



Business Plan 2006 – Division of Environmental Health - Florida Department of Health

Mission: "Promote and Protect Health"

Vision: "Healthier Floridians"

Goal: To prevent disease of environmental origin

Bureau of Community Environmental Health – FOOD AND WATERBORNE DISEASE PROGRAM

Trends and Conditions:

With an estimated 18 M population and 85.8 M annual visitors to Florida, along with an aging and high risk population, the Department of Health continues its ongoing responsibility and authority for epidemiological investigation in public food establishments and institutions such as hospitals, prisons, and schools (s. 381.006(10), F.S., s. 509.032(2)d, F.S., ss. 64D-3.002(1), 3.013(3), (5), (7), and 3.014, F.A.C.). The responsibility for routine, regulatory inspections of public food establishments other than institutions was transferred from DOH to the Department of Business and Professional Regulation and to the Department of Agriculture and Consumer Services through 1992 legislation.

Changing patterns of individual and global economic behavior have complicated the public health control of food and waterborne diseases in recent years and have accentuated the need for an improved public health infrastructure to detect illness. Present global political instabilities also raise the potential for intentional food contamination events which would initially manifest themselves as routine foodborne outbreaks. Major food and waterborne diseases include: campylobacteriosis, salmonellosis, shigellosis, staphylococcus, norovirus, giardiasis, hepatitis A and *Clostridium perfringens*. Emerging pathogens such as cryptosporidium, cyclospora, and *E. coli* O157:H7 have also caused recent outbreaks of illness. *Vibrio vulnificus* has caused severe illness and death in high-risk categories of people who choose to consume raw oysters. Recent emerging pathogens and vehicles include saxitoxin in Florida pufferfish, *Salmonella Typhi* in frozen imported mamey, cyclospora in fresh imported basil (the largest reported cyclospora outbreak in Florida history) and hepatitis A in raw oysters (the first such outbreak in 20 years). The risk of consumption of raw milk has also become a frontline public health issue.

Division Cost: \$863,164 (Administrative Trust Fund)

Division Positions: 11

County Program Cost: *

County Positions: *

* County staffing and costs are not tracked at a statewide

Florida has a unique structure in place for food and waterborne disease surveillance and investigation with nine regional food and waterborne disease epidemiologists to assist the county health departments in the investigation of these outbreaks. Food and waterborne outbreaks have always been underreported nationwide as well as statewide. This program was designed to address tasks at the county, regional, and state levels to achieve better reporting at an earlier date in the outbreak process. The counties themselves maintain food and waterborne illness complaint logs and perform outbreak investigations with an epidemiological team composed of an environmental health professional, a nurse and an epidemiologist. The regional environmental epidemiologists provide technical assistance in outbreak investigations and report writing along with assistance in questionnaire development and statistical analyses. Regional environmental epidemiologists also play a role in helping to train county health department staff in a variety of aspects of outbreak investigations.

From 1994-2005, the Food and Waterborne Disease Program has investigated 3,227 outbreaks with 25,686 cases. In addition to outbreak investigations, the program also follows up on 2,000 – 4,000 individual food and waterborne illness complaints every year. Among selected specific activities, since norovirus accounts for as much as 35% of foodborne outbreak-related cases (national estimates are 67%), training has been developed on norovirus, as well as *E. coli* O157:H7 and Salmonella and is being presented around the state. Florida has had several experiences



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with recreational waterborne disease outbreak investigations in swimming pools, water parks and interactive water fountains that have been combined into a presentation that was given at DOH Grand Rounds in 2001 and the 2002 National Environmental Health Association Annual Education Conference (NEHA AEC) in order to share this information with other health departments nationwide. This presentation has become a standard component of the Certified Pool Operators training that is conducted around the state. A subsequent presentation on foodborne marine pathogens was given at the 2003 NEHA AEC. At NEHA in 2004, a presentation on Foodborne Norovirus and another on 10 years of Foodborne Outbreak Disease data were given. At NEHA in 2005, two presentations on Foodborne Salmonella and *Vibrio vulnificus* were given along with the display of two posters on saxitoxin and on hepatitis A. In 2006, the NEHA presentation was on the 2005 statewide Cyclospora outbreak. Ongoing efforts by staff include working with CHDs to provide hepatitis A prevention education to food workers and to the public. Although there have been several high profile foodborne hepatitis A outbreaks, the fact remains that foodborne hepatitis A outbreaks account for less than 1% of outbreaks and outbreak-related cases from 1994-2005. The Regional Environmental Epidemiologists are also assisting CHDs on request with the exclusion of ill food workers.

