Document F6

Focus Area 6 Worksheet: Initial Steps

CIFOR Council to Improve Foodborne Outbreak Response

Detect • Investigate • Control • Prevent

Focus Area 6: Initial Steps

To help you understand what is included in this Focus Area, review the following goals and keys to success.

GOALS FOR INITIAL STEPS:

Agency/jurisdiction determines the likely occurrence of a foodborne outbreak based on case reports and characterizes the nature of the outbreak so that necessary resources can be mobilized and appropriate actions can be initiated.

KEYS TO SUCCESS FOR INITIAL STEPS:

"Keys to success" are activities, relationships, and resources that are believed to be critical to achieving success in a Focus Area. Determining whether an agency/jurisdiction has a particular key to success in place is somewhat subjective. Metrics, such as measures of time (e.g., rapidly, timely, and quickly), have not been defined. Your Workgroup should provide its own definitions for these terms, as is appropriate for your agency/jurisdiction, and use its best judgment in deciding whether a particular key to success is fully or partially in place.

Initial steps

- o Agency/jurisdiction has processes for the response to a possible outbreak, including who is to be notified and/or involved in the investigation and specific actions. Processes are written and easily accessible by staff.
- o Agency/jurisdiction has established criteria for determining the scale of the response to a possible foodborne outbreak based on the likely pathogen, number of cases, distribution of cases, hypothesized source, and agencies likely to be involved.
- o Staff can prioritize the response to a possible outbreak based on agency/jurisdiction criteria and know what outbreak circumstances require an immediate response, a more moderate response, or no response at all.
- o Staff have access to historical trends or other data to determine whether case counts exceed the expected number for a particular period and population.
- o Staff develop hypothesis(ses) about the source of an outbreak early in the investigation to guide investigation steps.

Requests for assistance

- o Local agencies notify state agencies as soon as an outbreak is suspected.
- o Agency/jurisdiction asks for help as soon as the need is recognized.

Making changes

- o Agency/jurisdiction conducts a debriefing among investigators following each outbreak response and refines outbreak response protocols based on lessons learned.
- o Agency/jurisdiction has performance indicators related to the initial steps of an outbreak investigation and routinely evaluates its performance in this Focus Area.

List the persons participating in the discussion of this Focus Area and list their affiliations.

1. DESCRIBE YOUR CURRENT ACTIVITIES AND PROCEDURES IN THIS FOCUS AREA.

Considering the keys to success on the previous page, describe your agency's/jurisdiction's current activities and procedures in this Focus Area. Refer to written protocols, if available, and materials related to ongoing efforts in capacity development or quality improvement (e.g., FDA Retail and Manufactured Food Regulatory Program Standards). As you list current activities and procedures related to this Focus Area, indicate those that might need work to improve your agency's/jurisdiction's response to foodborne disease outbreaks.

Activity/Procedure	Needs Improvement? ✓
	☐
	☐
	☐
	☐
	☐
	☐
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	☐
	☐
	☐

2. PRIORITIZE CIFOR RECOMMENDATIONS TO ADDRESS NEEDED IMPROVEMENTS.

Having identified activities and procedures in need of improvement, review the CIFOR recommendations related to this Focus Area (listed below). Rate the priority for implementing each recommendation based on its likely impact on foodborne outbreak response at your agency/jurisdiction and available resources. Use a scale of 1to 5 to rate each recommendation (1 = Low priority for implementation and 5 = High priority for implementation). If a recommendation is already in place in your agency/jurisdiction, check the appropriate box. If a recommendation is not relevant to your agency/jurisdiction, select N/A. **Refer to the hyperlinked section number following each recommendation to view the recommendation as it appears in the CIFOR Guidelines**.

	Already in place	Priority for Implementation or Improvement					
Initial steps		LOW				HIGH	
Determine whether reported illnesses are suggestive of an outbreak. Indicators include the following: • Multiple cases with a shared exposure and an incubation period and symptoms consistent with an illness resulting from the exposure or • Confirmed cases in excess of the expected number or • Demographic features or known exposures among cases suggestive of a common source. (5.2.1)	☐	1	2	3	4	5	N/A
Examine subsets of cases by using specific agent classifications (e.g., subtyping results) or certain time, place, or person characteristics to identify outbreaks among more common pathogens. (4.2.9.2)	☐	1	2	3	4	5	N/A
Alert the outbreak response team leader as soon as a potential outbreak is suspected. (5.2.2.1)	☐	1	2	3	4	5	N/A
To help assess the priority of investigating an outbreak and likely resources needed, review the descriptive features of the outbreak and relevant background information regarding the etiologic agent, establishment, or event. (5.2.2.1)	☐	1	2	3	4	5	N/A
Give highest priority to the investigation of outbreaks that • Are caused by a severe or life-threatening illness; • Affect populations at high risk for complications of the illness; • Affect a large number of persons; • Might be associated with a food-service establishment in which ill food workers are a continuing source of infection; • Might be associated with a commercially distributed food product that is still being consumed; • Might be associated with adulterated food. (5.2.2.2).	☐	1	2	3	4	5	N/A
When an investigation is deemed appropriate, assemble and brief the outbreak response team on the outbreak, team members, and their individual roles in the investigation. (5.2.2.3)	☐	1	2	3	4	5	N/A
If an agency/jurisdiction has decided to apply the incident command system (ICS) to its foodborne disease outbreak response, activate the ICS as early as possible in the response to an outbreak. (3.10.3)	☐	1	2	3	4	5	N/A

