Conference for Food Protection – Committee Periodic Status Report

Template approved by the Executive Board May 2014

Committee Periodic Status Reports are considered DRAFT until reviewed and acknowledged by the Executive Board

Council Chairs are required to submit committee reports to the Executive Director at least 30 days prior to each Executive Board meeting (held in Spring and Fall of each year); please submit reports far enough in advance of this deadline to permit review by the Council Chair. Committee Periodic Status Reports are intended to update the Executive Board on the status of the committee and the progress toward fulfilling the charges approved by the Assembly of Delegates or assigned by the Executive Board.

COMMITTEE NAME:

2016 Interdisciplinary FBI Training

COUNCIL or EXECUTIVE BOARD ASSIGNMENT:

Council II

DATE OF REPORT:

July 2, 2015

SUBMITTED BY:

James Steele, Patricia Welch, Tim Mitchell

COMMITTEE MEMBER ROSTER:

- □ see attached roster for updated member listing and Executive Board approval
- ✓ committee membership has not changed; see attached

COMMITTEE CHARGE(s):

- Use the Crosswalk submitted in the 2012-2014 Committee report to identify current gaps in the training for Program Standard #5 as established by Council to Improve Foodborne Outbreak Response (CIFOR) and the Partnership for Food Protection as best practices for foodborne illness investigation.
- 2. Identify new training programs as they relate to the Crosswalk and Standard #5.
- 3. Work within the Conference process to post the Crosswalk document from the 2012-2014 Committee to the CFP Website.
- 4. Report back to the 2016 biennial meeting a revised Crosswalk document for foodborne illness investigation.

COMMITTEE'S REQUESTED ACTION FOR EXECUTIVE BOARD (If Applicable):

PROGRESS REPORT / COMMITTEE ACTIVITIES WITH ACTIVITY DATES:

1. Progress on Overall Committee Activities

The committee has been meeting regularly via conference call to work on charges. The first conference call was held on October 20, 2014. The following is a brief summary of this first meeting.

- Reviewed Part VII Committee Membership Expectations
- Pat gave a brief history of the committee and the crosswalk
- Tim sent the crosswalk and the charges out to the committee because some folks either did not receive or lost them
- Reviewed the charges to the committee
- Pat will look into setting up Food Shield for the group to work collaboratively on the crosswalk document

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- Janet will try to get a copy of the RRT training to share with the team
- All members asked to review the crosswalk and charges and come with recommendations for the next meeting
- Next meeting on 11/17/14 1:00 pm EST

The second conference call was held on 12/15/14. James Steele was not available due to a medical emergency. The following is a brief summary of the meeting.

- Pat reviewed Food Shield, sounds like everyone is getting registered. Some folks already have access.
- Matt Jenkins and Pat Welch, Roger, Jeff Agreed to examine for gaps. (Charge 1/Subcommittee 1)
- Tim will look at number 2 with Susan Algeo and Dan and Kris. (Charge 2/Subcommittee 2)
- The group will work with the conference to get the current crosswalk posted. (Charge 3)
- Next group meeting will be 2/17/15 at 12 CST. (Pat to set Up)
- Sub committees will meet before 2/17/15 #1 will be 1/13/15 and Number 2 will be 1/23/15.

The third conference call was held 3/3/2015.

- Reviewed the progress of the two subcommittees and determined that the subcommittees were on the right track.
- The subcommittees with continue to meet before the next full committee meeting scheduled for 5/21/15.

The full committee held a conference call on 6/11/15.

- Reviewed the progress of the two subcommittees and reviewed the standard 5 with the crosswalk document.
- The next full committee meeting is scheduled for August 20, 2015 at 12:00 noon CT.

2. Progress Addressing each Assigned Committee Charge

Two subcommittees were created to work on the charges. Workgroup 1 has been working on Charge 1 and Workgroup 2 has been working on Charge 2.

<u>Subcommittee working on Charge</u> 1 - Use the Crosswalk submitted in the 2012-2014 Committee report to identify current gaps in the training for Program Standard #5 as established by Council to Improve Foodborne Outbreak Response (CIFOR) and the Partnership for Food Protection as best practices for foodborne illness investigation.

The subcommittee is using the trainings in the Crosswalk document to see in there are gaps in (see attachment 2)

The subcommittee held calls on 4/23/15 and 5/5/15.

<u>Subcommittee working on Charge</u> 2 - Identify new training programs as they relate to the Crosswalk and Standard #5.

The subcommittee is looking at the following trainings:

NEHA course "I-FITT-RR" provides training in many of the identified crosswalk areas.

CDC e-learning course "Environmental Assessment of Foodborne Illness Outbreaks"

The IFPTI Foodborne Illness Investigations Part 1-6.

The subcommittee held conference calls on 4/23/15 and 6/3/15

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Present on conference call: Susan Algeo Jeff Belmont Matthew Jenkins Kris Markulin Tim Mitchell Roger Mozingo Dan Okenu Pat Welch

• Reviewed the progress of the two subcommittees and determined that the subcommittees were on the right track.

