Crosswalk - Requirements for Foodborne Illness Training Programs Based on Standard 5

Introduction:

The 2014 - 2016 Interdisciplinary Foodborne Illness Training Committee (IFITC) was charged with developing a Crosswalk that would identify areas where training programs could be compared to Standard 5 of the Voluntary National Retail Food Regulatory Program Standards. Using the FSMA 205 C (1) Phases of a Food Incident Response CIFOR/RRT/MFRPSNNRFRPS Crosswalk as a base, the Committee revised the Crosswalk to compare additional training programs that were identified. In addition to the training programs identified in the CIFOR/RRT/MFRPSNNRFRPS Crosswalk, the IFITC also reviewed:

1. National Environmental Health Association (NEHA) course "I-FITT-RR"
2. National Environmental Health Association (NEHA) Epi-Ready - Foodborne Illness Response Strategies, June

2006

The resulting Crosswalk now identified the content of all the training programs and indicated, using a table format, how these compared to Standard 5. This Crosswalk is called Crosswalk - Requirements for Foodborne Illness Training Programs Based on Standard 5.

The Committee also recognized that in the process of determining gaps the Crosswalk could now have an expanded purpose of (1) identifying available resources related to Foodborne Illness Training; (2) setting a content baseline for the development of Foodborne Illness Training Programs; (3) establishing some consistency for training programs as a whole. The Committee considered this a more powerful interpretation of the first Charge and as such did not include any references to best practices.

**Accepted by the Assembly of Delegates at the 2020 Biennial Meeting of the Conference for Food Protection on August 20, 2021.**

The Committee also agreed that this document will be useful to regulators, academics, and NGO's when new training programs are being considered especially as it would introduce consistency, a much-needed component in Foodborne Illness Training Programs.

In 2016-2018, the Program Standards Committee (PSC) was now charged with maintaining the document. The document was updated with current references for the training materials.

In 2018 - 2020, the PSC used this Crosswalk to identify essential education content of foodborne disease outbreak training programs and update the Crosswalk with additional information. Courses added to the document are CDC EHS e-Learning on Environmental Assessment of Foodborne Illness Outbreaks, FDA Food Related Emergency Exercise Bundle (FREE-BO, IS-305: Environmental Health Training in Emergency Response (EHTER) Awareness Level, NEHA Certified Foodborne Outbreak Investigator Credential (CFOI) and Integrated Food Safety Center of Excellence (CoE) Webinar Series.

The resulting Crosswalk now identifies the content of all the training programs as indicated, using a table format, comparing them to Standard 5. In the interest of saving space, identified "Tools" that did not have a correlating "Reference" to the Standard 5 element being evaluated were removed from the Standard 5 element listing.

Industry Related Sources

The PSC reached out to 50 industry food safety professionals to determine whether or not any companies had developed their own internal training system for investigating foodborne illnesses. We were unable to find any company that have developed their own comprehensive internal training system for investigating foodborne illnesses. There are a variety of documents from public resources, such as from state and federal agencies to teach the basics of investigations. For the most part, the PSC feels that industry needs to be knowledgeable enough to determine if the illness was related to the food that was served or sold and if there was a breakdown in safe food handling practices. Additionally, the industry needs to be as informed as the sanitarians or epidemiologists investigating the outbreak.

Acronyms Used:

**RRT:** Rapid Response Team

**CIFOR:** Council to Improve Foodborne Outbreak Response

**MFRPS:** Manufactured Food Regulatory Program Standards

**IAFP:** International Association of Food Protection

**NASDA:** National Association of State Departments of Agriculture - Food Emergency Response Plan Template [https://www.nasda.org/policy/issues/food-safety/emergency-management/food-emergency-response-plans](http://www.nasda.org/policy/issues/food-safety/emergency-management/food-emergency-response-plans) **NEHA Epi-Ready:** National Environmental Health Association

**NEHA 1-FITT-RR:** lndustry-Foodborne Illness Investigation Training and Recall Response

**CDC** - Center for Disease Control

**VNRFRPS:** Voluntary National Retail Food Regulatory Program Standards - Standard 5

**CDC EHS:** Centers for Disease Control Environmental Health Specialist

**NEHA (CFOI}:** National Environmental Health Association Certified Foodborne Outbreak Investigator credential \*NOTE: The CFOI procedures relate to policies that are part of the exam for purposes of obtaining the credential. Therefore, the applicability of the CFOI to Standard 5 is limited.

