



#### Scott E. Holmes, MS, REHS Manager, Environmental Public Health Division Lincoln-Lancaster County Health Department Lincoln, NE





## **CIFOR Guidelines and Metrics**

#### Dale Morse, Don Sharp, Elizabeth Pace Food Safety Office, DFWED/NCEZID/CDC

#### **Craig Hedberg**

Minnesota CoE and School of Public Health, U of MN

Food Safety Learning Collaborative Symposium New York/Northeast Regional Center of Excellence Cornell University, July 20, 2016

#### **How CIFOR Works**

- <u>Vision</u>: Local, state, and federal partners collaborating effectively to reduce the burden of foodborne illness in the U.S.
- <u>Mission</u>: To improve methods at the local, state, and federal levels to detect, investigate, control, and prevent foodborne disease outbreaks
- <u>Process</u>: identify barriers/gaps, develop projects and workgroups to address the barriers/gaps

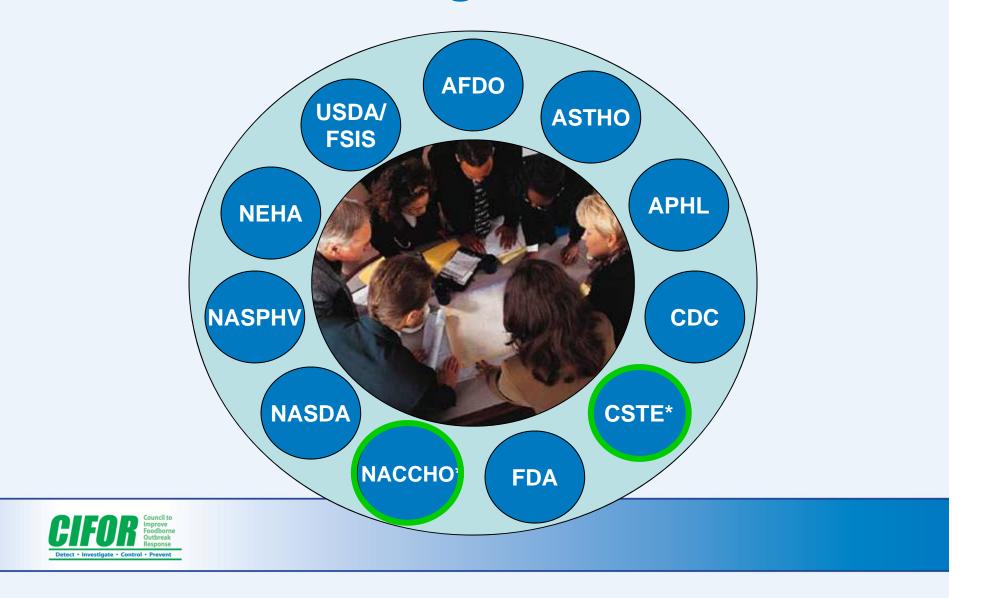


## Why CIFOR Works

- <u>Bottoms up approach:</u> CDC supplies funds and local and state participants supply the project proposals
  - FDA helps with some travel and some past projects
- <u>Wide variety of member organizations:</u> lab, epi, environmental health at local, state and federal levels
- <u>Enthusiastic representatives!</u>: reps have given many hours of their time to improve foodborne outbreak response and get projects finalized



#### CIFOR Member Organizations and Agencies



## CIFOR is 10 years old!

- Since first meeting in January 2006:
  - PFP (FDA, 2008)
  - RRT (FDA, 2008/2009)
  - FoodCORE (CDC, 2009)
  - FSMA (2011)
  - FDA CORE (2011)
  - CoEs (CDC, 2012)
  - OutbreakNet Enhanced (CDC, 2015)
- Strategic Planning: new 5 Yr. Plan in 1/16







What's in CIFOR's Future? **CIFOR Strategic Plan** We'll be right back with "The Legend of **CIFOR**" after these messages.







- 6) EVALUATE SOAP USE PRE AND POST
- **5) IMPLEMENTATION OVER SEVERAL WEEKS**
- 4) VERBAL AND VISUAL PROMPTS (TAKE 20!)
- 3) MONITORING
- 2) TRAINING ON HAND HYGIENE, GLO GERM
- 1) BUY IN FROM TOP MANAGEMENT

#### **BEHAVIOR CHANGE STRATEGY**





#### DANGEROUS INFECTIONS CAN BE SPREAD BY SIMPLY TOUCHING ZITS OR RUBBING YOUR NOSE.

TAKE 20 SECONDS TO WASH YOUR HANDS AFTER TOUCHING ANY PART OF YOUR BODY



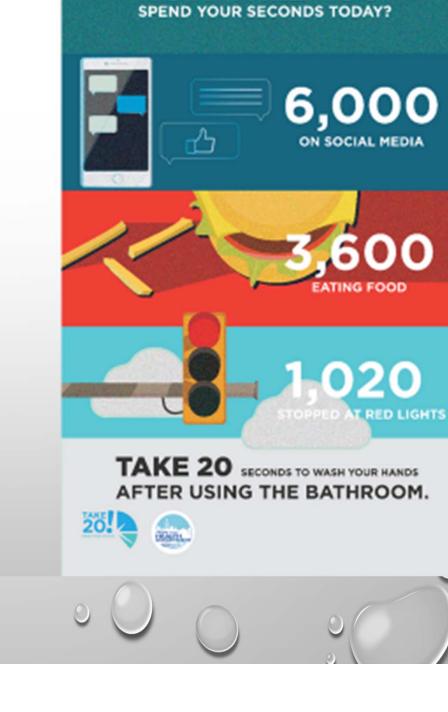
ILLNESS-CAUSING BACTERIA CAN BE FOUND ON AS MUCH AS OF RAW MEAT AND EGGS.





TAKE 20 SECONDS TO WASH YOUR HANDS AFTER HANDLING RAW MEAT AND EGGS.





HOW WILL YOU

#### CELL PHONES ARE DIRTY TOO.





TAKE 20 SECONDS TO WASH YOUR HANDS AFTER USING YOUR CELL PHONE.

