



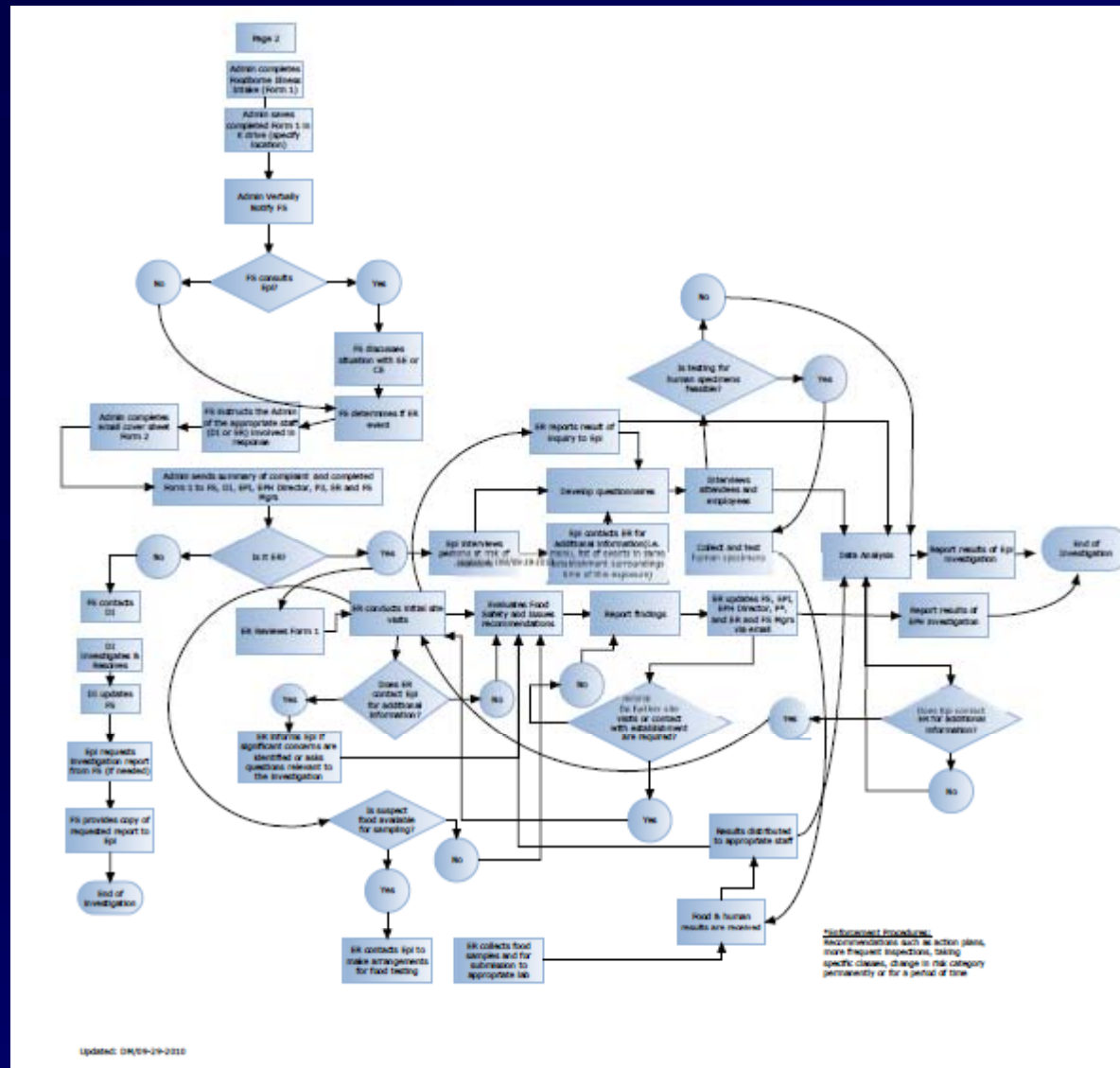
Foodborne Illness Investigations Improving the Lines of Communication

Janet Lane, R.S., M.P.H.
Environmental Public Health Division
June 18, 2011

Improvement Process

- Emergency response (ER vs. non-ER)
- Notification procedures
- Investigation changes
- Communication & collaboration
- Reporting & summaries

