Welcome

We welcome our partners to the Partnership for Food Protection (PFP) Newsletter! Our intent is to spread the word on all the great work the PFP Workgroups are accomplishing.

This edition features:

- A letter from the PFP Governing Council sharing information about the April face-to-face meetings of four workgroups;
- The mission and vision for a national integrated food safety system (IFSS);
- Thoughts from recently retired PFP Governing Council member Brian Collins;
- A report on draft best practice statements for recalls, with examples;
- An explanation of the job task analysis methods being worked on by the PFP Training and Certification Workgroup;
- An update on FDA’s 20.88 Long Term Information Sharing Agreement; and
- An update on the availability of after action reports.

As always, please let us know what you are working on. This newsletter will be published on a quarterly basis. If you have contributions to future newsletters, please send to pfp@fda.hhs.gov.

The PFP is a group of dedicated professionals from federal, state, and local governments with roles in protecting the food supply and public health. PFP is the structure used to meld and coordinate representatives with expertise in numerous specialties--food, feed, epidemiology, laboratory, animal health, environment, and public health--to create an IFSS.

PFP Governing Council Members

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*Non-voting council member
Dear Valued Partner,

On April 29-30, 2014, the PFP Governing Council and four of the PFP Workgroups - Animal Feed Net, National Feed Sampling, Information Technology, and Response & Recall-- met face-to-face in Indianapolis, Indiana. The Governing Council’s work during this time was focused on developing a PFP Strategic Plan that outlines how the PFP can contribute to the development of an IFSS over the next six years.

An important factor of the PFP Workgroup membership is that the PFP is made up entirely of volunteers. Producing resource and best practices documents for an IFSS involves tremendous commitment and time from our workgroup members. The work of the PFP is typically conducted through teleconferences and webinar meetings. Because support and resources were made available, the workgroups were able to take advantage of the opportunity to meet face-to-face.

Face-to-face meetings are highly constructive as members can finally place names with faces after several months of only electronic and phone communication. Having workgroup and Governing Council members physically present provides a synergistic environment to create the highest level of engagement and a forum for exchanging of ideas, dynamic interaction, and focused discussions on how best to achieve an IFSS.

The PFP Governing Council has been busy developing the path forward for the next phase of the PFP. We are doing this by creating a strategic plan and identifying, from the perspective of the PFP, the top priorities needed to further an IFSS. The goal of the strategic plan is to further mutual reliance through collaborating, sharing solutions, and solving problems together. We are truly excited about the future of the PFP and the contributions we know the PFP will make to benefit public health.

Sincerely (On behalf of the Governing Council),

Barbara Cassens and Pat Kennelly

PFP Governing Council Co-Chairs

PFP Governing Council Shares Definition, Vision, and Mission for an Integrated Food Safety System

**Vision:** Mutual Reliance for a Safer Food Supply

**Mission:** Collaboration—Sharing Solutions—Solving Problems

**Definition of a National Integrated Food Safety System:**

An IFSS includes a clearly defined public health mission that operates seamlessly among and in partnership with Federal, Local, State, Tribal, and Territorial agencies (partner agencies) to:

- Plan and prioritize work;
- Implement efficient, prevention-focused, risk-based inspections and sample collections at food and feed manufacturing facilities;
- Share results with all interested parties; and
- Jointly discuss, develop, and implement the most effective strategies for obtaining compliance in specific situations.

The ultimate goal of an IFSS is **mutual reliance with seamless coordination and communication** among partner agencies to assure high rates of compliance with food safety laws and regulations. An IFSS also actively solicits input and support from industry, academia, and interested consumer groups.
The ancient Greek metaphor said to describe notes of sweetness sung by a dying swan seems a fitting preamble. The metaphor is intended to describe a last engaging act before letting go to transition. And although few would compare any song of mine to those of a swan, and I, as yet, am not dying - I did recently retire. Absent “active duty,” I also had to let go of some connective purposes. One purpose, of which I was not quite ready to absolve myself, was the PFP as part of the vision for an IFSS. My swan song with PFP and IFSS is this reflection.

Early in in 2008, I had the opportunity to participate in a renewed and re-formed PFP. (The first 50-State Workshop convened in 1998 and activities were suspended in 2001 due to political change and redirection of national priorities.) The 2008 50-State Workshop, held in Saint Louis, MO, was convened partially in response to multiple foodborne illness outbreaks occurring in the United States, and because President Obama declared food safety and protection a priority.

The Workshop served as a catalyst for food safety and protection professionals from federal, state, local, tribal and territorial regulatory agencies to form a partnership. The purpose of the partnership was to redesign, redevelop, and implement food safety standards that were consistent, to engage a highly trained and skilled workforce, to create multi-jurisdictional working capacity and data sharing and to create quality systems with oversight and accountability. “Epic undertaking” was common vernacular in workshop whispers. By the end of the workshop, I found myself impassioned regarding the future of food safety and protection. I also found myself co-chair of the Training and Certification Workgroup and a member of the PFP Coordinating Committee.