## WOULD YOU WANT TO EAT THIS?



BLEACH

## NOBODY WANTS TO EAT YOUR POOP

TAKE 20 SECONDS TO WASH YOUR HANDS AFTER USING THE BATHROOM.





## PILOT TESTED 12 RESTAURANTS 70 SCHOOLS

## NEXT PHASE: ROLL OUT TO RESTAURANTS





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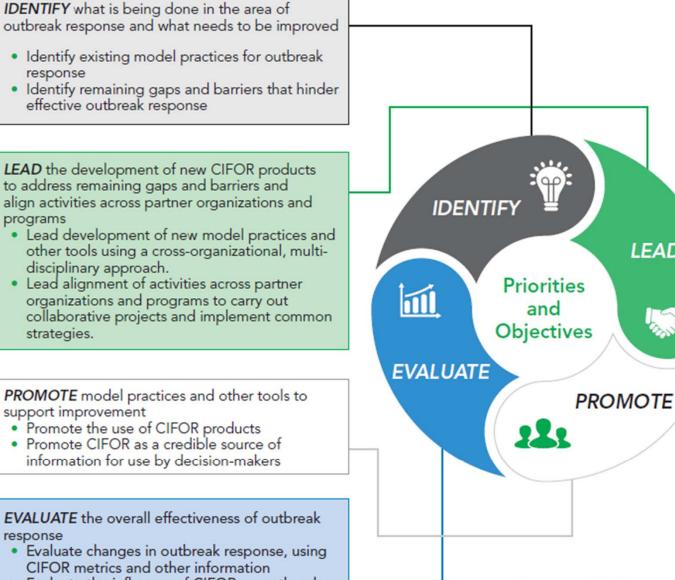
## AND NOW BACK TO OUR REGULARLY SCHEDULED PROGRAMMING.

## What's in CIFOR's Future? CIFOR Strategic Plan Development Teams

- Identify what is being done in the area of outbreak response and what needs to be improved
- Lead the development of new CIFOR products to address remaining gaps and barriers and align activities across partner organizations and programs
- Promote model practices and other tools to support improvement
- Evaluate the overall effectiveness of outbreak response



## **CIFOR Development Teams**



 Evaluate the influence of CIFOR on outbreak response

Figure 1. CIFOR strategic priorities and objectives.

LEAD

## CIFOR Guidelines for Foodborne Disease Outbreak Response, 2<sup>nd</sup> Edition

# GUIDELINES FOR FOODBORNE DISEASE OUTBREAK RESPONSE

SECOND EDITION

- Developed by a workgroup with representatives from state, local, and federal levels and all disciplines
- Recommendations are based on existing guidelines and practices
- Incorporated input from external reviewers and public review
- 1<sup>st</sup> edition in 2009: 198 pages
- 2<sup>nd</sup> edition in 2014: 255 pages



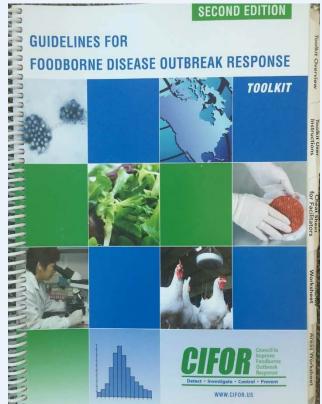
Future 3<sup>rd</sup> edition in 2018: 300+ pages

## CIFOR Guidelines <u>Toolkit</u>, 2<sup>nd</sup> Edition

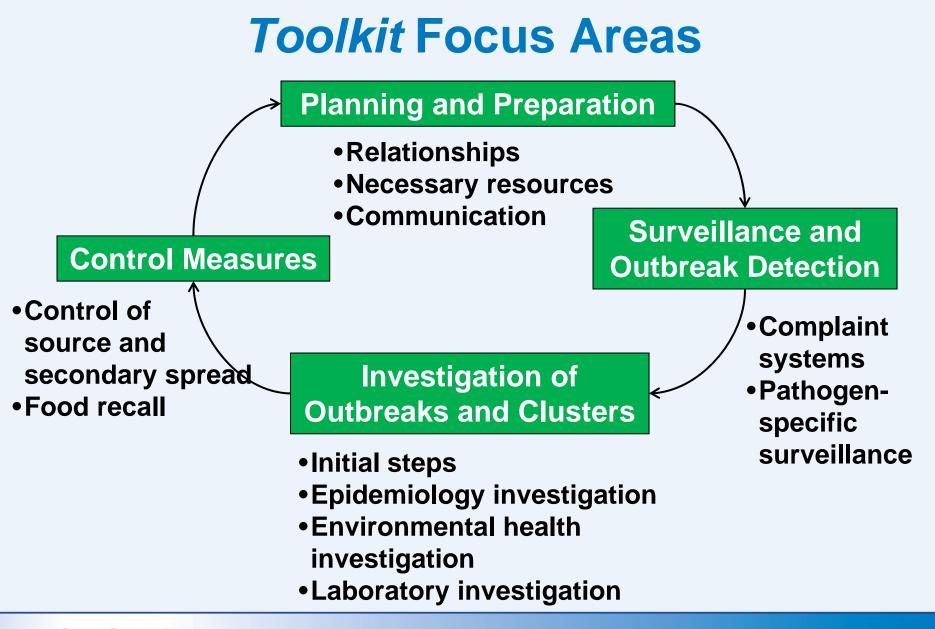
A process and supporting materials to help agencies and jurisdictions:

- Become more familiar with recommendations in the *Guidelines*
- Systematically evaluate their current foodborne disease detection and outbreak response activities
- Identify appropriate *Guidelines* recommendations to improve performance
- Make plans to implement those recommendations

#### 2015









## **CIFOR** *Guidelines* and Toolkit Implementation Training Grants

- Provided support to state and large urban (>1 million pop.) health depts to conduct training workshop(s) using the *Guidelines* and Toolkit
- Grant funds (\$5 K to \$7 K) used for:
  - Travel support, meeting room, A/V equipment
  - Facilitator contract, other training expenses
- Trainings completed by June, 2016



