

CHAPTER 1

WORKING WITH OTHER AGENCIES

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1.0. PURPOSE

Effectively working with other agencies during a human and animal food emergency response, encouraging a unified approach and a speedy recovery is a priority for building an effective Rapid Response Team (RRT). This chapter describes a model on which any other group can base the development of its own procedures when coordinating with its human and animal food response partners.

2.0. SCOPE

This chapter focuses on three areas in which federal, state, local, tribal, and territorial agencies involved in food emergency response often work together and strong interagency relationships are essential:

- **Building Relationships:** This section describes best practices to build trust, familiarity, and credibility among agencies through joint training, meetings, exercises, and participation in human or animal food safety and defense task forces.
- **Defining Roles and Responsibilities in an Investigation/Response:** This section identifies roles and responsibilities for key communication exchanges among agencies comprising the three legs of the “investigative stool”: epidemiology, laboratory, and environmental health (Department of Health and/or Agriculture).
- **Maintaining Infrastructure:** This section describes procedures and mechanisms to maintain relationships through a robust infrastructure. Many of these concepts are continuations of the activities designed to build relationships.

The best practices described in this chapter identify key areas and elements for each of these capabilities but are neither comprehensive nor specific to unique situations. State, local, tribal, territorial, and federal agencies seeking to improve multi-agency food emergency responses (e.g., States, Office of Inspections and Investigations [OII]) may utilize this chapter to assess and improve their response capabilities. Agencies with varying responsibilities (e.g., regulatory, public health, feed/animal health, law enforcement, and laboratory) and target response capability levels may differ in how they customize and apply these best practices.

3.0. RESPONSIBILITY

3.1. Agency/Organization Leadership

Leadership of federal, state, and local agencies involved in responses to human and animal food incidents will (jointly) approve any customizations made to this template to ensure that Working with Other Agencies (WWOA) policies and procedures developed are appropriate for the agencies involved.

3.2. RRT (or investigatory team, in states without an RRT) Leadership

Familiarization/training with the adopted policies and procedures: RRT leadership is responsible for ensuring that the personnel assigned to respond to a human or animal food incident have been provided with the Incident Command System (ICS) and investigation-related training necessary to implement this chapter.

Maintenance of these policies and procedures: This should be the duty of combined leadership of the response team (e.g., State principal investigator, Emergency Response Coordinator [ERC]).

3.3. RRT Members

Procedure Familiarization/awareness: RRT Members must be familiar (through orientation, training, exercises, etc.) with RRT Standard Operating Procedures (SOPs) and their implementation.

Skills maintenance: RRT members are each responsible for actively maintaining both their subject matter expertise and ability to work effectively in multidisciplinary and multi-agency response teams.

4.0. DEFINITIONS

The following terms are used frequently in this chapter: environmental, epidemiology, laboratory, and Food Safety and Defense Task Force.

See “Glossary of Key Terms” for definitions.

5.0. BACKGROUND

None

6.0. SAFETY

N/A

7.0. EQUIPMENT/MATERIALS

N/A

8.0. PROCESS DESCRIPTION

8.1. Standard Practices

Before building a new relationship between partnering agencies or when looking to strengthen an existing partnership, the following concepts should be considered:

- Know the lead contact person(s) in the other agency.
 - Know the current primary and secondary contacts in each appropriate agency for human and animal food incidents.
 - Attempt to contact these individuals *prior* to an event. Attempting to get to know someone during an emergency response can be difficult
- Understand the roles and responsibilities of each agency responsible for human and animal food safety activities.
 - Be aware that agency missions (and definitions of success) differ.

- Be aware that each agency will have both capabilities that they can offer during a multi-jurisdictional response and limitations; it is important to understand both.
- Understand the laws governing the release of confidential information (e.g., commercial distribution, medical records).
 - Know how to share the information appropriately. Know who in your agency is commissioned and know which agencies maintain a current 20.88 status¹.
 - Identify, understand, and develop confidentiality agreements between local, state, and/or federal partners (e.g., FDA State/Local Commissioning Program). See Section 12.2.3.
- Share updates and/or materials prior to meetings or conference calls with partners. (See III.E. “Conference Call Etiquette.”)
 - Provide information ahead of time so as not to surprise local, state, or federal partners when going into a meeting or conference call.
 - Distribute summaries of previous calls and meetings to all attendees.
 - Ensure all partners have the materials for the current meeting. Do not forget partners who may be attending the meeting remotely.
- Keep feed issues and agency feed partners in mind when investigating food incidents.
- Keep in mind that laboratory response partners may need to be notified of planned activities early so they may order necessary supplies, prepare media, etc.

8.2. Building Relationships

Interagency coordination during an incident requires clearly defined responsibilities, communication strategies, and interaction prior to an incident. This section identifies documents and activities that help establish effective working relationships for the development of these key elements for multi-agency responses.

8.2.1. Working as a multi-level, multi-agency team

Despite a large degree of variability in how public health programs are structured throughout the nation, one commonality tends to be that multiple agencies and programs are required to work together to effectively address human and animal food-related emergencies. Successful RRTs can serve as conduits to unify and coordinate multi-disciplinary (epi, lab, environmental/regulatory) and multi-jurisdictional (federal, state, local, territorial, and tribal agencies) responses to human and animal food-related emergencies within a state. These coordination activities are broad in scope and can involve joint training, investigations, data sharing, and data analysis to name a few.

¹ 20.88 Single-Signature Agreements Database:
<https://www.accessdata.fda.gov/scripts/sda/sdNavigation.cfm?sd=singlesignaturefood>

Regardless of the coordination topic, all multi-agency activities require some degree of communication and collaboration. The RRTs create a structure that facilitates bringing response partners together both in times of emergency and in times of team building. The latter is a particularly useful time to establish familiar relationships with counterparts in other agencies/programs rather than the fast-paced nature of most responses.