Development of Flowchart



Emergency Response

- Development of Emergency Response (ER) Team
- Sr. Investigator–Foodborne Illness (ER Investigator)
- Defined ER situations

Notification Procedures

- Foodborne illness notification received by EPH
- ER vs. non-ER
- Foodborne illness notification received by
Epidemiology

Foodborne Illness Notification Received by EPH

- Intake form
- Improvements to intake form:
 - Was meal associated with an event
 - Event coordinator's contact information
 - Specifically identify drinks consumed
 - Hospitalization vs. Emergency Rm visit only

Complaint Assignment

ER Investigator vs. Non- ER Investigator

ASSIGNMENT TO ER INVESTIGATOR

Patient with fbi complaint admitted to hospital

Patient with confirmed diagnosis of fbi

Patient who is a food handler

Complaint associated with an event

≥ 2 complaints against the same establishment
within 7 days

Discretion of supervisor

ALL OTHER FBI COMPLAINTS ASSIGNED TO DISTRICT INVESTIGATOR

Distribution of EPH Intake Form

For all ER and non-ER complaints, e-mails and pages sent to:

- EPH Field Supervisors, Manager and Director
- ER Investigator
- District Investigator
- EPH Support Staff
- Epidemiology fbi inbox
- Sr. Epidemiologist
- Chief of Disease Control and Clinic Prevention

Foodborne Illness Notification Received by Epidemiology

<u>Situation</u>	<u>Individuals Contacted via E-Mail</u>
Confirmed shigellosis case associated with a day care center or an elementary school	ER Investigator, EPH Field Supervisor, Manager and Director, Chief of Disease Control and Clinical Prevention
GI illnesses - often Norovirus in nursing homes/assisted living facilities or other institutions, schools and business settings	ER Investigator, EPH Field Supervisor, Manager and Director, Chief of Disease Control and Clinical Prevention
Ill patient of Big 5 Diseases is a food handler	ER Investigator, EPH Field Supervisor, Manager and Director, Chief of Disease Control and Clinical Prevention
Household contact of a patient ill due to one of the Big 5 Diseases	Field Supervisor and Manager
Patient ill with Salmonellosis, Shigellosis, E. coli, or Campylobacteriosis who reports having eaten at a establishment in HCPHES' jurisdiction during incubation period	Field Supervisor and Manager
Patient ill with Listeriosis or Brucellosis who reports exposure to unpasteurized cheese. Cheese sample may be available for testing	Field Supervisor and Manager
Request for oyster tags	Field Supervisor and Manager
City of Houston report of a foodborne illness complaint in an establishment in HCPHES' jurisdiction	EPH Support Staff

Foodborne Illness Investigations & Improvements

Non-ER Investigations

- Conduct foodborne illness investigation
- Use fbi checklist
- Thorough documentation
- Copies of all reports sent to Epidemiology

FBI Checklist

FOODBORNE ILLNESS INVESTIGATION CHECKLIST

Est. Name: _____ Date: _____
 Physical Address: _____

Food

Yes No

1. Is there any suspect food left?
 a. Food samples collected.
 b. Samples taken to lab. Date: _____ Laboratory: _____
 c. Was suspect food or leftovers used in another dish? If yes, explain: _____

2. Was food prepared at another site?
 a. Name of site: _____ Address: _____
 b. Contact person at food prep. site: _____
 c. Method of transportation: _____

Employees

Yes No

1. Has any employee been sick within the last 30 days?
 a. Name: _____ Phone No.: _____
 b. Symptoms: _____
 c. Diagnosis: _____

2. Does establishment keep a log of when employees were ill?
 3. Are time sheets available for the dates of implicated illness?