**IFSCOE:** Integrated Food Safety Center of Excellence

**CoE:** Center of Excellence

**EATS:** Environmental Assessments Training Series - EATS 102 is a training program designed to reinforce the lessons learned in EATS 101 by providing 4 additional scenarios. The training does reinforce how to perform an environmental investigation and the roles for different team members. It does not necessarily provide written guidelines for a program to incorporate into their procedures.

**EHTER:** Environmental Health Training in Emergency Response \*\*NOTE: EHTER is a face-to-face introductory course designed to provide an overview of potential environmental health topics and guidance that an EH professional may encounter in a disaster situation (primarily focused on natural disasters). It does not address foodborne illness.

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| STANDARD 5 - Voluntary National Retail Food Regulatory Program Standards |
| 1. Investigative procedures. |
| 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 otherrelevant departments and agencies. The procedures may be contained in a single source document or in multiple documents. |
| **Tool** | **Reference** |
| RRT | II. A. Chapter 1 |
| CIFOR | 3.1 |
| MFRPS | 5.3 |
| IAFP | Pages 3-4 |
| NASDA Version 4.0 August 2011 | 111, V, VI, VII, IX, X |
| NEHA Epi-Ready. Foodborne Illness Response Strategies. Edition 2012 | Modules 1, 2,3, 4,5, 6, 7 |
| **NEHA**I-FITT-RR | Module 1 Building a Partnership: Who and Why? |
| NEHA(CFOI) | \*Performing Environmental Assessment |
| IFSCOE | The CoE's are integral to quantitative analysis of foodborne illness investigation. TheCrosswalk does more than simply identify the content of the training content but makes it easy to access track and verify through certification. |
| EATS | Lessons 1-4. All four scenarios provide information on the roles and responsibilities of the investigation team in an outbreak. The material is presented in an e-learning formatted andparticipants are not provided with written guidelines for further use. |
| Food Related Emergency Exercise Bundle (FREE) | Information contained in the Resource, Lead planner and Facilitator's guidelines are provided depending on scenario. |
| 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. |
| **Tool** | **Reference** |
| RRT | 11.B.Chapters 2&3 |
| CIFOR | 3.6.2.1 |
| MFRPS | 5.3.1.2.6 |
| IAFP | Pages 3-4 |
| NASDA Version 4.0 August 2011 | Vl, XIV |

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| NEHA Epi-Ready. Foodborne Illness Response Strategies. Edition 2012 | Module 1 |
| NEHAI-FITT-RR | Module 1 Building a Partnership: Who and Why? |
| EATS | NEHA, in collaboration with CDC's Environmental Health Services Branch, the National Network of Public Health Institutes (NNPHI), EATS provides training on the role of environmental assessments in the broader context of outbreak investigations and the foodsafety system. |
| Food Related Emergency Exercise Bundle (FREE) | Several of the scenarios provide contact lists for appropriate contacts on federal level, websites where key information can be gathered. |
| 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 clearlyidentifies the roles, duties, and responsibilities of each party. |
| **Tool** | **Reference** |
| RRT | II.A.Chapter 1 |
| CIFOR | 3.1 |
| MFRPS | 5.3.1.1 |
| NASDA Version 4.0 August 2011 | V, VI, **IX, XIII** |
| NEHA I-FITT-RR | Module 1 Building a Partnership: Who and Why? Module 4 Epidemiologic Investigation |
| IFSCOE | The trainings are subject based. |
| Food Related Emergency Exercise Bundle (FREE) | The modules would help a jurisdiction to develop the MOUs with the appropriate program/department. |
| 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. |
| **Tool** | **Reference** |
| RRT | 11.E.Chapter 11 |
| CIFOR | 4.3.4.9 |
| MFRPS | 5.5 |
| IAFP | Page 2,3,4 Example logs: page 139-140 |
| NASDA Version 4.0 August 2011 |  |
| NEHA Epi-Ready. Foodborne Illness Response | Module 2 |

