

# COUNCIL OF STATE AND TERRITORIAL EPIDEMIOLOGISTS

#### **Overview Information**

Issuing Organization: Council of State and Territorial Epidemiologists (CSTE) at <a href="www.cste.org">www.cste.org</a>.

Participating Organizations: Council to Improve Foodborne Outbreak and Response (CIFOR) at <a href="www.cifor.us">www.cifor.us</a>, Centers for Disease Control and Prevention at <a href="www.cdc.gov">www.cdc.gov</a>. Funded through sub-awards from Cooperative Agreement Number 5U38HM000414.

# Title: Developing metrics from the CIFOR *Guidelines for Foodborne Disease Outbreak Response*Table of Contents

Full text of announcement

Section 1: Funding opportunity description

Section 2: Award information

Section 3: Eligibility information

Section 4: Application and submission information

Section 5: Applicant review information

Section 6: Award administration information

Section 7: For more information

#### Full text of announcement

Section 1: Funding opportunity description

Project Purpose and Background: In 2005, CSTE and CDC convened the Council to Improve Foodborne Outbreak Response (CIFOR). CIFOR is a multidisciplinary workgroup organized to increase collaboration across the country, across relevant areas of expertise, and across those affected by foodborne disease outbreaks in order to reduce the burden of foodborne illness in the United States. CIFOR members include representatives from the federal government and organizations representing state and local government, epidemiology, environmental health, public health laboratories, and regulatory agencies. CIFOR is co-chaired by CSTE and NACCHO. The other CIFOR member organizations are CDC, FDA, USDA, AFDO, NASDA, APHL, NASPHV, NEHA, and ASTHO. The CIFOR Guidelines for Foodborne Disease Outbreak Response, released in 2009, was developed to improve foodborne disease outbreak detection and response. Chapter 8 of the CIFOR Guidelines was developed for use by state and local public health agencies to evaluate the performance of their foodborne disease surveillance and control programs. Standardized performance criteria and metrics promote a common understanding of the key elements of surveillance and control activities, facilitate training of staff, and allow for the aggregation of data to evaluate program effectiveness and identify specific needs for improvement. The purpose of this project is to develop specific metrics and recommended targets from the Chapter 8 Performance Indicators and other sources.

The *Guidelines* can be found at <a href="http://www.cifor.us/CIFORGuidelinesProjectMore.cfm">http://www.cifor.us/CIFORGuidelinesProjectMore.cfm</a>. The *Guidelines* were intended to serve as a comprehensive source of information on foodborne

disease investigation and control for state and local health departments. It was intended to update and complement existing guidelines, policies and procedures and intended to be used to modify or redirect current approaches or expand activities to be consistent with the highest standards of public health practice. While the *Guidelines* contains performance indicators on types of measures, Chapter 8 does not include specific recommendations for targets that agencies should be meeting. For example, <u>indicator 8.6.1</u> refers to the "percentage of reported cases for which an onset date was reported", but does not specify what an effective and high-quality food safety program's proportion should be. Another example is <u>indicator 8.12.1</u>, which says that laboratories should measure "the median number of days from the submission of isolates to receipt serotyping results" (e.g., *Salmonella*), but the indicator does not specify a particular target value (e.g., 3 days, 30 days) that is recommended. This project seeks to recommend target values that will help agencies demonstrate their public health performance and effectiveness for the overall outcome of better population health.

Several groups have already made efforts to identify target values for a number of the CIFOR performance indicators that could be relevant. FoodCORE is a CDC-funded initiative providing funding to improve outbreak response currently in 7 sites. The FoodCORE sites and CDC have developed metrics for selected surveillance, detection, investigation, response, control, and prevention-related variables. Each participating site provides data related to the key areas of activity. More information about the FoodCORE project can be found at <a href="http://www.cdc.gov/foodcore/about.html">http://www.cdc.gov/foodcore/about.html</a>. The FDA Rapid Response Teams (RRT) project has also developed some indicators that may be relevant. More information about the FDA RRTs can be found at

http://www.fda.gov/ForFederalStateandLocalOfficials/CooperativeAgreementsCRADAsGrants/ucm297407.htm.

