

**Conference for Food Protection
2016 Issue Form**

Issue: 2016 II-016

Council Recommendation:	Accepted as Submitted _____	Accepted as Amended _____	No Action _____
Delegate Action:	Accepted _____	Rejected _____	

All information above the line is for conference use only.

Issue History:

This is a brand new Issue.

Title:

Report: Interdisciplinary Foodborne Illness Training Committee (IFITC)

Issue you would like the Conference to consider:

The 2014-2016 Interdisciplinary Foodborne Illness Training Committee (IFITC) seeks the Council's acknowledgement of its report.

Public Health Significance:

The Interdisciplinary Foodborne Illness Training Committee has been tasked with:

1. Use the Crosswalk submitted in the 2012-2014 Committee report to identify current gaps in the training for Program Standard #5 as established by Council to Improve Foodborne Outbreak Response (CIFOR) and the Partnership for Food Protection as best practices for foodborne illness investigation.
2. Identify new training programs as they relate to the Crosswalk and Standard 5.
3. Work within the Conference process to post the Crosswalk document from the 2012-2014 Committee to the CFP Website.
4. Report back to the 2016 biennial meeting a revised Crosswalk document for foodborne illness investigation.

The Committee believes that it has completed the assigned charges set by the Conference.

It is our belief that the need for foodborne illness training is important, and given that different jurisdictions do not use a consistent approach to foodborne illness investigations, the gathering and sharing of this information will make it possible for health agencies, universities, industry and other non-governmental organizations to determine if the training materials they are using matches the requirements of Standard 5.

The Committee does believe that improved training opportunities should increase awareness as well as promote the importance of Foodborne Illness Investigations.

Recommended Solution: The Conference recommends...:

1. Acknowledgement of the report of the Interdisciplinary Foodborne Illness Training Committee.
2. Thanking the Committee members for their work and dedication for completing the charges.

Submitter Information:

Name: James Steele
Organization: IFITC
Address: Walt Disney World PO Box 10,000
City/State/Zip: Lake Buena Vista, FL 32830
Telephone: 321-395-1665
E-mail: james.steele@disney.com

Content Documents:

- "Report: Interdisciplinary Foodborne Illness Training Committee (IFITC)"
- "Crosswalk - Requirements For Foodborne Illness Training Programs"
- "CFP Committee Roster Interdisciplinary FBI Training Committee 11302015"

Supporting Attachments:

- "Minutes - 2016 Interdisciplinary Foodborne Illness Training Committee"

It is the policy of the Conference for Food Protection to not accept Issues that would endorse a brand name or a commercial proprietary process.

Conference for Food Protection – Committee FINAL Report

Template approved:
08/14/2013

Committee Final Reports are considered DRAFT until deliberated and acknowledged by the assigned Council at the Biennial Meeting

COMMITTEE NAME: Interdisciplinary Foodborne Illness Training (IFITC)

COUNCIL or EXECUTIVE BOARD ASSIGNMENT: Council II

DATE OF REPORT: December 3, 2015 (revised 1-11-16)

SUBMITTED BY: Committee Co-Chairs James Steele and Patricia Welch
Vice-Chair – Tim Mitchell

COMMITTEE CHARGE(s):

1. Use the Crosswalk submitted in the 2012-2014 Committee report to identify current gaps in the training for Program Standard 5 as established by Council to Improve Foodborne Outbreak Response (CIFOR) and the Partnership for Food Protection as best practices for foodborne illness investigation.
2. Identify new training programs as they relate to the Crosswalk and Standard 5.
3. Work within the Conference process to post the Crosswalk document from the 2012-2014 Committee to the CFP Website.
4. Report back to the 2016 biennial meeting a revised Crosswalk document for foodborne illness investigation.