In the same manner RRT responses can be “scaled” based on the size and complexity of a human and animal food incident, so too can opportunities for multi-jurisdictional collaboration. RRTs that are just beginning to build their collaborative foundation can start out with small face-to-face meetings with the partners with whom they most commonly respond. As the foundation continues to be built, the collaborative process can become more complex where additional partners are eventually approached and invited to attend. This flexibility allows for each RRT to address strengths and weaknesses in their jurisdictions so the result for collaboration is strong and public health can be protected more effectively and efficiently.

RRTs have previously highlighted some specific areas of discussion that may serve as a starting point for other teams when considering how to approach multi-agency coordination in their region. Some of these discussion points may include:

- Does the RRT encompass the regulatory response component or is it inclusive of both the epidemiologic and regulatory response?
- To what human and animal food commodities is the RRT responding? What agencies are involved in responding to incidents involving these commodity areas?
 - Farms (produce and raw agricultural commodities)
 - Manufactured Foods
 - Retail (food service, grocery stores, etc. – jurisdiction may be shared across multiple agencies)
 - Meat
 - Eggs (in-shell, egg products, etc.)
 - Grade A Dairy
 - Raw Molluscan Shellfish
 - Fish/Seafood
 - Animal Food (animal feed, pet food)
 - Other
- Would the role of participating agencies change if it was suspected/confirmed that any of the commodities above were contaminated intentionally?
- Should local health jurisdictions be approached to be formal members of the RRT?
 - Does this change if your local jurisdictions are centralized under a state agency or autonomous?
- Is the RRT inclusive of the epi/lab partners or does the RRT just have defined communications with those partners?

- Does the RRT lab component include both the clinical and human and animal food regulatory labs? Are there other labs that should be included in the team?
- How should a multi-agency RRT Steering Committee be structured?
 - Who should be on this committee?
 - How often should the committee meet?
- Does the RRT only come into play during a high workload or surge capacity need, or are all responses to a potential human and animal food contamination event handled by the RRT?

A common thread when determining how to answer these questions is communication, both within an agency and with appropriate response partners. By discussing the capabilities and limitations of each agency or program early on, each RRT can structure their team based on their specific dynamics/needs/desires. Despite variances in team structure, the common goal of minimizing the time from RRT notification of an incident to the effective implementation of public health control measures is maintained.

8.2.2. Additional multi-agency coordination efforts

Development of a multidisciplinary, interagency team of highly trained participants to jointly investigate foodborne illness outbreaks and other food and agricultural emergencies is advantageous to all involved. In addition to those conducting investigational activities, the team should have working relationships with and be able to ask for assistance from Public Information Officers (PIOs), emergency management coordinators, and agency legal resources.

It is best to develop working multi-agency policies and procedures before initiating joint field operations.

Teams should create and maintain contact lists for RRT member agencies/partners. Key questions to consider include:

- How will RRT member agency/partner contact information be maintained, updated, and accessed?
 - How often will these be updated?
 - How will RRT member agencies/partners be made aware of changes to contact lists? See the Communications SOPs Chapter for more information on contact lists.
 - Where will the most current contact lists be stored so appropriate partners can easily reference them?

In general, agencies should also use ICS concepts and roles in routine situations. This practice establishes the foundation necessary for effective responses using ICS during emergencies (i.e., urgent/unusual situations). See National Incident Management system concepts at:

https://www.fema.gov/pdf/emergency/nims/NIMS_core.pdf

Team members should meet regularly to train for responding to an event. This training may include topics such as agency and office procedures, field activities, and sampling techniques.

Teams should also regularly conduct exercises using realistic scenarios to continually refine existing procedures and develop new techniques. For these, team members may be assigned to a variety of response roles including conducting inspections, sampling, record review, laboratory testing, compliance, and enforcement. These concepts are explored further in the Joint Training (8.2.7) and Joint Exercises (8.2.8) portions of this chapter.

8.2.3. Legal Framework

The process of establishing a joint inspection and investigation program begins with a review of each agency’s legal framework. This may include drafting memoranda of understanding (MOU) to delineate each agency’s roles and commitments to coordinate activities. For example, when coordinating with the FDA, key state personnel must receive FDA commissions and/or credentials (or be operating under a valid 20.88 agreement) so that they can receive critical information gathered during investigations. This ensures that agencies can:

- Share information;
- Take the most appropriate regulatory action;
- Share staff resources; and
- Document activities interchangeably.

These websites² provide materials and resources on information sharing under FDA confidentiality agreements, such as an information sharing matrix, information sharing ownership and disclosure chart, information sharing pyramid and trade secret flowchart, as well as a searchable database of agencies with current 20.88 long term information sharing agreements.

When the RRT is unable to share information freely among member agencies/partners due to confidentiality restrictions or other information sharing policies and laws, it is important to take time to share and explain these restrictions to avoid misunderstandings, false expectations and negative relationship impacts among RRT member agencies/partners. It is also important to share and discuss any actions that could be taken to mitigate the impacts (e.g., signing a confidentiality agreement, a 20.88 agreement or establishing a MOU).

These discussions could serve as a platform for partners to discuss ways to increase information sharing such as applying for commissions, credentialing, and/or signing a 20.88 agreement.

² <https://www.fda.gov/federal-state-local-tribal-and-territorial-officials/communications-outreach/information-sharing>
<https://www.fda.gov/ForFederalStateandLocalOfficials/CommunicationsOutreach/default.htm>

8.2.4. Memorandum of Understanding (MOU)

An MOU is a document that formally describes the relationship between parties, indicating an intended common line of action during a coordinated incident response.

MOUs should exist between any or all agencies represented under the epidemiology, environmental, and laboratory components of the response system. In addition, MOUs may capture the roles and responsibilities of the partnering organizations and how their combined actions will enhance the coordinated incident response.

The documents should clearly define how communications will flow between the groups before, during, and after an event, and how those communications should be formatted and disseminated. If not specified elsewhere, such as in an RRT operations manual, an MOU can also delineate the specific events required for each of the agencies to consider an incident response successfully completed.

Examples of MOUs between different partnering agencies are included at the end of this chapter (see Attachments A and B).