## CIFOR Outbreaks of Undetermined Etiology (OUE) Guidelines

- Suggest optimal, universal specimens for outbreaks
- Provide adequate specimens for second-tier testing and pathogen discovery
- Use CIFOR-developed recommendations on shipment, rule-out testing, and long-term storage of outbreak specimens



## **OUE Guidelines**

- Modeled on Minnesota and Wisconsin documents
- Uses specific outbreak profiles
- Categorized by key symptoms:
  - Diarrhea, vomiting, cramping, HUS, paresthesias, respiratory depression, hepatic symptoms, systemic Illnesses, other
- Infectious and non-infectious agents

#### Includes OUE Agent List

- ✓ Incubation period
- ✓ Primary signs and symptoms
- ✓ Primary specimen(s)
- ✓ Key epidemiological information

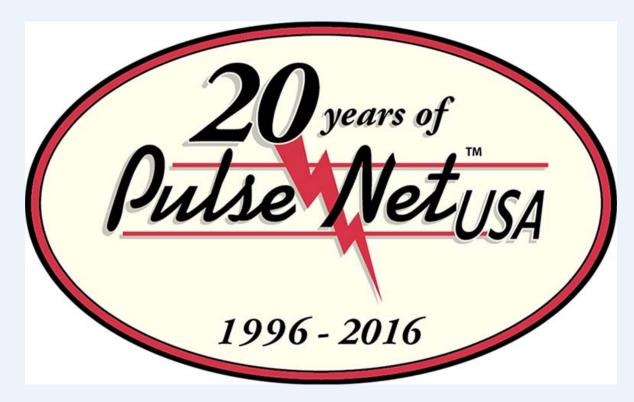


#### How to Access the OUE Guidelines





Has PulseNet helped reduce the impact of foodborne illness outbreaks?





#### "An Economic Evaluation of PulseNet, A Network for Foodborne Disease Surveillance"

- Authors: Scharff, Besser, Sharp, Jones, Gerner-Smidt, Hedberg
- American Journal Of Preventive Medicine, 2016
- Began as a basic CIFOR report to APHL
- Key findings about PulseNet system:
  - Prevents over 250,000 Salmonella, 9000 E. coli and 56 Listeria cases annually
  - Costs \$7.3 Million annually to operate but reduces medical and productivity costs by \$507 Million



#### "After PulseNet, what is next?"





#### "After PulseNet, what is next?"

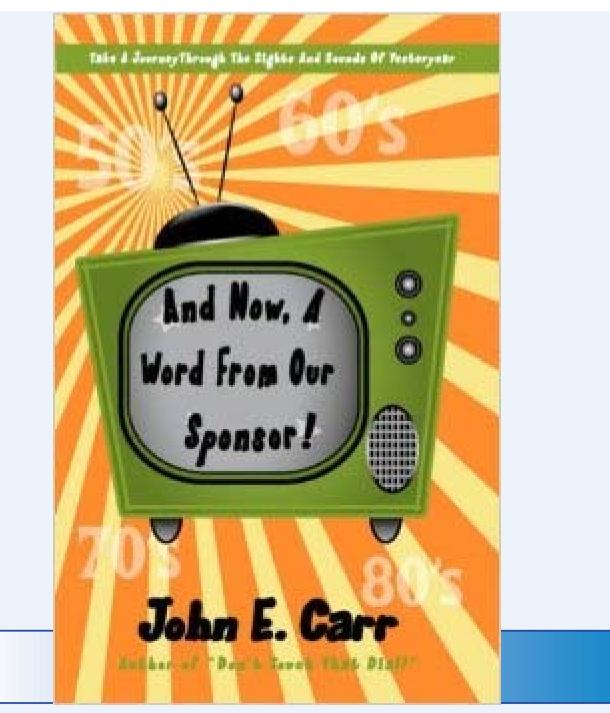




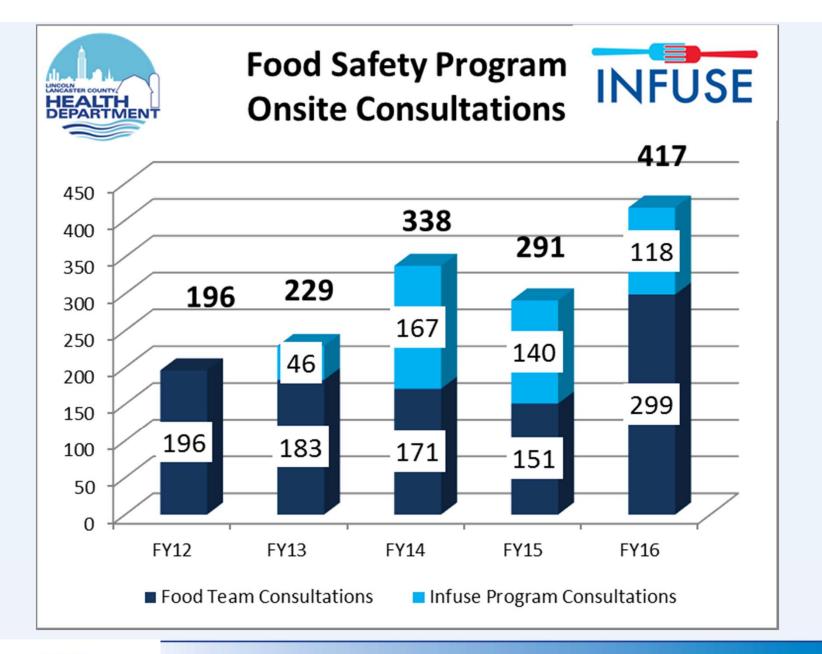
#### WGS – That's What!





