

Focus Area 2 Worksheet: Necessary Resources

FOCUS AREA 2: NECESSARY RESOURCES

Complete this worksheet if “Necessary Resources” is a high priority Focus Area for efforts to improve foodborne disease outbreak response in your agency/jurisdiction. (NOTE: The term “agency/jurisdiction” refers to the entity for which your workgroup is making decisions. See your completed “Document D: Preliminaries” worksheet for a definition.)

List the individuals participating in the discussion of this Focus Area (and their affiliations).

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

GOALS FOR NECESSARY RESOURCES:

Agency/jurisdiction has ready access to personnel, supplies, equipment, documents, and references necessary to initiate a rapid and effective outbreak response.

KEYS TO SUCCESS FOR NECESSARY RESOURCES:

“Keys to success” are activities, relationships, and resources that are 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.

Outbreak response team

- Agency/jurisdiction has access to staff with knowledge and experience in epidemiology, environmental health, laboratory science, health education, and communications to help in the response to an outbreak.
- Agency/jurisdiction has a designated outbreak response team with expertise in epidemiology, environmental health, and laboratory science.
- Outbreak response team members have been trained in the agency’s/jurisdiction’s outbreak response protocols and their individual and combined roles.
- Staff have access to and familiarity with standard documents used in an outbreak response including reporting forms, questionnaires, and disease-specific information sheets.

Surge capacity

- Available resources allow agency/jurisdiction to continue other necessary (core) functions during an outbreak response.
- Agency/jurisdiction anticipates gaps in resources and identifies sources to fill those gaps before an outbreak occurs (e.g., obtaining epidemiologic support from the state public health agency, identification of outside laboratories to provide support in large outbreaks).

Making changes

- Agency/jurisdiction conducts a debriefing among investigators following each outbreak response and refines outbreak response planning based on lessons learned.
- Agency/jurisdiction has performance indicators related to the resources necessary for successful outbreak response and routinely evaluates its performance in this Focus Area.

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 which could be changed to improve your agency's/jurisdiction's response to foodborne disease outbreaks.

Activity/Procedure	Needs Improvement? ✓
	<input type="checkbox"/>
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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 1 to 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 blue underlined section number following each recommendation to view the recommendation as it appears in the CIFOR Guidelines.**

	Already in place	Priority for Implementation or Improvement in Your Agency/Jurisdiction					
		LOW			HIGH		
<u>Outbreak response team</u>							
Determine the composition of the outbreak response team before an outbreak occurs. (3.2.1)	<input type="checkbox"/>	1	2	3	4	5	N/A
Use teams that include expertise in epidemiology, environmental health, laboratory science, and risk communication to respond to outbreaks. Members may come from different programs within an agency or different agencies. (3.2.2)	<input type="checkbox"/>	1	2	3	4	5	N/A
Establish a dedicated emergency response unit, if the population is large enough to justify the effort. (3.2.3.1)	<input type="checkbox"/>	1	2	3	4	5	N/A
Designate a team leader to help set and enforce investigation priorities, coordinate activities associated with the investigation, and communicate with agency decision makers and other agencies and organizations. (3.2.2.1)	<input type="checkbox"/>	1	2	3	4	5	N/A
Recruit additional team members with other areas of expertise depending on the unique characteristics of each outbreak. (3.2.2.6)	<input type="checkbox"/>	1	2	3	4	5	N/A
Ensure that members of the outbreak response team know each other. (3.6.2.2)	<input type="checkbox"/>	1	2	3	4	5	N/A
Ensure that all outbreak response team members have a common understanding that the primary goal for outbreak response is to implement control measures as quickly as possible to prevent illness. (3.2.3.4)	<input type="checkbox"/>	1	2	3	4	5	N/A
Pre-assign specific tasks to team members based on their knowledge and skills before an outbreak occurs. (3.2.1)	<input type="checkbox"/>	1	2	3	4	5	N/A
Ensure that the laws and legal authorities needed to support all relevant surveillance, detection, investigation, and control activities are in place as well as memoranda of agreement and other legal agreements for coordinated implementation of laws across jurisdictions and sectors. (3.8)	<input type="checkbox"/>	1	2	3	4	5	N/A
Ensure that team members (and other professional staff) understand the laws and legal authority needed to conduct an outbreak response and can demonstrate competence in applying those laws and legal authorities. (3.8) (9.0.2)	<input type="checkbox"/>	1	2	3	4	5	N/A