8.2.5. Joint Management Team

Organizations regularly participating in joint investigations and inspections should consider establishing a Joint Management Team. The Management Team is comprised of appropriate coordinators and supervisors from involved agencies. These coordinators may or may not be in a leadership role within their respective agencies; however, they should have some level of decision-making authority related to the functioning of the RRT. When not engaged in an outbreak or other human and animal food contamination event, these designees are responsible for maintaining a properly planned, organized, equipped, trained, and exercised team by:

- Scheduling and facilitating meetings for team members.
- Establishing thresholds for joint agency response.
- Providing updates to the agencies’ senior leadership and other parties.
- Keeping agency leadership apprised of RRT activities can encourage a “top-down” buy-in for maintaining multi-agency collaboration capacity through the RRT.
- Coordinating with agencies’ training and exercising officers to develop programs for field team and support team members.
- Setting standards for approval of reports and other documentation.
- Ensuring that an After-Action Review (AAR) takes place after responses are conducted and that lessons learned are integrated into future operations.
- Identifying staff to relieve personnel during extended operations and planning for the transition to normal operations after the incident.

- Establishing a process or method for working through disagreements and disputes, including elevation of the issue to a higher management level for resolution, when warranted.

8.2.6. “Regularly” Scheduled Meetings

Agencies participating in joint human and animal food incidents should consider scheduling regular meetings between the coordinators or designees of the partnering organizations. Routineness is key when ensuring that communication is maintained among response partners and RRTs should adjust their meeting frequency as necessary to maintain this capacity.

Bringing individuals together is important in setting the tone for cooperating agencies and ensuring that the top-down message within each group is one that promotes and supports working together with all partners. As individuals become more familiar with the routine and top-down endorsement is maintained, inter-agency communication has a better chance of becoming institutionalized as part of the agency’s “culture” or routine operational framework.

The meetings should include designated coordinators, management, or designees from all agencies and may address a range of topic areas including:

- Setting triggers for joint agency investigations and responses.
- Discussing roles and responsibilities for multi-agency response activities (e.g., recalls, audit checks, public notification, etc.)
- Providing updates to the agencies’ senior leadership and other parties.
- Coordinating training and exercises programs.
- Setting standards for approval of reports, forms, and other documentation.
- Ensuring that an AAR takes place and that lessons learned are integrated into future operations.
- Identifying staff to relieve personnel during extended operations and planning for the transition to normal operations after the incident.
- Establishing a process or method for working through disagreements and disputes, including elevation of the issue to a higher management level for resolution, when warranted.

8.2.7. Joint Trainings/Meetings

Having the management and staff of multiple agencies train together is an effective way to build relationships and the trust necessary for a coordinated response.

Inspectional staff included under the environmental group may represent several different agencies, each operating under their own regulations and enforcement procedures. Training these staff together on risk management, food safety, information sharing, intentional contamination procedures, and other areas can ensure a consistent approach across agencies as well as familiarity with their differences in responsibility, oversight, and enforcement.

Conducting joint training sessions is also a means to discuss concerns about how a specific process works (e.g., ICS) among agencies prior to developing an official document such as a policy, procedure, or MOU.

8.2.8. Joint Exercises

Conducting exercises with other agencies is an effective way to further define and refine the roles and responsibilities of the agencies involved in the investigation and mitigation of incidents.

Each participating agency should be involved in all steps of the process, from initial planning to post-exercise evaluation and/or AAR. These exercises should be designed to challenge existing response systems (including use of ICS) with the goal of identifying gaps in the process. AAR of the exercise should be open, accurate, promote actions that went well, and help to improve any actions that hindered the response.

Exercises should be performed in a non-threatening environment to build trust and relationships between the agencies before an actual incident occurs. See the Exercises Chapter within this RRT Best Practices Manual for more information and best practices on planning, conducting, and evaluating RRT Exercises.

8.2.9 Food Protection Task Forces

Food Protection Task Forces (FPTF) exist to encourage cooperation and communication among all human and animal food safety stakeholders within a state.

The ideal FPTF includes membership from federal, state, local, tribal, territorial regulators, academia, and industry. The FPTF should provide expert input into matters of food safety/defense and is an important prerequisite to the creation of formal agreements such as MOUs between stakeholders. Often, the members of a state's task force may also be partner agencies during RRT responses.

- **Food Protection Task Force Creation**

FPTFs are encouraged but not obligated to gain legal recognition as a cooperative, multi-jurisdictional panel of human and animal food safety/defense experts. This may be achieved by agency declaration, executive order (e.g., see North Carolina Executive Order 38; see chapter references (part 8)), or statutory authority (e.g., see 500.033 Florida Statute; see chapter references (part 8)).

Formal recognition of the FPTF as an entity provides greater credibility to the actions of the organization.

- **Food Protection Task Force Participation**

For the FPTF to be successful, representatives from the following fields and agencies should be invited to participate:

- Manufactured food safety/defense
- Foodborne disease epidemiology
- Retail/foodservice food safety/defense
- Animal feed safety/defense
- Human and animal food safety laboratories
- United States Food and Drug Administration (FDA)
- United States Department of Agriculture/Food Safety and Inspection Service (USDA/FSIS)
- Agency media professionals
- State Emergency Management
- Local Health Departments
- Tribes
- Territories
- United States Department of Homeland Security/State Fusion Centers
- Other laboratory partners
- State Law Enforcement Agencies
- Local Law Enforcement Agencies
- Federal Bureau of Investigation
- Food Industry Representatives
- State or Local Restaurant Trade Associations
- State or Local Agricultural Trade Associations
- State or Local Retail or Grocers Associations
- State or Local Public Health Associations
- State Universities and/or Community Colleges
- State Cooperative Extension
- Other participants, as deemed appropriate.

- **Food Protection Task Force Funding Mechanisms**

FPTFs may benefit from grant funding available through the FDA Office of Domestic Partnerships (ODP)³. These funds are designated to support task force activities with the goal of strengthening state-level human and animal food safety infrastructure.