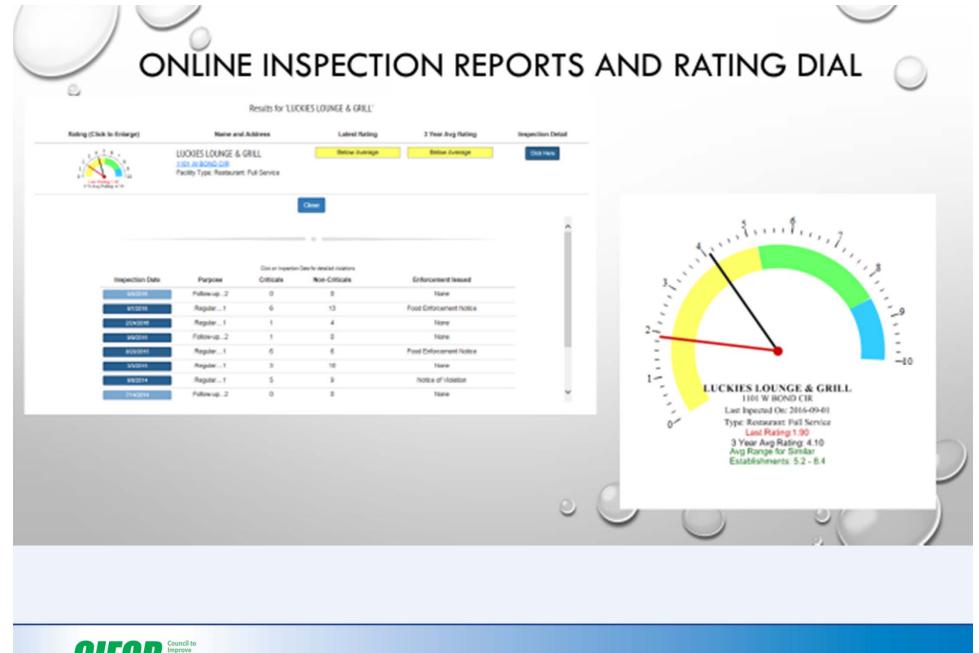




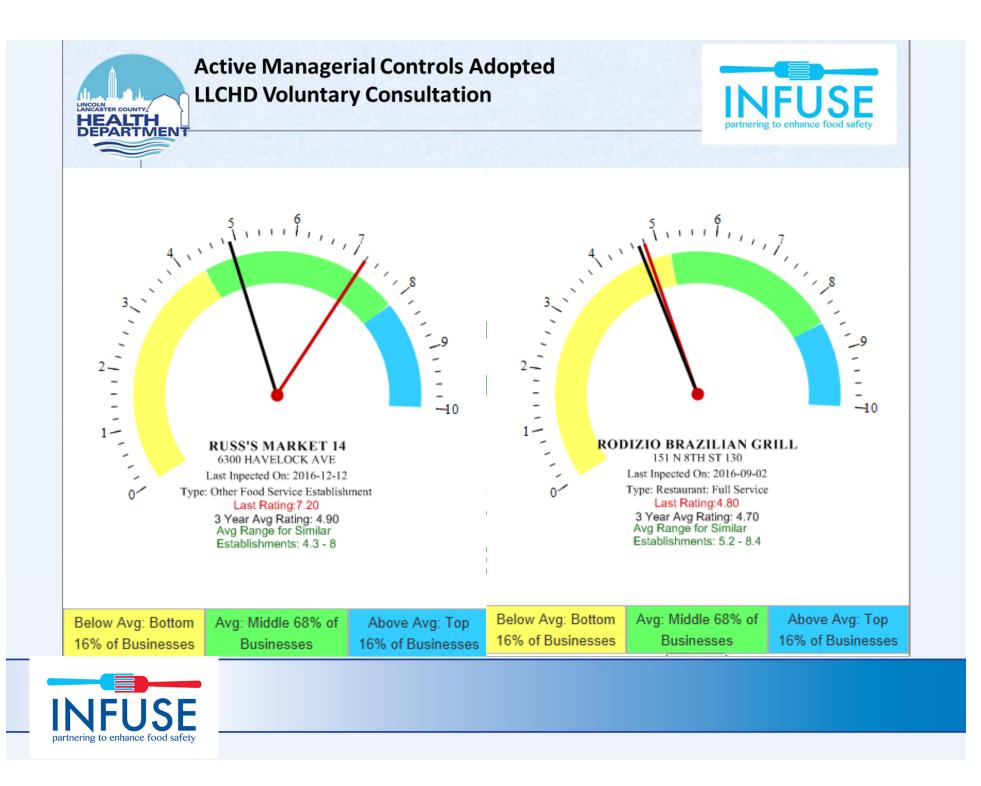


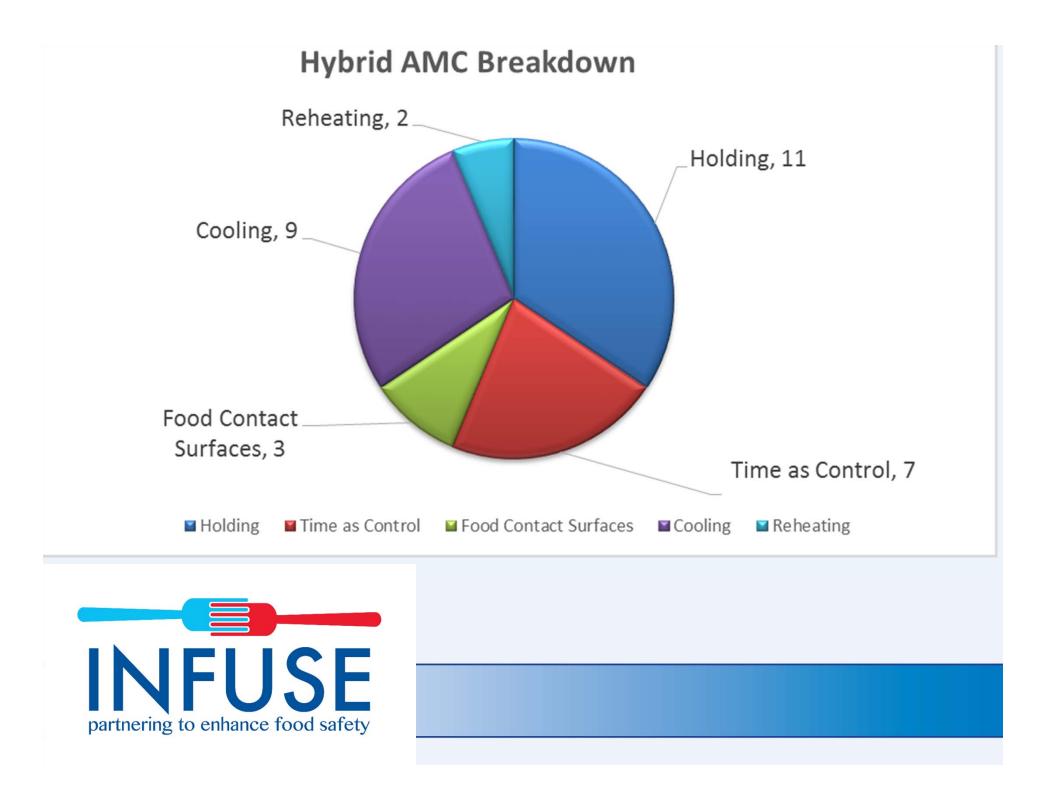


















# Integrated Food Safety Centers of Excellence (CoEs)

### Dale Morse, MD, MS & Elizabeth Pace, MPH

Food Safety Office

Division of Foodborne, Waterborne, and Environmental Diseases National Center for Emerging and Zoonotic Infectious Diseases Centers for Disease Control and Prevention

# **Food Safety Modernization Act**

PUBLIC LAW 111-353-JAN. 4, 2011

42 USC 2807-16. "SEC. 399V-5. FOOD SAFET "(a) IN GENERAL.—N enactment of the FDA I Deadline. Designation retary, acting through the trol and Prevention and described in subsection Safety Centers of Excell 'Centers of Excellence') and local public health pr outbreaks. The Centers selected State health depa "(b) SELECTION OF CE "(1) ELIGIBLE EN as a Center of Excelle "(A) be a Stat "(B) partner cation that have meaningful expe production, proce ship in the labor detection and inv "(C) provide time, and in suc "(2) WORKING GI date of enactment of the Secretary shall es and stakeholders fro and health agencies. and food manufacture to make recommenda tions of the Centers of "(3) ADDITIONAL may designate eligibl ters of Excellence, i under subsection (a). "(c) ACTIVITIES.—Unc Centers for Disease Cont lence shall be based out which shall provide assis departments of health thr "(1) providing res cerning symptoms ar interviewing individu outbreak investigation "(2) providing an of foodborne disease ties; "(3) providing to mental investigation for streamlining and "(4) establishing train future enidem address critical workf

address erticali worki "(5) training and "(6) strengthenii new foodborne illnes ment information sys "(7) conducting on increasing prov regarding food safety. "(d) REPORT TO CON date of enactment of the Secretary shall submi "(1) describes the and

and (2) provides legis tional resources requi "(e) AUTHORIZATION to be appropriated such

(b) to september 2015 this section. DUPLICATION OF EFFORT.—In carrying out activities of the Centers of Excellence or other programs under this section, the Secretary shall not duplicate other Federal foodborne illness response efforts."

Integrated Food Safety Centers of Excellence (CoEs) were established under the Food Safety Modernization Act (FSMA) to:

3950-

124 STAT, 3951

"... serve as resources for federal, state, and local public health professionals to respond to foodborne illness outbreaks."

"... provide assistance to <u>OTHER</u> regional, state, and local departments of health ..."







# **CoE** Activities

#### PUBLIC LAW 111-483-4AN. 4, 2011

2011 124 STAT 186

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"(c) ACTIVITIES.—Under the leadership of the Director of the Centers for Disease Control and Prevention, each Center of Excellence shall be based out of a selected State health department which shall provide assistance to other regional, State, and loca departments of health through activities that include— "(1) providing resources, including timely information con

