RESOLUTION: 25 APPROVED

SOURCE: COMMITTEE ON PUBLIC HEALTH AND RABIES

SUBJECT MATTER: IMPROVING THE RESPONSE TO FOOD-ASSOCIATED DISEASE OUTBREAKS

DATES: MINNEAPOLIS, MINNESOTA, OCTOBER 12-18, 2006

BACKGROUND INFORMATION:

The slow speed of response to foodborne outbreaks is commonly criticized. In reviewing after-action reports of these events, the need to facilitate communication and coordinate response efforts between agencies and entities has also been identified. Investigations are often hampered by the lack of expertise and resources when a single agency or person does the investigation resulting in critical factors being missed. Many of these issues can be corrected by developing multidisciplinary and interagency teams.

Developing interagency teams also makes the process more efficient by reducing the duplication of effort by various agencies. California has developed such a team, the California Food Emergency Response Team (CALFERT), which is doing an outstanding job. Development of these teams promotes the one medicine concept since these teams need to reach across many disciplines to be effective and efficient.

These teams would be invaluable in food defense events since they would already comply with the National Incident Management System (NIMS) which has been established by Homeland Security Presidential Directive (HSPD) 9. They would also fulfill roles in Emergency Support Functions (ESF) 8 and 11 of the National Response Plan (NRP).

RESOLUTION:

The United States Animal Health Association (USAHA) urges the United States Department of Agriculture (USDA), Food Safety and Inspection Service (FSIS), Animal and Plant Health Inspection Service (APHIS), the Department of Health and Human Services (DHHS), Food and Drug Administration (FDA), and the Center for Disease Control and Prevention (CDC) to work with their respective state counterparts to promote the development of multidisciplinary response teams for food-associated disease outbreaks in humans or animals at the federal, state, and local levels.

RESPONSE:
Experts from the Food and Drug Administration (FDA) are members of the California Food Emergency Response Team (CaIFERT), and that the Agency has been working directly, and very successfully, through CaIFERT to investigate recent foodborne outbreaks linked to California fresh produce. In addition, to improve outbreak response, the Centers for Disease Control and Prevention (CDC) recently funded the Council of State and Territorial Epidemiologists (CSTE) and the National Association of County and City Health Officials (NACCHO) to cochair the Council to Improve Foodborne Outbreak Response (CIFOR). CIFOR was created to help develop model programs and processes that will facilitate the investigation and control of foodborne disease outbreaks. CIFOR includes representatives from CSTE, NACCHO, CDC, FDA, the U.S. Department of Agriculture, the Association of State and Territorial Health Officials (ASTHO), National Environmental Health Association (NEHA), and the Association of Public Health Laboratories (APHL). CIFOR is sponsoring two projects aimed at improving outbreak response: 1) review and update of the 2001 MultiState Foodborne Outbreak Investigations: Guidelines for Improving Coordination and Communication and 2) development of performance indicators to assess completeness of outbreak-related records and surveillance functions and evaluate the timeliness of surveillance. More information on CIFOR can be found at

United States Department of Agriculture (USDA), Animal Plant Health Inspection Service (APHIS), Veterinary Services (VS)

APHIS will continue discussions with the Health and Human Services (HHS) and the Food Safety and Inspection Service (FSIS) on how to further strengthen collaborative communication and coordination response efforts at all levels. APHIS generally functions as a support agency to HHS and FSIS in human food borne outbreak investigations.

Currently, there are several ongoing food-borne outbreak response activities. These activities include the development of a series of updated guidelines to improve public health coordination and response to multi-jurisdictional outbreaks, and a proposal to develop a Memorandum of Understanding (MOU). This MOU would include FSIS, the Agricultural Research Service, APHIS, the Agricultural Marketing Service, HHS, the Food and Drug Administration (FDA), and the Centers for Disease Control and Prevention (CDC). The purpose of the MOU is to strengthen coordination and collaboration on food-borne disease outbreak investigations. Responsibilities within the draft MOU include the development of interdepartmental response teams and enhancing coordination and collaboration among local, State, and Federal officials.

At the Federal level, there are current activities to coordinate interagency food-borne outbreak responses. FSIS, APHIS, and FDA have physically stationed liaison officers at CDC, and CDC has physically stationed a liaison officer at FDA. Co-location of these individuals has enhanced communications and response among agencies on domestic and international animal and public health issues of mutual concern, including food-borne outbreaks.
Food Safety and Inspection Service (FSIS), Food and Drug Administration (FDA), Center for Disease Control and Prevention (CDC), and various State health departments regularly cooperate in investigating foodborne disease outbreaks. Each outbreak is unique, and cooperative efforts generally occur on a case-by-case basis. Multidisciplinary, multi-agency teams are often convened in response to outbreaks, and team members are selected based on the expertise needed for each given situation. The teams are in frequent contact and share information freely. Recent examples of extensive and effective collaboration among Federal and State partners are the 2006 investigations of large E. coli 0157:H7 outbreaks associated with fresh spinach and with Taco Bell restaurants.

United States Department of Agriculture (USDA), CDC, and FDA are currently exploring a number of platforms for enhanced collaboration in protecting public health in the prevention of and response to foodborne outbreaks. An important example of collaboration already in place among Federal, State, and local public health partners is the Council to Improve Foodborne Outbreak Response (CIFOR). CIFOR is co-chaired by the Council of State and Territorial Epidemiologists and the National Association of County and City Health Officials, and aims to develop guidelines, a resource and tool repository, and performance measures for response to enteric illness outbreaks. One of the expected outcomes is the development of coordinated systems to speed investigations and reduce further outbreaks of foodborne disease. FSIS/USDA, FDA, CDC, and various associations of public health professionals are all represented and actively involved in CIFOR. Federal, State, and local public health agencies also collaborate via OutbreakNet, a network designed to enhance communications, consultation, and information exchange regarding foodborne outbreaks.

Department of Health and Human Services (DHHS), Center for Disease Control and Prevention (CDC)

The CDC agrees with the spirit and intent of Resolution 25 urging CDC to work with our state counterparts to promote the development of multidisciplinary response teams for food-associated outbreaks. During the recent outbreak associated with bagged spinach, CDC supplied an environmental engineer to support the CALFERT field investigation teams. Each year, CDC holds an annual meeting of OutbreakNet, the foodborne disease epidemiologists from all the states, to review recent experience and identify ways to increase the effectiveness of investigations. CDC also currently supports NEHA’s Epi-Ready course multidisciplinary train in outbreak investigation targeted at state and local public health epidemiology, laboratory, and environmental health workers (http://www.neha.org/research/food_safety.html#train_schedule). Moreover, CDC provides funding to support the Council to Improve Foodborne Outbreak Response, a multidisciplinary group of federal, state, and local public health professionals engaged in outbreak response.