Capacity Building & Mentorship Framework for RRTs
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Executive Summary

The Rapid Response Team (RRT) concept facilitates long-term improvements to the national food safety system by strengthening interagency collaboration, both to improve effectiveness of responses and to build programs on nationally shared best practices and tools. RRTs are based on multi-jurisdictional (primarily FDA Division-District Office/State food regulatory program) and multi-disciplinary (laboratory, epidemiological and environmental health/regulatory) partnerships. State food regulatory programs currently compete and receive funding under the FDA’s Flexible Funding Model Cooperative Agreement (RRT funding options). The RRT Program also builds capacity and improves capabilities for multi-jurisdictional rapid response to food/feed incidents nationally through voluntary (non-funded RRTs).

Purpose Statement

The Capacity Building and Mentorship Framework for RRTs provides a three-phase framework for incremental RRT capacity building. This document can be applied by any State/Division-District wishing to establish a RRT with functional rapid response capabilities aligned with the RRT Best Practices Manual and the NIMS preparedness cycle (see Figure 1). Application of this document, including establishment of a mentorship relationship with an established RRT, will facilitate the development of RRT capabilities that are aligned with a proven, successful model, and result in increased protection of the public health.

This Capacity Building & Mentorship Framework for RRTs is written assuming a state manufactured food regulatory program is the state agency leading RRT development and the FDA Division/District Office is the primary FDA entity that the lead state agency interfaces and coordinates with. This framework is also applicable for RRTs led by a state regulatory program other than manufactured food. The lead state agency/program will need to make a few adjustments when reading:

- The Foundational Elements section is very specific to the operational aspects of a manufactured food program. Replace these manufactured food-specific references with the equivalent activity for the lead state agency/program, or disregard if no equivalent exists.
- Phases 1-3 contain frequent references to core and auxiliary RRT member agencies/partners. The term ‘state food regulatory program’ is frequently used and is implied to be the state manufactured food regulatory program. The lead state agency/regulatory program will always be part of the RRT’s core member agencies/partners, regardless of what human or animal food regulatory program leads the RRT development effort.
  - Interpret references to ‘state food regulatory program’ as the lead state agency/regulatory program, as well as any other human and animal food programs co-located within the lead state agency. It is encouraged that if the lead state agency (e.g., Department of Agriculture) has multiple human or animal food programs (e.g., manufactured food, egg, and produce), that all those human and animal food programs are considered core RRT member agencies/partners. This is to maximize the impact of RRT development to support response work in multiple different program areas.
  - When the lead state agency/regulatory program is produce or a state cooperative program area (retail, shellfish, Grade A milk), interpret references to the “FDA Division/District Office” to include not only the FDA District Emergency Response Coordinator, but also the FDA entity with field responsibility for that program. For produce this would be the FDA Office of Regulatory Affairs Produce Safety Network (PSN) Specialists; for state cooperative program areas, this would be the FDA Office of Regulatory Affairs Office of State Cooperative Programs (OSCP) Specialists. Even though the FDA Human and Animal Food Division may not have responsibility for field investigations associated with these program areas, it is important to keep the FDA Human and Animal Food Division management in the loop on RRT development.
Background

Enhancement of federal, state and local infrastructure to improve capabilities for rapid response to food and feed incidents is a recurring theme and directive, most recently highlighted in the Food Safety Modernization Act. The Office of Partnerships’ (OP) Rapid Response Teams (RRT) Cooperative Agreement Program was established for just this purpose, and since its inception in 2008, the RRT Program has documented best practices for all-hazards food/feed emergency responses by multi-jurisdictional RRTs (the RRT Best Practices Manual) and established over 20 RRTs nationwide.
RRT Capacity Building & Mentorship Framework
Rapid Response Teams (RRT) Program, FDA Office of Partnerships
Version: September 2018

**Figure 1: The three phases of RRT capacity building**

**Phase 1: Laying the groundwork**
- Obtain Commitment & Review Expectations
- Establish key relationships
- Establish a vision
- Identify the team & conduct a baseline assessment
- Develop an improvement plan

**Phase 2: Launching & Building**
- Plan
- Train
- Exercise
- Evaluate
- Organize & Equip
- Equip the team & provide training
- Address sustainability
- Construct a written framework (SOPs)

**Phase 3: Maintaining & Improving**
- Celebrate team successes & seize growth opportunities
- Evaluate performance
- Exercise the team
- Maintain relationships

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Program Overview (Capacity Building & Mentorship Framework for RRTs)
Program Overview

**RRT Concept**

The Rapid Response Team (RRT) concept facilitates long-term improvements to the national integrated food safety system (IFSS) by strengthening interagency collaboration.

The desired outcome of RRT development is to improve the effectiveness of responses to foodborne outbreaks and other human and animal food contamination events, and ultimately minimizing the time between agency notification of a human or animal food contamination event and implementation of effective control measures.

To accomplish this, RRTs develop and maintain processes to:

- Prepare for and effectively respond to foodborne illness outbreaks and other food emergencies.
- Enhance intra-agency and interagency collaboration and communication.
- Jointly train and exercise staff to be ready to respond to events when they occur.
- Identify potential preventive practices to reduce foodborne illness and injury.
- Establish national best practices and tools that can be shared with other states to improve their response to food emergencies.

**Objective**

- This document provides a three-phase framework for use by any State/Division-District wishing to establish a RRT with functional rapid response capabilities aligned with the RRT Best Practices Manual and the NIMS preparedness cycle.
- Application of this document, including establishment of a mentorship relationship with an established RRT, will facilitate the development of RRT capabilities that are aligned with a proven, successful model, and result in increased protection of the public health.

**Foundational Elements**

<table>
<thead>
<tr>
<th>STEP</th>
<th>DESCRIPTION</th>
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| 1) Assess the need for an RRT | • Delineate the need to develop rapid response capabilities and teams.  
• Conduct a meeting\(^1\) to assess “Foundational Elements” that support development of rapid response capabilities and teams. These include:  
  → Participation in Regulatory Program Standards.  
  → The day to day working relationship between the state program and the FDA Division-District (considerations).  
  → Adherence to FMD-50 by the State Program and FDA Division-District.  
  → State Program recall process.  
  → State Program process for responding to Reportable Food Registry (RFR) notifications. |
| 2) Address assessment results | • Develop a plan to address gaps |

\(^1\) Several meetings are suggested as part of RRT development (Foundational Elements assessment, introduction meeting, and kick-off meeting – see Phase 1, steps 4 and 7). While each meeting represents a distinct purpose, please note that it may be possible and beneficial to combine these meetings, depending on team members’ geographical dispersion, the amount of work to be done, etc.
## Phase 1 – Laying the Groundwork

<table>
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<th>STEPS</th>
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| 1) Obtain Commitment | • Determine if change to existing response coordination practices is needed, and if so, make the case for change.  
• Designate individual(s) to lead coordination and be responsible for the RRT initiative. |
| 2) Review Expectations | • Review supporting materials and clarify expectations for RRT participants (namely, the lead state agency, other key state agencies and the FDA Division/District Offices). |
| 3) Establish Key Relationships | • Establish the Division-District/State Partnership: Initiate/maintain a regular schedule of meetings with set agendas to foster an integrated FDA/State team.  
• Establish the Mentor/Mentee Relationship: If available, a mentor will be assigned to assist new RRTs with the development process. |
| 4) Establish a Vision (Introduction Meeting) | • Hold a meeting with key staff from RRT partners (FDA/State) and the RRT Mentor.  
• Define the vision/strategy for the RRT and set clear objectives.  
• Address sustainability. |
| 5) Identify the Team | • Identify the response team structure and skills that will be needed.  
• Select team members using a multi-disciplinary approach.  
• Identify & maintain mechanisms for intra/interagency communication. |
| 6) Conduct a Baseline Assessment | • Incorporate into the kick-off meeting, if possible (see step 7).  
• Determine the training level of current staff.  
• Review and document current process and flow.  
• Identify lessons learned/conclusions from assessment. |
| 7) Develop an RRT Improvement Plan (Kick-Off Meeting) | • Establish short, medium and long-term objectives.  
• Identify resources (both dedicated and those that can be strategically leveraged).  
• Re-clarify roles/responsibilities and ensure agreement among agencies (as needed) and identify point person(s)/decision-maker(s).  
• Review foundational elements assessment, baseline capability assessment, RRT vision.  
• Consider Phase 2 activities as a model for the plan. |

## Phase 2 – Launching & Building

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| 1) Maintain relationships | • Division-District/State partnership.  
• Mentor/mentee relationship. |
| 2) Construct a Written Framework | • Establish a clear operational plan.  
• Create a standardized response structure.  
• Establish a Training Plan, including ICS knowledge and practical skills.  
• Begin to develop/revise written SOPs. |
| 3) Address Sustainability | • Draft a sustainability plan to address resources (especially new resources) being utilized for RRT development. |
| 4) Equip the Team & Provide Training | • Purchase needed equipment and supplies.  
• Begin training RRT members. |
| 5) Exercise the Team | • Conduct the first (learning) exercise early in the development process.  
• Respond to incidents using RRT processes and procedures. |
| 6) Evaluate performance | • Conduct a Yearly RRT Capability Assessment and update the RRT Improvement Plan.  
• Conduct after action reviews (AARs) for any RRT exercises, responses or activations to learn from experiences. |
| 7) Celebrate Team Success | • Reinforce the team mindset and build the relationship, especially among team members from different agencies. |
### Phase 3 – Maintaining & Improving

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<th>STEPS</th>
<th>DESCRIPTION</th>
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<tr>
<td>1) Plan</td>
<td>• Maintain a written framework:&lt;br&gt;→ Standardized response structure.&lt;br&gt;→ Operational Plan.&lt;br&gt;→ Training Plan.&lt;br&gt;→ Specific SOPs.&lt;br&gt;→ Address sustainability (as needed).</td>
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<tr>
<td>2) Organize &amp; Equip</td>
<td>• Maintain, coordinate and routinely engage the team.&lt;br&gt;• Maintain the team’s equipment.</td>
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<tr>
<td>3) Train</td>
<td>• Execute the Training Plan:&lt;br&gt;→ Maintain RRT skills.&lt;br&gt;→ Provide additional appropriate training.&lt;br&gt;→ Provide incentives to address identified gaps and keep staff engaged.</td>
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<tr>
<td>4) Exercise</td>
<td>• Conduct multijurisdictional, multidisciplinary exercises and respond to incidents (RRT responses and activations)</td>
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<tr>
<td>5) Evaluate &amp; Improve</td>
<td>Routinely evaluate, assess &amp; realign as needed by doing the following:&lt;br&gt;• Conduct AARs to learn from experiences.&lt;br&gt;• Complete yearly RRT Capability Assessment as part of continuous process improvement efforts.&lt;br&gt;• Support each other &amp; celebrate success within the community:&lt;br&gt;→ RRT Mentorship &amp; a Regional approach.&lt;br&gt;→ Share with and learn from others: Participate in RRT Program activities where RRTs can introduce new team members and share information about new partnerships, initiatives, training opportunities, success stories, etc.&lt;br&gt;• Strategically align resources and initiatives to increase efficiency:&lt;br&gt;→ Intra-agency alignment, such as integration of core response team and regulatory program field staff.&lt;br&gt;→ External alignment: If/when possible, work with analogous programs (e.g., RRTs in other states) to leverage resources and share ideas.&lt;br&gt;• Re-assess what RRT level is desired and affordable:&lt;br&gt;→ Top agency support for making changes.&lt;br&gt;→ Refocus in light of changing agency priorities.&lt;br&gt;• Maintain a long-term perspective:&lt;br&gt;→ Evaluate what was learned during Phases 1 &amp; 2&lt;br&gt;→ Look to the future: 1, 5, 10 years out. What is the next step? What tools are needed to go to the next level?&lt;br&gt;• Revisit RRT vision over time; adjust supporting infrastructure as needed.</td>
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### Problem Solving Strategies

Focus on the Team:
- Relationship building is “Job One.”
- Address personality issues early on.
- Be intentional about breaking down disciplinary/agency silos.

