BACKGROUND:
Foodborne Disease Burden in the U.S.
76,000,000 Foodborne illnesses annually
325,000 Hospitalizations
5000 Deaths

BACKGROUND:
Foodborne Illness Surveillance System
> 3000 Local HD's
> 50 State HD's
> 5 Federal Agency Potentials
BACKGROUND:

- Barriers exist in detection, reporting, investigation and documentation.

- National performance standards, guidelines and models needed.

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CIFOR

- Council to Improve Foodborne Outbreak Response (2006)

- Funded by CDC and recently by FDA

- Council Co-Chaired by CSTE/NACCHO

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CIFOR

Partners:

- AFDO
- APHL
- ASTHO
- CSTE
- NACCHO
- NEHA
- FDA/CFSAN
- USDA/FSIS
- CDC
CIFOR PURPOSE

• To improve foodborne surveillance, outbreak detection, investigation, control, reporting, and prevention of foodborne illnesses at the local, state and federal levels.

CIFOR FUNCTION

• Systems approach to identify and prioritize components needing improvement:
  Capacity/Resources
  Interagency Loop
  Standards
  Multijurisdictional
  Evaluation

CIFOR PROJECTS

• Resource Clearinghouse:
  Questionnaires
  Guidelines
  Protocols
  Training
  Educational Materials
  Databases
  Models
CIFOR PROJECTS
- Multijurisdictional Guidelines:
  Detection Coordination
  Investigation Roles
  Notification Reporting

CIFOR PROJECTS
- Performance Indicators:
  Various Agencies/Levels
  Self-Assessment

CIFOR Projects
- Investigation Guidelines:
  Multi-year Project
  Practical
  Broad Input
  Vetting/Feedback
CIFOR Guidelines: Chapters

1) Practical Guide
2) Fundamental Concepts
3) Planning/Preparation
4) Surveillance/Detection
5) Investigation
6) Control Measures
7) Multijurisdictional Outbreaks
8) Performance Indicators
9) Legal Issues

CIFOR: New Projects

- PFGE Cluster Definition and Assessment
- Increase Availability of Training (Epi-Ready) - NEHA Lead.
- Involve Industry
- National FBI Complaint System --- In conjunction with FDA. NEHA lead.
- Coordination with Industry

CIFOR WORKGROUPS

- Multijurisdictional Guidelines
- Marketing and Promotion
- Online Clearinghouse
- Performance Indicators
- CIFOR Overall Guidelines
- Training
- Complaint System
- Industry
- Epi/Lab integration
- Cluster identification
CIFOR OUTCOMES

• Improved surveillance, investigation and outbreak response
• Better delineation of multijurisdictional issues
• Development and dissemination of “best practices”
• Improved Coordination among players (lab, epi, EH)

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CIFOR OUTCOMES

• Performance indicators widely distributed
• Data sharing
• Improved training/education
• System advocate
• Sounding board

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Acknowledgements

- Larry Marcum, J.D., NEHA
- Tim Jones, M.D., Tennessee, CSTE
- Marc-Alain Widdowson, VETMB, CDC

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*Funded by CDC

CIFOR Draft Performance Indicators for Foodborne Disease Programs

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Presentation Outline

- Performance indicators purpose and intended use
- What the indicators are
- What the indicators are not
- Development of indicators
- Overview of indicators
- Questions and discussion

Performance Indicators: Purpose and Intended Use

- Purpose
  - Promote common understanding
  - Facilitate training
  - Support aggregation of data
- Intended use
  - For state and local public health agencies to evaluate the performance of their food programs

What the Indicators Are

- Measurable indicators of effective surveillance for enteric foodborne diseases and response to outbreaks of such disease
  - Specific indicators and sub-indicators to support overall food program objectives
  - Metrics to support standardized evaluation of indicators
What the Indicators Are Not

- Performance standards
  - Performance standards depend on indicators, but indicators themselves do not define expected level of performance
- Basis of comparison between programs
  - Aggregation of data across multiple programs will provide overview of foodborne disease programs in general, but not a ranking system

