



TEXAS DEPARTMENT OF STATE HEALTH SERVICES

DAVID L. LAKEY, M.D.
COMMISSIONER
January 29, 2014

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Dear Foodborne Illness Coordinator:

The health director in your health department has indicated that you are to be the point of contact for the development and execution of a contract funded through an Exceptional Item awarded to the Department of State Health Services (DSHS) by the 83rd Legislative Session. The purpose of these funds is to augment local health department epidemiological capacity for outbreak and disaster response with special emphasis on foodborne illness investigations.

To achieve this outcome, the DSHS Commissioner has directed the Department's Emerging and Acute Infectious Disease Branch to offer funding for one full time epidemiology and surveillance staff member to those local health departments with the highest number of annual foodborne illnesses as determined by the Department's current foodborne illness questionnaire response. Based on these criteria, we are able offer your health department funding to cover the cost of a full time surveillance and epidemiology staff member for the current state biennial budget period. Continued funding is subject to EI renewal.

The focus of this staff member is foodborne illness with responsibilities to include investigations, analyzing and interpreting data, and reporting findings in compliance with local, state, and federal agency guidelines and regulations. A scope of work is attached. You have some latitude in the position that you create. We recommend that you select a position equivalent to the DSHS Public Health and Prevention Specialist IV, Epidemiologist I, or Epidemiologist II. (Job descriptions attached.)

Please prepare a budget for salary and fringe for hiring someone at this level for the remainder of FY2014 (April 1, 2014 to August 31, 2014) and all of FY2015 (September 1, 2014 to August 31, 2015). The FY2015 budget will be resubmitted/revised, if necessary, upon the initiation of the renewal process for the September 1, 2014 contract. You may also include customary other personnel costs such as travel and office supplies. We will accommodate your budgets within the constraints of the exceptional item amount and will consult with you if we are not able to fund the full amount. Please submit this budget to the Contracts Management Unit no later than February 12, 2014.

The Emerging and Acute Infectious Disease Branch is tentatively planning the four day training session the second week of July for these new staff, so you can see that we need to work steadily. If you have additional questions regarding this opportunity, please contact Marilyn Felkner (Marilyn.Felkner@dshs.state.tx.us; (512) 776-6393).

Sincerely,

Marilyn Felkner, DrPH
Emerging and Acute Infectious Disease Branch Manager

FY2014 Scope of Services for the IDCU/FDBN INV Program

SECTION I. STATEMENT OF WORK:

Contractor shall conduct surveillance for all foodborne and waterborne illnesses as required in Texas Administrative Code RULE §97.3 and conduct telephone interviews of patients with foodborne and waterborne illness who are determined by the Emerging and Acute Infectious Disease Branch (EAID) of the Department of State Health Services (DSHS) to be part of a cluster or outbreak to ascertain possible risk factors. Contractor may also perform surveillance and epidemiology activities during other major outbreaks and/or disasters.

Contractor shall, as directed by DSHS:

1. Retain an Epidemiologist that has qualifications in public health infection surveillance to perform and track the following deliverables;
2. Attend in-person the three (3) day foodborne investigation orientation training in Austin, Texas, provided by the EAID;
3. Locate, track, and contact case-patients assigned by DSHS using appropriate locating resources;
4. Complete the thirty to sixty (30-60) minute “TXDSHS/CDC Hypothesis Generating Questionnaire for Gastrointestinal Illnesses,” interview in English (or Spanish, when necessary) or other appropriate/focused questionnaire with case-patients identified by DSHS as part of a cluster. Interviews may be conducted by telephone or in-person;
5. Attempt to administer one-hundred percent (100%) of EAID-requested questionnaires for which contact information is complete as soon as possible but no later than two (2) business days after receipt of request to administer questionnaire. Attempted interviews include at least one (1) attempt to contact case-patients after hours if unable to contact case-patient after three (3) attempts during normal business hours;
6. Complete at least seventy-five percent (75%) of interviews within five (5) business days after assignment by DSHS. Completed interviews include those in which the case-patient is contacted, but refuses some or all of the interview. Interviews for which no contact is made with case-patient do not constitute a completed interview;
7. Enter all foodborne and waterborne illness cases correctly and completely in the National Electronic Disease Surveillance System (NEDSS) within five (5) business days of completion of investigation of each case interview;

8. Send laboratory specimens of at least ninety percent (90%) of cases of *E. coli*, *Listeria*, *Vibrio*, and *Salmonella* from hospitals and clinics within the jurisdiction to the Laboratory Services Section, Texas Department of State Health Services, Austin, Texas or to another specified contract laboratory for confirmatory and/or molecular testing;
9. Submit completed interviews to DSHS electronically to FoodborneTexas@dshs.state.tx.us or to fax number (512) 776-7616 no later than twenty-four (24) hours after completion of interview;
10. Assure and monitor the confidential treatment and transfer of confidential data provided by DSHS and confidential data provided to DSHS; and
11. Monitor foodborne illness kits to assure that materials have not expired, and transfer kit materials as needed/requested to other jurisdictions to optimize utilization.

SECTION II. PERFORMANCE MEASURES

The following performance measures will be used to assess, in part, Contractor's effectiveness in providing the services described in this Program Attachment, without waiving the enforceability of any of the other terms of the contract.

Contractor shall:

1. Attend in-person the three (3) day foodborne investigation orientation training in Austin, Texas, provided by the EAID;
2. Provide surge capacity to surrounding jurisdictions in the event of a major statewide outbreak or disaster;
3. Participate in monthly conference calls with the EAID to provide updates, progress reports, and other necessary communications;
4. Participate in outbreak/cluster-related conference calls and responses relevant to the jurisdiction hosted by the Centers for Disease Control and Prevention (CDC) or DSHS;
5. Assure and monitor that at least ninety percent (90%) of reported positive cases of *E. coli*, *Listeria*, *Vibrio*, and *Salmonella* from hospitals and clinics within the jurisdiction have laboratory specimens submitted to the DSHS Laboratory Services Section, in Austin, Texas or to another specified contract laboratory for confirmatory and/or molecular testing;

6. Complete interviews within five (5) business days with a goal of at least seventy-five (75%) percent completion rate. Completed interviews include those in which the case-patient is contacted but refuses some or all of the interview. Interviews for which no contact is made with case-patient do not constitute a completed interview;
7. Submit completed interviews to DSHS electronically to FoodborneTexas@dshs.state.tx.us or to fax number (512) 776-7616 no later than twenty-four (24) hours after completion of interview;
8. Submit a signed and dated copy of the NEDSS Confidentiality and Data Use Oath to DSHS for all individuals permitted to access NEDSS data by May 1, 2014. If not already a certified NEDSS user, attend DSHS training and complete certification;
9. Enter all foodborne and waterborne illness cases correctly and completely in the NEDSS within five (5) business days of completion of investigation of each case interview;
10. Submit a monthly list of all reported clusters, outbreaks and information on investigation findings on the tracking sheet provided by DSHS. Submit the list via electronic mail at FoodborneTexas@dshs.state.tx.us and sandy.clark@dshs.state.tx.us by the 15th of the following month;
11. Assure and monitor the confidential treatment and transfer of confidential data provided by DSHS and confidential data provided to DSHS; and
12. Assure and monitor the foodborne illness kits to assure that materials have not expired, and transfer kit materials as needed/requested to other jurisdictions to optimize utilization.