Expend energy & resources wisely to maximize return on investment:
- Address competing priorities & status quo mentality (tactics – identifying incentives, resources, action plans)
- Streamline SOP/document writing process where possible.
− Balance – avoid both “cookie cutter” approaches and “reinventing the wheel.”
− Leverage the synergy of multi-disciplinary teams – example: “feed is food.”

The RRT Environment

Words of Wisdom for Cultivating an Environment Conducive to Integration:
− An environment of trust and collaboration among staff is essential in making inter-agency efforts such as the RRT successful.
− Senior leaders in each organization need to set the tone and support the time and travel necessary for staff to meet regularly and get to know one another.
− Being open and honest when there are concerns about inspectional or investigational approach or work quality.
− For state and federal staff and managers, understanding that many issues will require adjustment on both sides to achieve the desired outcome, combined with a commitment to continuous improvement within their respective organizations, is critical for a successful relationship.
Foundational Elements to Support RRT Development

**Purpose**

- Foundational elements consist of the basic building blocks for day to day operations and coordination between the lead state agency and FDA Division/District Office. This relationship is the nucleus of the RRT, as strengthening this operational partnership during outbreak response was the impetus for creating the RRT Program in 2008. The lead state agency is typically the state manufactured food regulatory program, particularly if the RRT is being developed under an FDA cooperative agreement.
- Foundational elements should be addressed prior to or in parallel with Phase 1, and the activities outlined in this section must be completed before an RRT can be in Phase 2.

**Assess the Need for an RRT**

**Delineate the Need to Develop Rapid Response Capabilities & Teams**

The lead state agency and their corresponding FDA Division/District Office should conduct a meeting (teleconference or face to face) to answer each of the following items:

- Does the proposed lead state agency/program have regulatory authority or other responsibility to respond to outbreaks linked to food/feed products? Do other agencies/programs within the state share similar authorities or responsibilities that require coordination with the state program?
- How many (number) food/feed emergency responses were conducted in the last 12 months, and what is the estimated volume of work associated with response efforts? How many of these were multi-agency responses? (cost/benefit analysis)
- Is the state program participating in any Regulatory Program Standards? Is the state program in full or near full conformance with Standard 5? This is recommended prior to developing an RRT and advanced response capabilities.

**Assess Foundational Elements to Support Development of Rapid Response Capabilities & Teams**

The lead state agency and their corresponding FDA Division/District Office should conduct a meeting (teleconference or face to face) to assess each of the following items:

- Participation in Regulatory Program Standards (e.g., MFRPS, AFRPS, VNRFRPS)²
  - What is the status for Standard 5?
  - Are other state programs or agencies participating in regulatory program standards?
  - What opportunities are there for enhanced state/FDA collaboration?

- The day to day working relationship between the state program and the FDA Division/District (considerations)
  - Identify the current top 3-5 obstacles in the Division/District-State relationship and potential solutions.
  - Do the state program and the Division/District have a formal, written partnership agreement or equivalent with specific objectives (including outbreak or incident/event response)?
  - Do the state program and the Division/District meet face to face at least once a year?
  - Do the state program and the Division/District discuss joint training needs and gaps on an annual basis? Is joint training encouraged (are the state program and Division/District invited to attend each other’s training courses)?
  - Do the state program and the Division/District discuss budgetary constraints and resource/staffing issues on a regular basis?
  - Do the state program and the Division/District discuss contract activities and issues on a regular basis?
  - Do the state program and the Division/District discuss sampling assignments/plans (product, environmental) and inspectional workplanning on a regular basis?

² Manufactured Food Regulatory Program Standards (MFRPS), Animal Feed Regulatory Program Standards (AFRPS), Voluntary National Retail Food Regulatory Program Standards (VNRFRPS)
• Do the state program and the Division/District discuss facility risk categorization on an annual basis?
• Do the state program and the Division/District share respective plans for continuity of operations in the event of an emergency?
• Have the state program and the Division/District developed agreements or protocols relevant to laboratory capacity and support?
• Have the state program and the Division/District discussed compliance triggers and developed agreements or protocols for coordination of compliance actions?

− **Adherence to FMD-50 by the State Program and FDA Division/District**
  • Are both agencies aware of information sharing agreements currently in place (commissioning and/or 20.88 agreements), as well as information sharing training (FDA Pathlore, course CC8010W) and procedures on sharing FDA non-public information under these agreements? Does a lack of commissioned officers or confidentiality agreements impede information sharing between the state program and the Division/District? When confidentiality agreements are in place (commissioning or 20.88 agreements), are both agencies aware of the obligation to protect FDA information from further disclosure (including public disclosure under open records/sunshine laws) without first consulting with FDA (ORAinfoShare@fda.hhs.gov)?
  • Are the state Program and Division/District sharing inspectional, laboratory and other kinds of data? Formally or informally?
  • Has a routine communication process been established?
  • Has an emergency communication process been established?
  • Has a routine joint work-planning process been established?

− **State Program recall process**
  • Does the state collaborate with the FDA Division/District on recalls? Is there a formal process between State and FDA Division/District for responding to recalls?
  • Does the state program conduct recall audit checks? Are recall audit checks coordinated with the supporting FDA Division/District office?

− **State Program process for responding to Reportable Food Registry (RFR) notifications**
  • Does the state collaborate with the FDA Division/District on RFR notifications? Is there a formal process between State and FDA Division/District for responding to RFR notifications?
  • Is the state aware of their ability to voluntarily submit RFR reports? This is especially encouraged when the State is aware of a positive sample, has communicated with industry and industry refuses or is unable to submit the RFR report in a timely fashion (required 24-hour timeframe). State programs are encouraged to work with industry regarding RFR notifications so as not to jeopardize industry relations.

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**Address Assessment Results**

**Develop a Plan to Address Gaps**

− The development of the RRT is intended to enhance and further develop many of the above topics/bullet points above. While ideally, a State Program and FDA Division/District Office will have a solid foundation/working process in place for each of the above topics/bullet points prior to establishing a RRT, the existence of some gaps and/or the inability to say ‘yes’ to all the sub-bullets above should not immediately translate into a halt on all RRT development efforts.

− The State Program and FDA Division/District Office will need to discuss any gaps identified during the assessment and determine whether it is necessary to address them prior to RRT development (i.e., put RRT development on hold), or whether they can be addressed as part of RRT development. Regardless of the decision, the lead state agency and FDA Division/District Office should develop and implement a plan to address all gaps identified in the assessment, as they are elements critical to the development of an IFSS.

− If the decision is made to proceed with RRT development, the results of the assessment should be used to identify and prioritize goals for RRT development (see Phase 1: Develop an RRT Improvement Plan).
Phase 1: Laying the Groundwork

Information to be Received Shortly After Entering the Program

After a state food regulatory program either volunteers or is first awarded funding for RRT development, you will receive a ‘RRT Orientation Package,’ which will include, but is not limited to, the following:

- **Capacity Building & Mentorship Framework for RRTs**
- Listing of key State and FDA RRT Contacts (all RRTs)
- Listing of Office of Partnerships (OP) RRT Program Coordinators and areas of responsibility
- Progress Report Cheat Sheet (if funded)
- **RRT Capability Assessment Tool (CAT)**
- Information regarding the RRT Face to Face (F2F) Meeting
- Instructions for obtaining a FoodSHIELD account and accessing the [RRT Program Workgroup](#). You will begin to receive a weekly email communication called the ‘RRT Weekly Digest.’

Obtain Commitment

- Make the case for change to existing response coordination practices (i.e., RRT development) to both State Food Regulatory Program and FDA Division/District Office management. If the lead RRT state agency is a produce, retail, shellfish, or Grade A milk program, then it is important to involve FDA Produce Safety Network (PSN) or FDA Office of State Cooperative Programs (OSCP) branch chiefs, as well as the Human and Animal Food Division. Joining the RRT Program is a commitment to pursuing a multi-agency, multi-disciplinary integrated response for all-hazards food and feed contamination events.
- Designate individual(s) to lead coordination and be ultimately responsible for the RRT development. Ideally, there will be a main point of contact from the state food regulatory program and FDA Division/District Office. Further down the road, other partner agencies/programs will also need to designate key/main points of contact for the RRT (see ‘Identify the Team’).
- Provide key personnel (FDA and state) contact information to OP RRT Program Coordinators. These personnel will receive all RRT-related correspondence as well as the calendar invitation to the RRT Monthly Teleconference (1st Thursday of every month at 2PM Eastern), and they will be invited to join the [RRT Program Workgroup](#) in FoodSHIELD. Further down the road, other partner agencies/programs (see ‘Identify the Team’) should be added to the RRT Program Workgroup, distribution lists and calendar invitations.

Review Expectations

- Review all supporting RRT Program development materials and clarify expectations for agencies participating in RRT development at this point (namely, the lead state agency, other key state agencies and the FDA Division/District Offices).

Establish Key Relationships

Establish the Division-District/State Partnership

- RRTs are intended to function as an integrated Federal/State partnership.
- Initiate contact with the appropriate FDA District Emergency Response Coordinators (ERCs) and include the Office of Partnerships (OP) RRT Program Coordinators.
- Establish a regular Division-District/State RRT teleconference meeting (weekly is recommended, but no less frequent than biweekly). While the agenda of these meetings is at the discretion of the State/FDA RRT components, it should serve to maintain situational awareness and allow for full integration of the Division/District into the RRT. If there is
already a routine FDA/State meeting/teleconference at the appropriate staffing level, we encourage adding RRT into the agenda, rather than creating a duplicative meeting.