In 2009, the Obama Administration assembled an elite cadre of professionals to assist in creating a path to effective food safety and protection. Prevention, quick response and resource optimization were required operational tenets. An outcome was Michael Taylor and Stephanie David's “Partnerships for Food Protection” (RIW Foundation, 2009), which became the springboard for the 2010 50-State Workshop in Denver, CO.

Workgroups reported on challenges and outcomes and new workgroups were formed. Passions were invigorated and continuing support for PFP initiatives was substantiated by federal funding. FDA Commissioner Margaret Hamburg affirmed PFP’s mission by stating: “We will strengthen our collaborations with other public health agencies and leverage the expertise and resources of our colleagues at the international, federal, state and local levels to ensure effective solutions for the American people.”

The vision for an IFSS was taking shape with the Partnerships document and PFP initiative already in motion. If that was not enough, President Obama signed the Food Safety Modernization Act (FSMA) in 2011. The PFP and IFSS vision now had a codified, synergy-creating catalyst to bring everything together. With renewed energy, funding and a map forward, PFP set out to modernize and harmonize national standards, policies and procedures; standardize regulator training and credentialing; create national work plans; add rapid response capability; create laboratory capacity and accreditation; establish performance outcomes and accountability, and even create a method by which animal and pet feed/food could be surveyed, monitored, and recalled.

In 2012, Nashville, TN, was host to the fourth 50-State Workshop. In addition to reporting out on workgroup successes and creating redirections as a result of project scoping, the PFP administratively reorganized. A governance structure was finalized and a budget was created to provide a sense of continuity and longevity. (I guess I missed another meeting and now found myself on the Governance Committee!) I represented local regulators at the Nashville meeting and was proud to carry the flag for locals in creating the Local Agency Engagement Workgroup (LAEGW). The purpose of the LAEGW was to assure that local regulators participated and had an equal voice in our nation’s food safety scheme.

As 2013 was drawing to a close, I was tying up loose ends in my capacity and career with the City of Plano, TX. I found myself reflecting on the good work PFP has done while I was profiling for replacements on various committees, councils, and workgroups. Examples of outcomes coming to mind: a training course curricula for regulators on all levels, new credentials (with more to come) for food safety and protection professionals, establishment of Rapid Response Teams across the country, eLEXNET, PETNet, FoodNet, increased laboratory capacity and accreditation, improved Alliance communications, improvements and updates to manufactured, agriculture and retail food program standards – and there are many more. Perhaps most valuable though, was creation of a network of food safety and protection professionals throughout agency hierarchies that bought in to the vision of improved public health through an IFSS.

I remain passionate about the scope and global reach of the PFP. Change of this scope becomes generational, so this network will be critical to continuity and success of the work going forward. But as I leave “active duty,” I leave for you heartfelt encouragement, because there is yet much to be done. Lives depend on what you are doing!

Godspeed and thank you for the opportunity to learn, to share and to contribute!
The April Issue of the PFP Newsletter previewed the “District and State Recall Cooperative Plan” – a PFP Response and Recall Workgroup project and highlighted the group’s announced objectives. Our dedicated workgroup members have made tremendous strides in creating a best practice document. If utilized by FDA, state and local governments, the document should enhance communication and sharing of recall information and promote faster removal of adulterated and unsafe products from the market.

The workgroup consists of FDA and state regulatory staff involved in recall efforts. Ideas presented have been diligently reviewed and analyzed through workgroup discussions, personal outreach to co-workers and from survey data collected from FDA district and state respondents by the Minnesota Department of Agriculture and FDA’s Office of Enforcement and Import Operations (OEIO) in 2013. Each state has different arrangements with local government regulatory partners. Information will then filter down to the local level through the existing regulatory structures currently in place.

At a recent PFP sponsored face-to-face meeting, the workgroup representatives drafted 22 best practice statements drawn from the efforts of the sub-workgroups. These best practice statements cover a diverse range of ideas and practices. A few examples follow:

1. **Create a Directory of Recall Contacts:** Use the Association of Food and Drug Officials (AFDO) Directory of Local and State Officials (DLSO) searchable database to identify state and FDA contacts for recalls.

2. **Sharing of Information:** Recommend means by which states and FDA collect and share information during recall situations or joint inspections more readily. (Create or enhance Memorandums of Understanding (MOU’s))

3. **Sharing and Communication:** Recommend initiating quarterly conference calls with the states, FDA state liaisons and OEIO to facilitate communication, cooperation, and training.

4. **Sharing and Communication:** Recommend initiating routine conference calls with the states, FDA state liaisons, and local FDA district recall coordinators to enhance relationships and refine sharing and communication procedures.

5. **Sharing of Information:** Recommend changes to FDA’s Reportable Food Registry (RFR) to obtain/require submission of customer lists through amended reports and to enhance and standardize information collected via the RFR.

6. **Commissioning:** Recommend state recall staff be commissioned in order to facilitate and enhance sharing of recall information during outbreaks and Class I recalls.

