

FDA EMERGENCY RESPONSE

Rapid Response Teams And CORE Network

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FDA Rapid Response Team (RRT) Program

Overview

Why Rapid Response Teams (RRT)

- White House & Congressional interest in improving response and food safety
 - Food and Drug Administration Amendments Act (2007), President's Food Safety Working Group (2009), and the Food Safety Modernization Act (2011)
- Multi-year Cooperative Agreement Program
 - Awards range from \$300,000 - \$500,000
 - Oversight provided by ORA Office of Partnerships
 - Cross-Center RRT Advisory Committee
 - 19 RRTs (within 14 FDA Districts) are currently funded

Rapid Response Teams (RRTs)

Original RRTs		New RRTs	
Southeast Region		Central Region	
NC (ATL-DO)	GA (ATL-DO)	MI (DET-DO)	PA (PHI-DO)
FL (FLA-DO)	TN (NOL-DO)	MN (MIN-DO)	WV (BLT-DO)
	MS (NOL-DO)	VA (BLT-DO)	MD (BLT-DO)
Northeast Region		Southwest Region	
MA (NWE-DO)	NY (NYK-DO)	TX (DAL-DO)	IA (KAN-DO)
	RI (NWE-DO)		MO (KAN-DO)
Pacific Region		Summary: Total: 19 States/14 Districts –2008: 6 States/7 Districts –2009: 3 States/3 Districts –2012: 10 States/7 Districts	
WA (SEA-DO)	N/A		
CA (LOS-DO & SAN-DO)			

RRT Program Rationale

- Develop and maintain multi-jurisdictional RRTs that operate under ICS/NIMS to support integrated all-hazards prevention, response and recovery efforts for food/feed
 - Develop and support wide-spread adoption of best practices.
 - Strengthen federal/state/local infrastructure through the development of response capabilities in adherence with the preparedness cycle for capability building as per the National Response Framework



RRT Program Rationale

- Unify and coordinate federal/state/local food/feed emergency response efforts including:
 - Training, investigations, data sharing, data analysis and communications.
 - Strengthening the link among epidemiology, lab and environmental health components
- Ensure alignment with national priorities, including FSMA, IFSS, the National Response Framework, and the PFP.

Program Outcomes

- Development of Rapid Response Capabilities
 - District/State response teams
 - ICS Implementation (Unified Command)
 - RRT Manual (Best Practices)
 - Metrics
- Improve Program Infrastructure
 - MFRPS Implementation (original 9 only)
 - Sustainability
- Strengthen Federal/State/Local Collaboration
 - Across programs (health, agriculture, etc)
 - Across initiatives (IFSS, CDC FoodCORE, etc)



Did You Know

9 RRTs are in Public Health Agencies

10 RRTs are in Departments of Agriculture

RRT Best Practices Manual

- Model for rapid response capabilities development
 - Achievement Levels
- Each chapter designed to be used as a stand-alone document
- Developed by Working Groups
 - Developed by original 9 RRTs (states and District/Regional partners)
- Reviewed by Many Partners
 - FDA Headquarters and Field Offices
 - State and local agencies
 - Associations (AFDO, APHL, NACCHO, ASTHO)
 - Federal Partners (e.g., FSIS)