(1) providing resources, including timely information concerning symptoms and tests, for frontline health professionals interviewing individuals as part of routine surveillance and outbreak investigations;

"(2) providing analysis of the timeliness and effectiveness of foodborne disease surveillance and outbreak response activities:

"(3) providing training for epidemiological and environmental investigation of foodborne illness, including suggestions for streamlining and standardizing the investigation process; "(4) establishing followships, stipends, and scholarships to

 (4) establishing tenowships, superios, and scholarships to train future epidemiological and food-safety leaders and to address critical workforce shortages;
 "(5) training and coordinating State and local personnel;

"(6) strengthening capacity to participate in existing or new foodborne illness surveillance and environmental assessment information systems; and

"(7) conducting research and outreach activities focused on increasing prevention, communication, and education regarding food safety.

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#### **Main Activity Areas**

- 1. Strengthen surveillance and outbreak investigations
- 2. Analyze timeliness and effectiveness of responses
- **3. Train** public health staff in proven investigation techniques
- 4. Educate future food safety workforce
- Improve capacity of information systems
- Evaluate and communicate best practices



tradition of

# Workgroups



## Academic



### Communication



# Informatics

**Metrics** 



# Training

Compiles a list of food safety programs and courses offered by CoE Universities

Coordinates marketing and dissemination of CoE products (e.g. websites, Newsletter, Twitter)

Guides data projects and products such as data aggregation

Organizes activities related to CoE metrics including the 16 CIFOR measure/metrics with target ranges

Manages a repository of training products produced and offered by CoEs



# **2015 Expansion - Northeast**

### **Reason for Expansion**

- Large uncovered population in Northeast
- Far from existing CoEs
- Legislation allowed for expansion on regional basis

### **New York as Northeast Regional CoE**

- Unique regional emphasis, but doesn't have to go it alone
  - 3 FoodNet; 2 FoodCORE sites; 4 OutbreakNet Enhanced
  - 8 of 11 states funded above per capita national average
- Learning collaborative can serve as a model for regional foodborne illness support



# **Centers of Excellence - 2015**

#### **Colorado**

Colorado Department of Public Health and Environment Colorado School of Public Health

#### **+** Florida

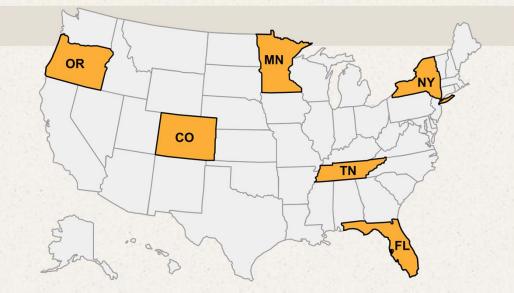
Florida Department of Health University of Florida

