Re. consultation on proposed closure of Inverness Veterinary Disease Surveillance Centre

Having reviewed the consultation document, the debate around the future of the Inverness DSC seems to focus entirely on the provision of diagnostic services. I completed my PhD on the future of farm animal veterinary practice in the UK in January 2015 and my findings suggest that the Scottish Veterinary Disease Surveillance Centres should have two additional and important functions:

1) A source of information, advice and support for private veterinary practices.

As livestock numbers decline, most farm animal veterinary services in Scotland are provided by mixed practices which spend a decreasing proportion of their time on farm work. This makes it more difficult for vets in practice to maintain their knowledge of farm animal diseases and pathology. As part of my PhD research, I carried out a series of case studies of veterinary practices. The Scottish practice that I included emphasised the importance of the local DSC for their business:

"SAC are like everybody else, under pressure, and I think they can be underutilised. I think I'd be really scared, that for farm practice in Scotland anyway, that if they get pushed further down in numbers and exposure, it's going to impact on us because we do use them a lot."

I do not believe that outsourcing diagnostic services to private practices is a satisfactory solution - the local DSCs provide a central point for the collection of information from veterinary practices and for dissemination of relevant information to practices. Private vets are the first line of an effective disease surveillance system, but it is not their primary function and support from their local DSC is essential.

2) Reserve veterinary capacity in the event of a disease outbreak.

The consultation in the wake of the 2001 foot and mouth disease outbreak highlighted a shortage of farm animal vets, and particularly those with relevant knowledge and experience, as a major issue in providing a timely and effective response to the epidemic. In the event of a major disease outbreak, the vets employed by the DSCs provide a valuable pool of highly trained and experienced farm animal vets with good knowledge of the local area and strong connections with farmers and veterinary practices. The majority of vets working in private practice now do little or no farm work. It seems unfair to all concerned to assume that they would be willing or able to respond effectively in the event of a disease crisis.

I appreciate that it is difficult to place an economic value on the two functions that I have described above. However, I believe that the closure of the Inverness DSC would be a false economy which could severely compromise Scotland's ability to support livestock production and to protect human and animal health. The word "underutilised" in the quote above is key - instead of reducing capacity, we must ensure that the DSCs are used to their full potential. I would suggest that the following areas should be priorities for the future:

1) strengthening existing links with private practices for effective collection and dissemination of animal health information

2) ensuring that the DSC vets are fully prepared to respond to animal health emergencies, and perhaps formalising this role further