RRT Manual Chapters

Volume 1

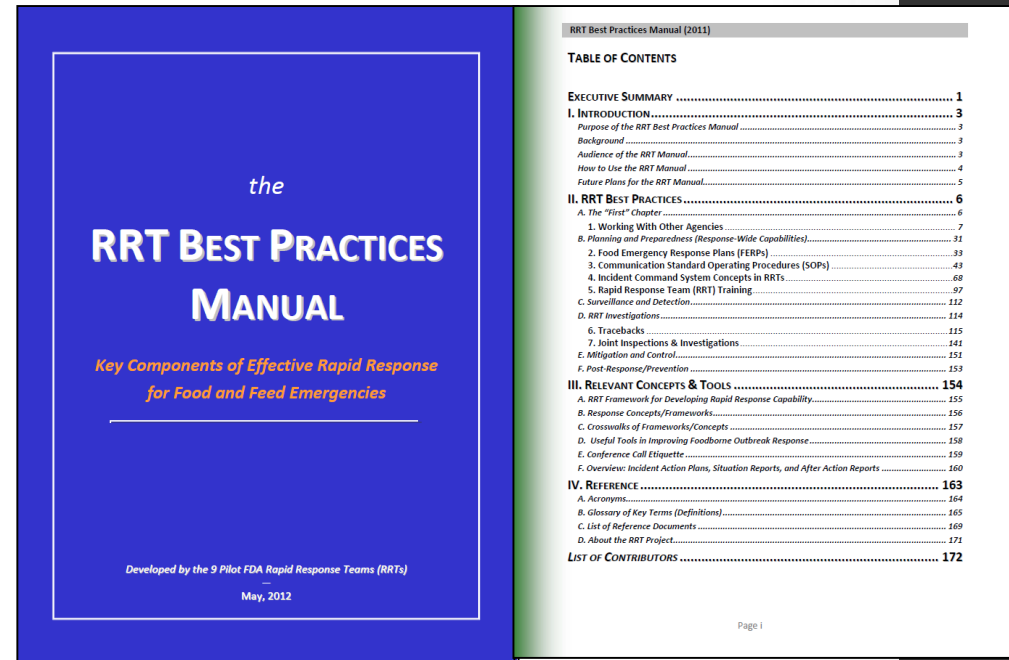
1. Working With Other Agencies
2. Food Emergency Response Plan
3. Communication SOPs
4. Training
5. Tracebacks
6. Joint Investigations
7. ICS

Volume 2

1. Recalls
2. Industry Relations
3. After Action Reviews
4. Environmental Sampling & Records Collection
5. Metrics
6. CIFOR
7. Cooperative Programs

RRT Best Practices Manual

- The RRT Best Practices Manual is available upon request to OP
 - Send an email to OP-ORA@fda.hhs.gov
- Developed by original 9 RRTs (states and District/Regional partners)
- The 2013 Edition (a.k.a. Volume 2) is expected this summer
 - Includes 7 new chapters, including metrics!