#### Minnesota

Minnesota Department of Health University of Minnesota SPH

#### New York

New York State Department of Health Cornell University



#### **†** Tennessee

Tennessee Department of Health University of Tennessee

#### **+**Oregon

Oregon Public Health Division University of Minnesota SPH

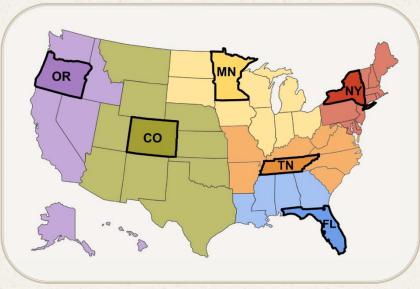


# **CoE Geographic Regions**

Centers serve as **NAVIGATORS** between the states in their geographic region and the resources and services provided by the Centers of Excellence

Centers may continue working with institutions outside of their region with whom they have **EXISTING PROFESSIONAL RELATIONSHIPS** 

Centers may continue providing **EXPERTISE** assistance to states outside of their region as they may be the most appropriate match for the requested service





# **CoE Services**

#### One-on-one Consultation

- Surveillance/outbreak consultation
- Long-term projects (e.g. database improvements)
- Mentorship (e.g. OutbreakNet Enhanced)
- CIFOR Toolkit evaluations
- Collaborative team training (e.g. Epi-Ready)
- Needs assessments
- Student interview team training
- On-line Training
  - Case series
  - Courses and videos
  - Questionnaire templates
  - Foodborne surveillance tools and products



# CoE Online Products (as of June 9, 2016)

- 1. 2013 Minnesota CIFOR Target Ranges for Select Performance Measures
- 2. 2014 Minnesota CIFOR Target Ranges for Select Performance Measures
- 3. Alabama Counties Legal Field Template
- 4. Background Population Exposure Estimates Using Salmonella Case Interviews
- 5. Binomial Probability Worksheet
- Background Population Exposure Estimates Using E. coli O157 Case Interviews
- Centered on Food Safety Newsletter – Special Edition, Fall 2015
- 8. Bleach Guidance Document (Spanish)
- Bleach Guidance Document
  Centered on Food Safety
- Newsletter Spring 2015 11. Centered on Food Safety Newsletter – Fall 2015
- 12. Centered on Food Safety Newsletter – Fall 2014
- 13. Centered on Food Safety Newsletter – Summer 2015
- 14. Centered on Food Safety Newsletter – Winter 2015
- 15. Centered on Food Safety Newsletter – Spring 2016
- 16. CoE Regional Map

- 17. Colorado Training Needs Assessment
- Colorado 2013 CIFOR Report
  Clinical & Environmental
- 20. Creating a Choropleth Map in Epi
- Creating a Choropleth Map in Epi Info 7
   Creating a Case Cluster Map in
- Epi Info 7 22. Compendium of Acute Foodborne 41.
- Disease 23. Enfermedades transmitidas por los
- alimentos : ¿Qué problema?
- 24. Cultural Foods Safety App
- 25. Downloading Epi Info 7
- 26. Environmental Water Sampling for Legionella
- 27. Environmental Assessment QuickTrain
- 28. Environmental Assessment Activities Mini Lecture
- 29. Event & Venue-centric Outbreak Questionnaire Template
- Evaluation of Florida Foodborne Illness and Outbreak Response Using the CIFOR Performance Measures 2013
- 31. Epi Info 7 Check Code 101
- 32. FL-CoE Education and Training
- Needs Assessment 33. FL-CoE CIFOR Evaluation 2013
- 34. FBI Complaint Form
- Exclusion Guidance for High Risk Groups with Enteric Diseases

- 36. Food Safety Southeast App for iOS
- 37. Food Safety Southeast App for Android
- 38. Florida Counties Legal Field Template
- 39. Food Source Information Wiki40. Gastroenteritis Foodborne
  - Outbreak Summary Form Foodborne Illness: What Problem?
- 42. Georgia Counties Legal Field Template
- 43. Importing a Non-Epi Infor Database into Epi Info 744. Get the SCOOP!
- 44. Get the SCOOP!45. Importing Templates into Epi Info 7
- 46. Instructional Video for the IT-Kit Stool Sample Collection Kit
- 47. In the Lab: Plating a Stool Sample
- 48. Instructional Video for the IT-Kit Stool Sample Collection Kit (Spanish)
- 49. IT-Kit Materials Cost
- 50. Interviewing Cardinal Rules Training Guide
- 51. IT-Kit Patient Instructions (English and Spanish)
- 52. Key Points for Creating a Foodborne Complaint System
- 53. IT-Kit Stockroom Order Request Form
- 54. Key Points for Creating a Team of Student Workers

- 55. Legally Covered Seminar
- 56. Key Points for Investigating Sub-Clusters
- 57. Mexican-style Restaurant
  - Questionnaire Template
- 58. Minnesota Enteric Interview Forms
- National Outbreak Reporting System (NORS) Form
   Norovirus Outbreaks and Control
- Measures
- 61. Outbreak Case Log: Day Care Facility Gastrointestinal Illness – Project Template
- 62. Outbreak Communication Agreement
- 63. Outbreak Interviewing Strategies (Full Version)
- 64. Outbreak Interviewing Strategies (Quick Version)
- 65. Outbreak Interviewer Training
- 66. Outbreak Investigation Case Series: E. coli O157:H7 Associated with Ground Beef Patties, 2007
- 67. Outbreak Investigation Guidelines
- 68. Packing & Shipping Lab Specimens
- 69. Patient Specimen Collection Instructions (Amies, English)
- 70. Patient Specimen Collection Instructions (Amies, Spanish)
  - Patient Specimen Collection Instructions (Bulk, English)
- 72. Patient Specimen Collection Instructions (Bulk, Spanish)