Establish the Mentor/Mentee Relationship

− Each new RRT will be assigned a mentor (if available). Initiate contact with your mentor RRT as soon as possible.
− Establish a regular mentor/mentee teleconference meeting (bi-weekly or monthly is recommended for Phase 1). While the agenda of these meetings is at the discretion of the RRT state/mentor, the goal of this relationship is to provide a sounding board and voice of experience to guide the new RRT through the process of establishing the RRT and associated capabilities.
− If possible, it is encouraged for the mentee state to travel key RRT personnel to the mentor state for a face to face mentorship meeting (See ‘Introduction Meetings’, below). If this is not possible, please utilize available technologies (e.g., teleconferences, web-meetings) to build the relationship between the new RRT (mentee) and mentor state.

Establish a Vision (Introduction Meeting)

Introduction Meeting

− Hold a meeting (face to face or teleconference), organized by the individual(s) in charge of RRT development, with identified RRT mentor. FDA Division/District RRT components should be invited and are encouraged to attend3, as well as FDA PSN and OSCP Specialists (if corresponding produce, retail, shellfish, and/or Grade A milk state regulatory programs are or will be participating in the RRT). Include all planned members of the RRT known at that point in the RRTs development.
− Agenda: Mentor will give overview of their RRT structure, capabilities and history (back-story, lessons learned, etc.). New RRT will share their current status, goals, and challenges.
− Outcome: Draft a development strategy for the RRT (including timeframes): document current stakeholders, roles/responsibilities, expectations (from them to the team and from the team to them), plans, and strategies, etc. Identify how team members will address conflicts early in the process. Include some flexibility in your timelines/timeframes. Address sustainability: what resources do you anticipate needing to support RRT development? Are new resources an option or will the RRT be built using solely existing resources? If new resources are an option, take note that you may need a plan for sustaining those resources, depending on where the funding is coming from (more on that in Phase 2).
− Take in what the mentoring RRT has to say; consider contacting another RRT to see how their experience differed from your mentor and how each set of experiences fits with the issues/culture in your own state. Resist the temptation to get ahead of yourselves or jump steps.
  • The purpose of this meeting should be to introduce the RRT concept to new partners in your state and to begin the process of building the team.
  • Listen to the mentor, discuss how their strategies and ideas could work in your own state, and begin to formulate ideas that can be fostered further in the Kick-Off Meeting.
− This needs to be an iterative process. Incorporate face to face meetings within the regular meeting schedule, if desired.

3 Travel for District/Division personnel to attend the Introduction meeting may be considered regulatory travel (see ORA Regulatory and Non-Regulatory Travel SOP ORA-ORM.009). Depending on the availability of funding and the physical proximity of the mentor and mentee states, travel of multiple FDA staff may not be practical in all cases. We encourage Division/District personnel to participate in planning the agenda and attend the meeting, perhaps exploring teleconference options if travel is not feasible, or scheduling a follow up teleconference after the meeting to get a recap of activities and thoughts for next steps.
Identify the team

Structure the team

- After the introduction meetings, identify the rough outline of your RRT team structure & membership and have a plan in place for filling any gaps within that team.
- Consult with your RRT Mentor (if applicable) and review the repository of existing RRT Org Charts within the RRT Workgroup in FoodSHIELD.
- Structuring the team:
  - Identify the skills that will be needed. Use a multi-disciplinary approach
  - Map out the regulatory framework in your state (what agencies are responsible for: retail, manufacturing, feed, egg, produce, dairy/Grade A milk, shellfish, meat/poultry, etc. – city, county, state). For all state regulatory programs that will be included in the RRT, make sure there is representation from the appropriate corresponding federal agency: e.g., FDA Division/District for manufactured food, egg, and animal food; FDA OSCP for retail, shellfish, Grade A milk; FDA PSN for produce; FSIS for meat/poultry.
  - Map out what government entity is responsible for foodborne disease surveillance, investigation, and response (city, county, state).
  - Include food/feed testing laboratories as part of RRT.
  - Identify any other funded programs within your state that have a food safety/outbreak response capacity focus (e.g., CDC: Centers of Excellence (CoE), FoodCORE, OutbreakNet Enhanced, EHS-Net).
  - If applicable, consider leveraging your state’s food protection task force.
  - Consider establishing a Steering Committee for your RRT, if desired.
  - Use the ‘RRT Structure’ section of the RRT capability assessment tool as a guide to help identify critical team components and otherwise structure the team.

Select the team members

- You will need to identify the personnel to fill the RRT team structure. Items to consider:
  - You will need to take into account your overall ‘sustainability’ strategy for the RRT and the resources available to the RRT member agencies/partners (see references to sustainability in ‘Introduction Meeting’, above). For example, depending on the resources available to you and your specific goals, you may consider hiring a ‘RRT Coordinator’ or other specialized positions to support the RRT. Alternatively, if no new resources are made available to support RRT development, your plan may be to incorporate RRT ‘duties’ as a portion/element of existing positions. Either way, management support and commitment to the RRT concept are crucial to the success of this step of RRT development.
  - Assess if potential team members are available internally. Backfill positions as needed.
  - Research ways to advertise for the positions (don’t hesitate to think outside the box).
  - It is beneficial to have RRT members involved from the beginning in setting up the team, developing timelines, and establishing relationships with the other team members.
  - Have qualifications well defined and stick with them. Personality is a factor. Select members based on skills/personality workload; support of their supervisor. Allow personnel to volunteer if possible.
- Work on assembling the right team members and reassessing the team structure should be ongoing as needs are assessed

Identify RRT communication mechanism

- Identify an initial mechanism for intra and inter-agency communication relevant to the RRT. RRT development will entail collaborative document development as well as data sharing for actual incidents when the team is operational. While your exact communication mechanisms will be worked out in more detail in Phase 2, it is still important to have a communication mechanism clearly identified to support your current development efforts. Examples include: FoodSHIELD, Traction, SharePoint, email.
Conduct a Baseline Assessment

Conduct a baseline assessment of the current response infrastructure and identify gaps relevant to RRT development. Note that this may be done as part of the ‘Kick-Off Meeting’ (the section immediately following this section).

Prerequisites

Looking at your RRT structure and membership, consider how to best involve representatives from involved agencies and disciplines involved in a food/feed outbreak, (i.e., epi, regulatory, lab). Their involvement in the baseline assessment is critical. Encourage open and honest communication during the assessment. Bring up any issues at this point so they can be addressed; later in the team development is not to the time to be pointing out gaps in your process. When conducting the baseline assessment, ensure that you have already established a rough flow for how the response team will work in both routine and emergency or other response situations (remember to leverage what may already exist for your State and Division/District). You cannot clearly identify gaps in your process unless you have a process in place to evaluate. Don’t stress out initially about having processes documented in official SOPs. Understand that this meeting and the gap analysis will help guide development of future plans and SOPs as needed.

Format

It is strongly recommended that the baseline assessment is incorporated into the kick-off meeting. If it must be conducted separately, it should be a comprehensive assessment (can take up to 2 days) and should involve State/FDA partners, and the mentor RRT (location: RRT State or District, or mutually decided neutral location). If meeting face to face is not a possibility break up this meeting into teleconferences and/or web meetings of not more than 2 hours per call/web-meeting.

Elements

RRTs should use the RRT Capability Assessment Tool provided by OP4. In addition to completing that tool, the following activities should be included in the baseline assessment:

- Complete the Foundational Elements Assessment
  - See ‘Foundational Elements’ Section of this document.
  - Use the results to identify priorities for the RRT moving forward.
  - Set tentative timelines for addressing identified gaps.
- Determine the training level of current staff
  - Assess current training program for new employees and RRT specific positions.
  - Review training records for ICS 100, 200, 700, 800, 300, 305, 400, ER220, Epi Ready, and ORAU-training.
  - Document all internal training courses provided which would relate to the RRT.
  - A Training coordinator can be very helpful to keep track of the training records of each staff member.
  - Mentor States can share their current training programs.
- Review and document current process and flow
  - Create a process flow diagram for how current response is conducted.
  - Document current procedures that are in place.
- Identify lessons learned
  - Review previous investigations and any AARs/debriefs that have taken place.
  - Develop a practical time-line for future After Action Meetings, Reports and Improvement Plans.
  - Look for areas where the RRT members could have played a vital role in the investigation, ICS structure or overall process.
  - Identify whose expertise and experiences would have been valuable to these investigations.

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4 The CAT is an online module in FoodSHIELD. A static electronic copy is also available in FoodSHIELD: Folder Capability Assessment Tool.
Mentor states can share past AARs as examples. AARs are also posted in FoodSHIELD.

**Develop an RRT Improvement Plan (Kick-Off Meeting)**

- Hold a meeting with identified RRT members and partners. Location: RRT State or District, or mutually decided neutral location. If a face-to-face meeting is not practical utilize technology (i.e., teleconference and/or web-meeting).
- Organized by RRT POC/Staff & Division/District partners. RRT Mentors (FDA/State) may attend.
- A record of this meeting should be kept so as to educate new RRT staff on the foundation of the RRT.

**Purpose**

- Conduct a baseline assessment or review the results of the baseline assessment, set vision, objectives/priorities and a plan for moving forward with RRT development (RRT Improvement Plan/Strategic Plan).

**Outcomes**

- Develop a RRT Improvement Plan that incorporates findings from the Foundational Elements assessment and RRT Capability Assessment Tool, as well as outlines a path to meet the RRT vision. Consider using activities in Phase 2 as a model for the Plan. Set tentative timelines and identify responsible individuals for tasks. Lay your groundwork and leave the procedure writing to later dates. We recommend a table or excel based improvement plan. An improvement plan should include: task descriptions (what needs to be accomplished), a detailed timeline (when the work will start, who will be doing the work and when the work will be completed), and status updates.
- Begin building the team concept. Stress that the RRT is an entity for all food safety professionals within the state. Show how the team can have a positive impact, not only with the member agencies, but also with outside stakeholders who will be interacting with the team in investigations/events.
- Address the barriers to team development including personalities and egos. Be open and honest with partnering agencies and request that they do the same for you. It is far better to discuss and address issues at this than to develop a team with defined procedures and processes only to find out later that you have problems.
Phase 2: Launching & Building

**Prerequisites**

Prior to embarking upon Phase 2, the following should be addressed/completed:
- All elements included in Phase 1, especially the Foundational Elements assessment and plan to address gaps (part of the Phase 1 baseline assessment).