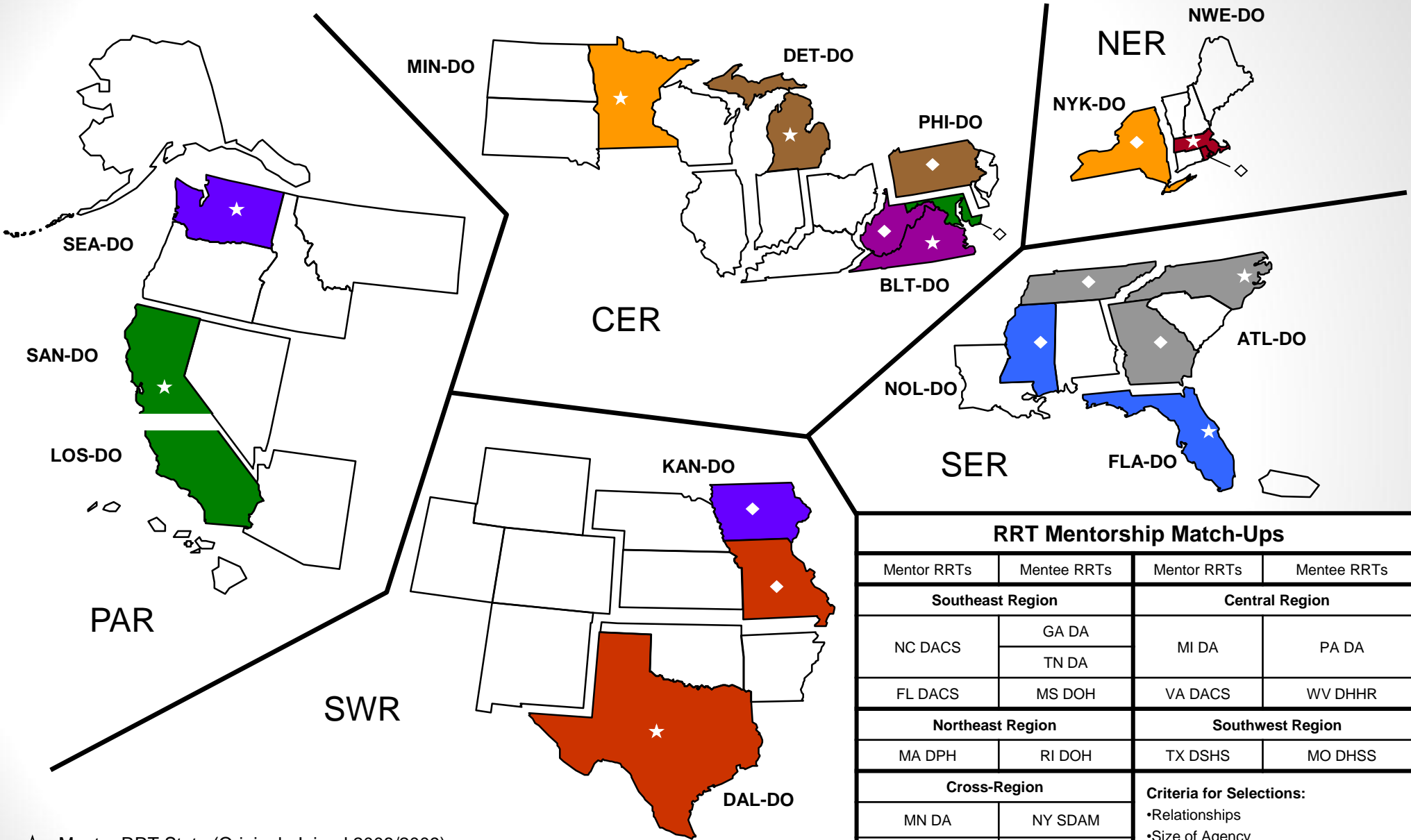
Building a RRT

- Building State-District collaboration to minimize barriers to effective field response
- RRT Structures
 - Each different
 - Varied state structures, District partners
 - Steering committees, RRT coordinators, specialized staff, etc.
 - Common core capabilities
 - Participants
 - Leads: State Food Regulatory & FDA District
 - Also: Epidemiology, Laboratories, Local health, Feed
 - Work together
 - Joint meetings, training, and investigations
 - Joint Plans: State Food Emergency Response Plans, Communication SOPs, ICS Structures

Standing Up the New RRTs

- Mentorship
 - Four factors: relationships, agency size, jurisdiction and geographic proximity
 - Goal: smoother, more efficient team stand-up & development
- Development of RRT Capacity Building Process & Mentorship Framework
- Transparency & Communications
 - With States
 - With ORA Field & HQ components
 - With other stakeholders