In 2001 and 2002, the Food and Waterborne Disease Program also worked collaboratively with the Florida Wildlife Conservation Commission and the Florida Department of Agriculture and Consumer Services on an investigation into the cause of an unusual outbreak of saxitoxin poisoning from Florida puffer fish consumption. Prevention outreach education and marine research on this issue are ongoing. The number of reported food and waterborne disease outbreaks has decreased somewhat from 175 in 2004 to 131 in 2005 and 147 in 2006). The number of cases per 100,000 population increased from 2004 (12.99) to 2005 (11.17). The number of reported food and waterborne disease outbreaks in DOH facilities decreased from 2004 (1.79) to 2005 (0.64). The percentage of final summary outbreak reports received within 30 days of the end of the investigation increased from 75% in 2004 to 85.9 in 2005.

While the numbers of food and waterborne disease outbreaks and rates of cases declined in 2006 compared to 2005, additional data years are needed to determine if this is a continuing positive trend. Since 1994, the food and waterborne illness prevention messages were targeted to the general population, high risk groups and the professional health care population. These include the statewide *Vibrio vulnificus* Education Program (in collaboration with the Florida Department of Agriculture and Consumer Services), educational materials for distribution to the public (food safety magnets, information cards and cutting boards), presentations to community groups and guest lectures at partner universities (including University of Florida, University of North Florida, Florida Agricultural and Mechanical University and Tallahassee Community College). Florida's *Vibrio vulnificus* Education Program is a model for all Gulf Coast states. A presentation on *Vibrio vulnificus* for Health Care Practitioners has been conducted numerous times around the state to audiences of physicians, dieticians and nurses, among others. An invited seminar was presented at the University of Texas El Paso campus on *Vibrio vulnificus* in 2006.

Future endeavors for this very active and productive program in addition to ongoing daily surveillance and investigation activities include the planning, development and implementation of online CEU training with automatic exams, tracking and certificates. Another long-range goal is to develop an online, interactive, single screen entry database to accommodate food and waterborne disease outbreak raw data and reports (see both the Food and Waterborne Disease and the Food and Water Preparedness business plans). Additional training on specific pathogens, food and



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waterborne disease investigation procedures and food and waterborne disease issues as well as educational materials are always under development. Currently all education outreach materials have been translated into Spanish and Haitian Creole. Attempts are being made to secure funding to print these materials so they can be disseminated to the public. Staff is also working to secure funding for another EpiReady training on Foodborne Illness Investigation by the National Environmental Health Association training team to all county health department foodborne illness investigators. This will enhance investigation competency and preparedness for any intentional contamination events.

Short Term Objectives

By January 1, 2008:

- Complete/finalize web-based statewide food and waterborne disease database.
- Develop 2 new food or waterborne illness training modules.
- Implement at least one 1-hour online training module with automatic post test and certificate

Long Term Objectives

By January 1, 2009:

- Maintain and improve web-based statewide food and waterborne disease database.
- Add subsequent online training modules.
- Continue to present Florida Food and Waterborne disease data/case studies at state and national conferences (e.g. FEHA, FPHA, FAPA, NEHA, IAFP, CSTE, etc.)
- Investigate buying state cars for each of the regional environmental epidemiologists.

By January 1, 2010:

- Work with DOH Food Hygiene Program to ensure that each applicable CHD has a food hygiene coordinator trained in food and waterborne disease surveillance and investigation.
- Pursue more stable funding sources in lieu of DBPR funding.



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Measure #1: Reduce the number of food and waterborne outbreaks to 285 or less.