4. Has any employee traveled outside of the country within the last 30 days?
 a.

Name	Phone Number	Country(s) Visited
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. What is the employee sick policy? _____

6. Do employee records indicate that individuals are aware of the employee sick policy?

Operations

Yes No

1. Was anything out of the ordinary on the day the suspect food was consumed? If yes, explain:

Other

Yes No

1. Was the establishment owner/operator aware of the alleged foodborne illness complaint?
 a. Number of persons reported ill: _____

FS 8-01 7D EAG

Attention Food Employees

Report to your supervisor immediately

If you have any of the following symptoms caused by illness or infection:

- ◆ Vomiting
- ◆ Diarrhea
- ◆ Jaundice (yellowing of eyes and skin)
- ◆ Sore throat with fever
- ◆ Infected wounds or lesions with pus (on hands, wrists, exposed body parts)

If you or a household member have been diagnosed by a doctor with:

- ◆ Norovirus
- ◆ Hepatitis A
- ◆ Salmonella typhii (typhoid fever)
- ◆ Shigellosis
- ◆ E. coli 0157:H7 (or other shiga toxin-producing Escherichia coli)

You could make your customers sick.

*Reporting your illness is mandatory under:
Texas Food Establishment Rule 229.163(d)
25 Texas Administrative Code (TAC) §229.163(d)*

Harris County
HCPHES
Public Health & Environmental Services

Environmental Public Health Division
101 South Richey, Suite G Pasadena, TX 77506
Phone: 713-274-6300 FAX: 713-274-6475
www.hcphe.org

7/10/10

ER Investigations – Large Foodborne Illness Outbreaks

- Constant communication with Epidemiology
- Development of fbo ER Investigator checklist
- Development of fbo foodservice manager questionnaire

Foodborne Outbreak Checklist for ER Investigator

- Food – menu, invoices, samples, preparation location, transportation method if applicable
- Employees – list of employees, timesheets, illness logs, employee illness/cuts, sick policy
- Operations – floor plan, storage of personal food, equipment layout, flow of food
- Event – no. of people attending event, contact information for event coordinator, method of food service, number of seatings and times, business also open to the public during event
- Other – other events 3 days before/after event, large catering to go orders, credit card receipts

Food Manager's Checklist

Harris County
HCPHES
 Public Health & Environmental Services

Hermisla Palacio, M.D., M.P.H.
 Executive Director
 2223 West Loop South
 Houston, Texas 77027
 Tele: (713) 439-6000
 Fax: (713) 439-6080

Michael Schaffer M.B.A.
 Division Director
 Environmental Public Health Division
 101 South Rice, Suite G
 Pasadena, TX 77506
 Tele: (713) 274-6300
 Fax: (713) 274-6475

**FOOD ESTABLISHMENT MANAGER'S CHECKLIST
 FOODBORNE ILLNESS OUTBREAK INVESTIGATION**

Est. Name: _____ Date: _____

Physical Address: _____

Information Needed	Need by: Date and Time
FOOD	
Menu	
List of menu items served at event and all ingredients	
Invoices of implicated product	
EMPLOYEES	
Timesheets from: to:	
Employee illness logs from: to:	
Contact list for all employees involved in the preparation or serving of the specific event	
Number of trained managers that worked the event (including preparation)	
Number of certified food handlers that worked the event (including preparation)	
OPERATIONS	
Establishment floor plan and equipment layout (incl. setup for drinks, RTE garnishes/appetizers, buffets)	
EVENT	
Contact name and number for coordinator of event	
OTHER	
List of dates and contacts for other large events 3 days before or 3 days after the event in question from: to:	
Lists of dates and contacts for other large catering or to-go orders 3 days prior or 3 days after the event in question from: to:	
Credit card receipts from: to:	

Checklist left with: _____

3/30/11

Communication & Collaboration

In-house:

- Epidemiology ↔ EPH
- Use of ICS
- Involvement of Health Ed, OPI

Outside:

- Lab support (city/state)
- Student Epidemiological Intelligence Service (SEIS)
- State Health Department, CDC
- Referrals and requests with other jurisdictions

Reporting & Summaries

EPH

- Investigation log
- Investigation reports

Epidemiology

- NORS
- Summaries

Improvements Needed

- Environmental sampling
- Public awareness of reporting
- More automation

In Summary

Frequent communication and mutual understanding and respect between Epidemiologists and Environmental Health Specialists across all jurisdictional boundaries play a significant role in identifying and reducing causal factors behind communicable disease - we're all in this together!