Rapid Response Teams (RRT) Mentorship Match-Ups



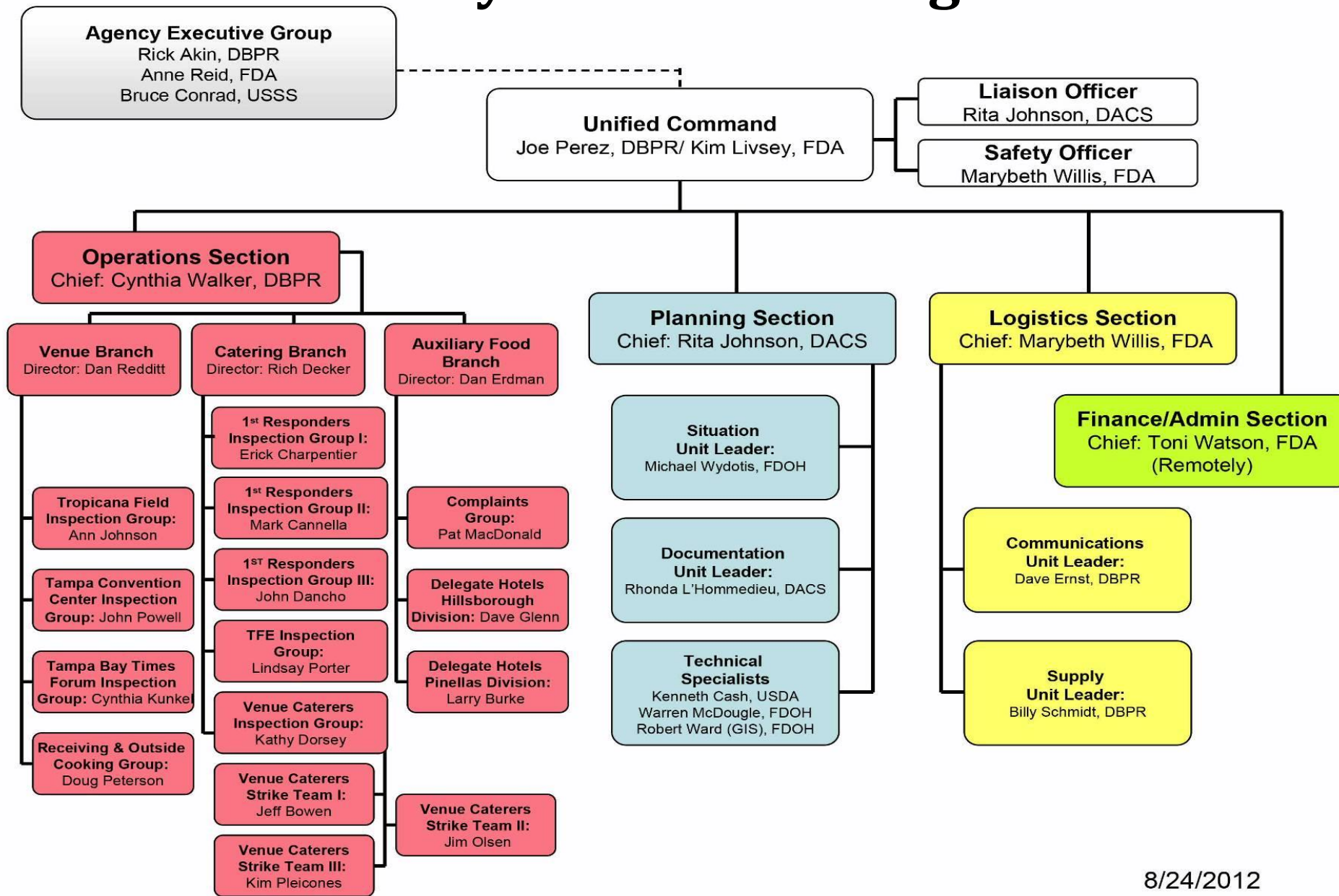
☆ = Mentor RRT State (Original- Joined 2008/2009)
 ◇ = Mentee RRT State (New- Under 2012 RFA)

RRT Mentorship Match-Ups			
Mentor RRTs	Mentee RRTs	Mentor RRTs	Mentee RRTs
Southeast Region		Central Region	
NC DACS	GA DA	MI DA	PA DA
	TN DA		
FL DACS	MS DOH	VA DACS	WV DHHR
Northeast Region		Southwest Region	
MA DPH	RI DOH	TX DSHS	MO DHSS
Cross-Region		Criteria for Selections:	
MN DA	NY SDAM	<ul style="list-style-type: none"> •Relationships •Size of Agency •Jurisdiction •Geographic Proximity 	
WA DA	IA DIA		
CA DPH	MD DHMH		

RRT Program Goals & Outcomes

- Original RRTs
 - Leadership in promoting RRT capabilities and development
 - Enhancing & operationalizing rapid response capabilities
 - Documented best practices in the RRT Manual
 - High-Profile Outcomes
 - 2011: Mold in Snokist Applesauce (WA & NC RRTs)
 - 2011: *Salmonella* Agona in Papaya (TX RRT)
 - 2011: *E. coli* O157:H7 in in-shell Hazelnuts (MI, MN & CA RRTs & WI)
 - Article on the traceback published in the Journal of Food Protection
 - 2012: *Salmonella* in Diamond Pet Food (MI RRT)
 - Resultant large scale recall
 - Surge Capacity at 2012 RNC