- **Hold Regular Meetings**

Task Forces are encouraged to meet on a regular basis (best practice to define “regular” ahead of time) to:

³<https://www.fda.gov/ForFederalStateandLocalOfficials/ProgramsInitiatives/ucm475029.htm>

- Develop relationships among human and animal food safety stakeholders.
 - Discuss new and emerging issues in human and animal food safety.
 - Identify opportunities for joint work-planning.
 - Explore means by which greater cooperation can be achieved among those responsible for protection of the food supply.
 - Discuss outreach activities and training opportunities.
 - Discuss policy development strategies.
- **Conduct Outreach Activities**

The FPTF should conduct outreach and educational activities to promote human and animal food safety within the state. Activities may include development of consumer educational campaigns, industry outreach for the development of recall plans, providing training opportunity notices on the task force website or through the RRT Coordinators, or sponsorship of forums or meetings to discuss pertinent food safety issues.
 - **Conduct Policy Development and Analysis**

The non-partisan FPTF should develop and evaluate human and animal food safety policy within the state. The FPTF should monitor legislative actions relating to human and animal food safety and advise state legislatures and rulemaking bodies on these matters.

8.3. Defining Roles and Responsibilities in an Investigation/Response

Below are examples of information shared among agencies as they fulfill their roles and responsibilities as the “three legs of the investigative stool” during a human and animal food incident. Each team should modify these components to meet the needs and structure of the regulatory framework of the state. They are described here to provide context for the kind of communication that should be completed when working with other agencies during an incident.

Note that the roles described below can be shared across multiple agencies (e.g., State Department of Health laboratory that supports the epidemiology program and a State Department of Agriculture laboratory that supports the environmental program; similarly, a food service environmental program may be in the State Department of Health while a manufactured foods environmental program may be in the State Department of Agriculture). A flow chart representing the types of communications that should occur during an event is included in section 12 of this chapter (Attachment C - Flowchart - Communications between Agencies).

Note: It is important to consult applicable Federal, State and Local policies when releasing information to partnering agencies (See Section 12.2.3 for more details).

Please refer to the Communication SOPs chapter for additional details on appropriate policies and procedures to facilitate communication.

8.3.1. Epidemiology to Laboratory

- Current epidemiological investigation updates of any outbreak that may engage the laboratory (e.g., reported from local health department, multistate, in-state).
- Early notification of incoming outbreak-associated samples.
- Provide historical illness data associated with a commodity being sampled.

8.3.2. Epidemiology to Environmental

- Clusters of notable epidemiological interest indicating human or animal food vehicle.
- Pulse Field Gel Electrophoresis (PFGE), Whole Genome Sequencing (WGS), or other subtyping results and updates of isolates for active investigations (e.g., isolates from clinical samples, may also include isolates from human or animal food samples if submitted to the lab by the epidemiology program). Routing of sample results may differ between RRTs and may depend on where the lab running the samples is housed (i.e., which agency).
- Laboratory results of products tested at the laboratory that supports the epidemiology program (may be human or animal food).
- Outbreaks identified by local communicable disease partners that are of interest for environmental health.
- Specifics of the human or animal food vehicle: product information, purchase dates, consumption date, purchase locations, sell-by/best if used by dates.

8.3.3. Laboratory to Epidemiology

- Detected serotype, subtype, PFGE, or WGS clusters.
- Cases or clusters in-state matching cases in other states or multi-state clusters.
- PFGE, WGS, or other subtyping results and updates of isolates for active investigations (e.g., isolates from clinical samples, isolates from human and animal food samples if submitted to the lab by the epidemiology program). Routing of sample results may differ between RRTs and may depend on where the lab running the samples is housed (i.e., which agency).
- Laboratory results of outbreak-related testing (e.g., clinical samples, may also include human and animal food samples if submitted to the lab by the epidemiology program).
- Interpretation of results (e.g., tissue residues, contaminants, microbiological).

8.3.4. Laboratory to Environmental

- Recommendations for sampling protocols (e.g., quantities, types, locations, shipping, preservatives).
- Laboratory point of contact (POC) for technical questions, shipment notifications, etc.

- PFGE, WGS, or other subtyping results and updates of isolates for active investigations (e.g., isolates from human and animal food samples submitted by the environmental program). Routing of sample results may differ between RRTs.
- Communicate clearly about when analytical results are expected to be available/released to avoid false expectations.
- Results of presumptive positive or confirmed positive samples for human or animal food testing related to active investigations (e.g., outbreaks, chemical contamination, etc.).
- Interpretation of results (e.g., tissue residues, chemical or microbiological contaminants).

8.3.5. Environmental to Epidemiology

- Significant findings of environmental investigations, including any root cause findings or environmental antecedents.
- Results of presumptive positive or confirmed positive human or animal food samples collected by the environmental program and tested at local, state, or federal laboratories (or private laboratories, if confidentiality agreements allow). Routing of presumptive or positive sample results may vary between RRTs depending on which agency the servicing laboratory is housed within.
- Recall of any products due to bacterial, chemical, or physical contamination with distribution in state.
- Notable progress on traceback investigations.
- Outbreaks identified by local environmental health agencies that are of interest for epidemiology partners.

8.3.6. Environmental to Laboratory

- Incoming samples that are incident or outbreak-associated, routine, or special-project related.
- Notable investigations in which the environmental program is currently involved.
- Notify laboratory response partners of when samples related to an active investigation are or will be collected, as well as how many. This way laboratory staff will know to prioritize the samples accordingly.
- Understand the agency's capabilities and capacity prior to the event.
- Consider sharing agency Continuity of Operations Plans (COOP), when applicable.