COMMITTEE ACTIVITIES AND RECOMMENDATIONS:

1. Progress on Overall Committee Activities:
 - a. Committee meetings: The committee met regularly via conference call to work on charges. The first conference call was held on October 20, 2014. During the initial meetings, time was allocated to introduce new members to the historical perspective of the committee and to review committee membership expectations. All members were asked to review the existing Crosswalk and committee charges and come with recommendations for the next meeting. The second conference call was held on 12/15/14. The committee decided to have two subcommittees to work on the charges. Subcommittee 1 worked on Charge 1 to identify current gaps in training for Standard 5. Subcommittee 2 worked on Charge 2 to identify new training programs as they relate to the Crosswalk and

Standard 5. The full committee held a conference call on 6/11/15 to identify progress being made by the subcommittees. A final conference call and email voting was taken in November 2015 on recommendations to CFP and on dissolving this committee.

b. Progress Addressing each Assigned Committee Charge

i. Charge 1 - Use the Crosswalk submitted in the 2012-2014 Committee report to identify current gaps in the training for Program Standard 5 as established by Council to Improve Foodborne Outbreak Response (CIFOR) and the Partnership for Food Protection as best practices for foodborne illness investigation.

1. The committee reviewed the Voluntary National Retail Food Regulatory Program Standard 5 and created a Crosswalk document with the training programs submitted in the 2012-2014 Committee report. This was to identify any gaps or requirements in the training programs as it relates to Standard 5.
2. The Committee also amended the Crosswalk with additional training programs that were identified by our subcommittee that was working on Charge 2.
3. 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. As a result, the Crosswalk was titled Crosswalk –Requirements For Foodborne Illness Training Programs Based on Standard 5
4. The Committee did discuss the best practices aspect of Charge #1 but recognized, as it did in point #3, that a better and more powerful interpretation of the Charge is for the Crosswalk to be used as a resource as well as a document that would guide an agency to include the appropriate sections/content when developing a training program.

ii. Charge 2 - Identify new training programs as they relate to the Crosswalk and Standard 5 of the Voluntary National Retail Food Regulatory Program Standards.

1. The following training programs were in the 2012-2014 Committee report:
 - a. Food and Drug Administration (FDA) Office of Partnerships (OP) Rapid Response Team (RRT) Program Chapter 5. Food Emergency Response Plan
 - b. Council to Improve Foodborne Outbreak Response (CIFOR)

- c. FDA - Manufactured Food Regulatory Program Standard No. 5 Food-related Illness and Outbreaks and Response
 - d. CDC e-learning course “Environmental Assessment of Foodborne Illness Outbreaks”.
 - e. National Association State Departments of Agriculture (NASDA), Version 4.0, August 2011
 - f. International Association for Food Protection (IAFP), “Procedures to Investigate Foodborne Illness”, Sixth Edition
2. The following trainings programs were identified by the 2014-2016 committee to review:
 - a. National Environmental Health Association (NEHA) course “I-FITT-RR” provides training in many of the identified crosswalk areas. This program is the Industry-Foodborne Illness Investigation Training and Recall Response
 - b. National Environmental Health Association (NEHA) Epi-Ready – Foodborne Illness Response Strategies, June 2006

iii. Charge 3 - Work within the Conference process to post the Crosswalk document from the 2012-2014 Committee to the CFP Website.

1. The committee sent the Crosswalk document to CFP, Executive Assistant to be posted on the CFP website in October 2014.
2. A short description was requested on what the Crosswalk is or represents and this was submitted in October 2014. The CIFOR/RRT/MFRPS/VRFRPS Crosswalk is a document that combines the Core Components required for the implementation of a Foodborne Disease response with the Phases of a Food Incident Response. By combining these, the baseline is set for the development of Foodborne Illness training programs be it in an academic, agency or private industry setting. As we know, unless there is proper collaboration, precise and accurate communication, and use of policies and procedures that are consistent between groups, there could be a response that is muddled at best. By using the Crosswalk, training requirements can be identified that would be used to create robust foodborne illness training programs with similar content.

iv. Charge 4 - Report back to the 2016 biennial meeting a revised Crosswalk document for foodborne Illness investigation.

