

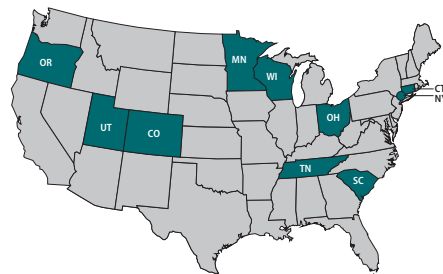
FoodCORE: Year Six Summary

Foodborne Disease Centers for Outbreak Response Enhancement

January 1 – December 31, 2016

Background

Foodborne Diseases Centers for Outbreak Response Enhancement (FoodCORE) centers address gaps in enteric disease response through enhanced capacity in laboratory, epidemiology, and environmental health to improve timeliness and completeness of outbreak response activities. The FoodCORE centers during Year Six (January 1 – December 31, 2016) were: Colorado, Connecticut, Minnesota, New York City, Ohio, Oregon, South Carolina, Tennessee, Utah, and Wisconsin.



Program Highlights

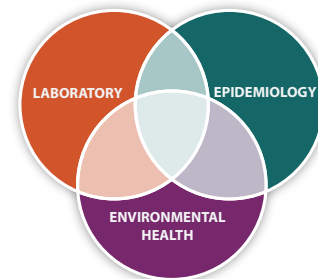
In April of 2016, representatives from all ten FoodCORE sites were joined by staff from CDC, FDA, and FSIS for a Vision Meeting in Atlanta, Georgia. Topics discussed at the meeting include metrics changes, publications, and future goals for the program. Meeting attendees were also given the opportunity to tour CDC's Emergency Operations Center, sit-in on a weekly tri-agency meeting to discuss ongoing cluster investigations, or attend a SEDRIC training. Throughout the year, FoodCORE centers maintained communication on monthly conference calls.

To showcase the value and impact of providing targeted resources to foodborne illness programs, presentations on the program are delivered at meetings and conferences. Presentations delivered in Year Six targeted new audiences including health communication and evaluation specialists. This includes presentations at:

- Council of State and Territorial Epidemiologists (CSTE) Annual Meeting
- National Conference on Health Communication, Marketing, & Media (NCHCMM)
- American Evaluation Association (AEA) Annual Conference
- American Public Health Association (APHA) Annual Meeting

During Year 6, two success stories were added to the FoodCORE website that highlighted successful investigations of FoodCORE centers. These stories demonstrated how the program advanced public health across the United States

- In February, a story was published about an outbreak linked to a summer camp in Colorado with many ill Tennessee residents. Though many miles apart, Tennessee and Colorado were able to work together to identify and thoroughly investigate this outbreak.
- In April, a story was published about Utah's perseverance in investigating a *Campylobacter* outbreak that was linked to a raw milk. Collaboration across public health agencies allowed Utah to isolate the outbreak strain in the milk, revoke the dairy's raw milk permit, and prevent additional illnesses.



Program Performance

Centers report metrics twice a year to evaluate changes resulting from the targeted FoodCORE resources. Metrics for *Salmonella*, Shiga toxin-producing *Escherichia coli* (STEC), and *Listeria* (SSL) have been collected since late 2010. Metrics for norovirus, other etiologies, and unknown etiology (NOU) investigations have been collected since 2012.

The metrics collected by FoodCORE centers are continually revised to best meet program needs. Changes were made to the metrics at the 2016 Vision Meeting that reflect the changing capacity at the FoodCORE centers. SSL metrics were expanded to capture timeliness and completeness of whole genome sequencing (WGS) testing and, in response to revised case definitions, to include data on probable and suspect cases in addition to laboratory confirmed cases. Metrics for *Campylobacter* and *Shigella* were also added to the SSL metrics with optional reporting. NOU metrics were expanded to better capture changes in culture-independent diagnostic testing. Metrics changes proposed at the 2016 Vision Meeting went into effect in January 2017 after pilot-testing in 2016.

See page two for figures and graphs for select metrics. Information on all of the metrics and complete data tables are available on the [FoodCORE website](#).

FoodCORE Web Resources:

FoodCORE program website:

<https://www.cdc.gov/foodcore/index.html>

FoodCORE Success Stories and Highlights:

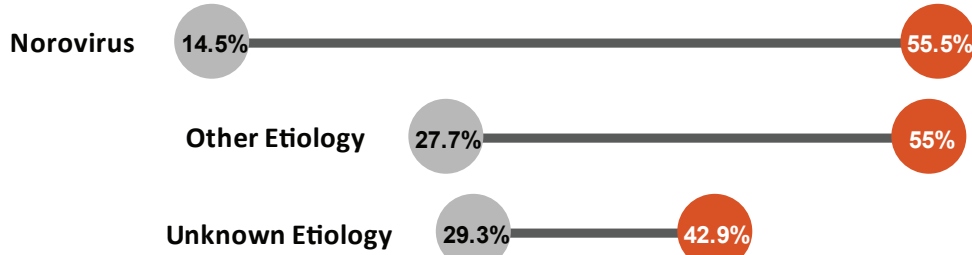
<https://www.cdc.gov/foodcore/successes.html>