RNC Food Safety Incident Management Team



RRT Program Goals & Outcomes

- New RRTs
 - Developing Federal/State/Local Collaboration
 - Joint trainings & exercises and joint or coordinated SOPs
 - Establishing procedures & processes for rapid response
 - Staffing and equipping teams

RRT 5 Year Plan

- Provide a clear vision and path forward in the face of recent change and lessons learned
 - 10 new RRTs added to the program
 - RRT and OP/DFSR leadership change
 - The appearance of several new response players on the field since the inception of the RRT Project
 - FDA CORE, PFP, FSMA, CIFOR...the list goes on
 - A wealth of investment and productivity from the original RRTs
 - New mentorship role for original RRTs
 - Best Practices Manual Volume 1 now available

Program Objective 1: Mentorship

- *Propagate Best Practices & Lessons Learned*
 - Develop a national RRT mentorship program (incorporating regional elements), including establishment of basic expectations for mentors/mentees and mechanisms to facilitate mentorship match-ups and track and evaluate progress.
 - Develop programmatic infrastructure to support implementation of the RRT Concept and Best Practices Manual by funded and non-funded RRTs.

Program Objective 2: RRT Capability Data Capture & Assessment

- *Measure Current Performance and Meaningful Success*
 - Measure process improvement, increases in efficiency/effectiveness and success at the individual RRT level and across the RRT Program.
- *Dual purpose of the tool:*
 - **Survey function** to ascertain current implementation of RRT capabilities, functions, etc, and overall RRT status
 - **Assessment function** to determine effectiveness at both the individual RRT level and at the RRT Program level and facilitate improvement

Program Objective 3: Communication

- *Transparency & Information Sharing*
 - Ensure transparency of objectives and outcomes for the RRT Program.
 - Actively promote and justify sustainment of the RRT Program and individual RRTs through strategic application of capability data capture/assessment and enhanced communications, to include promotional materials.

Program Objective 4: Post Response & Prevention

- *Lessons Learned, Corrective Actions & Continuous Improvement*
 - Ensure documentation and follow up for lessons learned to support prevention and facilitate continuous process improvement.
 - Operationalize models to analyze outcomes from concluded responses, identify causing factors and develop and effectively communicate recommendations for prevention.

Program Objective 5: RRT Maintenance & Maturity

- *Maintenance & Maturity of the RRT Concept: Innovation and Integration*
 - Develop multi-jurisdictional RRTs (minimum District/State) that operate under ICS/NIMS to support integrated all-hazards prevention, response and recovery efforts for food/feed.
 - Ensure continual improvement of the RRT Concept through investment in new models, capabilities and methodologies to improve and enhance response.

Program Objective 6: Sustainability

- *Program Evolution, Viability & Relevance*
 - Document and support successful efforts on the part of RRT state components towards sustainability of capabilities developed under the RRT cooperative agreement.
 - Formalize and make operational the RRT Program's role within a national, cohesive approach to response capacity and capability building (standards, best practices, innovation).
 - Obtain management support and begin to implement a strategy to align the structure, function and capabilities of RRTs within the context of the National Response Framework, including regional support structures.

Surge Capacity Workgroup

- Comprised of participants from SER RRTs, GEMA, OP
- Defining Surge Capacity
- Examining When it is Needed
 - Identifying Resources in States
 - Critical Elements needed to Offer or Accept Support
- Mechanism for Regional Response
- Exploring Inclusion of RRTs as Typed Resource under NIMS

CONTACTS

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FDA
CORE | COORDINATED
NETWORK | OUTBREAK
RESPONSE &
EVALUATION

FDA's New Approach to Managing Foodborne Outbreak Surveillance, Response and Post-Response Efforts