EH Strategic Plan	HP 2010 Objective	Strategy	Benchmark	Responsible Party	Target Date	Status
Be the best communicators and educators.	10-1: Reduce infections caused by key foodborne pathogens.	Conduct food and waterborne disease surveillance and investigation activities, educate CHD staff and the public. Document outbreak investigations.	The number of food and waterborne disease outbreaks investigated.	Roberta Hammond/ Regional Environmental Epidemiologists	December 2008	131 outbreaks investigated in 2005 and 147 in 2006 – the number of outbreak-related cases decreased from 2,017 to 1,225.
Promote and support training and innovation.	10-2: Reduce outbreaks of infections caused by key foodborne bacteria.	1. Food and Waterborne outbreak surveillance	Conduct active and passive surveillance activities	Roberta Hammond/ Regional Environmental Epidemiologists	December 2008	Ongoing.
Support community outreach.	10-6: Improve food employee behaviors and food preparation practices that directly relate to foodborne illnesses in retail food establishments.	2. Food and Waterborne outbreak investigations	Assist with food and waterborne disease outbreak investigations at CHD request.	Roberta Hammond/Tracy Wade/ Regional Environmental Epidemiologists	December 2008	Ongoing
Use our data.	8-2: Ensure that State health departments establish training, plans, and protocols and	3. Document food and waterborne disease outbreak investigation	Provide outbreak data on a monthly basis	Roberta Hammond/Tracy Wade/ Regional Environmental Epidemiologists	December 2008	Ongoing



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	conduct annual multi-institutional exercises to prepare for response to natural and technological disasters.					
	8-29: Reduce the global burden of disease due to poor water quality, sanitation, and personal and domestic hygiene.	4. Target CHDs with recent employees or without recent training in that regional environmental epidemiologist (REE) area.	Deliver at least one training per REE area within the 2007-2008 year.	Roberta Hammond/Tracy Wade/ Regional Environmental Epidemiologists	December 2008	Ongoing, e.g. new employee training provided by Juan Suarez, and Mike Friedman in 2006; program staff will participate in EH orientation in May 2007.



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Measure #2: Reduce number of suspected food and waterborne disease cases per 100,000 persons to 10 or less.

EH Strategic Plan	HP 2010 Objective	Strategy	Benchmark	Responsible Party	Target Date	Status
Be the best communicators and educators.	10-1: Reduce infections caused by key foodborne pathogens.	Conduct food and waterborne disease surveillance and investigation activities, educate CHD staff and the public. Document outbreak investigations.	All surveillance activities and educational opportunities properly documented.	Roberta Hammond/ Regional Environmental Epidemiologists	December 2008	In 2005 (most recent data available) the rate of food and waterborne illness per 100,000 population was 11.17. Ongoing; holiday food safety and Halloween food safety press releases which are planned again for 2007). Staff intends to continue work with national committees on food policies to reduce the number of specific illnesses from specific foods (Interstate Shellfish Sanitation Conference to reduce vibrio illnesses from shellfish consumption) and on other national foodborne illness policies (National Foodborne Epidemiologist Meeting (2006), OutbreakNet, National Recreational Waterborne Illness Workgroup (2005), National Food Safety System Outbreak Coordination workgroup); FDA FightBAC campaign,



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EH Strategic Plan	HP 2010 Objective	Strategy	Benchmark	Responsible Party	Target Date	Status
						etc.
Promote and support training and innovation.	10-2: Reduce outbreaks of infections caused by key foodborne bacteria.	1. Assist with food and waterborne disease outbreak investigations at CHD request.	Assist CHDs as requested.	Roberta Hammond/ Regional Environmental Epidemiologists	Ongoing	Ongoing
Support community outreach.	10-5: Increase the proportion of consumers who follow key food safety practices.	2. Educate CHD staff and the public.	Provide education on an as-needed or request basis.	Roberta Hammond/ Tracy Wade/ Sandy Heatherly/ Regional Environmental Epidemiologists	Ongoing	Ongoing
Use our data.	10-6: Improve food employee behaviors and food preparation practices that directly relate to foodborne illnesses in retail food establishments.	3. Provide outbreak data on a monthly basis	Data provided monthly.	Roberta Hammond/ Regional Environmental Epidemiologists	Ongoing	Currently working on debugging FWVSS system
	11-2: Improve the health literacy of persons with inadequate or marginal literacy skills.	4. Target high risk, susceptible populations and the general population.	Produce and distribute annual and area reports on food and waterborne disease outbreak activity statewide, as well as other food and waterborne disease information.	Roberta Hammond Preparedness Coordinator Regional Environmental Epidemiologists	Ongoing	Ongoing. Program staff provides information via phone, fax and e-mail on a routine basis; to CHDs and other interested parties. Roberta Hammond presented <i>Vibrio vulnificus</i> illness and prevention
	11-4: Increase the proportion of					