8.3.7. State (Environmental, Epidemiology, Laboratory) to Federal Agency (FDA⁴, USDA, CDC, EPA, FBI, and Laboratories)

State programs (including environmental, epidemiology, laboratory) should clearly and methodically communicate the results of investigations and report emerging outbreaks, recalls, complaints, and positive pathogen findings to the appropriate Federal Agency (e.g., FDA, FSIS, CDC, EPA) in situations like the following:

- An adulterant (including pathogens and chemicals [including pesticides]), is suspected in an outbreak or detected in a product (may or may not be under the jurisdiction of the Federal Agency).
- A pathogen or chemical (including pesticides) is found in a food that may be distributed in interstate commerce or otherwise under the jurisdiction of one or more federal agencies.
- An outbreak occurs on an international or interstate airplane, bus, train, or vessel.
- The State program requires support with laboratory testing (e.g., bacterial enumeration or WGS).
- Intentional product contamination is suspected or confirmed.
- The suspected food item is:
 - Imported
 - Previously implicated in multistate outbreaks
 - Prepackaged
 - Transported across state lines
 - Regulated by appropriate Federal Agency as listed above

8.3.8. Federal (FDA, USDA, CDC, EPA, FBI and Laboratories) to State (Environmental, Epidemiology, Laboratory)

Federal public health and regulatory agencies (e.g., FDA, USDA CDC, EPA) should communicate the results of investigations and report emerging outbreaks, recalls, complaints, and positive pathogen findings to the appropriate state program(s) (environmental, epidemiology, and/or laboratory) for situations such as:

- A multi-state or multi-jurisdictional cluster of illnesses involving the state is identified and being investigated by the federal agency.
- A pathogen or chemical (including pesticides) is suspected in an outbreak or detected in a product manufactured or distributed in the state.
- A pathogen or chemical (including pesticides) that renders a product adulterated is found in a food that may be distributed in the state.
- An outbreak occurs on an international or interstate airplane, bus, train, or vessel that could impact the state.
- Intentional product contamination is suspected or confirmed in the state or in commodities that may enter the state via commerce.

⁴ Primary FDA contacts to the States are the Office of Regulatory Affairs (ORA) District/Program Division Offices. States with an RRT must have jointly established communication procedures between the state and their respective FDA District/Program Division Offices. (See the “Communication SOPs” chapter for additional details.)

8.4. Maintaining Relationships

A formally established RRT must develop procedures and mechanisms to maintain its continued viability. Many of the components discussed in section 8.2 of this chapter are essential to building relationships for continual development and maintenance of existing partnerships. These components must be a continual part of team activities to ensure that the relationships built among cooperating agencies are not diminished over time or in the absence of actual, real-world response activities.

Examples of these multi-purpose components essential to team building and maintenance include:

- Joint Management Team (8.2.5)
- Regularly Scheduled Meetings (8.2.6)
 - Meeting response partners *before* an incident to increase familiarity and build personal relationships.
- Joint Training (8.2.7)
- Joint Exercises (8.2.8)
- Participation in Food Protection Task Forces (8.2.9)

9.0. DESIRED OUTCOMES (ACHIEVEMENT LEVELS)

9.1. Achievement Levels

Outcomes are assessed based on the corresponding level descriptions, and the goal is to attain the highest achievement level through evaluation and improvement processes.

Level	Description
1	“Working with Other Agencies” (WWOA) best practices (as described in this chapter) are not incorporated into the RRT’s Standard Operating Procedures (SOPs) or other documents. NOTE: Best practices can be included in a single or coordinated series of documents.
2	WWOA best practices are incorporated into applicable RRT SOPs/documents and properly identify all relevant partners. NOTE: WWOA best practices may be addressed within a single SOP but are more likely to be addressed within a coordinated series of SOPs or other documents maintained by the RRT (e.g., Communications SOPs, RRT or Foodborne Illness Manual, Joint Investigations SOP, Training SOP, ICS procedures, etc.).
3	All parties included in the RRT SOPs/documents that encompass WWOA best practices know that procedure(s) exist, know where the procedures are located, and clearly understand their respective roles and responsibilities.
4	The RRT SOPs/documents that encompass WWOA best practices are followed during incident response and/or planned exercises.
5	The RRT SOPs/documents that encompass WWOA best practices include a formal review and update process.

9.2. Process Overview

Level 1: WWOA best practices are not incorporated into the RRT’s SOPs/procedures

- Identify status of current SOPs:
 - Do informal/incomplete written or verbal agreements for WWOA exist?
 - Do other existing documents (MOUs, etc.) contain information or sections that could be utilized to address “working with other agencies” best practices?
 - Do formal communications or joint investigations SOPs exist?

Level 2: WWOA best practices (as described in this chapter) are incorporated into applicable RRT SOPs/documents and properly identify all relevant partners

NOTE: WWOA best practices may be addressed within a single SOP but are more likely to be addressed within a coordinated series of SOPs or other documents maintained by the RRT (e.g., Communications SOPs, RRT or Foodborne Illness Manual, Joint Investigations SOP, Training SOP, ICS procedures, etc.).

- All partnering agencies have been identified and included in the developed procedure(s). References include:
 - FPTF membership lists
 - Existing MOUs or other agreements
- Lead person(s) and backup for each partnering agency have been identified and contact information is current.
 - RRT identifies a frequency in which contact information is checked/updated.
- Procedure(s) addresses the relationships and communication among RRT member agencies/partners, including epidemiology, laboratory, and environmental health (Department of Health and/or Agriculture, human and animal food commodity programs, Federal/State/Local levels, as applicable).
 - Identification of all relevant partners
 - Reference RRT Manual “Communication SOPs” Chapter
- Procedure(s) appropriately includes other groups with which the RRT may need to communicate, interface or partner. Examples:
 - Emergency Operations Center (EOC)
 - Fusion Center
 - Industry
 - Academia
 - Law enforcement
 - Professional associations
- Procedure(s) adequately describes the relationship between state programs and federal partners. Federal partners may include:
 - Health and Human Services (HHS)
 - Food and Drug Administration (FDA)
 - Centers for Disease Control and Prevention (CDC)

- United States Department of Agriculture (USDA)
- Environmental Protection Agency (EPA)
- Department of Homeland Security (DHS)
- Federal Bureau of Investigation (FBI)
- FDA Office of Criminal Investigations

Level 3: All parties included in the RRT SOPs/documents that encompass WWOA best practices know the procedure(s) exists, know where the procedure(s) are located, and clearly understand their respective roles and responsibilities

- The procedure(s) adequately describes the roles and responsibilities of partners, including jurisdiction/regulatory authority, and properly references other documents for this purpose. Examples:
 - MOUs
 - Other SOPs
- Individuals and/or agencies listed on the procedure(s) receive role-appropriate training in the relevant procedure(s), such as:
 - Communications/Information Sharing SOP
 - Joint Investigations SOP
 - Training SOP
 - ICS procedures
- Training sessions are developed and scheduled to include all partners listed in the procedure(s).
- A lead agency, which is *most likely* the RRT grantee agency, is identified as responsible for maintaining and sharing the RRT’s procedure(s) that encompass WWOA best practices (electronically, physically, etc.).