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| Strategies. Edition 2012 |  |
| NEHAI-FITT-RR | Module 2 How Do You Recognize a Foodborne Illness? |
| IFSCOE | Yes |
| EHTER |  |
| Food Related Emergency Exercise Bundle (FREE) | Similar logs or databases are used to facilitate discussion throughout several of the scenarios presented. |
| e. Program procedures describe the disposition, action or follow-up and reporting required for each type of complaint or referral report. |
| **Tool** | **Reference** |
| RRT | Chapter 9, 10, 11 & 13 |
| CIFOR | Chapter 4, 4.3, Chapter 5 |
| MFRPS | 5.5 |
| IAFP | Pages 3-11 |
| NASDA Version 4.0 August 2011 | Vl, IX |
| NEHA Epi-Ready.  Foodborne Illness Response Strategies, Edition 2012 | Module 2 |
| NEHAI-FITT-RR | Module 2 How Do You Recognize a Foodborne Illness? |
| IFSCOE | Yes, the methodologies are covered in the COE |
| Food Related Emergency Exercise Bundle (FREE) | Similar procedures are referenced throughout the scenarios |
| f. Program procedures require disposition, action or follow-up on each complaint or referral report alleging food-related illness or injury within 24 hours. |
| **Tool** | **Reference** |
| RRT | Chapters 9, 10, 11 & 13 (oa.212) Subsection D |
| CIFOR | Chapter 4,5 |
| MFRPS | 5.5 |
| NEHA(CFOI) | Detecting Outbreaks |
| 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. |
| **Tool** | **Reference** |
| RRT | Chapters 9,10, 11 & 13 (Page 212) Subsection D |
| CIFOR | Chapter 4, 5 |
| MFRPS | 5.5 |
| IAFP | Pages 41-45 |
| NEHA Epi- | Module 3, 5, 8 |

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| Ready. Foodborne Illness Response Strategies. Edition 2012 |  |
| NEHAI-FITT-RR | Module 3 Environmental Assessment Exercise |
| CDCFoodborne Illness Outbreak EnvironmentalAssessments | Lesson 4, 5 |
| NEHA (CFOI) | Performing Environmental Assessment |
| IFSCOE | Step 1: Detect a Possible Outbreak. Step 2: Define and Find CasesStep 3: Generate Hypotheses about Likely Sources Step 4: Test HypothesesStep 5: Solve Point of Contamination and Source of the Food Step 6: Control an OutbreakStep 7: Decide an Outbreak is Over |
| EATS | Lessons 1-4 provides guidance on what information to collect during on site evaluations. |
| Food Related Emergency Exercise Bundle (FREE) | The established procedures are referenced and explained throughout several of the scenarios. |
| h. Program procedures provide guidance for immediate notification of appropriate law enforcement agencies if at any time intentional food contamination is suspected. |
| **Tool** | **Reference** |
| RRT | Chapter 6, 10 |
| CIFOR | 3.1, 3.10, 6.3 |
| MFRPS | 5.5 |
| IAFP | Pages 99-103 |
| NASDA Version 4.0 August 2011 | V, VI, IX |
| NEHA Epi-Ready. Foodborne Illness Response Strategies. Edition 2012 | Module 7 |
| Food Related Emergency Exercise Bundle(FREE) | The established procedures are referenced and explained throughout several of the scenarios. |
| i. Program procedures provide guidance for the notification of appropriate state and/or federal agencies when a complaint involves a productthat originated outside the agency's jurisdiction or has been shipped interstate. |
| **Tool** | **Reference** |
| RRT | Chapter 6, 10 |
| CIFOR | 3.1,3.10,7.3 |
| MFRPS | 5.3.1.2.2 |