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	health-related World Wide Web sites that disclose information that can be used to assess the quality of the site.		Maintain website with links to food and waterborne disease information. The website is updated every month with an updated training calendar. Calls on food and waterborne illness complaints and requests for information from the public are received and responded to by all staff on a daily basis.			information at the University of Texas, El Paso in 2006. Roberta Hammond and staff from the Food Hygiene Program attended the USDA Food Safety Education Meeting targeting high-risk groups in September 2006 to obtain materials and strategies for reaching high risk groups; entire Food and Waterborne Disease Program staff to attend the International Association for Food Protection Annual Meeting in Orlando, July, 2007.
	11-6: Increase the proportion of persons who report that their health care providers have satisfactory communication skills.	5. <i>Vibrio vulnificus</i> outreach with educational materials and training	Collaborate and coordinate with DACS Molluscan Shellfish Program, the ISSC and other Gulf Coast States to develop and present materials.	Roberta Hammond/ Tracy Wade/ Regional EEs	Ongoing	Program staffs work with the communications office to provide advisories as necessary (press releases issued on <i>Vibrio vulnificus</i> in 2001-2006), Roberta Hammond to attend the Biannual Interstate Shellfish Sanitation Conference Meeting in August 2007.



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	7-12: Increase the proportion of older adults who have participated during the preceding year in at least one organized health promotion activity.	6. Outreach to high risk groups, e.g. homeless, HIV/AIDS. Provide the general population with educational materials and information as needed and appropriate.	Develop working relationship with statewide homeless coalition to provide training and educational materials	Roberta Hammond/ Tracy Wade/ Regional EEs/ Ric Mathis	Ongoing	Program staff gives talks on request to organizations outside DOH (see annual report and Food and Waterborne Disease Coordinator Annual Activity Report or more detail). Scheduled to be on the State Council on Homelessness monthly conference call to give a teleconference presentation on March 6, 2007 with possibilities for more regional presentations if desired.
	7-2: Increase the proportion of middle, junior high, and senior high schools that provide school health education to prevent health problems in the following areas: unintentional injury; violence; suicide; tobacco use and addiction; alcohol and other drug use; unintended	7. Outreach and training to child care providers on safe food handling practices and food and waterborne disease prevention.	Present training to child care workers on request.	Roberta Hammond/ Tracy Wade/ Regional EEs	Completed.	Completed: Working with Robin Eychaner in the Group Care Program on the Child Care Environmental Hygiene and Safety Workgroup to develop training.



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	pregnancy, HIV/AIDS, and STD infection; unhealthy dietary patterns; inadequate physical activity; and environmental health.					



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Measure #3: Train a minimum of 2 CHD staff per CHD in food and waterborne disease outbreak surveillance and investigation practices.

