

F. Appendix 2: Key elements of complaint system operational guidelines

Key Elements of Complaint System Operational Guidelines

Soliciting and receiving reports

- Complaints received by telephone should be documented with a standard intake form to record complainant information. Complaints received through other formats warrant follow-up to fully document the complaint.
- All information collected should be entered into the complaint database.
- Refer complaints to other jurisdictions (local, state, or federal), as needed.

Detection of clusters/outbreaks

- Collect as much information as possible during the initial report. Get details about symptoms, onset date and time, and recovery date and time. These are needed to determine the likely etiology and determine which establishment (if any) was the most likely source of illness. Food histories and other exposures are critical to detecting clusters.
- Set up the reporting process so all reports go through one person or one person routinely reviews all reports to increase the likelihood that patterns among individual complaints will be detected.
- As new complaints are received, review previous complaints to recognize multiple persons with a similar illness or a common exposure.
- Compare exposure information collected through the complaint system with data from pathogen-specific surveillance to reveal potential connections between cases and increase the likelihood of detecting an outbreak.
- Cross-reference complaints to identify multiple independent complaints about a food establishment or event.

Responding to complaints

If only one person was ill or all ill persons live in the same household:

- Collect 3-day food history. Outbreaks are frequently associated with food consumed 2 or 3 days back in the food history, and not at the source that the complainant suspects. If clinical or laboratory evidence is available to suggest a specific agent with a longer incubation period, collect food history for incubation period corresponding to the agent*.

If a complaint reports ill persons from multiple households:

- Collect info only on common meals or environmental exposures (i.e., water).
- Collect names and contact information for other ill people reported by the complainant; if they are reluctant to provide this information, ask them to give your telephone # to the ill people to call (and stress the importance of them doing so). Illness information from other ill people is critical in determining if an outbreak actually occurred, the likely etiology, and on which food source an investigation should be focused.

Key Elements of Complaint System Operational Guidelines

Complaint assessment and follow-up

- Evaluate the clinical profile of reported illnesses (incubation periods, symptoms, and durations). If symptoms and likely incubation period are consistent with known foodborne illness, and a suspect food source is identified, an environmental assessment should be conducted by a trained environmental health specialist.
- If the complaint provides evidence of multiple illnesses that warrant the initiation of an outbreak investigation, the appropriate epidemiology and environmental health jurisdictions should be notified, and a conversation between appropriate agencies should take place to plan and initiate the investigation.
- If an etiology has been confirmed, that information should guide the EH assessment. If the etiology is not confirmed, use the clinical profile of reported illnesses (distribution of incubation periods, symptoms, and durations) to guide the EH assessment.
 - E.g., short incubation, little or no fever - suggestive of foodborne intoxication, focus on time-temperature abuse.
 - E.g., norovirus profile, focus on food worker illness, handwashing, and bare-hand contact with ready-to-eat foods.
- In an outbreak investigation, obtain and test clinical specimens from several members of the ill group. This may identify links to other outbreaks or sporadic cases.
- If the presumed exposure involves food, collect and store—but do not test—food from the implicated event. Test only after epidemiologic or environmental investigations implicate the food.
- Store food specimens as appropriate to the sample. Refrigerate perishable food samples but keep foods that are frozen when collected frozen until examined. In general, if perishable food samples cannot be analyzed within 48 hours after receipt, freeze them (–40 to –80o C).

* https://www.cdc.gov/foodsafety/outbreaks/investigating-outbreaks/confirming_diagnosis.html