FoodCORE Model Practices:

<https://www.cdc.gov/foodcore/resources.html>

Graphs for Select Metrics – Year Six

The percent of Norovirus, Other Etiology, and Unknown Etiology investigations with non-culture-based diagnostic testing at the public health lab increased from Year 5 to Year 6*

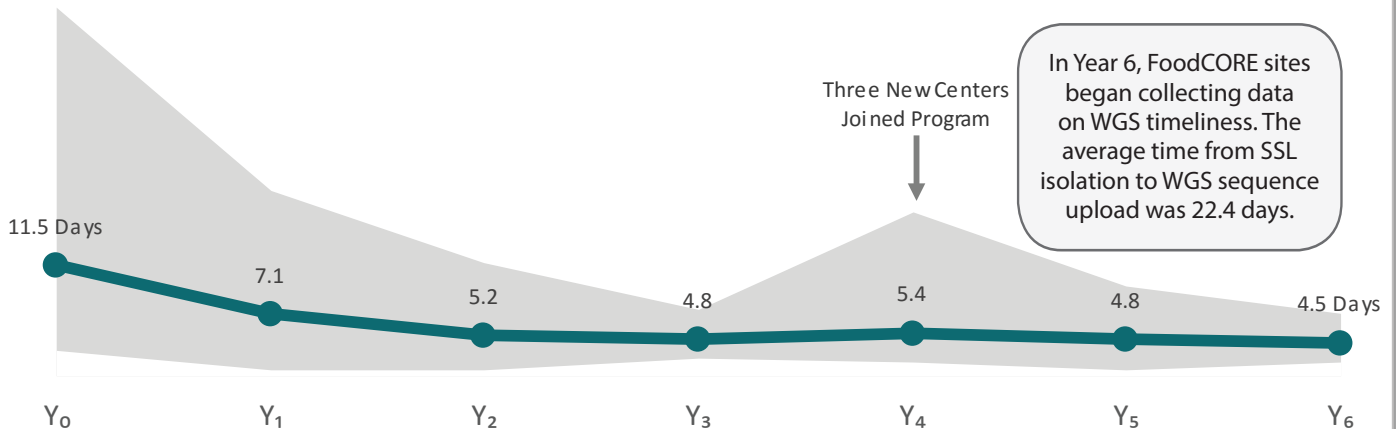


The greatest increase was seen in Norovirus investigations, which increased to nearly 4 times the Year 5 rate.

* Not a required metric

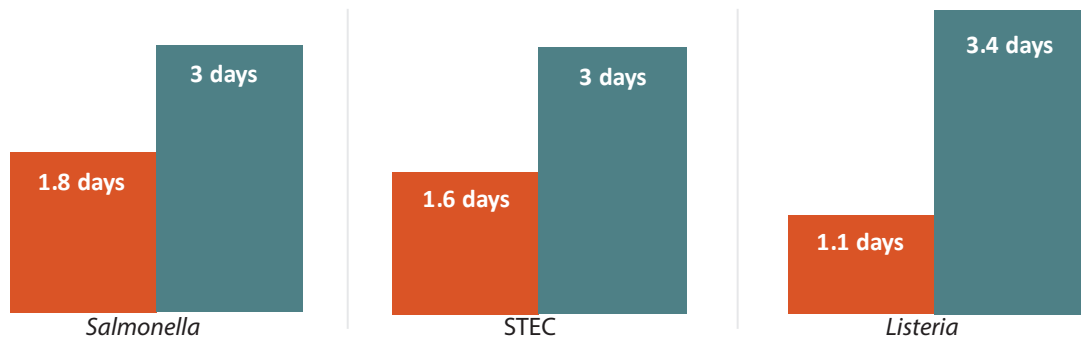
The average number of **days to complete PFGE** for *Salmonella*, Shiga toxin-producing *Escherichia coli* (STEC), and *Listeria* (SSL) isolates decreased by over 50% since baseline

The **longest average time** for any center to complete PFGE for SSL isolates decreased 5 fold from 35 days to 7 days



In Year 6, the median number of days for FoodCORE centers to **attempt** and **complete** interviews for SSL case-patients was under 4 days

FoodCORE sites attempted interviews for more than 95% of all confirmed and probable/suspect SSL case-patients.



FoodCORE centers have demonstrated that targeted investments can improve the completeness and timeliness of outbreak response activities. They have strengthened their outbreak response programs to conduct faster, better, and more complete investigations, to ultimately help stop the spread of enteric diseases.

Baseline (Y₀) = Oct 2010 – Mar 2011

Y₁ = Oct 2010 – Sept 2011

Y₂ = Oct 2011 – Dec 2012

Y₃ = Jan 2013 – Dec 2013

Y₄ = Jan 2014 – Dec 2014

Y₅ = Jan 2015 – Dec 2015

Y₆ = Jan 2016 – Dec 2016