**Assumptions**

- All prerequisites are completed.
- This document represents a synergy of general principles for RRT capacity building.
- Several of the activities within Phase 2 are long-term or contain continuous improvement elements.
- Many of the activities described here should be completed with significant input and assistance from multiple RRT members (e.g., the ‘core’ RRT group, to include at a minimum the FDA Division/District Office, state food regulatory program, epi, lab and feed representatives; may include other state food regulatory programs and FDA field components (OSCP, PSN), depending on the RRT’s structure). Throughout this document the RRT is commonly referred to as the responsible entity for completing a certain task. This language should be interpreted to mean that although the lead state agency is responsible for the completion of this activity, it is expected that all ‘core’ RRT members will contribute in partnership to its completion. Specific RRT components are named as responsible entities for tasks wherever possible.

**Preface**

A major area of focus for Phase 2 is creating a written framework for the RRT. A written framework may take the form of one or more Standard Operating Procedures (SOPs), a collection of Standard Operating Guidelines (SOG), a RRT Manual, or some other form of documentation. These SOPs or equivalents can be either agency specific, but coordinated with other RRT member agencies/partners, or joint (applying to one or more RRT agencies/partners). Examples of written frameworks, or subsections thereof, can be found in the ‘Examples and Sharing’ section of the RRT Program FoodSHIELD Workgroup.

Sub-sections of Phase 2 supporting creation of a written framework include: Create a Standardized Response Structure; Establish an Operational Plan; Establish a Training Plan; and Develop Written SOPs.

For all sections supporting creation of a written framework, RRTs should:
- Clearly identify individuals responsible for creating, coordinating, and maintaining these documents.
- Allow for adequate QA measures, such as dating and version control.
- Ensure that current versions are available to all RRT members (use of a FoodSHIELD workgroup for inter-agency document sharing is suggested).

**Maintain Relationships**

**Maintain the Division-District/State Partnership**

RRTs are intended to function as an integrated Federal/State partnership. Throughout the duration of Phase 2, the lead agency should:
- Establish and make operational a regular District/State teleconference meeting as described in Phase 1 (‘Establish the Division-District/State Partnership’). This activity can be subsumed by routine RRT meetings (see ‘Establish an Operational Plan’), provided all original requirements continue to be met.
Maintain the Mentor/Mentee Relationship

Each RRT lead agency will be assigned a mentor (one of the existing RRT States). Throughout the duration of Phase 2, the lead agency should:
- Establish and make operational a regular mentor/mentee teleconference meeting as described in Phase 1 (‘Establish the Mentor/Mentee Relationship’).

Construct a Written Framework

Establish an Operational Plan

An operational plan outlines the basic functions, roles and responsibilities of the RRT. Read the RRT Best Practices Manual Working with Other Agencies (WWOA) Chapter. Progress in this activity is directly aligned with WWOA Achievement Levels.

Elements of an operational plan can be found in section 8 of the WWOA Chapter (see chapter citations, below). Outcomes from the Kick Off Meeting (Phase 1) can also be rolled into this plan (e.g., RRT mission/vision, RRT implementation plan).

Key items to address include
- Coordination of a multi-level, multi-agency team (Section 8.2.1).
  - Identify the RRT’s scope: 1) focus: e.g., foodborne illness outbreaks, other food and agricultural emergencies; 2) desired capabilities: e.g., inspections, investigations, environmental assessments, recalls, tracebacks, any commodity specific focus.
- Establishment of a Joint Management Team (Section 8.2.5).
- Regularly scheduled meetings (Section 8.2.6).
  - Identify triggers for joint agency investigations and response (informal/coordinated RRT responses and formal RRT activations).
  - Identify frequency and purpose of both teleconference and face to face meetings. A minimum of 1 face to face meeting per year is encouraged.
  - Incorporate technology (such as webinars) to help with long-distance communication and stakeholder engagement where needed.
- Joint Training (Section 8.2.7).
- Joint Exercises (Section 8.2.8).
  - See related activity ‘Conduct the First (Learning) Exercise’ below.
- Task Forces (Section 8.2.9).
- Defining roles and responsibilities in an investigation/response (Section 8.3).
  - Actively work with program managers to determine how the RRT will integrate into the program’s structure during an investigation or traceback.
  - Define a process for public notification (RRT/multi-agency coordination).
- Maintaining Relationships (Section 8.4).

RRT Data Management

Additionally, the RRT Operational Plan should identify and describe system(s) the RRT uses to share and manage response information (e.g., email, excel/spreadsheets, eSAF, FoodSHIELD, LIMS, other online collaboration tools, other software, etc.). Additional details and documentation of RRT use of systems should be incorporated into the Communications SOP as well (see ‘Develop Written SOPs,’ below).

FERP Development

In the long term, the RRT's operational plan can be used as the basis for a multi-disciplinary Food Emergency Response Plan (FERP) that is coordinated with the FDA Division/District Office and incorporated into the State plan
Capacity Building & Mentorship Framework for RRTs

Rapid Response Teams (RRT) Program, FDA Office of Partnerships
Version: October 2018

and exercised regularly (see the RRT Best Practices Manual FERP Chapter; progress in this activity is directly aligned with FERP Achievement Levels).

Some new partners may come into play as a FERP is developed. The RRT should consider its relationship with (incorporation, outreach, etc.) these partners. Examples include: Law Enforcement, Emergency Management, Boards of Animal Health, Universities and industry. Many may already be addressed through RRT involvement in a Food Protection Task Force (Section 8.2.9 of the WWOA Chapter).

Create a Standardized Response Structure

This builds upon the Phase 1 section ‘Structure the Team’, where the RRT was to have a rough outline of the RRT team structure and membership and have a plan in place for filling any gaps. Outcomes from the Kick-Off Meeting should also be included in the process of developing this response structure.

In order to progress from Phase 2 to Phase 3, a RRT must create a standardized response structure, the minimum contents of which are broken down and described in Parts 1-3. This process will require a great deal of coordination with RRT members, and the input and guidance from a RRT mentor (if available). When a RRT enters Phase 2, the progress on a standardized response structure should be a standing agenda item on regular RRT mentor-mentee teleconferences.

Identify the team

− Develop documentation that captures RRT composition (multi-agency, multi-discipline steering committee or equivalent, if desired; core RRT members; auxiliary RRT members), as well as an overview of roles and responsibilities of team members/agencies and functions of the steering committee, if applicable.
− Ensure all team members have appropriate information sharing agreements in place. Selection of appropriate vehicle (20.88 vs. Commissioning) should be based on roles and responsibilities within the RRT. Contact ORAinfoshare@fda.hhs.gov for more information or with questions. A database of 20.88 single-signature agreements for food and feed is posted on FDA’s website.

Considerations for Team Development

− Read the RRT Best Practices Manual WWOA Chapter. Progress in this activity is directly aligned with WWOA Achievement Levels.
− Core RRT members: Must include at a minimum (but could be broader and encompass partners mentioned under ‘auxiliary RRT members’, at the discretion of the RRT): FDA Division/District Office, state manufactured food regulatory program, state feed regulatory program, epidemiology, and laboratory representatives. If the lead RRT state agency has other food regulatory programs within the agency (in addition to manufactured food), those other food regulatory programs should also be represented as core RRT members.
− Auxiliary RRT members: Identify persons/agencies for team expansion early (FDA Office of State Cooperative Programs (OSCP) – retail food/shellfish/Grade A milk; FDA Produce Safety Network (PSN); state regulatory programs for egg, produce, retail food, shellfish, dairy/Grade A milk, and meat/poultry inspection; state university extension services; emergency preparedness/response; public information officers (PIOs); local health departments; FSIS; etc.). Consider inviting some of these individuals to early RRT meetings in an observer role. This will allow them to gauge their interest in participating as a part of the team and will allow at least some input from them during early RRT development.
− Buy-in is the key to successful team development. Make a pitch to the persons/agencies participating on the RRT that there is a real benefit to their involvement. It is critical to keep all parties engaged and informed. FDA Division/District participation is especially crucial to success.
− Expanding the RRT: As your RRT develops, you might look to add new members. Be aware that bigger is not always better. New members mean new opinions, personalities, and potentially egos. Additionally, the bigger your team becomes the harder it is to schedule events like meetings, exercises, etc. This is where having ‘core’ and ‘auxiliary’ members can be very helpful.
Identify ICS Structure(s)

- Document the ICS structure(s) (primary [core] and secondary [auxiliary] ICS positions) utilized by the RRT, as well as the structure for entering into Unified Command.
- Document staff that will occupy a position on, or provide support to, the ICS structure(s). Ensure coordination with the RRT Training Plan (see ‘Establish a Training Plan,’ below), to ensure adequate training of RRT members to participate in the RRT ICS structure(s).
- Unified Command must be an element of the structure(s).
- Identify trigger points for RRT activation, involving establishment of an ICS/Unified Command Structure, as well as trigger points and protocols for notification of partners upon RRT activation. In doing so, ensure coordination with the RRT Operational Plan. This information will likely roll into and be formalized within the RRT Communications SOPs, see ‘Develop Written SOPs,’ below.
- Make sure to keep agency leadership in the loop as RRT activation triggers and ICS structure develop. For an RRT to be successful, agency leadership must buy-in to the ICS/activation concept and agree to focus resources during an activation.

Considerations for ICS Structure Development

- Read the RRT Best Practices Manual Incident Command System (ICS) Chapter. Progress in this activity is directly aligned with ICS Achievement Levels.
- Examples of RRT ICS Structures, can be found in the ‘Examples and Sharing’ section of the RRT Program Workgroup. Discussion with your mentor RRT is highly encouraged.
- Come to a common understanding early in the process on how ICS will work for your RRT.
  - Who will serve as command and general staff in the ICS structure (e.g., only the lead agency and FDA)? Will other RRT member agencies be involved as liaisons to that ICS Structure?
  - For a truly integrated ICS (positions manned by personnel from all RRT member agencies), how will you handle communication and reporting considering agency procedures may differ from what needs to occur under the ICS?
  - It is critical to discuss as a team how the RRT will operate in an actual emergency (exercises are a great way to accomplish this).
  - ICS should not be exclusionary, don’t let it drive your partners away!
- A Unified Command Structure can ease staffing burdens and allow for shared/leveraged resources, allowing for increased effectiveness and efficiency. At the same time, difficulties can arise due to personnel reassignment during an incident (particularly when you consider having personnel from one agency report to personnel from a different agency for the duration of an incident, but this occurs for intra-agency personnel reassignment as well), or a RRT member agency’s reluctance to share command and control of an incident. While there is no instant fix for some of the more complex issues, be sure to reach out to others to ask for their input – many are facing similar issues.