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| IAFP | Pages 6-7 |
| NASDA Version 4.0 August 2011 | IV, V, VI, IX, **XII,** XV |
| NEHA Epi-Ready. Foodborne Illness Response Strategies. Edition 2012 | Module 7 |
| CDCFoodborne Illness Outbreak EnvironmentalAssessments | Lesson 7 |
| NEHA(CFOI) | Detecting Outbreaks |
| IFSCOE | Colorado Integrated Food Safety Center of Excellence (CoE). The CoE's identify and develop model practices in foodborne disease surveillance and outbreak response. |
| Food Related Emergency Exercise Bundle (FREE) | The established procedures are referenced and explained throughout several of the scenarios. |
| 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. |
| **Tool** | **Reference** |
| RRT | Chapters 9, 10, 11 |
| CIFOR | 5.2 |
| MFRPS | 5.3 |
| IAFP | Pages 34-41 |
| NEHA Epi-Ready. Foodborne Illness Response Strategies. Edition 2012 | Modules 5, 8 |
| NEHAI-FITT-RR | Module 3 Environmental Assessment Exercise |
| CDCFoodborne Illness Outbreak EnvironmentalAssessments | Lesson 2 |
| NEHA(CFOI) | Reviewing investigation Findings |
| IFSCOE | An example: Evaluation of Nebraska Foodborne Illness and Outbreak Response Using the Council to Improve Foodborne Outbreak and Response (CIFOR) Proposed PerformanceMeasures 01/11/2017 |
| EATS | Lessons 1-4. The training focuses on understanding how the foodborne illness could have occurred and identifying the contribution factors. |
| Food Related Emergency Exercise Bundle (FREE) | Covered under several modules detailing the foodborne illness investigation. |
| b. The program shares final reports of investigations with the state epidemiologist and reports of confirmed foodborne disease outbreaks\* |

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| with CDC. |
| **Tool** | **Reference** |
| RRT | Chapters 3, 6, 13 |
| CIFOR | 4.2, 4.3, 4.4, 7.5, 9.1 |
| MFRPS | 5.5 |
| IAFP | Page 75 |
| NEHA Epi-Ready. Foodborne Illness Response Strategies. Edition 2012 | Module 8 |
| NEHAI-FITT-RR | Module 7 Final Report & Recovery |
| CDCFoodborne Illness Outbreak EnvironmentalAssessments | Lesson 8 |
| IFSCOE | Yes |
| EATS | Lessons 1-4. The training includes reporting on findings from the investigation |
| Food Related Emergency Exercise Bundle (FREE) | Sharing of final reports is outlined within the scenarios |
| 3. Laboratory Support Documentation |
| 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 biological, chemical, radiological contaminants or other food adulterants that can be identified by the laboratory. The laboratory support available includes the ability toconduct environmental sample analysis, food sample analysis, and clinical sample analysis. |
| **Tool** | **Reference** |
| CIFOR | 4.2, 4.3, 4.4, 9.1, |
| MFRPS | 5.3.3.4 |
| IAFP |  |
| NASDA Version 4.0 August 2011 | VI |
| NEHA Epi-Ready. Foodborne Illness Response Strategies. Edition 2012 | Modules 4 & 5 |
| NEHA1-FITT-RR | Module 5 Collecting Samples and Laboratory Testing |
| IFSCOE | Yes |
| Food Related Emergency Exercise Bundle (FREE) | Lab documentation procedures are shared during the scenarios. |
| b. The program maintains a list of alternative laboratory contacts from which assistance could be sought in the event that a food-related |

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| 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 jurisdiction's primary laboratory(s). |
| **Tool** | **Reference** |
| CIFOR | 4.2, 4.3,4.4, 9.1 |
| MFRPS | 5.5 |
| NASDA Version 4.0 August 2011 | VI |
| NEHA(CFOI) | Collecting Samples |
| IFSCOE | Yes |
| Food Related Emergency Exercise Bundle (FREE) | The scenarios presented in the modules address these issues. |
| 4. Trace-back Procedures |
| a. Program management 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 acoordinator to guide the investigation. Trace-back reports are shared with all agencies involved and with CDC. |
| **Tool** | **Reference** |
| RRT | Chapter 9 |
| CIFOR | 5.2 |
| MFRPS | 5.3.3.3 |
| IAFP | Forms J 1, 2 & 3 (pg. 154-154) |
| NASDA Version 4.0 August 2011 | VI, IX |
| NEHA Epi-Ready. Foodborne Illness Response Strategies. Edition 2012 | Module 5 |
| NEHAI-FITT-RR | Module 8 Food Recalls |
| CDCFoodborne Illness Outbreak EnvironmentalAssessments | Lesson 7 |
| NEHA (CFOI) | Conducting Product Tracing |
| IFSCOE | Yes |
| Food Related Emergency Exercise Bundle (FREE) | Lab documentation procedures are shared during the scenarios. |
| 5. Recalls |
| a. Program management has an established procedure to address the recall of foods implicated in an illness, outbreak, or intentional food contamination. |