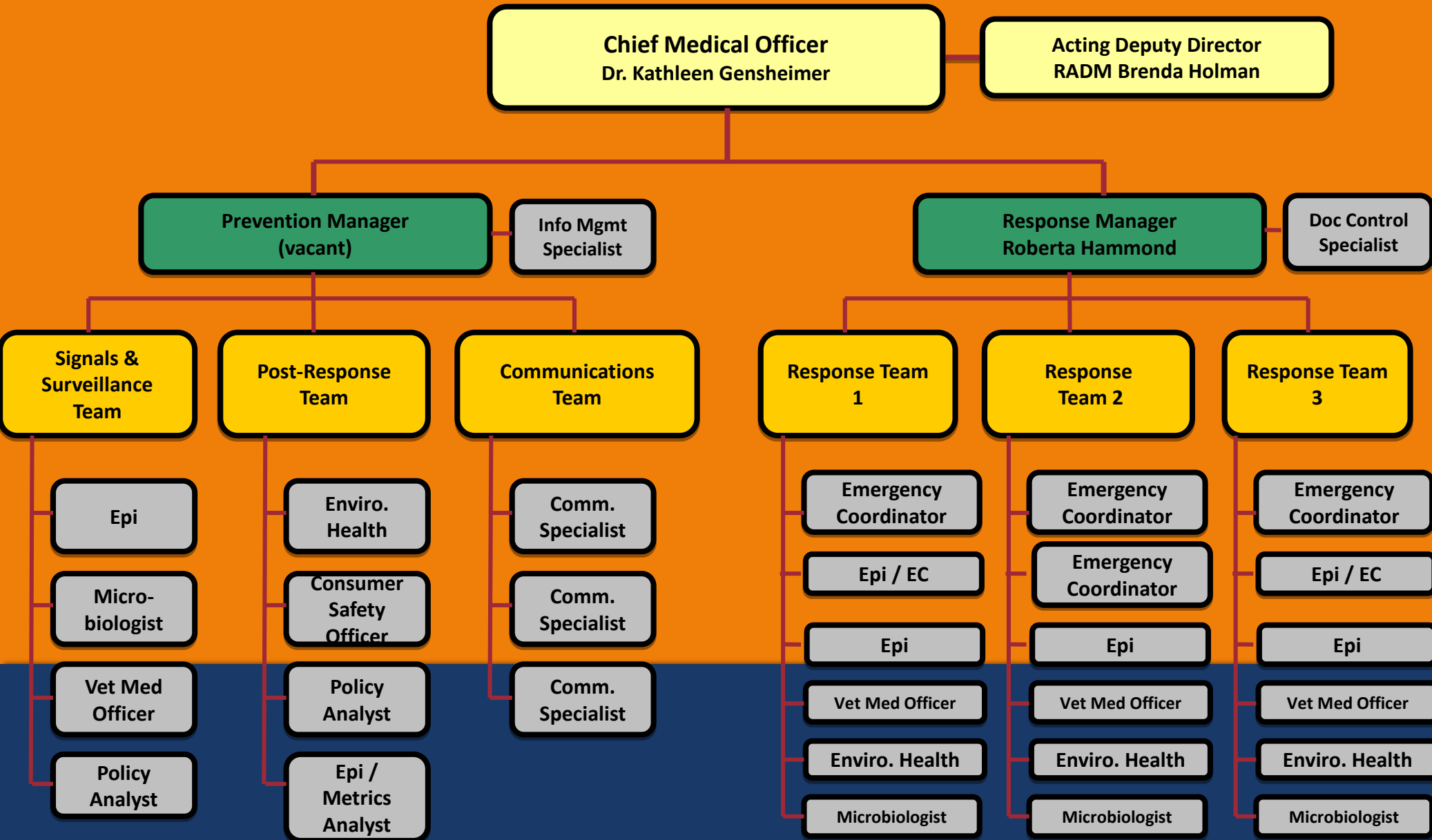
So What is **CORE**?

- FDA's Coordinated Outbreak Response and Evaluation Network
- It is a full-time staff dedicated to the investigation, control and prevention of outbreaks of illnesses caused when human food, animal food and cosmetic products are contaminated
- Signals and Surveillance: Finding the Outbreak
- Response: Stopping the Outbreak
- Post-Response: Preventing the Next Outbreak

So What is **CORE**?