Development of Indicators

- Developed in parallel with overall Guidelines, then incorporated into the larger document
- Authored by Craig Hedberg and CIFOR Workgroup
- Reviewed by entire CIFOR and external review group
- Reviewed by Guidelines Workgroup
- Undergoing public review as part of the larger Guidelines

Overview of Draft Indicators

- Series of tables
- Indicators, sub-indicators and metrics
- Separate indicators for local and state agencies
  - Both levels have indicators for
    - Overall foodborne disease program
    - Communicable disease
    - Environmental health
    - Public health laboratory
Overview of Draft Indicators

- Roles and responsibilities of Foodborne Disease Surveillance and Control programs will vary by agency, according to local and state law.
- Individual agencies should select indicators and metrics that best reflect their activities, regardless of where they fall in the document's table structure.

Overall Foodborne Disease Program Objectives

- Form the basis of specific performance indicators
- Short, intermediate and long-term objectives
- Indicators, sub-indicators and metrics for each objective

Overall Foodborne Disease Program Short-Term Objectives

- Detect foodborne disease events of public health importance
- Respond to events in a timely manner
- Intervene when appropriate to prevent illness
Overall Foodborne Disease Program
Intermediate Objectives

- Determine etiology, vehicle and contributing factors of foodborne disease outbreaks
- Monitor trends to identify emerging foodborne disease and food safety problems
- Increase knowledge of foodborne disease causes and abatement strategies

Overall Foodborne Disease Program
Long-Term Objectives

- Prevent future outbreaks
- Reduce incidence of foodborne illness
- Increase health of the general population

Indicators for Overall Foodborne Disease Program
Short-term Objective

- Short Term Objective
  - Respond to events in a timely manner
- Indicator
  - Foodborne outbreaks investigated
- Sub-Indicators
  - Process -- Cases interviewed, stool samples obtained, controls interviewed, environmental health assessment conducted, food flow documented, food workers interviewed
Indicators for Overall Foodborne Disease Program
Short-term Objective, cont’d

- Metrics
  - % of investigations that had cases interviewed
  - % of investigations that had stool samples collected from at least one case
  - % of environmental investigations that included all key elements
  - % of foodborne outbreaks where a source was identified

LHD Example: Overall Foodborne Disease Surveillance Program

- Performance Indicator
  - Foodborne outbreaks investigated
- Sub-Indicator
  - Time from onset of symptoms to initiation of outbreak investigation
- Metric
  - Median number of days from onset of symptoms of the first/index case to outbreak investigation

LHD Example: Communicable Disease Program

- Performance Indicator
  - Foodborne outbreaks investigated
- Sub-Indicators
  - Cases interviewed
  - Stool samples obtained
- Metrics
  - % of investigations that had cases interviewed
  - % of investigations that had stool samples collected from at least one case
LHD Example: Environmental Health Program

- Performance Indicator
  - Foodborne outbreaks investigated
- Sub-Indicators
  - Environmental health assessment conducted
  - Food flow documented
  - Food workers interviewed
- Metrics
  - % of outbreaks with environmental assessments
  - % of assessments including a food flow
  - % of assessments including worker interviews

LHD Example: Public Health Laboratory

- Performance Indicator
  - Foodborne outbreaks investigated
- Sub-Indicators
  - Turn-around time from collection of stools samples to confirmed culture results
- Metrics
  - Median number of days from submitted stool samples to obtaining results

EDITS Benchmark Data

- Benchmark data included where available
  - % of cases with exposure history
  - % of cases with an onset date
  - % of cases with a report date
  - Median number of days between receipt of report to case interview
  - % of cases with isolates submitted to PHL
  - Median number of days between submission of specimen to subtyping results
Public Review Process

- Presentations at multiple meetings
- Entire draft on-line for review and comments-- www.cste.org/cifor/guidelines.asp
- Synopsis on-line for quick review of content
- Opportunity for organizations to host focus group meetings on the Guidelines

Finalizing the Guidelines

- Target Dates
  - October 15, 2008 -- Completing all public review
  - December 31, 2008 -- Incorporating public comment and revising draft
  - First Quarter, 2009 -- Final review and adoption by CIFOR
  - Second Quarter, 2009 -- Dissemination

Thank you!

Questions????

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