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| **Tool** | **Reference** |
| RRT | Chapter 12 |
| CIFOR | 5.2.4.1.1 |
| MFRPS | 5.3.2.2 |
| NASDA Version 4.0 August 2011 | VI, IX |
| NEHA Epi-Ready. Foodborne Illness Response Strategies. Edition 2012 | Module 5 |
| NEHA1-FITT-RR | Module 8 Food Recalls |
| Food Related Emergency Exercise Bundle (FREE) | The scenarios presented in the modules address these issues. |
| b. When the jurisdiction has the responsibility to request or monitor a product recall, written procedures equivalent to 21 CFR, Part 7 are followed. |
| **Tool** | **Reference** |
| RRT | Chapter 12 |
| CIFOR | 5.2 |
| NASDA Version 4.0 August 2011 | VI, IX |
| NEHA1-FITT-RR | Module 8 Food Recalls |
| Food Related Emergency Exercise Bundle (FREE} | The scenarios presented in the modules address these issues. |
| c. Written policies and procedures exist for verifying the effectiveness of recall actions by firms (effectiveness checks) when requested by another agency. |
| **Tool** | **Reference** |
| **RRT** | Chapter 12 |
| **CIFOR** | **5.2** |
| **IAFP** |  |
| **NEHA**1-FITT-RR | Module 8 Food Recalls |
| **NEHA(CFOI)** | Conducting Product Testing |
| Food Related Emergency Exercise Bundle (FREE) | The scenarios presented in the modules address these issues. |
| 6. Media Management |
| a. The program has a written policy or 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. |

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| **Tool** | **Reference** |
| RRT | Chapters 3 & 6 |
| CIFOR | 3.6 |
| MFRPS | 5.3.4.2 |
| IAFP | Page 73 and 105 |
| NASDA Version 4.0 August 2011 | VI, **IX, XI** |
| NEHA Epi-Ready. Foodborne Illness Response Strategies. Edition 2012 | Module 8 |
| NEHAI-FITT-RR | Module 6 Control MeasuresModule 8 Food Recalls |
| NEHA (CFOI) | Preparing for Investigation Reviewing Investigation Findings |
| IFSCOE | Yes |
| Food Related Emergency Exercise Bundle (FREE) | The scenarios presented in the modules address these issues. |
| 7. Data Review and Analysis |
| a. At 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 illness or food-relatedinjury\*. These periodic reviews of foodborne illnesses may suggest a need for further investigations and may suggest steps for illness prevention. |
| **Tool** | **Reference** |
| RRT | Chapters 13 & 14 |
| CIFOR | 4.3, Chapter 8, 5.2.9 |
| IAFP | 2&3 |
| NASDA Version 4.0 August 2011 | XIV |
| NEHA Epi-Ready. Foodborne Illness Response Strategies. Edition 2012 | Module 2 |
| IFSCOE | Yes |
| Food Related Emergency Exercise Bundle (FREE) | The scenarios presented in the modules address these issues. |
| b. The review is conducted with prevention in mind 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;
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| 1. Foodborne Disease outbreaks\*, Suspect Foodborne Outbreaks\* and Confirmed Foodborne Disease Outbreaks\* associated with similar food preparation processes;
2. Number of confirmed foodborne disease outbreaks\*;
3. Number of foodborne disease outbreaks\* and suspect foodborne disease outbreaks\*;
4. Contributing factors most often identified;
5. Number of complaints involving real and alleged threats of intentional food contamination; and
6. A number of complaints involving the same agent and any complaints involving unusual agents when agents are identified.
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| **Tool** | **Reference** |
| RRT | Chapters 13 & 14 |
| CIFOR | 4.3, Chapter 8 |
| IFSCOE | Campylobacter Outbreak at a Colorado Correctional Facility A Foodborne Outbreak Investigation Case Studyr Available at the COE in Colorado |
| c. In the event that there 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 a 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. |
| **Tool** | **Reference** |
| RRT | Chapter 8 |
| IFSCOE | Mock scenarios are part of the investigative process |