- Designed to streamline and strengthen FDA's efforts to:
 - Prevent
 - Detect
 - Investigate
 - Respond
 - Evaluate
 - Apply Lessons Learned

CORE Organizational Structure



CORE Interaction

with External Partners

CDC	USDA	States
<p>Works with CORE Signals & Surveillance Team to discuss emerging outbreaks</p>	<p>Weekly meetings with CORE Signals & Surveillance Team and CDC to discuss emerging outbreaks</p>	<p>CORE works through FDA District Offices with state and local public health and agriculture officials on investigations and inspections</p>
<p>Works with CORE Response Teams on outbreaks related to FDA-regulated human and animal foods</p> <p>Lab results from the states are reported to the FDA districts and/or CDC.</p>	<p>FSIS and other USDA offices work closely with CORE Response Teams on outbreaks associated with dual jurisdiction products</p>	<p>Rapid Response Teams (RRTs) continue to work with FDA District Offices</p> <p>CORE works through its District offices for assistance from the nationwide FERN lab network.</p>

CORE Functional Areas

- Signals and Surveillance
- Response
- Communications
- Post-Response
- ✓ CORE is organized to respond quickly, with solid information behind them
- ✓ It all begins with Signals and Surveillance...

CORE Prevention: Signals and Surveillance Team

Specific Roles & Responsibilities

- Analyzes internal and external information for illness trends and potential clusters of illness
- Monitors emerging clusters of illness
 - CAERS, MARCS, FACTS, Consumer Complaints, PulseNet, FoodNet, etc...
- Communicates regularly with CDC and USDA to discuss emerging human and animal food outbreaks
- Provides data and trending information for situational awareness reports

CORE's (3) Response Teams:

Specific Roles & Responsibilities

- Coordinates information flow across organizations during a response
- Along with ORA and others in FDA, determines strategy for and coordinates the implementation of response activities
- Conducts traceback investigations in close collaboration with FDA District Offices
- Evaluates environmental, epidemiologic, and laboratory data to inform assignments and direction of outbreak investigations
- Applies ICS principles during response efforts

Regional Incident Management Teams (IMT)

- Teams with in-depth training in Incident Command System (ICS)
 - Command and General Staff
- Deployed/activated to mitigate incidents and events on behalf of ORA
 - Foodborne Illness Outbreaks
 - Disasters
 - Recalls
 - Special Events
- Allows management and other staff to focus on:
 - Performance Goals
 - Congressional Inquiries
 - Day to Day Responsibilities