	Already in place	Priority for Implementation or Improvement in Your Agency/Jurisdiction					
		LOW			HIGH		
Outbreak response team (cont'd)							
Provide continuing education to members of the outbreak response team so they can maintain and improve their skills within their specialty. (3.2.3.4)	<input type="checkbox"/>	1	2	3	4	5	N/A
Train members of the outbreak response team in the agency's outbreak response protocol and the member's team role. (3.2.3.3)	<input type="checkbox"/>	1	2	3	4	5	N/A
Exercise outbreak response team members together to identify gaps in resources and likely problem areas, and ensure that each team member can perform his or her assigned role in outbreak response and understands the roles and responsibilities of other team members. (3.2.3.4)	<input type="checkbox"/>	1	2	3	4	5	N/A
Conduct regional training with multiple agencies, including table-top exercises. (3.2.3.4)	<input type="checkbox"/>	1	2	3	4	5	N/A
Identify opportunities to collaborate with representatives of the food industry in training exercises, to foster an understanding of what happens during an outbreak investigation and develop communication strategies that can help streamline actual outbreak investigations. (3.2.3.4)	<input type="checkbox"/>	1	2	3	4	5	N/A
Ensure that all team members regularly participate in outbreak investigation and control efforts, even if it means working with another jurisdiction because the team's home jurisdiction does not have many outbreaks. (3.2.3.4)	<input type="checkbox"/>	1	2	3	4	5	N/A
Identify support personnel available to make phone calls, answer incoming calls from concerned members of the public, enter data into a database, copy paperwork, and perform other administrative work to assist the outbreak response team. (3.3.2.1)	<input type="checkbox"/>	1	2	3	4	5	N/A
Have legal counsel available to prepare public health orders, review and recommend revisions in agency procedures and control measures, and address other legal issues. (3.3.2.2) (3.8)	<input type="checkbox"/>	1	2	3	4	5	N/A
Keep appropriate equipment (3.3.2.3) and supplies (3.3.2.4) ready for use by the outbreak response team at any time. Ensure that relevant field investigators have access to these kits and know where they are located. (3.2.3.3)	<input type="checkbox"/>	1	2	3	4	5	N/A
Review supplies regularly (at least twice a year and preferably quarterly) and replace missing or expired materials. (3.3.2.4)	<input type="checkbox"/>	1	2	3	4	5	N/A
Identify standardized outbreak-related forms (e.g., chain-of-custody forms, foodborne illness complaint worksheets, case report forms, laboratory test requisition forms, standard outbreak investigation questionnaires, and environmental health assessment forms) before an outbreak occurs. (3.3.2.5) (3.5.2.1) (5.1.2.5)	<input type="checkbox"/>	1	2	3	4	5	N/A
Train staff in the use of these standard forms to ensure proper completion by all members of the investigation team. (3.5.2.1) (5.1.2.5)	<input type="checkbox"/>	1	2	3	4	5	N/A

