of the four most important non-statutory diseases that are prevailing in both beef and dairy herds in the British Isles.

- Bovine Viral Diarrhoea (BVD)
- Infectious Bovine Rhinotracheitis (IBR)
- Leptospira Hardjo
- Johne's Disease

Other diseases that have been discussed and could in the future be included under the CHeCS umbrella include Neosporosis, Bovine TB, Digital Dermatitis and Salmonella Dublin.

Herd owners may test for any or all of the diseases at any one time. Where to start depends on a herds individual circumstances and a schedule should be developed in conjunction with the herd's veterinary surgeon.

The entry level to a cattle health scheme only requires routine monitoring (which in dairy herds is by milk testing). This will give a good assessment of the health status of the herd.

Once the health status for any of these diseases is known then a herd may progress through a programme of screening and eradication to eventual accreditation of disease free status. Two clear annual check tests for example for BVD leads to accreditation where there are two categories - accredited free and vaccinated monitored free which indicates a lower herd status than the accredited free category.

## **Herd Health Protection**

Many European countries have either eradicated or have embarked upon national control and eradication programmes for these four diseases. If the British Isles do not keep pace with these significant improvements herd owners will find themselves at a significant disadvantage. In the longer term, herd health will increasingly become a consumer-led issue which could prevent dairy or beef being sold from non-compliant farms.

CHeCS licensed cattle health schemes advise straightforward health measures specifically designed to protect the herd from re-infection. These are equally effective in keeping out other infectious diseases such as bovine TB, digital dermatitis or strep. agalactiae mastitis. CHeCS herd health planning is especially effective protecting the overall health, welfare and profitability of the herd.

Buying cattle mainly from herds that are known to be healthy has therefore never been more important. The advent in Scotland of the NFUS led Scottish Cattle Industry Group and the acceptance of a Cattle Health Declaration Certificate is a notable step forward to ensure that a potential purchaser can actually see what the health status of an animal can be. It is to be hoped that equal progress can be made in the rest of the British Isles but the pervasive influence of bovine TB makes any real progress difficult at present.

## **Financial Gain**

Defra estimate that BVD costs the cattle sector between £25-£61 million per year whilst Johnes Disease is estimated at £13 million per year. These are considerable and often under-estimated costs on the farm. However being able to demonstrate real financial benefit in controlling any of these diseases continues to be an issue. For example it is known that in just 10 years uncontrolled BVD in a 100 cow herd can cost at least £45000 and Johnes Disease more than £20,000 but these are relatively modest sums and other disease problems and other issues can make demonstrating real cost benefit very difficult. The advent of economic disease cost calculator models by the University of Reading sponsored

by Defra for both BVD and Johnes may be helpful here but as usual much depends upon the farm information provided.

It is therefore very encouraging to see the Scottish Governments intent for a National BVD eradication plan over the next five years combining both voluntary and compulsory phases. The elimination of PI animals from the chain is absolutely essential and the close involvement of auctioneers is a key element for success. Prosecutions can occur under the Sale of Goods Act but proof is needed and the adage caveat emptor (buyer beware) must be followed, which is why the Scottish Cattle Health Certificate is such a significant development. Private sales are however not covered by legislation.

### **CHeCS Schemes Update**

It has been heartening to see noticeable growth on a UK basis of cattle farmers joining such schemes often encouraged by the pedigree breed societies who clearly see the benefit for their registered animals. The involvement of NML Herdwise with their monitoring for Johnes via milk samples based on the Danish voluntary approach has given real encouragement for dairy farmers to get involved because up until then CHeCS had been very beef orientated from producers north of the Border. Not really surprising as it was Biobest, HI Health and SAC who had been instrumental in getting the accreditation body going in the early days.

It is hard to calculate the exact numbers participating in the seven CHeCS licensed cattle health schemes but it is probably between 6500-7000 herds who will be part of the process in one of the monitoring, control or eradication phases.

### **Lessons Learnt**

A few concluding remarks:

1. The development of CHeCS has taken about 10 years to really make progress. It takes far longer than is often imagined to bring about change. Farmer peer pressure has been hugely influential in the success of HI Health in the Highlands and Islands in Scotland whilst the success of the Welsh Black Cattle Society's Johnes Eradication Scheme has been largely due to having a vet as an administrator running the programme. In complete contrast the BVD regional control pilot in Norfolk/Suffolk was very successful at getting farmers engaged initially but the lack of a local focal point with the time to co-ordinate and follow up actions meant that any initial momentum could not be capitalised upon.
2. The advent and approach of CHeCS is a good example of the cattle industry working together but no-one should be under any illusion that these are quite complex diseases which means that clear and accurate interpretation of the results is crucial. This is why we insist that any scheme applying to join CHeCS has to have adequate and appropriate veterinary support.
3. The future growth of CHeCS will depend upon Governments views upon endemic disease and the influence of the major retailers. In the former instance it is clear that any support will be as a potential way of mitigating greenhouse gas emissions whilst with the latter it will be as a precautionary principle as far as the dairy sector is concerned whilst for pedigree beef producers it will be a further way of extracting added value from the food chain.
4. Scotland with their various initiatives show what is possible but unless and until there is real progress on bovine TB in England and Wales it is difficult to see real engagement from farmers in hot spot areas.