#### 73. Prevention and Control of Norovirus in LTCFs

- 74. ProTip #1
- 75. ProTip #2
- 76. ProTip #3
- 77. Puerto Rico Municipalities Legal Field Template
- 78. Raw Milk Questionnaire Template
- 79. Shotgun Hypothesis-Generating Questionnaire
- 80. Shotgun Hypothesis-Generating Questionnaire (Spanish)
- 81. Specimen Collection Video
- 82. Student Outbreak Response Training
- 83. Student Outbreak Response Training Curriculum Guide
- 84. Sub/Sandwich Shop Questionnaire Template
- 85. The Gopher-Beaver Form
- 86. The Stool Sample Kit: Instructions for Staff
- 87. Water Test Kit Video Tutorial
- 88. Toddlers/Young Children Questionnaire Template
- 89. US Virgin Islands Districts Legal Field Template
- 90. What is Vibrio Vulnificus and Where Can It Be Found?
- 91. Web Course: Foodborne Outbreak Investigation and Response, PartB
- 92. Web Course: Foodborne Outbreak Investigation and Response, PartA
- 93. Wyoming 2014 CIFOR Report

Centers of Excellence

CoEFoodSafetyTools.org

# Learn More About the CoEs

Twitter@FoodSafetyCoE

Quarterly Newsletter
 Centered on Food Safety

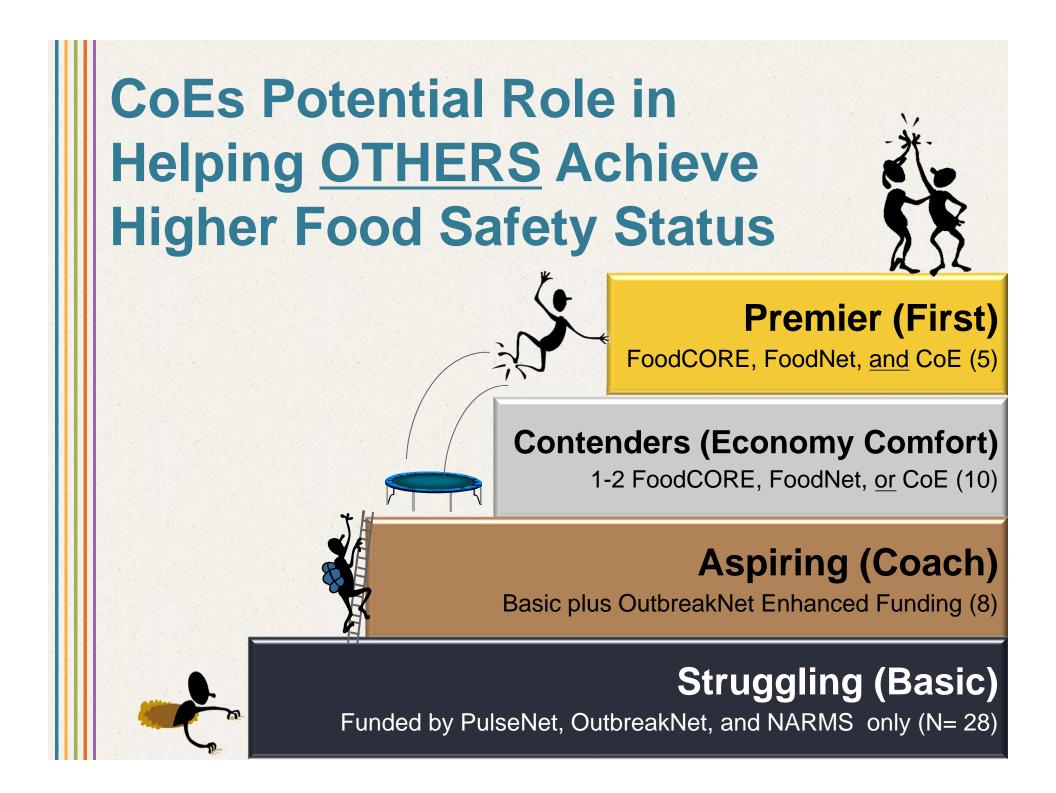
### www.cdc.gov/foodsafety/centers/index.html



# **Future Directions & Projects**

- Expanding Mentorship Activities
  - ~7 OutbreakNet Enhanced sites being added
  - Additional outreach to others
- Pursuing External Funding for Special Projects
  - Antimicrobial Resistance
  - Attribution
  - Advance Microbial Detection
- Adding Work Group Priorities
  - WGS training for epis
  - Research agenda
  - Integrated activities

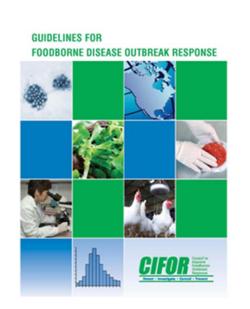


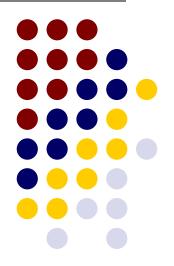




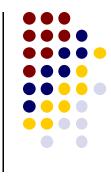
### Developing Metrics to Improve Outbreak Investigation

Craig Hedberg, PhD Environmental Health Sciences





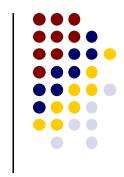
### Background



- CIFOR *Guidelines* included measurable indicators of effective surveillance for enteric diseases and response to outbreaks by state and local public health officials.
  - intended for agencies to evaluate performance of their foodborne disease surveillance and control programs.
  - stopped short of providing specific targets for individual metrics.
- CIFOR identified need to develop target values to help state and local public health agencies *demonstrate performance and effectiveness* conducting foodborne disease surveillance and outbreak control activities.

### **Selected Performance Measures**

- Address four key components of the public health food safety system:
  - surveillance system evaluated;
  - follow up on complaints, cases and isolates;
  - complaint/cluster investigations;
  - outbreak summaries and reporting to NORS.
- Encompass roles for epidemiology, laboratory practice, and environmental health, and include activities at both state and local levels.