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	Already in place	Priority for Implementation or Improvement in Your Agency/Jurisdiction					
		LOW			HIGH		
Outbreak response team (cont'd)							
Determine how and what information from forms can be properly and efficiently shared within the investigation team. (3.5.2.1)	<input type="checkbox"/>	1	2	3	4	5	N/A
Obtain tools to analyze outbreak data (e.g., Epi Info, SAS) before an outbreak occurs. (3.5.2.2)	<input type="checkbox"/>	1	2	3	4	5	N/A
Ensure that staff are trained to use these tools. (3.5.2.2)	<input type="checkbox"/>	1	2	3	4	5	N/A
Ensure that appropriate electronic records management procedures are in place, including routine data backups, off-site redundant storage, and disaster recovery procedures. (3.5.2.2)	<input type="checkbox"/>	1	2	3	4	5	N/A
Determine storage capacity for laboratory samples collected during an outbreak before any outbreaks. (6.2.1.2)	<input type="checkbox"/>	1	2	3	4	5	N/A
Develop written guidance, in collaboration with public health or regulatory laboratorians, on sample collection and management. Guidance should cover samples that have been collected from food prepared for consumption or food that has been partially consumed, as well as samples from food for which regulatory action could readily be taken, such as unopened boxes of suspected food. (6.2.1.2)	<input type="checkbox"/>	1	2	3	4	5	N/A
Assemble a reference library with information about foodborne diseases, enteric illnesses, and control measures. Where possible include electronic resources that can be accessed during field investigations. (3.2.3.3)	<input type="checkbox"/>	1	2	3	4	5	N/A
Assemble a list of resource persons who have expertise in specific disease agents and investigation methodologies. (3.2.3.3)	<input type="checkbox"/>	1	2	3	4	5	N/A
Additional ideas:							
Surge capacity							
Identify individuals who can conduct interviews and provide other support to the outbreak response team during large-scale outbreaks (e.g., university or MPH students, STD investigators). (3.2.3.2)	<input type="checkbox"/>	1	2	3	4	5	N/A
Develop a contact list and protocol for contacting these individuals when needed, including after-hours contact information. (3.2.3.2)	<input type="checkbox"/>	1	2	3	4	5	N/A
Develop job description(s) for these individuals. (3.2.3.2)	<input type="checkbox"/>	1	2	3	4	5	N/A
Develop and provide training for these individuals including on-the-job training and training during outbreak investigations. (3.2.3.2)	<input type="checkbox"/>	1	2	3	4	5	N/A
Periodically involve non-foodborne disease staff in foodborne disease outbreak responses to help them to be better prepared for non-foodborne disease outbreak investigations and to augment foodborne disease response resources when needed. (3.2.3.4)	<input type="checkbox"/>	1	2	3	4	5	N/A

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	Already in place	Priority for Implementation or Improvement in Your Agency/Jurisdiction					
		LOW			HIGH		
Surge capacity (cont'd)							
Develop processes for requesting help from other agencies in the response to an outbreak. (3.9)	<input type="checkbox"/>	1	2	3	4	5	N/A
Ask for help in responding to an outbreak earlier rather than later – when the scale of the outbreak seems likely to overwhelm agency resources; when it is known or suspected to be multijurisdictional or to be associated with a commercially distributed product; or when the nature of the outbreak or response is beyond the experience of agency staff. (3.9.2)	<input type="checkbox"/>	1	2	3	4	5	N/A
Ensure that all key staff know the steps necessary in asking for help. (3.9.3)	<input type="checkbox"/>	1	2	3	4	5	N/A
When asking for help, be prepared to share as much information about the outbreak as possible including the setting of the outbreak, the population at risk, the suspected etiologic agent, the suspected source, and the agencies involved. (3.9.3)	<input type="checkbox"/>	1	2	3	4	5	N/A

Additional ideas:

Making changes

Conduct a debriefing among members of the outbreak response team and other investigators following each outbreak to identify lessons learned. (3.2.3.4)	<input type="checkbox"/>	1	2	3	4	5	N/A
Refine agency outbreak response preparation and planning (e.g., available resources) based on the lessons learned. (3.2.3.4)	<input type="checkbox"/>	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 will 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 could positively or negatively influence implementation of the recommendation and ways to incorporate the recommendation into your agency's/jurisdiction's standard operating procedures.

One person should be given responsibility for monitoring progress in implementing the above CIFOR recommendations. Follow-up should occur at specified checkpoints (e.g., 3, 6, 9, and 12 months after the start of the Toolkit process) and results should be shared with the entire workgroup.

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: _____

NEXT DATE FOR FOLLOW-UP ON PROGRESS: _____