Level 4: The RRT SOPs/documents that encompass WWOA best practices are followed during incident response and/or planned exercises

- Triggers for implementing the procedure(s) in response to an incident/emergency are identified and understood.
- Individuals and agencies listed in the procedure(s) will exercise response plans on a routine basis.

Level 5: The RRT SOPs/documents that encompass WWOA best practices include a formal review and update process

- A timeframe is established for review of the procedure(s).
- A procedure exists for incorporating after action review/reporting and other comments/suggestions into the procedure(s).
- A process to ensure the accuracy of contact information included in the procedure(s) is implemented.
- If not addressed in the review of the procedure(s) themselves, the procedure(s) review considers implementation of updates needed for other documents which impact WWOA, such as the following:
 - Communications/Information Sharing SOP

- Joint Investigations SOP
- Training SOP
- ICS procedures

10.0. RELATED DOCUMENTS

Examples of a MOU between different partnering agencies are included in section 12 (Attachments A & B) of this chapter.

11.0. REFERENCES AND OTHER RESOURCES

(Full citations are in the References Section, “List of Reference Documents,” listed by author.)

- Council to Improve Foodborne Outbreak Response (CIFOR). *Guidelines for Foodborne Disease Outbreak Response*. (<https://cifor.us/products/guidelines>)
- National Food Safety System Project. “Multistate Foodborne Outbreak Investigations Guidelines for Improving Coordination and Communication.” (<http://www.fda.gov/downloads/ForFederalStateandLocalOfficials/FoodSafetySystem/UCM143338.pdf>)
- North Carolina Executive Order of the Governor 38 (12/23/2009): Reestablishing the Food Safety and Defense Task Force. (<http://digital.ncdcr.gov/cdm/ref/collection/p16062coll5/id/11989>)
- Florida Food Safety and Food Defense Advisory Council. §500.033 Florida Statutes. (http://leg.state.fl.us/statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0500-0599/0500/Sections/0500.033.html)
- Treadwell, Randy J.; 2014 International Food Protection Training Institute (IFPTI) Fellowship in Food Protection: Factors Influencing Multi-Jurisdictional Collaboration within State Food Emergency Rapid Response Teams (RRTs). https://www.afdo.org/wp-content/uploads/2020/08/randytreadwell_presentation_for_afdo_final-isd_and_qa.pdf

12.0. ATTACHMENTS

- Attachment A – Epidemiological MOU between Agencies
- Attachment B – Laboratory MOU between Agencies
- Attachment C – Flowchart – Communications between Agencies

13.0. DOCUMENT HISTORY

Version #	Status*	Date	Author
1.0	I	9/26/2011	RRT Working with other Agencies WG (VA**, Baltimore District**, MI, NC, Florida District, CFSAN, MA)
1.1	R	2/1/2012	ORA/OP
1.2	R	1/24/2013	ORA/OP
2.0	R	5/26/2017	RRT Working with other Agencies WG (WA**, MD, NC, ORA OPRM)
3.0	R	3/1/2023	ORA/OP-AFDO Compiled Revisions
3.1	R	12/1/2024	ODP-AFDO Compiled Revisions

*Status Options: Draft (D), Initial (I), Revision (R), or Cancel (C)

**Workgroup Lead

Change History

- 1.1 – Editorial revisions made by ORA for document clearance.
- 1.2 – Minor editorial revisions to achievement level for clarification purposes.
- 2.0 – Revised for the 2017 Edition of the RRT Manual.
- 3.0 – AFDO compilation for 2023 Edition of RRT Manual
- 3.1 - AFDO compilation for 2025 Edition of RRT manual. Updated FDA program names resulting from the 10/2024 FDA reorganization

Attachment A – Epidemiological MOU between State Agencies

Example from North Carolina

MEMORANDUM OF UNDERSTANDING (MOU) BETWEEN THE NORTH CAROLINA (NC) DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES (NCDA&CS) AND THE NC DEPARTMENT OF HEALTH AND HUMAN SERVICES (NCDHHS) CONCERNING THE INVESTIGATION OF FOODBORNE ILLNESSES ASSOCIATED WITH FOOD SERVICE ESTABLISHMENTS AND FOOD PLANTS

I. GENERAL

This Memorandum of Understanding (MOU) is between the North Carolina Department of Health and Human Services Division of Public Health (NCDHHS DPH) and the North Carolina Department of Agriculture and Consumer Services (NCDA&CS), Food and Drug Protection Division.

The purpose of this MOU is to clarify the respective responsibilities of NCDA&CS and NCDHHS DPH in the investigation of foodborne illnesses associated with food service establishments, food facilities or other relevant food operations, and in furtherance of such purpose, to broaden cooperative efforts between the two agencies.

Responsible Agencies

NCDA&CS and NCDHHS DPH are the responsible agencies for the implementation of this MOU. The authority of the Secretary of Health and Human Services to investigate outbreaks of communicable disease is established under NCGS § 130A-5 (Duties and Powers of the Secretary of Health and Human Services). The authority of the Secretary of Health and Human Services to regulate food and lodging establishments is established under NCGS § 130A-248 and § 130A-227 (Food and Lodging Establishments). The authority for the Commissioner of Agriculture to regulate the branding or misbranding and adulteration of any food, drug, device, cosmetic or consumer commodity is established under NCGS § 106-120 et. seq (Food, Drugs, and Cosmetics). Pursuant to the power granted to the Secretary of Health and Human Services, execution of this instrument binds all authorized agents when conducting activities on behalf of each respective agency. For purposes of this agreement, NCDHHS DPH and NCDA&CS will be responsible for its implementation.