<u>Project Objectives</u>: A consultant will develop recommended targets based on the performance indicators in Chapter 8 of the CIFOR *Guidelines* and used by FoodCORE sites. The outcome of the project is intended to be a set of core measures feasible for all states to collect and explanation of how to do so and why. The project will consist of components including but not limited to:

- a. Review of FoodCORE metrics, including core and optional metrics, and metrics from other states and initiatives that may be collecting similar data
- b. Creation of a subset of indicators based on importance and feasibility of implementation. The subset should include metrics for epidemiology, laboratory, and environmental health programs. They should focus primarily on the state level, although some metrics may be applicable to local programs as well.
- c. Development of term definitions and methodology as necessary. The metrics applicable to the local level should include definitions and methodology appropriate for the local level. Methodology should also include prerequisite information, i.e., data that must be collected in order to calculate the indicator.

- d. Development of recommended targets for each indicator. The recommended targets may be tiered to include, for example, good, better, or best recommendations. The inclusion of tiered target recommendations will be determined together by the consultant and the workgroup.
- e. Identification of several state health departments (at least 5) to provide feedback on the selected indicators and their recommended targets
- f. Revision of indicators and targets as necessary based on feedback from identified sites
- g. Creation of a summary report of the identified measures and their recommended targets
- h. Work with lead author Jac Davies and workgroup to consider inclusion of metrics in the CIFOR *Guidelines* being revised in fall and winter 2012-2013. Work with lead author to incorporate metrics and language and revise Chapter 8 of the CIFOR *Guidelines* appropriately.

#### **Deliverables**:

- a. Detailed project plan including timeline for CSTE and CIFOR review and approval
- b. Comprehensive report of measures and recommended targets, including the following sections:
  - i. Introduction and background
  - ii. Justification of why performance indicators are important, why data should be collected, and why recommended targets were put to each indicator selected
  - iii. Subset of performance indicators that are both measurable and worth measuring
  - iv. Recommended targets for each indicator, including potential tiers of recommendations (e.g., good, better, or best)
  - v. Methodology: How to collect data for the indicator subset, including the prerequisites needed in order to calculate the indicator
  - vi. Definition of terms
- c. Project summary report for CSTE

#### Timeline:

Phase I Develop project plan

Phase II Review metrics in
FoodCORE & other states

Phase III Create a subset of feasible indicators & define methodology
Define targets for each indicator in subset

2012							2013				
June	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May

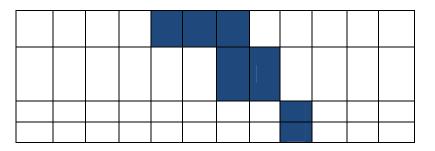
Phase IV Determine sites to collect

data & analyze Revise indicators as necessary based on site

feedback

Finalize indicators

Phase V Final report



#### Section 2: Award information

Mechanism(s) of support: CSTE will manage matters related to financial support for this project. Funds available: Funding for this project will be firm fixed. CSTE and CIFOR intend to commit up to \$50,000.00 to support this project over 10 months.

CSTE receives funding for this project through the Centers for Disease Control and Prevention (CDC) cooperative agreement number 5U38HM000414. Funds awarded to contractors under this announcement are subject to the laws, regulations and policies governing the U.S. Public Health Service grant awards. All estimated funding amounts are subject to the availability of funds.

#### Section 3: Eligibility information

<u>Eligible applicants</u>: Institutions of higher education, nonprofit organizations, and private consultants. Applicants should have demonstrated experience with data analysis and developing performance indicator/metrics. Applicants also should have experience in foodborne disease surveillance and outbreak response (investigation, control, reporting) issues and experience in conducting foodborne disease-related activities in public health practice settings.

Section 4: Application and submission information: Applicants should submit an application addressing the objectives, components, and eligibility requirements stated in Section 1 and Section 3, respectively.