All of the Best Practice statements will be shared by the PFP as soon as the work is completed and approved by the PFP Governing Council. If our best practice recommendations are further discussed and adopted by FDA, state, and local governments, we believe we will be able to move in a positive direction to better achieve our common goal of promoting and protecting public health in our current IFSS environment.

Thanks to the knowledge, expertise, and dedication of the participating workgroup members. We will develop, finalize, and present a best practices document on recalls to the PFP Governing Council by August 2014. This document will also be discussed at the August 50-State Workshop.

Workgroup Leads: Wanda Lenger, FDA and Brad Honold, Minnesota Department of Agriculture

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**Improving Recall Coordination between Federal, State, and Local Governments**

*Brad Honold and Wanda Lenger*
A job task analysis (JTA) is a method to deconstruct and analyze a specific job or occupation. One of the PFP Training and Certification Workgroup projects is to recommend specific job task analyses to be conducted and to participate in that process as subject matter experts (SMEs) and/or nominate another SME to assist FDA’s Division of Human Resources Development (DHRD) in this process. For training within the integrated food safety system, there is a need to identify the commonalities of all our regulators and also the specialized requirements in each program area.

FDA’s DHRD has been using the Design of A Curriculum (DACUM) method developed by Ohio State University to further curriculum development in moving towards performance-based training and competency-based education. The gradients of knowledge, skills, and abilities need to be delineated as inspectors and investigators progress from beginner and novice levels, develop mastery, and achieve the expert level status.

Conducting a JTA using the DACUM method begins with a three-day process with a focus group of 10 to 15 SMEs that currently conduct that specific regulatory job task, for example as a compliance officer or retail food inspector. The DACUM facilitator will tease out the duties, tasks, knowledge, skills, abilities, attributes, tools, equipment, and resources necessary for the job. The next step is to validate the results of the initial focus group of SMEs with others nationwide that perform the same job responsibilities.

Those responding to the JTA validation questionnaire are asked if they conduct those same tasks, how often, and how important they are to the job. If respondents perform tasks that are not listed, the tasks can be added. A statistical analysis is conducted on the responses and those tasks that do not raise to a high enough level of significance are indicated on the report.

The results of the JTA report can be used for many different purposes. In DHRD, the JTA travels down two separate paths: the first is toward training and curriculum development and the second is toward developing credentials for certification. Curriculum development is a process that creates a pathway for learners. Using SMEs and best instructional design practices, a path paved with performance-based training and competency-based education is created to guide learners to the stated curriculum goal.

Similarly, certification development is a process. Certification development includes test development, experts collaborating with SMEs to establish eligibility requirements, creation of a valid assessment as an indicator of competency in a skill or job, and the development of a continuing education program to maintain competence.

Other indications for JTAs are job design or redesign, hiring qualifications and criteria, interview question development, drafts of standard operating procedures (SOPs), and position descriptions.
In May 2014, FDA’s Office of Policy and Risk Management and Office of Partnerships began implementing new 20.88 Long-Term Food Information Sharing Agreements (ISAs) for food, feed, and cosmetic related information. These agreements allow FDA to share certain non-public information with State and local public health agencies. These new Long-Term Food ISAs took effect on July 1, 2014 and replace previous editions of the 20.88 information sharing agreements and allow for the head of the State or local agency to pledge that they have the authority to protect non-public information, and that they will not further disclose the information received. Furthermore, FDA will no longer require individual signatures on long-term 20.88 agreements as it has in the past.

The Long-Term Food ISAs have been in development since January of 2012 and are an enormous step towards an integrated food safety system. These agreements will allow for more efficient sharing of information, especially during recalls and outbreaks. In the future, FDA will provide training materials to assist state and local agencies in ensuring that all parties are aware of the importance of protecting non-public information.

If you have any questions regarding these agreements or believe that your State or local agency could benefit from a Long-Term Food ISA, please contact the Office of Policy of Risk Management at InfoShare-ORA@fda.hhs.gov.

Help Available for Making After-Action Reports

After-action reports (AARs) are critical to improving our responses to food emergencies. You can now produce AARs more quickly and efficiently by ordering templates and instructions.

The importance of conducting AARs as soon as possible after an event was highlighted at a breakout session of the 2012 PFP 50-State Workshop. The group also recommended developing AAR templates that could be shared widely with food protection partners.

There are now several AAR templates in an AAR chapter of the Best Practices Manual of the FDA Rapid Response Team (RRT). A pdf copy of the RRT Best Practices Manual is available to food regulatory partners upon request at: OP-ORA@fda.hhs.gov. In addition to sample AAR templates for simple, medium and complex incidents, the chapter also includes templates for lessons learned and recommendations, a scalable approach to AARs, recommended timelines and definitions.

The material, provided by states, FDA, and USDA, should be very helpful to any program wanting to develop their own AAR procedure or forms.

AARs do not have to take excessive amounts of time, and they pay off by improving responses and building trust and mutual respect among participants. The effort is particularly important as we work together to build an IFSS.

Please contact us with ideas, questions, and newsletter contributions at pfp@fda.hhs.gov