Jurisdiction

This MOU applies throughout the State of North Carolina.

Effective Date

This agreement will be effective upon approval by all agencies and will remain in effect indefinitely until superseded, rescinded, or modified by written, mutual agreement of both parties.

Amendment, Modification and Termination

This MOU may be amended or modified only by written, mutual agreement of the parties. Either party may terminate this MOU by providing written notice to the other party. The termination shall be effective upon the sixtieth calendar day following notice, unless a later date is set.

Agreement Administrators

The administrator of this MOU for NC DA&CS is the Director, NCDA&CS Food and Drug Protection Division, 4000 Reedy Creek Rd., Raleigh, NC 27607-6465, (919) 733-7366 and the administrator for NCDHHS DPH is the Foodborne Disease Epidemiologist, Medical Consultation Unit, Communicable Disease Branch, 225 N. McDowell St., Raleigh, NC 27603, (919) 715-1162.

Legal Authority

NCGS § 130A-481 (Food Defense) provides requisite authority for NCDA&CS and NCDHHS DPH to enter into this MOU. The authority of the Secretary of Health and Human Services to enter into this agreement is also established under NCGS § 130A-6 (DHHS Delegation of Authority). NCGS § 106-141 (Food and Drug Examinations and Investigations) also authorizes this MOU. For the purposes of this agreement only, “contaminated” and “adulterated” are equivalent terms.

II. RESPONSIBILITIES AND IMPLEMENTATION

Determination of Responsibility

When a reported case or outbreak of food-related illness is determined to be caused by a manufactured food product regulated by NCDA&CS, then NCDHHS DPH will collaborate with NCDA&CS on the investigation. NCDHHS will be responsible for conducting the epidemiologic investigation. NCDA&CS will be responsible for conducting an investigation at the food facility or other relevant food operations. NCDA&CS will send a copy of these reports to NCDHHS DPH. Shared information may be designated as confidential, privileged or otherwise protected and all agencies will handle such information in a manner that will continue to protect such information. Any reports containing proprietary business information will continue to be exempt from the Public Records Law when shared outside of NCDA&CS. NCDA&CS will notify NCDHHS DPH when sharing records that may contain privileged information and such documents will be conspicuously marked as such. NCDHHS DPH will notify NCDA&CS when sharing records that may contain privileged information and such documents will be conspicuously marked as such. NCDA&CS and NCDHHS DPH will also coordinate any resulting actions to remove the contaminated food from distribution. Laboratory support for

investigations will be coordinated by each agency under separate existing agreements. NCDHHS DPH will coordinate the operations of local authorized agents in the investigation of food service establishments and the control of contaminated food leading to foodborne illnesses. NCDHHS DPH will send a copy of the final outbreak report to NCDA&CS. NCDA&CS will assist in the investigation of food service establishments if the contaminated food is determined to be a manufactured food or agricultural commodity.

Implementation

NCDA&CS will inform its field representatives of their areas of responsibility. NCDHHS will define areas of responsibility among local health department officials. NCDHHS and NCDA&CS will provide or sponsor joint training sessions in the interpretation and application of principles, regulations, standards, and techniques of common concern or interest.

III. MECHANISMS FOR INFORMATION EXCHANGE

NCDHHS DPH and NCDA&CS shall maintain rosters of regional and local health officials and NCDA&CS food program supervisors and make such rosters available to each other on at least an annual basis. Whenever one agency becomes aware of actual or suspected cases of food borne illness, it shall report such cases by telephone-without delay to the other agency. NCDHHS DPH will report such cases to the local health department having jurisdiction for that locality as appropriate. Any reports relative to the incident will be exchanged with the relevant agencies. Whenever one agency learns of an FDA Class I or similar recall of food or food products distributed in North Carolina, it shall notify a designee at the other agency of such recall. If a food recall resulted from a food borne illness each agency shall notify a designee at the other agency of such illness. Throughout the recall process, agencies at all levels will make an effort to keep the other agency informed and cooperate in every way possible to expedite the removal of hazardous food from the marketplace.

IV. MECHANISMS FOR EMBARGO OF FOOD SOURCES IMPLICATED IN INVESTIGATION

Epidemiological Investigation

NCDHHS DPH will investigate food borne disease outbreaks. These investigations are initiated following receipt of reports of food borne illness, injury or suspected outbreak report via routine communicable disease surveillance, consumer complaint or notification by external partners to NCDHHS DPH or following receipt of food borne illness, injury or suspected outbreak report via consumer complaint or notification by external partners to NCDA&CS. These investigations are conducted and documented by county health departments, following procedures outlined in existing protocols. NCDHHS DPH will notify NCDA&CS of all on-going investigations where a contaminated food source is the suspected cause of a disease outbreak as appropriate. NCDA&CS will provide assistance in the investigation and may play the lead role in performing trace back of contaminated foods to their source by visiting retailers, wholesalers, and producers to review and obtain records that document the chain of distribution for the products and performing trace forward as appropriate to consignees. NCDHHS DPH will conduct investigations at retail foodservice establishments as guided and

needed by its investigation of reported case(s), and will coordinate the activities of local environmental health offices. NCDHHS DPH will analyze the findings of the epidemiologic and source investigations and make a determination as to the likelihood of an association between the illness outbreak and its cause being one or more sources. When warranted, based on the evaluation of the investigation data and analysis, the Secretary of Health and Human Services or a designee will inform the Commissioner of Agriculture that food from the source(s) constitute(s) a danger to the health of the people of the State and that such source(s) is/are unapproved source(s) for food service establishments in the State. Investigational findings will be documented and maintained following existing protocols and retention schedules.