EH Strategic Plan	HP 2010 Objective	Strategy	Benchmark	Responsible Party	Target Date	Status
Be the best communicators and educators.	10-1: Reduce infections caused by key foodborne pathogens.	Target CHDs with recent employees or without recent training in that regional environmental epidemiologist (REE) area.	Deliver at least one training per REE area within the 2005-2006 year.	Roberta Hammond/ Tracy Wade/ Regional Environmental Epidemiologists	December 2008	<ul style="list-style-type: none"> Ongoing. Regional food and water epi meetings are also held in each geographical area at least one time per year to provide training. Regional environmental epidemiologists and the statewide coordinator continue to work on collaborative relationships with the CHDs and other health care entities.
Promote and support training and innovation.	10-2: Reduce outbreaks of infections caused by key foodborne bacteria.	1. Annual Basic Environmental Health training (Investigating Food and Waterborne Diseases)	Training presented as part of BEHO	Roberta Hammond/ Tracy Wade/ Regional Environmental Epidemiologists	Annually	<ul style="list-style-type: none"> Basic EH training to be held in May 2007.
Support community outreach.	10-5: Increase the proportion of consumers who follow key food safety practices.	2. Annual training or presentation at the FEHA AEM (usually, but not always that year's update on food and waterborne disease data or pre-conference training)	Training provided at FEHA AEM	Roberta Hammond/ Tracy Wade/ Regional Environmental Epidemiologists	Annually	<ul style="list-style-type: none"> Issues in Foodborne Illness Outbreak Investigations pre-conference training was offered at the 2005 FEHA AEC. Waterborne Disease Investigation training was offered at the 2004 FEHA Annual



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						Education Meeting, as well as 10 years of Foodborne Outbreak Disease Data in FL. Waterborne Disease Issues 6-hour training offered at FEHA AEC in 2004.
		3. Administer Food Certification exam in partnership with EH Professional Certification Program	Exams provided as requested	REEs	Ongoing.	Ongoing.
Use our data.	10-6: Improve food employee behaviors and food preparation practices that directly relate to foodborne illnesses in retail food establishments.	4. Pathogen/issue-specific modules, e.g.: <ul style="list-style-type: none"> o <i>Vibrio vulnificus</i> o Norovirus o Waterborne Diseases in Florida o Recreational Waterborne Diseases in Florida o Seafood Outbreaks in Florida o Foodborne Marine Pathogens in Florida o Year-to-date data o Handling Complaints o Developing Questionnaires o Pathogenic <i>E. coli</i> o Foodborne 	Specified modules developed	Roberta Hammond/ Tracy Wade/ Regional Environmental Epidemiologists	December 2008	<ul style="list-style-type: none"> • Under development for a guest lecture at the University of Florida, February 2007, Foodborne Outbreaks Linked to Produce, Florida and Nationwide • Under development: Overview of Foodborne Pathogens with Case Studies • Training continues to be presented around the state on <i>Vibrio</i> as well as Norovirus. • Further training on other vibrios and pathogens is still under



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		Salmonella in Florida o Statewide Cyclospora Outbreak, Florida 2005				development. Training on issues in institutional foodborne outbreak investigation is also planned.
		5. Simulated foodborne outbreak exercises o (CDC Case Studies) o 6-hour How to Investigate Food and Waterborne Disease Outbreak training with exercise	Outbreak exercises developed	Roberta Hammond/ Tracy Wade/ Regional Environmental Epidemiologists	December 2008	Simulated foodborne outbreak exercises including CDC case study exercises continue to be presented around the state.
		6. Dissemination of data and information nationwide	Data disseminated	Roberta Hammond	December 2008	2006 Institute of Medicine (IOM) Forum on Microbial Threats – Addressing Foodborne Threats to Health: The Policies and Practice of Surveillance, Prevention, Prevention Outbreak Investigations and International Coordination (Presentation and published workshop summary on the 2005 Cyclospora outbreak investigation). February 8 lecture at UF MPH EH Program scheduled on



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						<p>Foodborne Outbreaks in Produce; March 20 lecture scheduled with FAMU CBG Proposal Capstone Internship in Food Safety Abstract accepted for NEHA in 2006 (A Case Study of an NSP outbreak in Florida), and have been submitted to IAFP for 2007 (Salmonella Outbreaks in Florida, and two posters: NSP and Vibrio parahaemolyticus), CSTE 2007 (NSP poster). 2 presentations and 2 posters at NEHA in 2005; a poster at CSTE in 2005.</p>
		Develop alternate training strategies to reduce costs	Alternate training developed	Roberta Hammond/ Tracy Wade/ Regional Environmental Epidemiologists/ Mitch Stripling	December 2009	Develop Breeze modules from all existing training modules.
		1. Interactive bookshelf	Change to Breeze modules.	Roberta Hammond/ Tracy Wade/ Regional	December 2008	Work on changing interactive bookshelf to Breeze format is