1. The committee developed a document: Crosswalk – Requirements For Foodborne Illness Training Programs Based on Standard 5. This document will be useful when determining which part of Standard 5 is

covered by the programs reviewed and potentially where future training needs to be developed.

2. The committee recommends this revised Crosswalk document be posted on the CFP website.

2. Recommendations for consideration by Council:

- a. The Interdisciplinary Foodborne Illness Training Committee recommends that the Crosswalk – Identified Gaps in Foodborne Illness Training Programs Based on Standard 5 created by the committee be posted on the CFP website in Word and PDF formats and that the committee be dissolved as it has completed the charges from the 2014 CFP Biennial Meeting.
- b. The Interdisciplinary Foodborne Illness Training Committee also recognizes the importance of training on foodborne illness and recommends that Council II consider that any future work on training resources, including updating the Crosswalk, for foodborne illness response and investigation be coordinated under the Program Standards Committee. The Specific charge is as follows: The Program Standards Committee will review and update the Crosswalk - Identified Gaps in Foodborne Illness Training Programs Based on Standard 5 based on any newly developed courses or training programs
- c. The Interdisciplinary Foodborne Illness Training Committee recommends that Council II acknowledge this final report.

CFP ISSUES TO BE SUBMITTED BY COMMITTEE:

The Interdisciplinary Foodborne Illness Training will submit three (3) Issues at the 2016 biennial meeting based on the recommendations of the committee. The Issues are:

1. Report – Interdisciplinary Foodborne Illness Training Committee – The first Issue is to request the Conference to acknowledge the 2014-2016 Interdisciplinary Foodborne Illness Training Committee final report and thank the committee members for their work.
2. IFITC 2 – The second Issue is to recommend that the Conference approves the Crosswalk –Requirements For Foodborne Illness Training Programs Based on Standard 5 and the posting of this document on the CFP website. Based on Charge 1, the Interdisciplinary Foodborne Illness Training Committee developed a Crosswalk –Requirements For Foodborne Illness Training Programs Based on Standard 5 which identified areas that were not covered in Standard 5. It was agreed that the Crosswalk could be used to identify areas that should be in a Foodborne Illness Training Program. Further, the Crosswalk can be used to identify the resources available when developing a training program for Standard 5. With that in mind, the numbered pages shown in the columns and rows of the Crosswalk are the areas that are consistent with areas in the Standard 5. The Committee also agreed that the Conference should be asked to post this on the CFP website.

3. IFITC 3 – The third Issue we would like the Conference to consider is as follows: Dissolve the IFITC and transfer specific charges to the Program Standards Committee. In particular IFITC would word the Charges accordingly:

The Conference further recommends assigning the Program Standards Committee with the following standing charges:

1. Identify available resources related to foodborne illness training.
2. Assess any newly developed foodborne illness training courses or programs.
3. Maintain the document titled *Crosswalk - Requirements For Foodborne Illness Training Programs Based on Standard 5* as a resource and content baseline for foodborne illness training.
4. Report back any findings and recommendations to future biennial meetings of the Conference for Food Protection.

List of Attachments:

Content Document:

Crosswalk - Identified Requirements in Foodborne Illness Training Programs Based on Standard 5

Supporting Attachments:

2014-2016 Interdisciplinary Foodborne Illness Training Minutes

Committee Member Roster:

2014-2016 Interdisciplinary Foodborne Illness Training Committee Membership

Roster

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

Introduction:

The 2012 – 2014 Interdisciplinary Foodborne Illness Training Committee (IFITC) obtained the FSMA 205 C(1) Phases of a Food Incident Response (CIFOR/RRT/MFRPS/VNRFPS Crosswalk) and used this Crosswalk as the response to the Charge to identify essential education content of foodborne disease outbreak training programs.

The 2014 – 2016 Interdisciplinary Foodborne Illness Training Committee (IFITC) was now 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 CIFOR/RRT/MFRPS/VNRFPS 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/MFRPS/VNRFPS 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.

The Committee also agreed that the 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.