Formalize Inter-Agency Relationships

Read the RRT Best Practices Manual WWOA Chapter. Progress in this activity is directly aligned with WWOA Achievement Levels. Chapter citations are provided, below.
- Actively work with other agencies to determine how RRT will interface with them.
- Conduct a review of RRT member agency legal frameworks (Section 8.2.3).
- MOUs should exist between the agencies represented under the epi, environmental and lab components of the response system (Sections 8.2.4; Attachment A; Attachment B). RRTs must ensure continuity with roles/responsibilities as outlined in the RRT operational plan.
- When multiple epi, environmental or lab components reside within one agency, communications and other collaborative functions can be captured in the RRT operational plan or capability specific SOPs and does not require the establishment of MOUs.
Establish a Training Plan

A Training Plan (referred to as ‘Training Procedures’ within the RRT Best Practices Manual Training Chapter) is essential to provide a strong regulatory and scientific foundation for the RRT. Read the RRT Best Practices Manual Training Chapter.

**General Principles for RRT Training Plan Development**

− **Hire or assign a dedicated RRT Training Coordinator:** As was mentioned in Phase 1, a dedicated training coordinator is an invaluable resource.

− **Use the RRT Best Practices Manual:** Key areas and elements of a RRT Training Plan (including examples of a generic RRT Training Program) are provided in the Training Chapter, but are neither comprehensive nor specific to unique situations. It is up to each RRT to take the generic training plan and adapt it to their needs. The RRT Training Chapter intends that the RRT Training Plan meet the requirements of MFRPS Standard 2 (Training).

− **Outline a plan for all RRT members:** It is important that the RRT delineate in their Training Plan what training requirements (basic, intermediate, advanced) are applicable to which types of RRT members (agency and personnel specific).
  
  • The RRT Training Plan and associated records should incorporate and capture RRT proficiency development and a current summary of team member proficiency.
  
  • Additional staff in the food and feed protection programs and in other relevant organizations (e.g., other RRT member agencies, as appropriate) should be trained as a resource to provide surge capacity to the RRT and/or individual RRT member agencies in the event that additional assistance is needed (cross-disciplinary and cross-agency training).
  
  • A train the trainer approach for response-based activities (such as sampling, recall effectiveness/audit checks, traceback/traceforward, etc.) that reaches the local responder level is highly encouraged.
  
  • Incorporate mechanisms to track RRT personnel training and ensure that continuing education is provided as necessary.

− **Practice Joint Training:** Unless circumstances prevent otherwise, RRT members (especially state and FDA investigators) should engage in joint training. This is in accordance with one of the key principles laid out in the RRT Manual Training Chapter, and helps provide a uniform foundation for rapid response as a team. When separate training courses must be offered in order to reach the full target audience, every effort should be made to coordinate training offerings so as to provide equivalent training content/materials for team members.
  
  • Examples: CDC Food Safety Centers of Excellence (CoEs) may be willing to provide Epi-Ready training for all RRT members (see the NY CoE website for Epi-Ready Training). Louisiana State University (LSU)/National Center for Biomedical Research and Training (NCBRT) courses such as PER-298 Team Approach to Foodborne Outbreak Response could be offered to all RRT members. There are many other courses through FDA, USDA, DHS, CDC, and many Universities that can be utilized.

**Ensure RRT members have ICS knowledge and practical skills**

− Consider a combined training/exercise plan for RRT personnel, such as: ICS online, then seminar/TTX, then ICS 300 & 400, then real responses, then position-specific like class along with a robust multi-day TTX. Try to use ICS exercises that are human and animal food relevant/applicable (i.e., de-smoked; not using a fire event scenario).

− See ‘Identify ICS Structure(s)’ above for related/supporting training documentation requirements. It is important to have a record of RRT members trained for Command and General Staff positions (position specific training).

− Joint training among RRT member agency staff for ICS is strongly encouraged, and at a minimum, equivalent training should be provided across RRT member agencies.

− Work together on non-emergency situations, in ICS structure if possible, to learn to trust one another and routinely exercise the ICS principles.

**Other items to consider**

− Consider including risk communication training and leverage expertise of PIOs.

− Consider use of an outside facilitator for multidisciplinary or multijurisdictional training.
− Seek technological solutions to allow for offsite participation and reach a greater audience.
− Reach out to Mentor RRTs to participate in training and exercises along with sharing contacts of possible participants.
− Consider partnering with agencies such as law enforcement, state health or agriculture department, or FBI for bioterrorism and crime scene training.

Develop Written SOPs

It is strongly encouraged that a RRT conduct an initial (learning) exercise (see ‘Conduct the First (Learning) Exercise,’ below) and if possible have a couple of responses to incidents or exercises under its belt before writing SOPs in earnest. SOP development is a long term, continuous improvement process.

Considerations for SOP development:
− Use RRT Operational Plan content as a starting place, where possible. As SOPs are developed, either update the Operational Plan or remove old documents from circulation.
− Align with Standard 5 response requirements of applicable national program standards (MFRPS, AFRPS, VNFRPS) wherever possible.
− People with specific expertise should be involved in writing SOPs.
− Use a QMS process for SOP development and maintenance, including a periodic, formal review process.
− Address training needs for new SOPs/capabilities in the RRT Training Plan.
− Use a standard state agency operations guide (if the state has a template already developed) to develop RRT procedures. If the state does not have a generic template, seek examples from the RRT mentor (if applicable) or other RRTs.
− Do not re-invent the wheel by starting from scratch to develop written SOPs. Examples of SOPs can be found in the ‘Examples and Sharing’ section of the RRT Program FoodSHIELD Workgroup. RRTs should reach out to their mentor (if applicable) and other RRTs for input and support where needed.

On progressing to Phase 3:
− In order to progress to Phase 3, an RRT should be able to demonstrate that they meet the following requirements for each of the ‘key’ SOPs identified below:
  • All RRT member agencies with responsibility for that capability (e.g., SOP) have policies and procedures in place, and that those agencies use the policies and procedures as written.
  • Where applicable, the policies and procedures must meet at a minimum the intermediate achievement level of the corresponding RRT Manual chapter.
− When dealing with multiple agencies with shared responsibility for a capability within the RRT, the RRT can choose to address SOP development in a variety of ways. Creation of single, multi-agency SOPs is ideal, with leveraging (piggy-backing) procedures onto existing multi-agency agreements (such as MOUs) a close second. In any case where multiple procedures exist to describe a single, coordinated RRT capability, RRTs must ensure coordination of content across SOPs.
− Establishing multi-agency SOPs can require more time and effort than single agency SOPs. When beginning this process, the agency leading the effort should consider creating a written justification document and obtaining buy in from their agency’s head (e.g., Food Regulatory Program Director, Director of Agriculture, Health Commissioner, etc.) and commitment to directly support the effort as other agencies are contacted to work on the SOP. This will reduce the chance that top management of partner agencies won’t sign off on the SOP.
− The portions of Phase 3 that address SOP development are focused on refinement/maintenance of SOPs and development of SOPs outside of the ‘key’ list below.

Key SOPs (should be prioritized in SOP development):
− Any SOPs that address gaps in RRT Foundational Elements.
− Communications SOP: Requires intensive coordination with RRT member agencies and must include trigger points for RRT activation, including establishment of an ICS/Unified Command Structure, as well as trigger points and
protocols for notification of partners upon RRT activation or initiation of other RRT activities (see RRT Best Practices Manual Communications SOP Chapter; progress in this activity is directly aligned with that chapter’s Achievement Levels).
- **Traceback SOP** (see RRT Best Practices Manual Traceback Chapter; progress in this activity is directly aligned with that chapter’s Achievement Levels).
- **Joint Inspections & Investigations SOP** (see RRT Best Practices Manual Joint Inspections & Investigations Chapter; progress in this activity is directly aligned with that chapter’s Achievement Levels).
- **Environmental Sampling SOP** (see RRT Best Practices Manual Environmental Sampling & Records Collection Chapter; progress in this activity is directly aligned with that chapter’s Achievement Levels).
- **Recall SOP** (see RRT Best Practices Manual Food Recalls Chapter; progress in this activity is directly aligned with that chapter’s Achievement Levels).

**After Action Reviews (AAR) SOP** Must clearly define ‘trigger’ points for conducting after action reviews (may be a tiered approach to various levels of after action review based on the incident/event, from development of an incident summary and development/implementation of recommendations (lessons learned) through development of a full after action report). (see RRT Best Practices Manual AAR Chapter; progress in this activity is directly aligned with that chapter’s Achievement Levels).

- Other SOPs (representing other RRT Manual Chapters and other SOPs as deemed necessary by the RRT or OP) should be addressed after key SOPs are drafted.

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### Address Sustainability

This builds upon the mention of sustainability under ‘Introduction Meetings’ in Phase 1, where the RRT was to identify whether what resources (especially new resources) would be needed/a part of RRT development. Sustainability is the development of mechanisms to support or maintain a portion of products, outcomes or accomplishments achieved by the RRT. A sustainability plan should be drafted, to include:

- **The RRT’s vision for sustainability**: Briefly summarize the RRT’s approach to sustainability (is it something you actively pursue and incorporate into major decisions regarding the RRT; what are the primary approaches for sustainability [see examples below]) and high-level sustainability goals (what does success look like, what timeframe are you looking at to achieve success, what capabilities are most important for the RRT to retain/maintain).
- **RRT investments requiring sustainability**: List investments [expenditures] made (i.e., personnel hired, personnel proficiency [training], IT systems). For each, briefly indicate:
  - Where are the resources to support this activity (investment) coming from? Is that source sustainable? Is there a contingency plan in place to retain the investment should the existing funding source cease?
  - Priority of maintaining the investment (i.e., low, medium, high);
  - Impact of losing the investment (i.e., eliminates current RRT capability for conducting tracebacks).

- **Assumptions and risks** pertinent to the RRT Sustainability Plan.
- **A process for annual review and revision**.

Throughout the duration of Phase 2, the lead agency should:

- Actively work with state food program managers to determine how the RRT will integrate into the program’s structure and align with MFRPS Standard 5 response requirements. Similar conversations should occur with other food regulatory programs outside of MFRPS (e.g., AFRPS, VNFRPS, egg, produce, shellfish, dairy/Grade A milk, meat/poultry, etc., depending on the RRT’s structure).

Examples of sustainability approaches for RRT capabilities include:

- Developing program infrastructure (IT systems and agency level documentation [SOPs, MOUs, other agreements]), such that the state and federal agencies involved in the RRT sustain and maintain RRT documentation/operations as part of their normal business/operations
- Pursuing complementary/supplemental funding opportunities or leveraging resources with partners
– Establishing continuity of operations (EMAC\textsuperscript{5}, mutual aid agreement)
– Training (RRT and non-RRT personnel) – a ‘train the trainer’ approach, where an investment in one RRT member can be leveraged to train others.