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				Environmental Epidemiologists/ Mitch Stripling		ongoing, 3 transformations planned for 2007.
		2. Audio teleconferences	Audio teleconferences scheduled	Roberta Hammond	December 2008	Discussions re the feasibility of regular audio-teleconferences on specific pathogens or outbreaks. Grand rounds on <i>Vibrio vulnificus</i> presented January 25, 2005, Holiday Food Safety, December 2006.
		3. Statewide or regional conferences	Conference presentations scheduled	Roberta Hammond, Tracy Wade and REEs	December 2008	REEs each hold one regional conference per year in their assigned areas, participate in Statewide Epi Seminar when possible, participate in FEHA when possible.
		4. Use of web technology	Web technology explored	Roberta Hammond, Tracy Wade / Mitch Stripling	December 2008	Use of Breeze technology is planned where feasible and when time permits, and making training available online at any time at the trainee's convenience is being developed.



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		Develop educational materials for handouts at meetings, presentations and displays	Materials designed	Roberta Hammond/ Sandy Heatherly/ Tracy Wade/Ric Mathis	December 2008/ pending funding	Ongoing/Pending funding
		1. Magnets/cards	Magnets and cards designed	Roberta Hammond/ Sandy Lyda/ Tracy Wade/Ric Mathis	December 2008/ pending funding	<ul style="list-style-type: none"> • Handwashing magnets have been developed in three languages: English, Spanish, and Haitian Creole and have been distributed to CHDs. • Handwashing cards have recently been developed and distributed also. Plans are underway to print cards in Spanish and Haitian Creole. • In addition, clean-cook-chill-separate magnets and don't cross contaminate cutting boards have been developed and distributed. Translations into Spanish and Haitian Creole are completed. • Working on Ciguatera, NSP and Vibrio wound information cards and magnets with the HAB



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						program.
		2. Posters	Posters developed	Roberta Hammond/ Sandy Heatherly/ Tracy Wade/Ric Mathis	December 2008/ pending funding	<ul style="list-style-type: none"> • Ten posters: An Overview of Hepatitis A in Florida; <i>Vibrio vulnificus</i> in Florida; and Saxitoxin and Pufferfish in Florida have also been developed and used in displays at several meetings and for National Food Safety Month 2003. Other posters will be developed as important issues arise. • Posters developed in 2006: NSP, Cyclospora, • To be developed in 2007: <i>Vibrio parahaemolyticus</i> • We have purchased display boards for each of the regional environmental epidemiologists for training purposes.



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Measure #4: Increase the level of compliance with final outbreak summary reports completed within 30 days of an investigation by 5% (per DOH/DBPR Interagency Agreement).

EH Strategic Plan	HP 2010 Objective	Strategy	Benchmark	Responsible Party	Target Date	Status
Be the best communicators and educators.	8-29: Reduce the global burden of disease due to poor water quality, sanitation, and personal and domestic hygiene.	Target CHDs with late outbreak summary reports.	Increase compliance statewide by at least 5%.	Roberta Hammond/ Regional Environmental Epidemiologists	December 2008	Ongoing. Compliance with this requirement has increased from 75% in 2004 to 86% in 2005.
		1. Working one-on-one with individual CHDs to address individual compliance issues, including	One-on-one discussions with individual counties to determine issues and reach solutions.	Roberta Hammond/ Regional EEs	December 2008	Ongoing. Food and Waterborne Disease training and inservice for CHD staff is scheduled on request.
Promote and support training and innovation.	10-1: Reduce infections caused by key foodborne pathogens.	2. New staff training	Staff has been trained.	Roberta Hammond/ Regional EEs	Ongoing	New staff orientation training as requested.
		3. Providing assistance with report writing	Report writing assistance provided.	Roberta Hammond/ Regional EEs	Ongoing	On request and as needed.
Support community outreach.	10-2: Reduce outbreaks of infections caused by key foodborne bacteria.	4. Discussions with epi teams.	Discussions have been held.	Roberta Hammond/ Regional EEs	Ongoing	At least once per quarter, and on request.
		5. QI visits	QI visits have been made.	QI teams	Ongoing	As scheduled. QI visits to delinquent counties use a foodborne epi question form and have emphasized the need/requirement for timely reporting. There



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						continues to be room for improvement. QI process under review and transformation by DOH.