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

<http://www.nasda.org/File.aspx?id=4065>

NEHA Epi-Ready: National Environmental Health Association

NEHA I-FITT-RR: Industry-Foodborne Illness Investigation Training and Recall Response

CDC – Center for Disease Control

VNRFPS: Voluntary National Retail Food Regulatory Program Standards – Standard 5

STANDARD 5 - Voluntary National Retail Food Regulatory Program Standards								
1. Investigative procedures.								
Standard 5	RRT	CIFOR	MFRP S	IAFP Procedures To Investigate Foodborne Illness Sixth ed.	NASDA Version 4.0. August 2011	NEHA Epi- Ready. Foodbor ne Illness Respons e Strategie s. June 2006	NEHA I-FITT-RR	CDC Foodborne Illness Outbreak Environmental Assessments
a. The program has written operating procedures for responding to and /or	II. A. Chapter 1	3.1	5.3	Page 3-4	IV, V, VI, IX, XII	Modules 1,2,3,4, 5,6	Module 1	

<p>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 other relevant departments and agencies. The procedures may be contained in a single source document or in multiple documents.</p>								
<p>Standard 5</p>	<p>RRT</p>	<p>CIFOR</p>	<p>MFRP S</p>	<p>IAFP Procedures To Investigate Foodborne Illness Sixth ed.</p>	<p>NASDA Version 4.0. August 2011</p>	<p>NEHA Epi- Ready. Foodborne Illness Response Strategies. June 2006</p>	<p>NEHA I-FITT-RR</p>	<p>CDC Foodborne Illness Outbreak Environmental Assessments</p>

<p>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.</p>	<p>II.B. Chapters 2&3.</p>	<p>3.6</p>	<p>5.3 c</p>	<p>Page3-4</p>	<p>III, V, VI</p>		<p>Module 1</p>	
<p>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 clearly identifies the roles, duties and responsibilities of each party.</p>	<p>II.A. Chapter 1.</p>	<p>3.1</p>	<p>5.3 a</p>		<p>V, VI, IX, XIII</p>		<p>Module 1</p>	

Standard 5	RRT	CIFOR	MFRP S	IAFP Procedures To Investigate Foodborne Illness Sixth ed.	NASDA Version 4.0. August 2011	NEHA Epi- Ready. Foodbor ne Illness Respon se Strategie s. June 2006	NEHA I-FITT-RR	CDC Foodborne Illness Outbreak Environmental Assessments
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.	II. E. Chapter 11	3.5	5.5	Page 2,3,4	V, VI, X	Module 1	Module 2	
e. Program procedures describe the disposition, action or follow-up and reporting	Chapter 9,10,11 & 13	Chapter 4, 4.3, Chapter 5	5.5	Page3-11		Module 1, 6	Module 2	

required for each type of complaint or referral report.								
f. Program procedures require disposition, action or follow-up on each complaint or referral report alleging food-related illness or injury within 24 hours.	Chapters 9, 10, 11 & 13 (pg.212?) Subsection D	Chapter 4,5	5.5		IX	Module 1	Module 2	
Standard 5	RRT	CIFOR	MFRPS	IAFP Procedures To Investigate Foodborne Illness Sixth ed.	NASDA Version 4.0. August 2011	NEHA Epi-Ready. Foodborne Illness Response Strategies. June 2006	NEHA I-FITT-RR	CDC Foodborne Illness Outbreak Environmental Assessments
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	Chapters 9,10, 11 & 13 Page 212? Subsection D	Chapter 4, 5	5.5	Pages 41-45	VI	Module 3,5	Module 2	Lesson 5