**Equip the Team and Provide Training**

**Equip the Team**

While most of the effort thus far in the development of the RRT has been focused on planning and documentation, it is also important to begin procuring the necessary equipment and supplies to support the RRT during investigations. While the equipment/supply needs for each RRT may vary based on its particular needs, there are many resources from which to draw upon to build your RRT’s equipment/supply list.

**RRT Best Practices Manual**
– Environmental Sampling & Records Collection Chapter: Attachment A – Sample Equipment List.
– Metrics Chapter: Attachment A – Field Equipment and Supplies Example Checklist.

**RRT Mentors**
– RRT Program Workgroup (FoodSHIELD): Examples may be posted in the following folder: Examples and Sharing/Equipment and Supplies.
– RRT Mentorship Meetings: Add a discussion of equipment and supply lists to the agenda for your routine RRT mentorship teleconference/meeting.

**Provide Training**

Begin to provide training to RRT members as per the RRT Training Plan. See more details in Phase 3, ‘Execute the Training Plan’.

**Conduct the First (Learning) Exercise**

Although it might seem counterintuitive, it is recommended that the RRT conduct an exercise early in the team development process (i.e., before progressing too far along with the written framework [e.g., response team structure and establishing an operational plan or procedures]). Such an exercise will: show gaps in communications and information flow that need to be addressed by the RRT; Provide valuable information regarding RRT membership needs; Serve as an ‘alpha test’ of any preliminary versions of the RRT’s written framework and provide other information to aid in future team development issues.

**Considerations for RRT exercise planning/execution:**
– Consult the RRT Manual Exercises Chapter, especially the Attachments (templates/checklists).
– RRTs should consider use of FDA’s Food Related Emergency Exercises in a Box (FREE-B) options.
– As was noted in Phase 1, a dedicated training coordinator is extremely beneficial to focus on coordinating activities like this. Involve other team members as appropriate to keep them engaged in the exercise planning process.
– Use of an outside facilitator can be extremely beneficial, especially if relationships are tenuous or not well defined.
– Take advantage of technology allowing for virtual/offsite participation when budgets are tight or travel is restricted.
– The goal of conducting this exercise is to provide practical information that can be applied to RRT development; minimum participation includes core RRT components (i.e., state food/feed regulatory programs, epi, lab, and FDA Division/District Office; FDA OSCP and PSN should be included if corresponding state programs are involved in the RRT at this point).
– It is strongly suggested that the RRT invite and incorporate input/participation from their Mentor RRT.

\textsuperscript{5} Emergency Management Assistance Compact
− RRTs should incorporate an after action review component for this exercise that results in documentation of recommendations/tracking of follow up action. This can be accomplished by using exercise outcomes to update the RRT Improvement Plan (originally generated after the Phase 1 Kick Off Meeting).
− Update any existing components of the RRT’s written framework (e.g., team structure, ICS structure(s), operational plan) based on outcomes from the learning exercise.

**Evaluate Performance**

**Conduct a Yearly RRT Capability Assessment**

RRTs should complete the RRT Capability Assessment Tool and update the RRT Improvement Plan on a yearly basis. Conduct after action reviews (AARs) for any RRT exercises, responses or activations to learn from experiences (see Phase 3 ‘Evaluate & Improve’ for more details).

**Celebrate Team Success**

Find ways to reinforce the team mindset and build the relationship, especially among team members from different agencies.
− Submit summary reports of significant RRT investigations to RRT Coordinators to be shared on FoodSHIELD and discussed on RRT Monthly Teleconferences.
  • Summary reports should consist of: 1) an incident/event summary (at a minimum, defines and describes the size, scope and distribution of the incident); and 2) documentation of recommendations/tracking of follow up action.
  • The threshold for ‘significant’ RRT investigations is left to the discretion of the RRT, all things being relative. While there is no requirement to develop summary reports within a certain timeframe from the conclusion of an investigation, a large lag time may negatively affect the quality of the report.
− Share accomplishments (investigations or process improvement based) with all RRT members, being sure to thank and recognize the contribution of applicable RRT members. Email recognition of members’ successful contributions to the RRT (cc’ing the entire RRT) can also be very rewarding.
  • Consider submitting a poster or presentation abstract to a regional or national meeting to share the success of your RRT’s development.
Phase 3: Maintaining and Improving

Prerequisites

Prior to embarking upon Phase 3, the following must be addressed and/or completed:

− All elements included in Phase 2, including the creation of a written framework for the RRT, as described in that document. Note that the RRT’s written framework is expected to be a living document, subject to a continuous improvement process. To summarize, a written framework includes:
  • Standardized Response Structure (Org chart [core, auxiliary, steering committee], ICS structure, inter-agency agreements).
  • Operational Plan (RRT mission/vision Data Management; RRT scope/capabilities [i.e., RRT capability assessment and improvement plan]; documented procedures, roles and responsibilities for coordination/maintenance of the RRT – not capability specific).
  • Training Plan (addressing training needs for all RRT members, as well as mechanisms for tracking training status and ensuring that continuing education is provided as necessary).
  • Written SOPs (i.e., implementation of key SOPs as described in Phase 2).

− The RRT should maintain conformance with Standard 5 of MFRPS and other applicable national program standards (AFRPS, VNFRPS).

Assumptions

− All prerequisites are completed.
− Phase 3 should commence after Phase 2 is completed.
− This document represents a synergy of general principles for RRT capacity building, which is based on the work of the pilot RRTs in the RRT grant program.
− Activities within Phase 3 are long-term and contain continuous improvement elements that do not lend themselves to defined timeframes. This document was crafted with this in mind.
− Many of the activities described here should be completed with significant input and assistance from multiple RRT members (e.g., the ‘core’ RRT group, to include at a minimum the FDA Division/District Office, state food regulatory program, epi, lab and feed representatives; may include other state food regulatory programs and FDA field components (OSCP, PSN), depending on the RRT’s structure). Throughout this document the RRT is commonly referred to as the responsible entity for completing a certain task. This language should be interpreted to mean that although the state food regulatory program may be the ‘lead’ state agency in the RRT, it is expected that all ‘core’ RRT members will contribute to its completion. Specific RRT components are named as responsible entities for tasks wherever possible.

Plan

Maintain a Written Framework

A large area of focus for Phase 3 is maintaining a written framework for the RRT (Standardized Response Structure, Operational Plan, Training Plan and Written SOPs). A written framework may take the form of one or more Standard Operating Procedures (SOPs), a collection of Standard Operating Guidelines (SOG), a RRT Manual, a RRT Playbook, or some other form of documentation. Examples of written frameworks, or subsections thereof, can be found in the ‘Examples and Sharing’ section of the RRT Program FoodSHIELD Workgroup.

For all sections supporting creation of a written framework, RRTs should:

− Clearly identify individuals responsible for creating and maintaining these documents.
− Allow for adequate QA measures, such as dating and version control.
− Ensure that current versions are available to all RRT members (use of a FoodSHIELD workgroup or similar web-based collaboration tool for inter-agency document sharing is suggested).
While all the ‘key items to address’ and ‘recommendations’ for each element of the RRT written framework from Phase 2 will be subject to maintenance in Phase 3, the following items warrant particular attention:

− **Standardized Response Structure:**
  - Maintain documentation of RRT Structure and procedures, roles and responsibilities for coordination/maintenance of the RRT – not capability specific (see ‘Maintain & Coordinate the Team,’ below).
  - Pursue and complete necessary documents, SOPs and agreements to support Unified Command. While primary focus should be on a Unified Command Structure that unites the Food Program and the Division/District, RRTs should work towards a Unified Command Structure that would allow for incorporation of any RRT core member agency, as called for by the specific incident.
  - Maintain formalized inter-agency agreements to support the RRT.

− **Operational Plan:**
  - Complete design and/or identification and make operational a RRT Data Management System, with capability for use by all RRT member agencies, as needed/appropriate.
  - Pursue and complete FERP development: While a RRT-specific operational plan or equivalent will still be necessary, some elements of the RRT operational plan may be incorporated into a state FERP, coordinated with the FDA Division/District Office.

− **Training Plan:**
  - Maintain coordination between the ICS structure and the RRT Training Plan to ensure personnel are trained. Ensure some redundancy in trained personnel for ICS positions (at least 2 per ICS position) as a preemptive measure against staff turnover and to ensure availability of trained personnel during an incident. Seek food/feed specific ICS training opportunities.
  - Ensure the training plan adheres to the general principles for ‘RRT Training Plan Development’ (Phase 2). See additional considerations below in ‘Execute the Training Plan.’
  - Track training status of RRT members and ensure that continuing education is provided as necessary.

− **Written SOPs:**
  - Maintain key SOPs (Phase 2, ‘Develop Written SOPs’) and develop other SOPs (representing other RRT Manual Chapters and other SOPs as deemed necessary by the RRT or OP) to address additional RRT capabilities as deemed necessary by the RRT (i.e., aligned with the RRT’s scope [desired capability development]) or OP (required under the cooperative agreement).
  - As additional SOPs (capabilities) are added to the RRT’s written framework, identify training needs and personnel to be trained to the Training Plan.

**Address Sustainability**

This builds upon the Phase 2 section ‘Address Sustainability’. Throughout the duration of Phase 3, the RRT should:

− Actively work with state food program managers to determine how the RRT will integrate with the program’s structure and align with Standard 5 response requirements for MFRPS, AFRPS and VNRFPS, as applicable. Similar conversations should be had for other program areas: egg, produce, shellfish, dairy, Grade A milk, meat, etc., as applicable, depending on the RRT’s structure.

− Otherwise carry out the RRT Sustainability Plan, making revisions when needed and documenting successes.

**RRT Mentorship**

Throughout the duration of Phase 3, the new RRT should:

− Maintain a regular mentor/mentee teleconference meeting as described in Phase 2 (‘Maintain the Mentor/Mentee Relationship’).

− Extend invitations to the mentor/mentee to join exercises and trainings; listen in to after action meetings and conference calls; or participate in site visits, as appropriate and/or necessary.

Open mentorship activities (not confined to the assigned mentorship pair) are strongly encouraged:
− Post incident summaries and lessons-learned summaries for completed RRT responses in the RRT Program Workgroup in FoodSHIELD (Examples & Sharing Folder).
− Post examples of high-quality RRT written framework elements (e.g., SOPs, training plan, etc.) in the RRT Program Workgroup (Examples & Sharing Folder).
− Contribute content to the RRT weekly digest email and reach out to others based on digest content of interest.