Workgroup 1 reported that they completed an assessment of the following programs:

- o RRT
- CIFOR
- o MFRPS
- o IAFP Procedures to Investigate Foodborne Illness
- NASDA version 4.0
- NEHA Epi-Ready

Workgroup 2 reported that they assessed the following new programs that were not in the original crosswalk document:

- NEHA I-FITT-RR
- o CDC Foodborne Illinois Outbreak Environmental Assessments

Further work to accomplish – Summary of recommendations

Discussed that the final committee report is due December 4, 2015 and that we needed to think about what are recommendations from the committee will be to CFP. We also need to decide whether our committee wishes to be reformed to continue its work to complete current/new charges for the 2016-2018 biennium <u>or</u> if it will have run its course and can be retired.

These will be discussed on our 8/20/15 call.

• The subcommittees with continue to meet before the next full committee meeting scheduled for 08/20/15.

STANDARD 5								
1. Investigative procedur	es. (RRT Page							
	1	T		T	-			
	RRT	CIFOR	MFRPS	IAFP Procedures To Investigate Foodborne Illness Sixth ed.	NASDA Version 4.0. August 2011	NEHA Epi- Ready. Foodborne Illness Response Strategies. June 2006	NEHA I-FITT-RR	CDC Foodborne Illness Outbreak Environmental Assessments
a. The program has written operating procedures for responding to and /or conducting investigations of foodborne illness and food-related injury*. The procedures clearly identify the roles, duties and responsibilities of program staff and how the program interacts with other relevant departments and agencies. The procedures may be contained in a single	II. A. Chapter 1	3.1	5.3	Page 3-4	IV, V, VI, IX, XII	Modules 1,2,3,4, 5,6	Module 1	

source document or in multiple documents.							
b. The program maintains contact lists for individuals, departments, and agencies that may be involved in the investigation of foodborne illness, food- related injury* or contamination of food.	II.B. Chapters 2&3.	3.6	5.3 c	Page3-4	III, V, VI	Module 1	
c. The program maintains a written operating procedure or a Memorandum of Understanding (MOU) with the appropriate epidemiological investigation program/department to conduct foodborne illness investigations and to report findings. The operating procedure or MOU clearly identifies the roles, duties and responsibilities of each party.	II.A. Chapter 1.	3.1	5.3 a	?	V, VI, IX, XIII	Module 1	

d. The program maintains logs or databases for all complaints or referral reports from other sources alleging food- related illness, food- related injury* or intentional food contamination. The final disposition for each complaint is recorded in the log or database and is filed in or linked to the establishment record for retrieval purposes.	II. E. Chapter 11	3.5	5.5	Page 2,3,4	V, VI, X	Module 1	Module 2	
e. Program procedures describe the disposition, action or follow-up and reporting required for each type of complaint or referral report. f. Program procedures require disposition, action or follow-up on	Chapter 9,10,11 & 13 Chapters 9, 10, 11 & 13	Chapter 4, 4.3, Chapter 5 Chapter 4,5	5.5	Page3-11	IX	Module 1, 6 Module 1	Module 2 Module 2	
each complaint or referral report alleging food-related illness or injury within 24 hours.	(pg.212?) Subsection D							

g. The program has established procedures and guidance for collecting information on the suspect food's preparation, storage or handling during on-site investigations of food- related illness, food- related injury*, or outbreak investigations.	Chapters 9,10, 11 & 13 Page 212? Subsection D	Chapter 4, 5	5.5	Pages 41- 45	VI	Module 3,5	Module 2	Lesson 5
h. Program procedures provide guidance for immediate notification of appropriate law enforcement agencies if at any time intentional food contamination is suspected.	Chapter 6, 10	3.1, 3.10, 6.3	5.5	Pages 99- 103	IV, VI, IX, XI	Modules 1,6	Module 8	
i. Program procedures provide guidance for the notification of appropriate state and/or federal agencies when a complaint involves a product that originated outside the agency's jurisdiction or has been shipped interstate.	Chapter 6, 10	3.1, 3.10, 7.3	5.3	Pages 6-7	IV, VI, IX, XII	Modules 1,6, Appendix 2	Module 2	Lesson 7