outbreak investigations.								
h. Program procedures provide guidance for immediate notification of appropriate law enforcement agencies if at any time intentional food contamination is suspected.	Chapter 6, 10	3.1, 3.10, 6.3	5.5	Pages 99-103	IV, VI, IX, XI	Modules 1,6	Module 8	
i. Program procedures provide guidance for the notification of appropriate state and/or federal agencies when a complaint involves a product that originated outside the agency's jurisdiction or has been shipped interstate.	Chapter 6, 10	3.1, 3.10, 7.3	5.3	Pages 6-7	IV, VI, IX, XII	Modules 1,6, Appendix x 2	Module 2	Lesson 7
2. Reporting Procedures								
Standard 5	RRT	CIFOR	MFRP S	IAFP Procedures To Investigate Foodborne Illness Sixth ed.	NASDA Version 4.0. August 2011	NEHA Epi-Ready. Foodborne Illness Response Strategies. June	NEHA I-FITT-RR	CDC Foodborne Illness Outbreak Environmental Assessments

						2006		
a. Possible contributing factors to the food-related illness, food-related injury* or intentional food contamination are identified in each on-site investigation report.	Chapters 9, 10, 11	5.2	5.3	Pages 34-41	VI	Module 3,6	Module 3	Lesson 2
b. The program shares final reports of investigations with the state epidemiologist and reports of confirmed foodborne disease outbreaks* with CDC.	Chapter 3, 6, 13	4.2, 4.3, 4.4, 7.5, 9.1	5.5	Page 75	VI	Module 1,6 Appendix 6	Module 4	
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		4.2, 4.3, 4.4, 9.1,	5.5		VI			

<p>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 to conduct environmental sample analysis, food sample analysis and clinical sample analysis.</p>								
<p>b. The program maintains a list of alternative laboratory contacts from which assistance could be sought in the event that a food-related 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</p>		<p>4.2, 4.3, 4.4, 9.1</p>	<p>5.5</p>		<p>VI</p>			

analysis that cannot be performed by the jurisdiction's primary laboratory(s).								
4. Trace-back Procedures								
Standard 5	RRT	CIFOR	MFRP S	IAFP Procedures To Investigate Foodborne Illness Sixth ed.	NASDA Version 4.0. August 2011	NEHA Epi- Ready. Foodbor ne Illness Respons e Strategie s. June 2006	NEHA I-FITT-RR	CDC Foodborne Illness Outbreak Environmental Assessments
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 a	Chapter 9	5.2	5.3	Forms J 1, 2 & 3	V			Lesson 7

coordinator to guide the investigation. Trace-back reports are shared with all agencies involved and with CDC.								
5. Recalls								
a. Program management has an established procedure to address the recall of foods implicated in an illness, outbreak or intentional food contamination.	Chapter 12	5.2	5.3		V, IX		Module 8	
b. When the jurisdiction has the responsibility to request or monitor a product recall, written procedures equivalent to 21 CFR, Part 7 are followed.	Chapter 12	5.2			VI, IX		Module 8	
Standard 5	RRT	CIFOR	MFRP S	IAFP Procedures To Investigate Foodborne Illness Sixth ed.	NASDA Version 4.0. August 2011	NEHA Epi-Ready. Foodborne Illness Response Strategies. June 2006	NEHA I-FITT-RR	CDC Foodborne Illness Outbreak Environmental Assessments

<p>C. Written policies and procedures exist for verifying the effectiveness of recall actions by firms (effectiveness checks) when requested by another agency.</p>	<p>Chapter 12</p>	<p>5.2</p>			<p>VI</p>			
<p>6. Media Management</p>								
<p>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.</p>	<p>Chapter 3, 6</p>	<p>3.6</p>	<p>5.5</p>	<p>Page 73 and 105</p>	<p>V, VI, XI, XII</p>	<p>Module 6 Appendix 2</p>	<p>Module 8</p>	
<p>7. Data Review and Analysis</p>								
<p>Standard 5</p>	<p>RRT</p>	<p>CIFOR</p>	<p>MFRP S</p>	<p>IAFP Procedures To Investigate</p>	<p>NASDA Version 4.0. August 2011</p>	<p>NEHA Epi- Ready. Foodbor</p>	<p>NEHA I-FITT-RR</p>	<p>CDC Foodborne Illness Outbreak Environmental</p>