Initial steps (cont'd)	Already in place	Priority for Implementation or Improvement LOW HIGH
Consider indicators suggestive of a multijurisdictional outbreak* and respond accordingly. (7.1) (Table 7.2)	☐	1 2 3 4 5 N/A
Assess the availability of appropriate staff to conduct the investigation. (5.2.2.3)	☐	1 2 3 4 5 N/A
If sufficient staff with the needed skills are not available, request external assistance. (5.2.2.3) (See below.)	☐	1 2 3 4 5 N/A
Establish the goals and objectives for the investigation early in the investigation. (5.2.3)	☐	1 2 3 4 5 N/A
Generate hypotheses about the potential source of an outbreak during the earliest stages of the investigation and refine hypothesis as more information becomes available. (5.1.2.4)	☐	1 2 3 4 5 N/A
In the beginning of an investigation, base hypotheses on the potential source of the outbreak on the descriptive epidemiology of cases (i.e., time, place, and person characteristics of cases), the pathogen, and known exposures among cases. (5.1.2.4)	☐	1 2 3 4 5 N/A
Select, prioritize, and assign investigation activities to outbreak response team members based on hypotheses about the potential source. (5.2.4)	☐	1 2 3 4 5 N/A
For group illnesses associated with an event or establishment, obtain clinical specimens from members of the ill group for laboratory testing as soon as possible. (4.3.9.4)	☐	1 2 3 4 5 N/A
For group illnesses associated with an event or establishment, collect food samples from the event or establishment and store, but do not test them until implicated through epidemiologic or environmental investigations. (4.3.9.4)	☐	1 2 3 4 5 N/A
Interview patients associated with an outbreak as soon as possible because recall will be better closer to the time of the exposure and cases will be more motivated to share information with investigators closer to the time of their illness. (4.2.9.3.1)	☐	1 2 3 4 5 N/A

Additional ideas:

Requests for assistance		
Request assistance in the response to an outbreak as soon as the need is recognized. (3.9.1)	☐	1 2 3 4 5 N/A

*A multijurisdictional foodborne disease outbreak requires the resources of more than one local, state, territorial, tribal, or federal public health or food-regulatory agency to detect, investigate, or control.

	Already in place	Priority for Implementation or Improvement (LOW – HIGH)
Requests for assistance (cont'd)		
Request external assistance if the • Scale or complexity of outbreak seems likely to overwhelm agency resources; • Outbreak is known or suspected to affect multiple counties, states, or countries; • Investigation points to a commercially distributed product; • Nature of the outbreak or necessary response is beyond the experience of agency staff. (3.9.2)	☐	1 2 3 4 5 N/A
At the local level, call the State Epidemiologist (or surrogate) to request external assistance. (3.9.3)	☐	1 2 3 4 5 N/A
At the state level, call the most appropriate office at CDC or the CDC emergency response number to request external assistance. (3.9.3)	☐	1 2 3 4 5 N/A
If the suspected food falls under the jurisdiction of a food-regulatory agency, call that agency to request external assistance. (3.9.3)	☐	1 2 3 4 5 N/A
Share as much information about the outbreak as possible when requesting external assistance. (3.9.3)	☐	1 2 3 4 5 N/A

Additional ideas:

Communications		
Contact persons internal to and external to the agency that should be notified in the event of an outbreak, following agency/jurisdiction protocols. (3.6.2.2) (3.6.2.3)	☐	1 2 3 4 5 N/A
If the outbreak is suspected to be multijurisdictional, notify agencies that might need to participate in the investigation or might be affected by the outbreak immediately, including surrounding jurisdictions, state health department, and appropriate food-regulatory agency. (7.2) (7.4)	☐	1 2 3 4 5 N/A
If intentional contamination is suspected, notify law enforcement officials immediately. If the threat is deemed credible, activate the ICS. (3.10.3)	☐	1 2 3 4 5 N/A
Identify persons who will be responsible for communication on behalf of their organizational unit and for the outbreak response team. (3.6.2)	☐	1 2 3 4 5 N/A
Coordinate activities and set up good lines of communication between persons and agencies involved in the investigation. (5.1.2.3)	☐	1 2 3 4 5 N/A

Additional ideas:

3. MAKE PLANS TO IMPLEMENT SELECTED CIFOR RECOMMENDATIONS.

For each CIFOR recommendation selected in the previous step (or idea formulated by the Workgroup), identify who might take the lead in implementing the recommendation and the timeframe for implementation (e.g., a specific completion date or whether the change is likely to require short-, mid- or long-term efforts). If certain actions must precede others, make a note of this and adjust the timeframe. In addition, consider factors that might positively or negatively influence implementation of the recommendation and ways to incorporate the recommendation into your agency's/jurisdiction's standard operating procedures.

CIFOR recommendations or other ideas from previous step	Lead person	Timeframe for implementation	Notes (e.g., necessary antecedents, factors that might influence implementation, ways to incorporate the recommendation into standard operating procedures)

Date worksheet completed _____