EHS-Net Ideal Complaint System Decision Grid

	Category	#	Item collected	Examples	Justification	Level of Importance	Comments / Concerns
A	Origin Of Complaint Data	A1	Name and contact info on person collecting the complaint **and/or** source of information	Agency, environmentalist, department, clinic, receptionist, email, phone, fax	In order to clarify any data collection entry	High	
B	Complainant Data	B1	Complainant(s) Name		Reference for follow-up interview	High	Should remain confidential
		B2	Complainant(s) contact info	Telephone (work, cell, home) Home address E-mail address	Essential if follow-up interviews are warranted	High	Contact info to be stripped from responses-coded for confidentiality
		B3	Complainant(s) Age		May allow better identification of and evaluation of complainants more susceptible to foodborne illness	Moderate	Data collected may be more accurate and forthcoming if the question requests DOB rather than age.
		B4	Complainant(s) Race		Some allergens or intolerances are more prevalent for certain races.	Low	
		B5	Complainant(s) Gender		Some pathogens may be of more concern based on the person's gender.	Moderate	
		B6	Complainant(s) occupation	Complainant with diarrhea works in fast food restaurant in another town and has continued to work since becoming ill. The health dept. in that jurisdiction would need to be alerted so they could impose proper restrictions or exclusion, determine which ready to eat foods that person prepared that are still available for sale, see if other workers are also ill, etc.	Occupation -- could help identify trends in food consumption on a particular day or special event, etc.	Moderate	Should be followed up on so as not to continue spreading the disease or cause an outbreak.
		B7	Previous illness or chronic condition		May influence present illness	Moderate	

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		B8	Existing Medication(s)		May impact illness	Moderate	
C	Suspect Food Data	C1	Name of suspect food(s) reported by complainant	Typically the last meal before onset as reported by complainant. Basic food as stated on menu with special requests also included. (e.g. hamburger with no onion but add cheese.)	May be the vehicle in an outbreak	High	Menu items and special requests to these items as best described by caller should be documented. Specific ingredients may be identified during investigation.
		C2	Date and time food was consumed		Helps confirm outbreak and provides data for epidemiological curve or outbreak scenario	High	
		C3	Location food was consumed		Essential for confirmation of an outbreak	High	
D	72-hour Food History Data	D1	72 hour food history of food(s) and drink(s) consumed	Past 3 days of ALL meals consumed. This includes both home prepared and restaurant/food service meals.	Link common locations where complainants consumed food to better identify locations responsible for FB illness.	High	72 hours history is adequate for initial complaint. Additional history may be warranted during an outbreak investigation.
		D2	Date and time of meals reported				
		D3	Locations where foods were consumed during the 72-hour history				
E	Illness Data	E1	Illness onset date and time		Case definition and epi curve information. (also to help identify an outbreak - by helping link locations from the food history data)	High	
		E2	Duration of illness		Better identify foodborne illness etiology	High	

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		E3	Symptoms		Helps to fit illness to a case definition of an outbreak illness (to identify an outbreak)	High	
F	Clinical Data	F1	Health Care or Hospital visited/stayed		Contact information may be needed to verify/confirm case definition.	High	Name, location and contact information should be documented.
		F2	Date and time of visit		Verification/validate complainant report	High	
		F3	Length of stay (if admitted)		May help confirm case definition.	Moderate	
		F4	Physician contact information		Contact information may be needed to verify/confirm case definition.	High	
		F5	Clinical specimens taken	Specimens provided to HC provider.	Confirms case definition	High	
		F6	Clinical data	Results from hospital/lab if known	Confirms case definition	High	
		F7	Specimen request* or reminder	"Would you be willing to provide a stool sample?"	Help confirm case definition	High	* Specimen requests would be made under special circumstances as determined by the interviewer.
G	Related Exposure Data	G1	Check list of all other possible exposures such as out of state travel, petting zoo, mass gathering, diapered kids or adults		To identify other possible suspects for the illness	Moderate	
		G2	Water consumed outside of residence in past 2 weeks		May help identify waterborne illnesses	Moderate	

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		G3	Exposure to recreational water in past 2 weeks		May help identify waterborne or other enteric disease	Moderate	
H	Associations and/or Related Case Data	H1	Number of people eating suspect meal		May facilitate an initial investigation	High	
		H2	Number of people reportedly ill		May influence investigative actions to be taken	High	
		H3	Group leader contact information		Group leaders may provide information on entire party/participants of events.	Moderate	This applies when a complaint is part of an organized event where a group leader may quickly provide information on all participants under the group leader's management.
		H4	Indicator of whether ill persons shared common exposure prior to suspect meal		May facilitate initial investigation and influence investigative actions to be taken	High	
		H5	List of contacts who may have eaten at the establishment	This list would include persons known or believed to have eaten at the same establishment during the same time period.	Aids during the investigation and analysis of foodborne outbreaks. Facilitates identification of controls.	High	
I	Other	I1	Actions(s) taken		To better understand whether to follow similar response actions in the future if faced with the same illness scenario	Moderate	