				Foodborne Illness Sixth ed.		ne Illness Response Strategie s. June 2006		Assessments
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-related injury*. These periodic reviews of foodborne illnesses may suggest a need for further investigations and may suggest steps for illness prevention.	Chapter 13, 14	4.3, Chapter 8		2&3				
b. The review is conducted with prevention in mind and focuses on, but is not	Chapter 13, 14	4.3, Chapter 8						

<p>limited to, the following:</p> <p>1) Foodborne Disease Outbreaks*, Suspect Foodborne Outbreaks* and Confirmed Foodborne Disease Outbreaks* in a single establishment;</p> <p>2) Foodborne Disease Outbreaks*, Suspect Foodborne Outbreaks* and Confirmed Disease Outbreaks* in the same establishment type;</p> <p>3) Foodborne Disease Outbreaks*, Suspect Foodborne Outbreaks* and Confirmed Foodborne Disease Outbreaks* implicating the same food;</p> <p>4) Foodborne Disease outbreaks*, Suspect Foodborne Outbreaks* and Confirmed Foodborne Disease Outbreaks* associated with similar food</p>								
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preparation processes; 5) Number of confirmed foodborne disease outbreaks*; 6) Number of foodborne disease outbreaks* and suspect foodborne disease outbreaks*; 7) Contributing factors most often identified; 8) Number of complaints involving real and alleged threats of intentional food contamination; and 9) Number of complaints involving the same agent and any complaints involving unusual agents when agents are identified.								
C. In the event that there have been no food- related illness or food- related injury* outbreak investigations conducted during the	Chapter 8							

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 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.								
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Committee Name: Interdisciplinary Foodborne Illness Training Committee (IFITC)

Last Name	First Name	Position (Chair/Member)	Constituency	Employer	City	State	Telephone	Email
Algeo	Susan	Member	Food Industry Support	Paster Training, Inc.	Gilbertsville	PA	610-970-1776	susan.algeo@pastertraining.com
Belmont	Jeffrey	Member	Food Industry Support	NRFSP	Orlando	FL	407-226-3500	jbelmont@nrfsp.com linda.catalan@brinker.com
Catalan	Linda	Member	Retail Food Industry	Brinker International	Dallas	TX	972-770-8746	bchapman@statefoodsafety.com
Chapman	Bryan	Member	Food Industry Support	State Food Safety	Orem	UT	801-494-1879	
Cooper	Ivory Gene	Member	Local Regulator	Dist. Of Columbia	Washington	DC	202-535-2180	ivory.cooper@dc.gov sandra.fabian@wawa.com
Fabian	Sandra	Member	Food Service Industry	Wawa, Inc.	Media	PA	610-358-8779	efollett@statefoodsafety.com
Follett	Emilee	Member	Food Industry Support	State Food Safety	Orem	UT	801-805-4679	matthew.jenkins@sodexo.com
Jenkins	Matthew	Member	Food Service Industry	Sodexo	Chicago	IL	630-390-4020	kris.markulin@delhaize.com
Markulin	Kris	Member	Retail Food Industry	Delhaize America	Reston	VA	703-347-2072	tim.mitchell@publix.com
Mitchell	Tim	Vice-Chair	Retail Food Industry	Publix Super Markets	Lakeland	FL	863-688-1188	dan.okenu@transglobalconsults.com
Okenu	Dan	Member	Food Service Industry	TransGlobal Consults, LLC	Snellville	GA	404-805-2221	Pieter.sheehan@fairfaxcounty.gov
Sheehan	Pieter	Member	Local Regulator	Fairfax County Health Dept.	Fairfax	VA	703-246-8470	james.steele@disney.com
Steele	James	Chair	Food Service Industry	Walt Disney World	Lake Buena Vista	FL	407-560-4724	patricia.welch@illinois.gov
Welch	Patricia	Chair	State Regulator	IL Dept. of Public Health	Springfield	IL	217-785-2439	janet.williams@fda.hhs.gov
Williams	Janet	Member	Federal Regulator	FDA/ORA/DHRD	Rockville	MD		