CORE Prevention: Post-Response Team

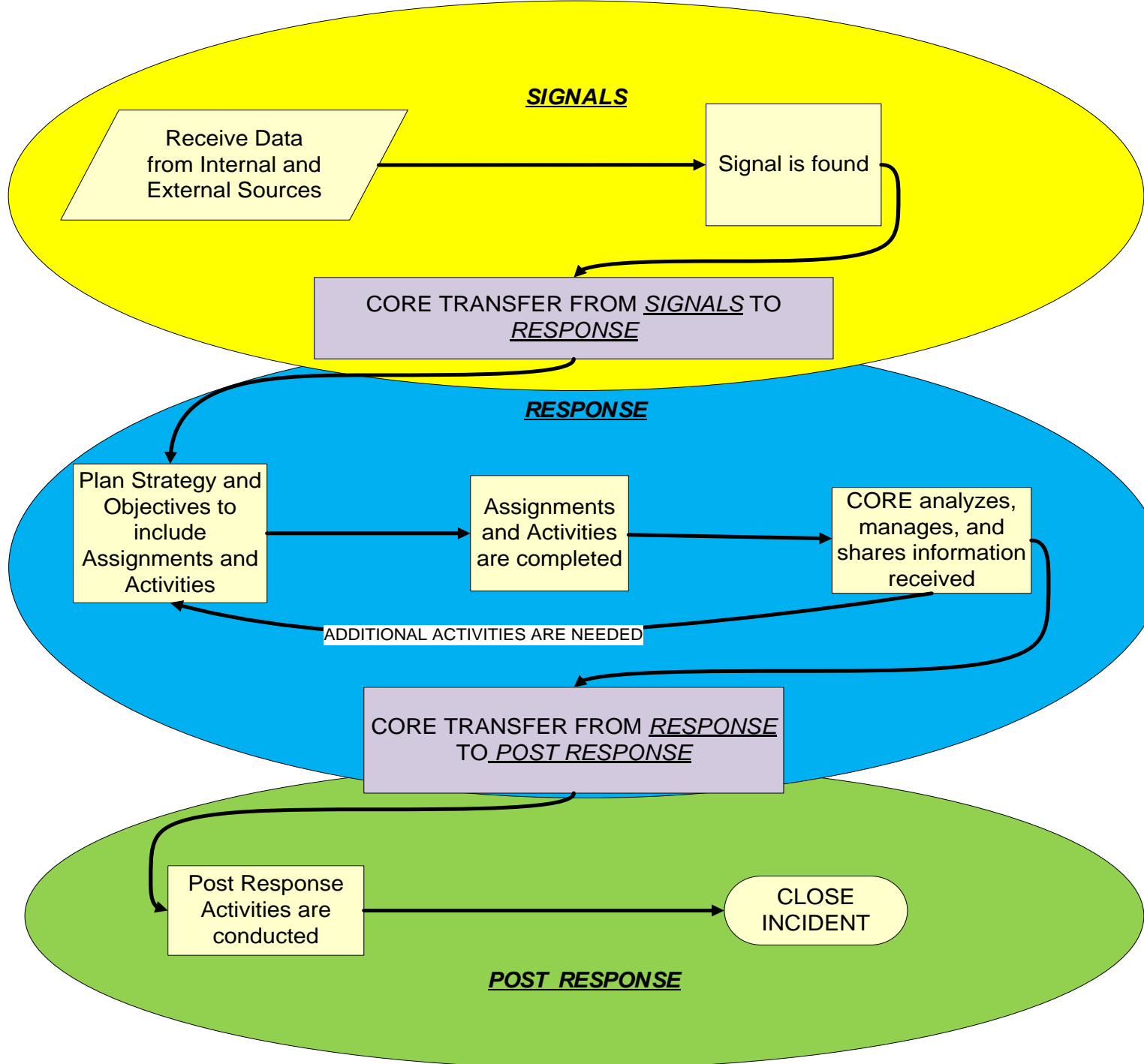
Specific Roles & Responsibilities

- Performs environmental assessments/root-cause analysis
- Integrates outbreak findings into FDA guidance, policies, and regulations for human and animal food
- Publishes findings on outbreak investigations and environmental assessments
- Develops and maintains performance metrics
- Maintains the CORE Outbreak Database
- Conducts lessons learned and lessons learned reports following an outbreak

CORE Communications Team:

Specific Roles & Responsibilities

- Provides strategic communications
- Ensures consistent and coordinated messaging during outbreaks
- Develops and continually updates talk points, FAQs, and web copy
- Participates on cross-agency workgroups to enhance outbreak communications efforts with CDC and USDA
- Works with internal and external stakeholders



CORE Network

The Summary

- **The CORE Network**

- Builds Upon FDA's Established Best Practices
- Incorporates Lessons Learned
- Expands FDA's Monitoring and Post-Response Capabilities
- Investigates and Documents Underlying Causes
- Drives Prevention-Based Food Safety Policies

Web page:

<http://www.fda.gov/Food/FoodSafety/CORENetwork/default.htm>

Questions?

- CORE Internal Website:
<http://inside.fda.gov:9003/CFSAN/CORE/default.htm>
- CORE Incident Status Board:
<http://inside.fda.gov:9003/CFSAN/CORE/ucm273650.htm>
- CORE External Website:
<http://www.fda.gov/Food/FoodSafety/CORENetwork/default.htm>