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## CENTRAL FUND SUPPORT FOR COSTS ASSOCIATED WITH INFECTIOUS DISEASE OUTBREAKS

1. The Infectious Disease Central Fund is a jointly-funded function established to contribute towards the costs of diagnosis, monitoring and management of specific equine infectious diseases. The overarching aim is to help contain outbreaks of equine infectious disease in Great Britain in the interests of the health and welfare of the national herd and the economic implications of such an outbreak for the Thoroughbred industry. Specific objectives are to support (i) identification of index case(s) of diseases likely to have a major impact on the health and welfare of Thoroughbreds that the index case(s) may have mixed with and (ii) testing that is mandated by industry authorities aiming to identify potential disease spread amongst Thoroughbreds. To encourage testing in such circumstances, the Fund may assist with the associated expenses subject to the following protocol. This protocol applies only to localised outbreaks, not to national epidemics for which a different approach would be appropriate.

The contributors to the Fund are the Horserace Betting Levy Board (HBLB), Racehorse Owners and the Thoroughbred Breeders' Association (TBA). The level of assistance given under this protocol is necessarily limited by the resources available to those bodies.

The Fund is managed by the HBLB Equine Infectious Disease Surveillance Oversight Committee (EIDSOC).

This protocol has been endorsed by the HBLB, British Horseracing Authority (BHA), National Trainers Federation (NTF), Racehorse Owners Association (ROA) and TBA.

### **Limitations of the scope of this protocol.**

2. This protocol applies only to outbreaks of diseases which are included within the HBLB codes of practice (<https://codes.hblb.org.uk/>), with exceptions made for piroplasmosis and parasite resistance for which no Central Fund support is available currently. In outbreaks of Notifiable diseases which have triggered government-mandated disease testing, Central Fund support will not be available.

This protocol applies to premises licensed by the BHA (ie licensed racehorse trainers) and to Thoroughbred breeding studs.

Exceptionally, consideration may be given to cases involving other premises which pose a high risk to Thoroughbred racing. Any decisions will be at the discretion of the EIDSOC panel (see below).

Where outbreaks of other infectious disease affect the Thoroughbred industry, support from the Central Fund may be available and will be determined in consultation with all funders. This may extend to include investigations of emerging diseases or syndromes.

The Thoroughbred industry-funded Equine Infectious Disease Surveillance (EIDS) Team can advise if required (contact details below).



3. A claimant who is a racehorse trainer licensed by the BHA is required to adhere to all BHA Rules of Racing and General Instructions and is advised to follow the recommendations set out in the NTF Code of Practice for Infectious Diseases of Racehorses in Training. Failure to do so may jeopardise a claim. Trainers are referred to the Rules of Racing and should ensure that they fulfil their obligations to report infectious disease investigations to the BHA [contact details below].

Any other claimant should follow the recommendations in the HBLB International Codes of Practice. Failure to do so may jeopardise a claim.

Licensed trainers, and other potential claimants, are strongly advised to consider taking out business continuation insurance to cover costs, incurred in the course of a disease outbreak, that are outside the scope of this Central Fund support provision.

4. Claims for financial support will only be considered after the EIDS Team has confirmed that the trainer (or other claimant) and their veterinary advisors have provided all clinical information and laboratory results requested by EIDS. Claims must be supported by relevant invoices.

5. An application for support from the Central Fund can only be initiated by the claimant to HBLB using the claim form shown below. Claimants are strongly recommended to inform their representative bodies (for example the TBA or NTF) and also, in respect of BHA licence holders, the BHA.

In the event of a suspected case of an equine infectious disease:

- i) The Central Fund will consider re-imbursing the following cost categories:
  - Laboratory tests of swabs and/or blood samples from all horses in an affected yard (index case and all in-contacts) as advised by the EIDS Team
  - Collection of blood and/or nasopharyngeal swabs by a vet at a fixed maximum rate per horse sampling session (2026: £35 inc VAT subject to note iii below) regardless of whether one or both of bloods and swabs are collected. All consumables are expected to be included within the maximum fixed rate.
  - Collection of guttural pouch lavage (both pouches) with a single nasopharyngeal swab under sedation at a fixed maximum rate per horse (2026: £275 inc VAT subject to paragraph 10. below). All costs associated with endoscopy, sedation and consumables are expected to be included within the maximum fixed rate.
  - Postage/delivery of samples to a diagnostic laboratory
  - Repeat sampling and testing as appropriate and as advised by EIDS
  - Extraordinary staff costs associated only with the collection of laboratory samples and only where circumstances dictate sampling must be conducted outside the yard's normal working hours (staff costs related to care of horses are not eligible).
  - Post-mortem examination of horses which present with acute severe neurological signs in which infectious disease is strongly considered to be the most likely differential diagnosis, usually because more than one horse is involved, plus carcass transport costs supported by appropriate invoices from a transport company and/or fuel costs if a



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vehicle owned by the affected trainer is used. Ideally, additional samples (serology, whole blood in EDTA and heparin & nasopharyngeal swabs) should be submitted before euthanasia or accompany the carcase to the laboratory. The cost of post-mortem examination can be reclaimed regardless of whether the infectious disease is ultimately diagnosed or excluded, however, normally once infectious disease has been identified in an index case(s) on a premises, post-mortem examinations on subsequent cases will not be eligible for funding. NB this is separate from the TBA's post mortem subsidy, with screening, for EHV when mares experience pregnancy loss. Costs associated with transporting carcases for post-mortem examination can be reclaimed with receipts from a suitable provider to a maximum of £1,500.

ii) The Fund will not contribute towards:

- Treatment costs
- Extraordinary staff costs apart from those noted above
- Rental of alternative premises
- Cleaning of any premises
- Transport of equines from or back to home premises
- Compensation to owners
- Any other costs not listed in i) above.

### **Claims**

6. Claims should be made on the designated form (see below). The form, with supporting documentation, should be submitted by the claimant to HBLB [contact details below].

7. A panel comprising three nominees of the HBLB's Equine Infectious Disease Surveillance Oversight Committee (EIDSOC) will review claims and make recommendations for the approval of the co-funders of the Central Fund (HBLB, Racehorse Owners represented by the ROA and the TBA). Representation from claimants will be allowed. Should the claim concern a Thoroughbred stud, the panel will include a representative of the TBA.

8. Should a claim be denied, either wholly or in part, reasons for the decision will be given.

9. It is intended that determination of any application would be concluded not more than four weeks after receipt of the final claim in any one outbreak.

10. VAT: We would expect that all grants issued by HBLB would be outside the scope of VAT as the amounts granted are given freely and HBLB neither derives any benefit from the grant nor receives any services as part of the arrangement. However, if unsure whether VAT applies, we would recommend consulting a tax adviser.

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Contact details:

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