



Animal &
Plant Health
Agency

APHA Briefing Note 05/20

Outcome of the pilot to explore the use of Approved Tuberculin Testers (ATTs) in private veterinary businesses to carry out tuberculin skin testing of cattle in England.

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Purpose

To inform Official Veterinarians (OVs) that the pilot study set up to assess the use of ATTs in private veterinary businesses to carry out tuberculin skin testing of cattle in England has successfully concluded. A decision has been made to roll out the use of ATTs from late 2020 so that veterinary practices in England will have the opportunity to use ATTs subject to providing the specified requirements.

Background

ATTs have been used by APHA to carry out TB tests, in a limited way, since 2005. Responses to a public consultation on extending their use in 2018 were generally positive. Key issues raised were the need for robust veterinary supervision and quality assurance (QA) for ATTs. A pilot study has been run by APHA to ensure that these particular areas were rigorously examined.

The pilot study ran from 5 December 2018 to 1 February 2020 and evaluated the use of trained, non-veterinary paraprofessionals in private veterinary practices to TB skin test cattle in England.

A total of nineteen practices recruited ATTs for the pilot and a total of twenty two ATTs were recruited. The practices were located across four of the five VDP regions in England – Devon and Cornwall (8), Wessex (5), Midlands (1) and North (5).

The objectives of the pilot were to test the methods and procedures concerned with the use of ATTs by private veterinary businesses including registration, theoretical and practical training, supervision, authorisation, performance and QA. The pilot has been used to make improvements to procedures, and the outcomes have been used as evidence to inform the decision whether to introduce the use of ATTs on a larger scale in private veterinary practices.

Information

The pilot has been very successful. The majority of the delivery criteria were met and the few issues that arose were managed effectively. Close monitoring of the pilot confirmed that the level of veterinary supervision of ATTs during training, and subsequently once fully authorised, was very high.

Feedback collected during the pilot from several sources including the participating ATTs, veterinary practices, veterinary supervisors and farmers, was strongly in favour of extending the use of ATTs to private practices. For example, some farmers involved in the pilot praised the ATTs' communication and cattle handling skills along with their execution of the TB test itself.

Similarly, training assessor feedback indicates that ATTs attained a level of competency during training at least as good as that of newly qualified OVs. This includes the ability to communicate with farmers, handle cattle and the execution of the TB test itself. Detailed analysis revealed that ATT performance in detecting reactors, inconclusive reactors and reactions to the skin test has been at least as good as that demonstrated by OVs.

Positive feedback was received from ATTs on the quality of the training and veterinary supervision.

Participating practices worked with APHA to address the small number of issues that arose in a positive manner. Most issues were not ATT specific, but rather highlighted issues applicable to all TB testers, particularly new veterinary graduates (e.g. injury risk, farmer challenge against a test result and minor administration non-compliances). All issues were satisfactorily resolved and actions taken to prevent or minimise recurrence.

Following extensive review of the pilot APHA recommended that the use of ATTs is rolled out more widely across veterinary businesses in England subject to certain conditions. Those conditions are required to provide reassurance that the standards of QA and supervision of ATTs are maintained through ongoing monitoring and management by APHA. This recommendation has been approved and rollout will commence from late 2020.

Following the Pilot there are several new processes that need to be implemented before ATTs can be used more widely. In order to ensure a smooth transition for all and that APHA can continue to closely monitor ATTs, it is essential that all these processes are implemented and fully tested prior to the rollout. It is anticipated that this will be completed late this year.

All veterinary businesses in England will have the opportunity to employ ATTs subject to providing the requirements. ATTs will not be limited to working for veterinary practices carrying out TB testing for the VDPs. They will be permitted to carry out all skin test types with the exception of tests required for export purposes (including for semen export etc). ATTs will not need to be directly employed by the practice for which they are carrying out the testing, subcontracted or 'locum' ATTs will be permitted but all ATTs must work within a veterinary led team and meet the strict veterinary supervision requirements

The minimum eligibility criteria for an ATT are:

- Minimum age of 18 years.
- Identification and basic DBS security checks.
- either:
 - three GCSEs or equivalent qualifications in Mathematics, English and in a Science Subject or Food Production or
 - three years performance in a Government regulatory role e.g. Local Authority (LA) Inspector or Environmental Health Officer
- A minimum of six months previous livestock handling experience.
- A Conflict of Interest declaration required at enrolment.
- The Official Controls Qualification (Animal Health Paraprofessional) – Approved Tuberculin Tester (OCQ(AHP) - ATT) qualification must be gained before authorisation to carry out any TB testing will be granted.
- The theory training will be completed with an examination, which will need to be invigilated by a Member of the Royal College of Veterinary Surgeons (MRCVS).
- Conditional authorisation to test under supervision from for a maximum of six months will be granted following successful completion of the online course, examination and the confirmation of an Approved Veterinary Supervisor (AVS) and deputy/ies on the training record.
- An AVS must be nominated who must be an MRCVS with a current OCQ(V) - TT qualification. One AVS will be able to supervise a maximum of two ATTs, but only one of which can be in training at any time. A deputy AVS must also be nominated with the option for a second. The AVS will also be able to act as a deputy for other ATTs.
- The AVS will be required to confirm an understanding of their role and responsibilities as detailed on the training record and declare their own position including a successful audit within the last two years with no breaches. The AVS must accept responsibility and declare that they are supervising no more than the maximum permitted number of ATTs.
- Candidates will be required to test a minimum of 500 animals in at least ten herds under the direct and continuous supervision of an AVS. This must include some beef and some dairy type animals with no more than 100 animals in any one herd counting towards this total.
- Each candidate will be required to see a minimum of 80 skin reactions to the test and within that a certain number of different types of reaction - minimum 20 oedematous, 20 circumscribed. These can be observed on cattle in the tests that they carry out, that have been TB tested by another authorised officer, as long as the ATT has seen and recorded them or a combination of both. ATTs will be permitted to move to another participating practice under the supervision of another AVS if necessary to meet these requirements
- Whilst training, candidates will need to be under constant direct supervision, i.e. physical presence of AVS on farm whilst testing with no exceptions.

- Once the ATT is considered competent by the AVS and the minimum number of animals have been tested and reactions seen the ATT will be eligible for the practical assessment and may enrol for a formal practical assessment.
- A practical assessment will be carried out by an independent assessor using the APHA contracted training provider. Candidates will need to be assessed both on the injection day and reading day of the test (TT1 and TT2). Testing of a minimum of 30 cattle must be assessed.
- If the assessment is passed, full authorisation to test will be issued from APHA. Candidates will not be permitted to test alone until authorisation is received.
- The AVS must complete an on farm assessment of the testing of at least 20 animals at TT1 and TT2 between four and six months after the ATT's full authorisation is granted.
- A full on farm audit must be carried out for all ATTs in the first twelve months following full authorisation by the VDP, APHA or the training provider.
- Following the initial on farm audit the ATT must have an APHA, VDP or training provider audit at least once every two years. The ATT will have to provide evidence that at least thirty cattle have been tested in every two year interval.
- APHA will continue to report on the performance of ATTs (and OVs) in terms of numbers of reactors, IRs and reactions identified against that expected. This will enable audits to be targeted to any outliers.
- Revalidation of the OCQ(AHP) - ATT will be required:
 - Two years from the initial date of authorisation of the ATT
 - Thereafter every four years

Full details on the requirements and processes will be provided by the end of the Summer 2020.

APHA would like to encourage all OVs to share this information more widely with colleagues. Communications will also be sent through other channels.

Further Information

Consultation responses can be found at <https://www.gov.uk/government/consultations/bovine-tb-extending-the-use-of-approved-tuberculin-testers-atts-to-perform-skin-tests-on-cattle-in-england/outcome/summary-of-responses-and-government-response>

Details of the Pilot can currently be found at :

http://apha.defra.gov.uk/External_OV_Instructions/Approved_TB_Tester_Pilot_England/Updates/index.htm although these will be updated in due course now that the Pilot has ended.

A summary of the Pilot Report can be found at:

<http://apha.defra.gov.uk/documents/ov/final-summary-report.pdf>

Further information including Q&A can be found on the TB hub website at:

<https://tbhub.co.uk/tb-policy/england/approved-tuberculin-testers-in-england/>

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