

CDC and the Food Safety Modernization Act

CDC is committed to supporting the implementation of the Food Safety Modernization Act (FSMA) and is working closely with the Food and Drug Administration (FDA) and other agencies to execute its provisions. The new authorities for FDA and enhanced surveillance and response capacity at local, state and federal levels authorized in the Act can transform food safety systems in the United States. Inherent in the legislation is the potential to increase overall capabilities and provide new opportunities for detecting more problems sooner, responding to them faster and more efficiently, monitoring the effectiveness of interventions to prevent foodborne illness, and providing data to guide food safety policy.

CDC's ability to provide high quality surveillance data and leadership in outbreak investigations will support FDA in designing data driven preventive controls and food safety standards. The FSMA promotes the enhancement of foodborne illness surveillance systems to improve the collection, analysis, reporting, and usefulness of foodborne illness data.

CDC Responsibilities in the Food Safety Modernization Act

The new legislation recognizes that robust foodborne illness surveillance data are needed to inform targeted prevention interventions. Relying on CDC's expertise in this area the FSMA directs the agency to:

- Improve coordination and data sharing with public health partners and the public;
- Increase state and local participation in national surveillance networks;
- Expand and integrate national surveillance systems;
- Enhance laboratory and epidemiological methods for agent identification, outbreak detection and investigation; and
- Improve the attribution of specific illnesses to specific foods.

The FSMA also directs CDC to designate five Integrated Food Safety Centers of Excellence at state health departments to identify and implement best practices in foodborne diseases surveillance and to serve as a resource for public health professionals at state, local and regional levels.

- The HHS Secretary is charged with creating a working group to guide efforts to establish these Centers of Excellence.

Other provisions of the FSMA require, or will be enhanced by CDC leadership and participation. These activities include, but are not limited to the following:

- Developing the Joint Food Safety and Food Defense Research Plan;
- Designating high-risk foods based, in part, on the history of foodborne illness outbreaks attributed to such foods
- Establish a work group to advise on the improvement of surveillance data collection, access and use;
- Developing guidelines for individuals to manage the risk of food allergy and anaphylaxis in schools and early childhood education programs.

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Implementation for Section 205 “Surveillance”

CDC has many ongoing activities which pertain to this section. Some of the additional activities needed to fulfill the components of this section include*:

“Improve the collection, analysis, reporting and usefulness of data on foodborne illnesses”

- Increased participation in national surveillance networks and systems
- Enhanced pathogen testing and genotyping methods
- Enhanced IT infrastructure for electronic laboratory reporting and data integration
- Customized attribution to agency specific food commodities, attribution by source and point of processing
- Systematic collection and advanced testing of samples from outbreaks of unknown etiology
- Reference database for standard pathogen information from public health laboratories
- Extramural funding for scientific research by academic institutions
- Establishing a “Working Group” to recommend improvements in foodborne disease surveillance
- Increased participation in OutbreakNet sentinel sites
- Standardized investigation data elements and enhanced IT infrastructure for communication and data integration
- Extramural funding to implement best practices in outbreak response and containment nationally
- Conduct a review of state and local capacities

Implementation for Section 399V-5. “Food Safety Integrated Centers of Excellence”

- Designate 5 Integrated Food Safety Centers of Excellence to serve as resources to respond to foodborne disease outbreaks

Implementation for Section 112. “Food Allergy and Anaphylaxis Management”

- Develop guidelines to manage the risk of food allergy and anaphylaxis in schools and early childhood education programs

*Analysis of the current programs and gaps applicable to the legislation is ongoing

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