Although official RRT mentorship pairings may be assigned by the FDA Office of Partnerships, new RRTs are encouraged to explore (propose to regional partners, organize, coordinate, implement) a regional approach to mentorship. Benefits of a regional approach include:

− **Resource & Information Sharing:**
  - A larger pool of experience and skill sets that can be leveraged by individual RRTs (greater chance that the region as a whole possesses the knowledge, skills and abilities to address a given issue). Additional ‘mentors’ to turn to; a pre-set group for sharing lessons learned, success stories, trial & error, etc.
  - Increased knowledge of other RRTs in your region (similarities, difference and how they might be able to assist you), such as capacity and inventory (see regional collaboration in ‘Address Sustainability’).
  - Sharing of surveillance and inspectional findings, emerging trends, novel approaches, etc.
  - A more organized position from which to liaise with other regions when needed (e.g., specific commodities, import, etc.)

− **Maximize Efficiency and Effectiveness:**
  - Possible reduction in travel costs (training, meetings & mentorship activities).
  - Train together for improved response.
  - Streamlined process, less redundancy.
  - Expedite and standardize response within the region.
  - Awareness of regional differences can inform prioritization of time and resources to maximize efficiencies.

− **Multiple States/Divisions-Districts, One Voice:**
  - FDA structure already facilitates a regional mentorship.
  - Can present obstacles/issues for assistance and resolution from more than one state and/or Division/District (force multiplier).

**Organize & Equip**

**Maintain & Coordinate the Team**

**Team Structure (not incident specific)**
Identification and documentation of team members and structure was covered in Phase 2 ‘Create a Standardized Response Structure.’ In Phase 3, the RRT must be sure to maintain this documentation (see ‘Maintain a Written Framework,’ above) and ensure engagement of necessary partners. Although RRT Structure will vary on a case-by-case basis, the following components should be represented on the RRT (be it in a steering committee, core or auxiliary capacity). Partners that must be represented considered core RRT member agencies/partners are marked with an asterisk.

− **FDA Division/District Office*: The nucleus of the RRT is considered the state food regulatory program agency and the corresponding FDA Division/District Office. The FDA Division/District Office will designate one or more persons to be the main point of contact representing the Division/District Office on the RRT and designate other personnel to participate in RRT activities as appropriate (e.g., joint trainings, joint inspections, joint investigations, joint exercises etc.).

− **FDA Produce Safety Network**: If produce is included within the scope of the RRT, then the applicable Produce Safety Network staff for the RRT’s state should be represented on the RRT.

− **FDA OSCP Retail Food/Shellfish/Grade A Milk**: If retail food, shellfish, and/or Grade A milk programs are included within the scope of the RRT, then the applicable OSCP retail food/shellfish/Grade A milk specialists for the RRT’s state should be represented on the RRT.
− **Food Program***: This is typically the lead state agency within the RRT and all food regulatory programs within this agency should be represented on the core RRT group, in addition to any other state agencies with a manufactured food regulatory program. Other state regulatory agencies (outside of the lead state agency) with authority over egg, meat/poultry, produce, shellfish, dairy/Grade A milk and retail should also be included within the RRT – this can be in a core or auxiliary capacity at the discretion of the RRT.

− **Feed Program***: Each Rapid Response Team should include at least one person representing the State’s feed regulatory program. The definition of “food” in section 201(f) of the Federal Food, Drug, and Cosmetic Act (FD&C Act) includes human food, animal feed, and ingredients used in each of those classes of products. Many animal feeds contain food processing byproducts, many firms make ingredients for both types of products and, often, salvaged food products are used as animal feed. As a result, it is important that each RRT be able to work with the State feed regulatory program to prevent food emergencies from becoming feed emergencies and vice-versa. Consideration should be given to collaboration with animal health veterinarians and other food animal programs.

− **Epidemiologists***: Each Rapid Response Team should ensure inclusion of epidemiological representatives, specifically, an epidemiologist representing the State’s entity with primary responsibility for surveillance and epidemiological investigations of foodborne outbreaks. It is important that there is an intentional and effective partnership between the regulatory/environmental health, surveillance, epidemiology, and laboratory components of the public health system to ensure optimal communication and collaboration during responses to foodborne illness outbreaks.

− **Laboratory***: For laboratory support, the RRT will develop the proper protocols and agreements with both the FDA and/or other federal or State labs for analytical support during foodborne outbreak investigations. All lab participants on the response team should be fully trained in team inspections. Lab SMEs (e.g., microbiologists, chemists) will provide current information on emerging pathogen analytical methodology and servicing lab capability. Lab SMEs will also keep current information on the best shipping methods to the servicing lab. Appropriate development and storage of sampling kits for use in a rapid response should be incorporated. Uniformity in sample collection will be essential to achieve consistent results with multiple serving laboratories.

− **Local Health Partners**: Each RRT should develop a strategy to incorporate key local health department partners in appropriate RRT activities (e.g., situational awareness, coordination for targeted activities, such as recalls, investigations involving the retail point of service, etc.). The move towards a nationally integrated food safety system requires effective integration across all levels of government. As the RRT concept develops, it is important to develop effective models of collaboration in food emergency response to include local partners. It is encouraged that all local health partners involved in the RRT also participate in the Voluntary National Retail Food Regulatory Program Standards (as well as those state agencies with authority over retail foods). RRTs are strongly encouraged to leverage FDA OSCP Retail Food Specialists in engaging local health partners.

**Routine Team Engagement**

As was originally laid out in Phase 2, ‘Establish an Operational Plan,’ the RRT should hold regularly scheduled meetings with RRT member agencies. Quarterly meetings are recommended, with at least one of those being face-to-face.

Leveraging of a Food Protection Task Force to engage RRT member agencies and other stakeholders is encouraged, but must be done in a fashion that accomplishes the purpose of such meetings (e.g., to provide a venue for, at a minimum, core RRT member agencies to 1) determine RRT policy, activities and future direction; 2) achieve situational awareness among RRT member agencies; and 3) allow for feedback).

RRTs are primarily intended to function as an integrated Federal/State partnership. Throughout the duration of Phase 3, the RRT must maintain an adequate FDA/State relationship as described in Phase 2 (‘Maintain the Division-District/State Partnership’). This activity can be met through routine RRT meetings, provided all original requirements continue to be met. Critical Division/District personnel to be involved in the RRT include: Program Division Director, District Director, Deputy District Director (should that person be responsible for overseeing FDA/State relations), Emergency Response Coordinator, District Recall Coordinators, State Liaison (as appropriate, depending on duties).
Other critical FDA Human and Animal Food Operations personnel (outside of the Division/District) include: FDA Produce Safety Network and FDA OSCP Retail Food/Shellfish/Grade A Milk Specialists (depending on your RRT’s current engagement of these partners).

**Equip the Team**

Maintain the equipment and supplies necessary to support the RRT during investigations, including sampling equipment/supplies (identified with input from laboratory RRT members).

While the equipment/supply needs for each RRT may vary based on its particular needs, there are many resources from which to draw upon to build your RRT’s equipment/supply list (See Phase 2, ‘Equip the Team’).

**Train**

**Execute the Training Plan**

See Phase 2 ‘Establish a Training Plan,’ as well as specific items to focus on as per ‘Maintain a Written Framework’ (above), including: joint training, expertise development, utilizing a train-the-trainer approach and training for sustainability/intra-RRT surge capacity (e.g., cross-disciplinary and cross-agency training; and training of RRT member agency personnel not primarily assigned to RRT duties for use as potential surge capacity).

**Items of Focus for RRT Training**

Provide and/or procure training opportunities for RRT members according to the RRT Training plan (should be aligned with and meet the minimum requirements of the Training Chapter of the RRT Best Practices Manual). Important training areas include: foodborne illness investigations; ICS (100, 200, 300, 400, position specific); sampling techniques; tracebacks; farm investigations; and commodity-specific investigations such as sprouts, eggs, leafy greens, etc. It is important that the RRT delineate in their training plan what training requirements are applicable to which types of RRT members.

RRT members should also provide response-based training for other local, state or federal investigators and industry groups, as appropriate. Additional staff in the food and feed protection programs and in other relevant organizations (e.g., other RRT member agencies, as appropriate) should be trained as a resource to provide surge capacity to the RRT in the event that additional assistance is needed. A train the trainer approach for response-based activities (such as sampling, recall effectiveness/audit checks, foodborne illness investigations, traceback/traceforward, etc.) that reaches the local responder level is highly encouraged.

Unless circumstances mandate otherwise, RRT members (especially state and District investigators) should engage in joint training. This is in accordance with one of the key principles in the Training Chapter of the RRT Best Practices Manual, and helps provide a uniform foundation for rapid response as a team. When true joint training is not possible and separate training courses must be offered in order to reach the full target audience, every effort should be made to coordinate training offerings so as to provide equivalent training content/materials for team members.

Where feasible, RRTs should consider inviting or including other RRTs to participate in training events and/or make available these training materials to other RRTs through FoodSHIELD or other appropriate avenues.

Provide incentives for team members to address/fill any training gaps and keep staff engaged in the RRT.

**Proficiency Development**

Each RRT investigator should become proficient in at least one core component of rapid response (e.g., commodity specific agricultural practices, manufacturing processes, water, wildlife, soil amendments, ICS/NIMS). This investigator would then be responsible for training other staff in this area so that there is at least one back-up for each area of proficiency on the team.
Exercise

Conduct RRT Responses

**RRT Response & After Action Review**

The RRT should use the written framework to guide incident response, including adherence to trigger points for RRT activation and establishment of an ICS/Unified Command Structure, as well as trigger points and protocols for notification of partners upon RRT activation or instigation of other RRT activities. It is important to note that not every RRT response warrants a formal ICS/Unified Command activation. The RRT written framework should apply and provide structure to incidents that warrant a coordinated, multi-agency (RRT) response, but do not meet the activation trigger threshold.

Following a RRT response, an after action review (appropriate to the size/scope of the incident) should be conducted and the following documentation should be maintained and shared with other RRTs. At a minimum, an after action review must produce:

1. An incident summary which, at a minimum, defines and describes the size, scope and distribution of the incident.
2. A list of recommendations (lessons learned) and appropriate tracking of subsequent implementation of recommendations (to be included in the RRT Improvement Plan).

A full after action report may be created, as warranted by the incident/event (see the RRT Best Practices Manual, AAR Chapter).

An incident summary and list of recommendations (lessons learned) may be posted in the RRT Program Workgroup, see ‘RRT Mentorship,’ above. The threshold for successful prevention efforts and ‘significant’ RRT investigations is left to the discretion of the RRT, all things being relative. While there is no requirement to submit summary reports within a certain timeframe from the conclusion of an investigation/activity, a large lag time may negatively affect the quality of the report. The recommendation in the RRT Manual is to conduct an AAR within 45 days of the conclusion of a response/exercise.