2016 Interdisciplinary Foodborne Illness Training Committee

Minutes
10/20/2014

1. Susan Algeo
2. Jeff Belmont
3. Sandy Fabian
4. Emilee Follet
5. Matt Jenkins
6. Kris Markulin
7. Jackie Owens
8. Pieter Sheehan
9. Pat Welch
10. Janet Williams
11. Tim Mitchell
12. Dan Okenu

- One committee member announced she is going on maternity leave so she will not be on the next one or two calls. I believe it was Emilee Follet (sorry, did not hear her name well)
- Reviewed Part VII Committee Membership Expectations
- Pat gave a brief history of the committee and the crosswalk
- Tim sent the crosswalk and the charges out to the committee because some folks either did not receive or lost them
- Reviewed the charges to the committee
- Pat will look into setting up Food Shield for the group to work collaboratively on the crosswalk document
- Janet will try to get a copy of the RRT training to share with the team
- All members asked to review the crosswalk and charges and come with recommendations for the next meeting
- Next meeting on 11/17/14 1:00 pm EST

Thank you,

Tim Mitchell RS, CP-FS

2016 Interdisciplinary Foodborne Illness Training Committee

Minutes
12/15/2014

- David Lawrence
- Susan Quam
- Susan Algeo
- Jeff Belmont
- Matt Jenkins
- Kris Markulin
- Tim Mitchell
- Roger Mozingo
- Pat Welch

Pat reviewed Food Shield, sounds like everyone is getting registered. Some folks already have access.

Matt Jenkins and Pat Welch, Roger, Jeff Agreed to examine for gaps. (Charge 1/Subcommittee 1)

Tim will look at number 2 with Susan Algeo and Dan and Kris. (Charge 2/Subcommittee 2)

The group will work with the conference to get the current crosswalk posted. (Charge 3)

Next group meeting will be 2/17/15 at 12 CST. (Pat to set Up)

Sub committees will meet before 2/17/15 #1 will be 1/13/15 and Number 2 will be 1/23/15.

Thank you,

Tim Mitchell
Vice Chair

2016 Interdisciplinary Foodborne Illness Training Committee

Minutes

3/3/2015

1. Susan Algeo
2. Jeff Belmont
3. Sandy Fabian
4. Matt Jenkins
5. Kris Markulin
6. Roger Mozingo
7. Jackie Owens
8. Gale Prince
9. Pat Welch
10. Tim Mitchell
11. Dan Okenu
12. James Steele

- Reviewed the progress of the two subcommittees and determined that the subcommittees were on the right track.
- The subcommittees will continue to meet before the next full committee meeting scheduled for 5/21/15.

2016 Interdisciplinary Foodborne Illness Training Committee

Minutes

6/11/2015

Present on conference call:

Susan Algeo

Jeff Belmont

Matthew Jenkins

Kris Markulin

Tim Mitchell

Roger Mozingo

Dan Okenu

Pat Welch

- Reviewed the progress of the two subcommittees and determined that the subcommittees were on the right track.

Workgroup 1 reported that they completed an assessment of the following programs:

- RRT
- CIFOR
- MFRPS
- IAFP Procedures to Investigate Foodborne Illness
- NASDA version 4.0
- NEHA Epi-Ready

Workgroup 2 reported that they assessed the following new programs that were not in the original crosswalk document:

- NEHA I-FITT-RR
- CDC Foodborne Illinois Outbreak Environmental Assessments

Further work to accomplish – Summary of recommendations

Discussed that the final committee report is due December 4, 2015 and that we needed to think about what are recommendations from the committee will be to CFP.

We also need to decide whether our committee wishes to be reformed to continue its work to complete current/new charges for the 2016-2018 biennium or if it will have run its course and can be retired.

These will be discussed on our 8/20/15 call.

- The subcommittees will continue to meet before the next full committee meeting scheduled for 08/20/15.