Embargo, Recall, and Public Notification

After receiving a notification from the Secretary of Health and Human Services, the Commissioner of Agriculture shall direct and oversee the embargo, and disposition of the food in question in accordance with the provisions of the North Carolina Food, Drug, and Cosmetic Act. When deemed appropriate, NCDA&CS shall request the firm's responsible party to implement a recall of such adulterated food and to notify the public of such recall. NCDA&CS and NCDHHS DPH shall assist in cases involving embargo and recall by monitoring the disposition of contaminated food from food service establishments, food facilities, or other relevant food operations and by making available witnesses for any administrative proceedings and/or litigation associated with such actions. Nothing herein contained shall be construed to restrict the power of the Secretary of Health and Human Services and/or the Commissioner of Agriculture to take Summary Action under their respective authorities to require the discontinuance of conditions or activities constituting a danger to public health when such action is deemed appropriate under the circumstances.

Acceptance of Agreement

For the Department of Agriculture and Consumer Services

Signature

Name:

Title: Director, Food and Drug Protection Division

Date

For the North Carolina Department of Health and Human Services Division of Public Health

Signature

Name:

Title: Director, Division of Public Health

Date:

Attachment B – Laboratory MOU between State Agencies

North Carolina Example

MEMORANDUM OF UNDERSTANDING (MOU) BETWEEN THE NORTH CAROLINA (NC) DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES (NCDA&CS), THE NC DEPARTMENT OF HEALTH AND HUMAN SERVICES (NCDHHS), DIVISION OF PUBLIC HEALTH FOR ITS STATE LABORATORY OF PUBLIC HEALTH.

I. GENERAL

This Memorandum of Understanding (MOU) is between the North Carolina Department of Health and Human Services, Division of Public Health (NCDHHS DPH) and the North Carolina Department of Agriculture and Consumer Services (NCDA&CS). The purpose of this MOU is to clarify the respective laboratory testing responsibilities of NCDA&CS and NCDHHS DPH in the investigation of food borne illness outbreaks associated with food service establishments and food plants, and in furtherance of such purpose, to broaden cooperative efforts between the two agencies.

Responsible Agencies

NCDA&CS and NCDHHS DPH are the responsible agencies for the implementation of this MOU. The authority of the Secretary of Health and Human Services to investigate outbreaks of communicable disease is established under NCGS § 130A-5 (Duties and Powers of the Secretary of Health and Human Services), and to regulate food and lodging establishments is established under NCGS § 130A-248 and § 130A-227 (Food and Lodging Establishments). The authority for the Commissioner of Agriculture to regulate the misbranding and adulteration of any food, drug, device, cosmetic or consumer commodity is established under NCGS § 106-120 et. seq. (Food, Drugs, and Cosmetics).

Jurisdiction

This MOU applies throughout the State of North Carolina.

Effective Date

This agreement will be effective upon approval of both agencies and will remain in effect indefinitely until superseded, rescinded, or modified by written, mutual agreement of both parties.

Amendment, Modification and Termination

This MOU may be amended or modified only by written, mutual agreement of the parties. Either party may terminate this MOU by providing written notice to the other party. The termination shall be effective upon the sixtieth calendar day following notice, unless a later date is set forth.

Agreement Administrators

The administrator of this MOU for NCDA&CS is the Director of NCDA&CS Food and Drug Protection Division, 4000 Reedy Creek Rd., Raleigh, NC 27607-6465, (919)-733-7366 and the administrator for NCDHHS DPH is the Director of the North Carolina State Laboratory of Public Health, 4312 District Drive, Raleigh, NC 27607, (919)-807-8960.

Legal Authority

NCGS § 130A-481 (Food Defense) provides requisite authority for NCDA&CS and NCDHHS DPH to enter into this MOU. The authority of the Secretary of Health and Human Services and its delegates to enter into this agreement is also established under NCGS § 130A-6 (DHHS Delegation of Authority). NCGS § 106-141 (Food and Drug Examinations and Investigations) also authorizes this MOU.

II. RESPONSIBILITIES AND IMPLEMENTATION

Determination of Responsibility

When a reported case of foodborne illness is determined to be caused by a food product regulated by NCDA&CS, NCDHHS DPH will collaborate with NCDA&CS on the investigation. NCDHHS DPH will be responsible for the laboratory analysis of human clinical samples collected during the investigation. NCDA&CS will be responsible for the laboratory analysis of food and/or environmental samples collected during the investigation. NCDHHS DPH will perform serotyping and molecular subtyping on both clinical isolates and food/environmental isolates collected during the course of an investigation, as approved by the Director of the North Carolina State Laboratory of Public Health or designee. Both agencies will submit a copy of laboratory results to the partner agency.

Shared information may be designated as confidential, privileged or otherwise protected and all agencies will handle such information in a manner that will continue to protect such information. Any reports containing proprietary business information will continue to be exempt from the Public Records Law when shared outside of NCDA&CS. NCDA&CS will provide notification when sharing records that may contain privileged information and such documents will be conspicuously marked as such.

III. MECHANISMS FOR INFORMATION EXCHANGE

Reports detailing laboratory analysis related to food borne illness outbreak investigations or cases will be shared between the agencies through the most efficient means such as telephone, email, or fax.

IV. LABORATORY FINDINGS

NCDA&CS will test food and/or environmental samples collected during investigations. NCDHHS DPH will perform serotyping and molecular subtyping on both clinical isolates and

food/environmental isolates collected during the course of an investigation, as approved by the Director of the North Carolina State Laboratory of Public Health or designee. If a laboratory analysis requires Biosafety Level 3 (BSL-3), the specimen will be transferred to the State Laboratory of Public Health. Director of the North Carolina State Laboratory of Public Health or designee and/or NCDA&CS Food & Drug Protection Division Director or designee will notify the other agency of all on-going laboratory investigations where a contaminated food source is the suspected cause of a food borne illness outbreak.

For the Department of Agriculture and Consumer Services

Signature

Name:

Title: Director, Food and Drug Protection Division

Date:

For the Department of Health and Human Services

Signature

Name:

Title: Director, Division of Public Health

Date:

Attachment C – Flowchart – Communications between Agencies