RRTs are encouraged to take a tiered approach to after action reviews, where complete after action reports are required for all formal RRT activations, and more informal incident summaries/lessons learned documents (as described above) could be generated for less formal RRT responses (joint/coordinated events). See the RRT Best Practices Manual AAR Chapter (section 5, Background information) for more ideas/information.

**Environmental Assessments**

RRTs should incorporate environmental assessment/root cause analysis activities into RRT incident responses. This will include implementation of environmental assessment procedures by trained personnel, to include identification, documentation and sharing of contributing factors and environmental antecedents, as well as contributions towards development and implementation of subsequent recommendations for industry or other preventive measures.

Resources to aid in developing environmental assessment capabilities and capacity can be found in the RRT Program Workgroup in FoodSHIELD (Folder: Examples and Sharing, Subfolder: Investigations and Traceback), and in the RRT Manual Environmental Sampling & Records Collection Chapter. The CDC Environmental Assessment Training Series (EATS) is also recommended.

RRTs are encouraged to initiate and execute prevention-focused activities, based on findings from environmental assessments. Summaries of successful prevention activities may also be posted on a Food Protection Task Force Website or state agency website.

Conduct RRT Exercises

See Phase 2 ‘Conduct a First (Learning) Exercise’ and the RRT Manual Exercises Chapter for RRT exercise planning/execution considerations. In the absence of a RRT activation (under ICS/NIMS and Unified Command) involving an after action review and subsequent implementation of recommendations during a given year, the
RRT should complete at least one annual exercise that incorporates the use of ICS and all members of the RRT (multi-disciplinary) to promote team building of the RRT and continuous improvement. An after action review and report should be completed for this exercise and shared in FoodSHIELD.

**Evaluate & Improve**

**Complete a Yearly RRT Capability Assessment**

RRTs should complete the RRT Capability Assessment Tool and update the RRT Improvement Plan on a yearly basis. Lessons learned/items for improvement from RRT responses and exercises should also be incorporated into the RRT Improvement Plan.

**Utilize a Continuous Improvement Process**

A RRT’s written framework should be subject to a continuous improvement process. The heart of a RRT continuous improvement process should be the use of lessons learned from actual RRT responses and exercises as well as the completion of the yearly RRT Capability Assessment to update of the RRT Improvement Plan. The RRT may elect to implement other continuous improvement ‘inputs’ as well (e.g., MFRPS Strategic Improvement Plan, CIFOR assessments, etc.). No matter how diverse the inputs/tools used for continuous improvement, the RRT Improvement Plan (updated yearly) should be the ultimate and comprehensive repository or documentation of priorities and areas for improvement for the RRT.

In accordance with the preparedness cycle for capability development as per the National Response Framework, the priorities and items identified for improvement in the RRT Improvement Plan should be addressed through planning (e.g., updating the RRT written framework), organizing/training/equipping and exercising. The outcomes of this cycle would then be evaluated via incident/exercise lessons learned as the completion of the yearly RRT Capability Assessment to inform the next yearly update of the RRT Improvement Plan.

**Celebrate Team Success**

Find ways to reinforce the team mindset and build the relationship, especially among team members from different agencies.

- Submit summary reports of successful prevention activities and significant RRT investigations to be discussed on RRT Teleconferences (see other sharing requirements under ‘Conduct RRT Responses’).
- Share accomplishments (investigations or process improvement based) on RRT Teleconferences, being sure to thank and recognize the contribution of applicable RRT members. Email recognition of members’ successful contributions to the RRT (cc’ing the entire RRT) can also be very rewarding.
- Consider submitting a poster or presentation abstract to a regional or national meeting to share the success of your RRT’s development or a successful investigation or prevention activity.
- Consider ways to promote team unification/identification (e.g., develop a logo, branded vests, hats, jackets, etc.). Note: apparel is not an allowable expense under the cooperative agreement.
- Participate in RRT Program where RRTs can introduce new team members and share information about new partnerships, initiatives, training opportunities, success stories, etc. Venues for this include FoodSHIELD RRT Program WG discussion boards (under development), Food Protection Task Forces and regional mentorship.
- Attend the RRT Annual Face to Face meeting: At a minimum, representatives from the RRT’s state agency and FDA Division/District Office should attend the RRT annual Face to Face Meeting. Contact OP RRT Program Coordinators for additional details.

Reflect upon and learn from what you’ve accomplished and what obstacles you’ve faced

- Hold a meeting to evaluate what was learned during RRT development (*identify and apply* lessons learned, incorporate items to address [course-correction] in the RRT improvement plan).
- Continually look to the future: 1, 5, 10 years out. What is the next step? What tools are needed to go to the next level? Make sure this is reflected in your RRT Improvement Plan.
− Revisit your RRT vision/mission/scope over time and adjust supporting infrastructure as needed (i.e., your RRT operational plan).

Maintain commitment of senior leadership on state and federal level
− Show RRT successes and maintain a portfolio of success stories. Show process improvement and growth that has resulted from RRT development.
− Continually assess what RRT level is desired and affordable. Continually refocus in light of changing agency priorities.
Common Terms & Definitions

1. **After Action Review** – A learning tool intended for the evaluation of an incident (event, investigation, etc.) in order to improve performance by sustaining strengths and correcting weaknesses. The written After Action Report also provides investigation and response partners a final summary of the incident, including issues raised during the After Action Review process.

2. **Environmental Assessment/Investigation** (Also called “Environmental Health Assessment”) – On-site food product investigations, conducted in conjunction with investigations (e.g., traceback) as needed to assess and rule out the potential that the contaminant of concern was introduced at a point in the distribution or production system. This is achieved by identifying contributing factors and environmental antecedents.

3. **FoodSHIELD** – FoodSHIELD is a web-based system for communication, coordination, education, and training among the nation’s food and agriculture sectors. This secure system allows public health and food regulatory officials at the local, state, and federal levels across the nation to work together. It also helps communicate food safety information.

4. **Human or Animal Food Incident** – An unintentional or deliberate contamination, threatened or actual, of food that may impact human health at any point in the production system (e.g., pre-harvest production, processing, distribution). Note that a human or animal food emergency is an incident in which the response needs exceed the capacity of the initial responding entity or jurisdiction response. (See NASDA Template Version 4.0. Preface)

5. **Incident Command System (ICS)** – A flexible, scalable response organization providing a common framework within which people can work together effectively to respond to an emergency. (For more information, see FEMA’s ICS Resource Center)

6. **Proficient/Proficiency** – A RRT member (especially an investigator) that has successfully completed an ‘advanced’ level of training for a RRT capability. The determination of beginner/intermediate/advanced training levels for RRT capabilities is at the discretion of the RRT and must be documented in their Training Plan.

7. **Rapid Response Team (RRT)** – The group of state and federal partners associated with each Rapid Response Team. This team is responsible for developing and implementing improved rapid response to human or animal food incidents. There are typically two tiers of RRT member agencies/partners: core and auxiliary. **Core RRT member agencies/partners** include the FDA District/Human and Animal Food Division, state food regulatory program (typically the manufactured food program), state feed regulatory program, state epidemiologist, and state laboratory; and may also include others, as defined by each RRT. If the lead state agency (e.g., Department of Agriculture) has multiple human or animal food programs (e.g., manufactured food, egg, and produce), it is encouraged that all those human and animal food programs are considered core RRT member agencies/partners. This is to maximize the impact of RRT development to support response work in multiple different program areas. **Auxiliary RRT member agencies/partners** include other regulatory programs within the state (retail/restaurant inspections, raw molluscan shellfish, dairy/Grade A milk, egg, meat/poultry, produce, etc.; both the state regulatory agency and corresponding federal group: FDA Produce Safety Network (PSN), FDA Office of State Cooperative Programs (OSCP), FSIS), local health departments; these will vary and are defined by each RRT. RRT as a “Response Team” – RRT often refers to the group of individuals who conduct specific investigation activities and coordinate the RRT’s response to an incident. These personnel will be selected from the subset of RRT member agencies or partners that will assume responsibility for the RRT response or activation (e.g., State Departments of Agriculture and Health, FDA District/Program Division Offices, USDA/FSIS). This response team may be in the form of an Incident Management Team (IMT) stood up under Incident Command System (ICS)/Unified Command, constituting a RRT activation, or could operate under a non-ICS structure that would constitute a RRT Response. **Lead State Agency** – The state agency responsible for leading RRT development; this is typically the state manufactured food regulatory program, particularly if the RRT is being developed under an FDA cooperative agreement. However, a Voluntary RRT can be led by any state human or animal food regulatory program.

8. **RRT Activation** – Agency Executives or designees approve activation of RRT (e.g., stand up of an IMT). Actual definition and triggers for activation are determined by each RRT individually and must be properly documented in
SOPs or other RRT agreements/plans. Triggers which may be considered prior to a potential RRT activation could include the number of ill persons or deaths, possibility of incident escalation, severity of the health hazard, etc.

9. RRT Response – RRT response activities, other than RRT Activations, to incidents with increased potential public health risk. These do not include routinely scheduled regulatory activities and may involve a broad range of incidents, including but not limited to: human illness clusters and outbreaks, human or animal food contamination incidents with no human illnesses, requests for emergency assistance from another agency, large planned events, severe weather events, and other human or animal food emergencies. RRT Responses are those requiring enhanced coordination, communication, and subject matter expertise, and technical skills that RRT members have developed.

10. RRT Steering Committee – A selected number of key representatives from core RRT member agencies that provide oversight and strategic direction to the RRT (development and function). Must include at least a representative from the State Food Regulatory Agency and corresponding FDA District/Program Division Office.

11. RRT Capability – Any capability that impacts a RRT’s ability to conduct a rapid response for a food/feed incident; particularly, any of the RRT Manual chapters.

12. RRT Improvement Plan – Provides a strategy for development and/or improvement of RRT capabilities and actualization of the RRT concept/vision over the course of the RRT award. The bulk of the improvement plan should be based on the results of the RRT Capability Assessment and focus on the specific activities needed to achieve desired capacity levels for applicable RRT Manual Chapters. Priorities for RRT capacity development will be based on State resources and food program risks, which vary significantly across the country, based on different types of commodities (e.g., fresh produce versus shellfish) or geographic factors (e.g., hurricanes, ports). An improvement plan should include: task descriptions (what needs to be accomplished), a detailed timeline (when the work will start, who will be doing the work and when the work will be completed), and status updates. We recommend a table or excel based improvement plan.