2. Reporting Procedures								
a. Possible contributing factors to the food- related illness, food- related injury* or intentional food contamination are identified in each on- site investigation report.	Chapters 9, 10, 11	5.2	5.3	Pages 34- 41	VI	Module 3,6	Module 3	Lesson 2
b. The program shares final reports of investigations with the state epidemiologist and reports of confirmed foodborne disease outbreaks* with CDC.	Chapter 3, 6, 13	4.2, 4.3, 4.4, 7.5, 9.1	5.5	Page 75	VI	Module 1,6 Appendix 6	Module 4	
3. Laboratory Support Doe	cumentation	r	T	L	ſ			
a. The program has a letter of understanding, written procedures, contract or MOU acknowledging, that a laboratory(s) is willing and able to provide analytical support to the jurisdiction's food program. The documentation describes the type of		4.2, 4.3, 4.4, 9.1,	5.5	?	VI			

biological, chemical, radiological contaminants or other food adulterants that can be identified by the laboratory. The laboratory support available includes the ability to conduct environmental sample analysis, food sample analysis and clinical sample analysis.						
b. The program maintains a list of alternative laboratory contacts from which assistance could be sought in the event that a food- related emergency exceeds the capability of the primary support lab(s) listed in paragraph 3.a. This list should also identify potential sources of laboratory support such as FDA, USDA, CDC, or environmental laboratories for specific analysis that cannot be performed by the	4.2, 4.3, 4.4, 9.1	5.5	?	VI		

jurisdiction's primary							
laboratory(s).							
4. Trace-back Procedures							
a.							
Program management	Chapter 9	5.2	5.3	?	V		Lesson 7
has an established							
procedure to address							
the trace-back of foods							
implicated in an illness,							
outbreak or intentional							
food contamination.							
The trace-back							
procedure provides for							
the coordinated							
involvement of all							
appropriate agencies							
and identifies a							
coordinator to guide the							
investigation. Trace-							
back reports are shared							
with all agencies							
involved and with CDC.							
5. Recalls							
a.							
Program management	Chapter 12	5.2	5.3	?	V, IX	Module 8	
has an established							
procedure to address							
the recall of foods							
implicated in an illness,							
outbreak or intentional							
food contamination.							
b.							
When the jurisdiction	Chapter 12	5.2		?	VI, IX	Module 8	
has the responsibility to							

request or monitor a								
product recall, written								
procedures equivalent								
to 21 CFR, Part 7 are								
followed.								
c.								
	Chanton 12	F 2			14			
Written policies and	Chapter 12	5.2		?	VI			
procedures exist for								
verifying the								
effectiveness of recall								
actions by firms								
(effectiveness checks)								
when requested by								
another agency.								
6. Media Management	I	Γ	1	T	T			
а.								
The program has a	Chapter 3,	3.6	5.5	Page 73	V, VI, XI,	Module 6	Module 8	
written policy or	6			and 105	XII	Appendix 2		
procedure that defines								
a protocol for providing								
information to the								
public regarding a								
foodborne illness								
outbreak or food safety								
emergency. The								
policy/procedure should								
address coordination								
and cooperation with								
other agencies involved								
in the investigation. A								
media person is								
designated in the								
protocol.								
7. Data Review and Analy	sis	L			I			

a.Chapter4.3,2&3At least once per year, the program conducts a review of the data in the complaint log or database and the foodborne illness and food-related injury* investigations to identify trends and possible contributing factors that are most likely to cause foodborne illnesses may suggest a need for further investigations and may suggest steps for illness prevention.Chapter 4.3, chapter 82&3b. b. the review is conducted with prevention in mindChapter 13, 144.3, chapter 81c. the review is conducted with prevention in mind13, 14Chapter 8
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The review is conducted Chapter 4.3,
with prevention in mind 13, 14 Chapter 8
and focuses on, but is
not limited to, the
following:
1)
Foodborne Disease
Outbreaks*, Suspect
Foodborne Outbreaks*
and Confirmed
Foodborne Disease
Outbreaks* in a single

				[]
establishment;				
2)				
Foodborne Disease				
Outbreaks*, Suspect				
Foodborne Outbreaks*				
and Confirmed Disease				
Outbreaks* in the same				
establishment type;				
3)				
Foodborne Disease				
Outbreaks*, Suspect				
Foodborne Outbreaks*				
and Confirmed				
Foodborne Disease				
Outbreaks* implicating				
the same food;				
4)				
Foodborne Disease				
outbreaks*, Suspect				
Foodborne Outbreaks*				
and Confirmed				
Foodborne Disease				
Outbreaks* associated				
with similar food				
preparation processes;				
5)				
Number of confirmed				
foodborne disease				
outbreaks*;				
6)				
Number of foodborne				
disease outbreaks* and				
suspect foodborne				
disease outbreaks*;				

7)					
Contributing factors					
most often identified;					
8)					
Number of complaints					
involving real and					
alleged threats of					
intentional food					
contamination; and					
9)					
Number of complaints					
involving the same					
agent and any					
complaints involving					
unusual agents when					
agents are identified.					
C.					
In the event that there	Chapter 8	?	?		
have been no food-	•				
related illness or food-					
related injury* outbreak					
investigations					
conducted during the					
twelve months prior to					
the data review and					
analysis, program					
management will plan					
and conduct a mock					
foodborne illness					
investigation to test					
program readiness. The					
mock investigation					
should simulate					
response to an actual					

confirmed foodborne				
disease outbreak* and				
include on-site				
inspection, sample				
collection and analysis.				
A mock investigation				
must be completed at				
least once per year				
when no foodborne				
disease outbreak*				
investigations occur.				