Content and form of application submission: Applications should include the following headings in the order listed and should address the issues included under each heading:

- i. Contact information (1/2 page maximum)
- ii. Methods the applicant will use in conducting project work and in developing and completing all specified deliverables including all phases. (4 pages maximum)
- iii. Proposed budget (1 page maximum)
  - 1. Personnel
  - 2. Travel
  - 3. Supplies
  - 4. Other needed expense categories
- iv. Projected timeline, including dated milestones (1 page maximum)
- v. Appendix additional materials (not required and may not be reviewed)

<u>For further assistance</u>, technical questions, or inquiries about the application, contact Lauren Rosenberg at CSTE (770-458-3811 or <u>lrosenberg@cste.org</u>). Representatives from CSTE will be available to speak to potential applicants to discuss technical or administrative questions. All such questions and answers will be made available to all applicants who have submitted letters of intent.

#### Submission, review, and anticipated start dates

- a. Letter of intent (strongly encouraged, but not required): July 18, 2012
- a. Application submission receipt date: July 30, 2012
- b. Award notification date: August 6, 2012
- c. Anticipated award date: August 13, 2012

<u>Submitting an application</u>: Applications must be received by 11:59 pm ET July 30, 2012. Notification will be sent to the applicant upon successful receipt of the application upon request. Electronic copies are encouraged, but the application must be received by the deadline.

Lauren Rosenberg

Associate Research Analyst

Council of State and Territorial Epidemiologists

2872 Woodcock Blvd., Suite 303

Atlanta, GA 30341

770-458-3811 (phone)

770-458-8516 (fax)

Irosenberg@cste.org

<u>Application processing</u>: All applications received by the deadline will be reviewed by an objective review panel.

## Section 5: Application review information

All applications will be reviewed against these criteria:

a.	Ability of the applicant to meet the objectives of the project described in	
	Section 1, above, satisfactorily	40%
b.	Applicant's understanding of the project and deliverables	20%
c.	Technical merit of the proposed project as determined by peer review	25%
d.	Extent to which the budget is justified	10%
e.	Completeness of applications	5%

Review and selection process: Eligible applications that are complete will be evaluated for technical merit by CIFOR and CSTE in accordance with the review criteria. A panel of CIFOR members, CSTE National Office staff, and subject matter experts will be created to ensure the completeness and appropriateness of applicants' proposal. Funding awards will be made based upon the quality of the submitted proposal and the ability of the applicant to meet the objectives stated above.

#### Section 6: Award administration information

<u>Award notices</u>: Applicants will be notified via email or phone no later than August 6, 2012. <u>Recipient and responsibilities</u>: The award recipient will have primary responsibility for the following:

- a. Develop a draft plan for the overall project during Phase I. The draft project plan must include a detailed work plan, a timeline and milestone, among other relevant information. The draft plan will be reviewed and potentially revised by CSTE and CIFOR.
- b. Manage the overall project
- c. Provide written progress reports and invoices to CSTE as required in the contract agreement
- d. Provide multiple avenues for feedback and discussion (conference calls, etc.) on a regular basis (at least twice monthly)
- e. Attend an in-person workgroup meeting if deemed necessary
- f. Creating materials consistent with the objectives and components in Section 1
- g. Complete the deliverables, following review by CSTE and revisions as directed by CSTE
- h. Provide written recommendations for use and implementation of the deliverables
- i. Provide a written summary report and invoices to CSTE as required in the contract agreement

<u>CIFOR Role</u>: CIFOR members will participate in reviewing applications submitted in response to this RFP and will provide technical guidance throughout the project.

#### CSTE responsibilities: CSTE will:

- a. Serve as the applicant's principal point of contact
- b. Monitor the terms of the agreement
- c. Fund according to the terms of the agreement
- d. Provide information about the progress of the program to the CSTE Executive Board and to CIFOR
- e. Review all reports and distribute the final report to CIFOR

### Section 7: For more information contact:

Lauren Rosenberg, MPA
Associate Research Analyst
Council of State and Territorial Epidemiologists
2872 Woodcock Blvd., Suite 303
Atlanta, GA 30341
770-458-3811 (phone)
770-458-8516 (fax)
Irosenberg@cste.org

For more information about CIFOR and the Guidelines, visit: www.cifor.us