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Measure # 5: Decrease number of food and waterborne disease outbreaks per 10,000 DOH establishments in DOH facilities from 3.00 in 2004 to 2.85 in 2005.

EH Strategic Plan	HP 2010 Objective	Strategy	Benchmark	Responsible Party	Target Date	Status
Be the best communicators and educators.	10-1: Reduce infections caused by key foodborne pathogens.	Work with Food Hygiene staff in Bureau of Community Environmental Health to make sure that DOH facilities have all the training they need on food and waterborne diseases and their prevention.	Rate of food and waterborne disease outbreaks per 10,000 DOH establishments	Roberta Hammond/ Regional Environmental Epidemiologists	December 2008	Ongoing. The rate of food and waterborne disease outbreaks in DOH facilities has decreased slightly from 2004 (1.8) to 2005 (0.6). All DOH facilities with outbreaks are given information or training on food and waterborne diseases and their prevention. Training and information are provided on request and after any food or waterborne outbreak incidents to establishment operators, ill persons and other interested parties.
Promote and support training and innovation.	10-2: Reduce outbreaks of infections caused by key foodborne bacteria.					
Support community outreach.	10-5: Increase the proportion of consumers who follow key food safety practices.					
Use our data.	10-6: Improve food employee behaviors and food preparation practices that directly relate to foodborne illnesses in retail food establishments.					
	11-2: Improve the health literacy of persons with inadequate or	1. Coordinate with other agencies, e.g. DOE, DOC, AHCA to provide assistance	Ongoing coordination.	Roberta Hammond/ Regional EEs	Ongoing	Recent outbreak assistance has included hospitals, nursing homes,



Business Plan 2006 – Division of Environmental Health - Florida Department of Health

Mission: "Promote and Protect Health"

Vision: "Healthier Floridians"

Goal: To prevent disease of environmental origin

Bureau of Community Environmental Health – FOOD AND WATERBORNE DISEASE PROGRAM

Measure # 5: Decrease number of food and waterborne disease outbreaks per 10,000 DOH establishments in DOH facilities from 3.00 in 2004 to 2.85 in 2005.

EH Strategic Plan	HP 2010 Objective	Strategy	Benchmark	Responsible Party	Target Date	Status
	marginal literacy skills.	during food and waterborne outbreaks as well as training materials and opportunities.				schools and correctional facilities.
	11-4: Increase the proportion of health-related World Wide Web sites that disclose information that can be used to assess the quality of the site.	2. Make presentations to professional associations of foodworkers regarding food and waterborne disease prevention practices	Presentations have been given.	Roberta Hammond/ Regional EEs	Ongoing	New contacts with the Department of Education and the DOH School Health Coordinator have been made.
	11-6: Increase the proportion of persons who report that their health care providers have satisfactory communication skills.	3. Develop educational materials in collaboration with Food Hygiene Program (see Objective 1 Strategies above).	Educational materials developed.	Roberta Hammond	Ongoing	See Objective 1 Strategies above.



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Bureau of Community Environmental Health – FOOD AND WATERBORNE DISEASE PROGRAM

Measure #6: Develop and maintain web-based statewide Food and Waterborne Disease database.

EH Strategic Plan	HP 2010 Objective	Strategy	Benchmark	Responsible Party	Target Date	Status
	8-26: Improve the quality, utility, awareness, and use of existing information systems for environmental health.	FWVSS System developed and implemented.	Web-based, real-time statewide food and waterborne disease database.	EH IT Director/ Roberta Hammond	December 2008	Debugging of the system is ongoing, not funded for further development.
	11-4: Increase the proportion of health-related World Wide Web sites that disclose information that can be used to assess the quality of the site.	1. Implement program	Program has been implemented.	EH IT Director/ Roberta Hammond	December 2008	Debugging of the system is ongoing, not funded for further development.