### **Target Range Development**

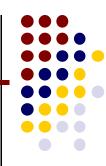
- Target ranges for the selected performance measures were based on available information.
  - Most of the target ranges were derived from evaluations of surveillance data published in the peer-reviewed literature.
  - In addition, results of Year 1 FoodCORE analyses, NORS data, and PHEP Guidance were used to establish target ranges.
- As information becomes available, target ranges can be refined to better reflect overall performance levels.
  - In addition, target ranges reflect performance that may change over time as the availability of resources changes or as new methods are introduced.

## Performance Measures Related to Complaint-Based Surveillance



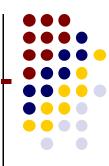
<b>CIFOR Performance Measure</b>	Target Range
1. Foodborne illness complaint reporting system	Preferable: Electronic database
	Acceptable: System to log complaints
12. Complaint investigation interval	Preferable: < 7 days
	Acceptable: 7-21 days
10. Outbreak clinical specimen collections	Preferable: >75% of outbreaks

### Performance Measures Related to Pathogen Specific Surveillance: Case-Based



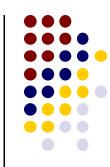
<b>CIFOR Performance Measure</b>	Target Range
4. Confirmed cases with exposure history obtained ( <i>Salmonella</i> , STEC, <i>Listeria</i> separate)	Preferable: >75% of cases
	Acceptable: 50-75% of cases
11. Cluster investigation interval	Preferable: < 7 days
	Acceptable: 7-21 days
13. Cluster source identification	Preferable: >20% of clusters with > 5 cases

### Performance Measures Related to Pathogen Specific Surveillance: Isolate-Based

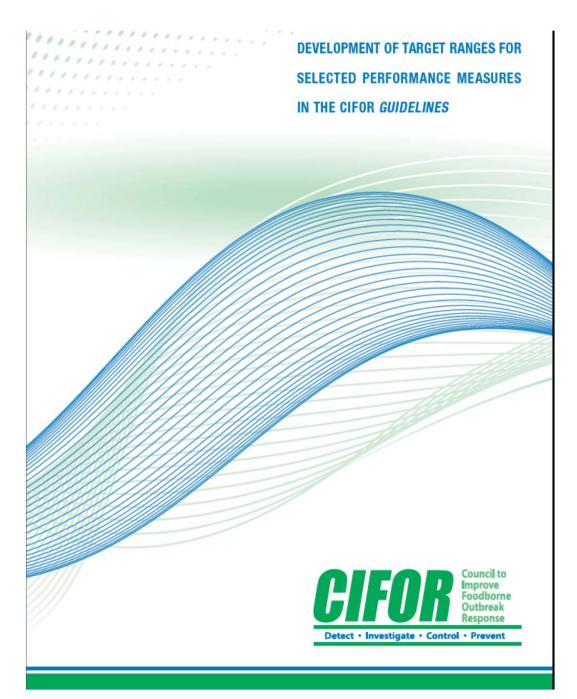


CIFOR Performance Measure	Target Range
5. Isolate submissions to PHL (Salmonella, STEC, Listeria separate)	Preferable: >90% of isolates
	Acceptable: 60-90% of isolates
7. Isolate submission interval (Salmonella, STEC, Listeria separate)	Preferable: < 7 days
	Acceptable: 7-8 days
6. PFGE subtyping of isolates (Salmonella, STEC, Listeria separate)	Preferable: >90% of isolates
	Acceptable: 60-90% of isolates

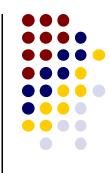
### Performance Measures Related to Outbreak Reporting



<b>CIFOR Performance Measure</b>	Target Range
3. Foodborne illness outbreak rate	Preferable: >6 outbreaks / 1,000,000 population
	Acceptable: 1-6 outbreaks / 1,000,000 population
14. Outbreak etiology reported to NORS	Preferable: >68% of outbreaks
	Acceptable: 44-68% of outbreaks







Target ranges reflect performance that may change over time as the availability of resources changes or as new methods are introduced.

http://www.cifor.us/documents/MetricsReport\_Abridge\_FINAL.pdf



# **Project Workgroup and Consultants**

- John Besser PhD, CDC, Enteric Diseases Laboratory Branch
- Gwen Biggerstaff MSPH, CDC, Outbreak Response and Prevention Branch
- David Boxrud MS, Minnesota Department of Health, Public Health Laboratory
- Scott Holmes MPH, Lincoln Lancaster County Health Department
- Timothy Ihry DVM, MSA, DACVPM, USDA, Food Safety and Inspection Service
- Ernest Julian, Ph.D., Rhode Island Department of Health, Office of Food Protection
- William Keene, PhD, MPH, Oregon Health Division
- Mel Knight, REHS, National Environmental Health Association
- Bela Matyas MD, MPH, Solano County Public Health
- Dale Morse, MD, MS, CDC, Division of Foodborne, Waterborne and Environmental Diseases,
- Dhara Patel, MPH, CSTE
- Lauren Rosenberg MPA, CSTE
- Josh Rounds, MPH, Minnesota Department of Health
- Carol Selman, CDC, Environmental Health Services Branch
- Don Sharp, MD, DTM&H, CDC, Division of Foodborne, Waterborne and Environmental Diseases
- Kirk Smith, DVM, PhD, Minnesota Department of Health
- Regina Tan, DVM, MSPH, DACVPM, USDA, Food Safety and Inspection Service
- Patricia White, DVM, USDA, Food Safety and Inspection Service
- Ian Williams, PhD, MS, CDC, Outbreak Response and Prevention Branch

## **Future Plans for Metrics and C-MET**

- COE have begun to use the 16 metrics and C-MET and to assist other states in this process
- Encourage use of C-MET by all states and large local HDs
- Update metrics
  - Obtain feedback from all users
  - Compare utility of CIFOR metrics with FoodCORE and other metrics
- Incorporate major changes into third edition of CIFOR *Guidelines* 
  - Minor changes can be done on web anytime



# **For More Information About CIFOR:**

- Visit the CIFOR website: <u>www.cifor.us</u>
- Contact the CSTE National Office: Thuy Kim, MPH Associate Research Analyst <u>tkim@cste.org</u>
- CDC: Don Sharp <u>das8@cdc.gov</u>
- Scott Holmes (402)441-8019
  <u>sholmes@lincoln.ne.gov</u>

