**Part I- General characterization of the outbreak response**

Completed for each outbreak.

**Major change:** Relocation of several questions from other forms to this one, so that all outbreak-level questions are in one form.

**Note:** Questions in red are new questions.

|  |  |  |
| --- | --- | --- |
| **Original NEARS** | **Revised NEARS** | **Reason for change** |
| 1. Did the exposure(s) take place in a single or multiple locations, for example a single restaurant or two or more restaurants, a single school or two or more schools or a combination of establishments, etc.?
 | **1.** Did the exposure(s) take place in a single or multiple locations (ex: one restaurant or two or more restaurants, one restaurant or a restaurant and a school)? | Revised for clarity |
| 1. Did the exposure(s) happen in a single county/township/parish or multiple counties/townships/parishes in your state?
 |  | The order of the old Q2 and Q3 were reversed to improve flow; the old Q2 is now the new Q3 and the old Q3 is now the new Q2 |
| 3. Did the exposure(s) occur in a single state or multiple states? |  | The order of the old Q2 and Q3 were reversed to improve flow; the old Q2 is now the new Q3 and the old Q3 is now the new Q2 |
|  | **2.** Did the exposure(s) occur in a single state or multiple states?  | The order of the old Q2 and Q3 were reversed to improve flow; the old Q2 is now the new Q3 and the old Q3 is now the new Q2 |
|  | **3.** Did the exposure(s) happen in a single county/township/parish or multiple counties/townships/parishes? | The order of the old Q2 and Q3 were reversed to improve flow; the old Q2 is now the new Q3 and the old Q3 is now the new Q2 |
| **4**. How many food service establishment locations within your jurisdiction were associated with this outbreak? | **4.** How many food service establishment locations within your jurisdiction were associated with this outbreak?  |  |
| **5**. Were any environmental assessments conducted at food service establishments in your jurisdiction as a part of this outbreak? | **--** | Deleted; information can be obtained through the old Q5b (now the new Q5) |
| **5a.** Briefly describe the reason(s) why environmental assessments were conducted in your jurisdiction as a part of this outbreak. | **--** | Deleted; lower priority |
| **5b.** How many environmental assessments were conducted in food service establishments in your jurisdiction as a part of this outbreak? | **5.** How many environmental assessments were conducted at food service establishments in your jurisdiction as a part of this outbreak? | The old Q5b is the new Q5 |
| **5c.** Why were no environmental assessments conducted at food service establishments in your jurisdiction as a part of this outbreak? | **5a.** *If no environmental assessments were conducted*: Why were no environmental assessments conducted at food service establishments in your jurisdiction as a part of this outbreak? | * Revised for clarity
* Renumbered
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| --- | --- | --- |
| 1. Were any non-food service establishment locations within your jurisdiction associated with this outbreak investigation?
 | -- | Deleted; information can obtained through the old Q6a (now the new Q6) |
| **6a.** How many non-food service establishments in your jurisdiction were associated with this outbreak?  | 1. How many non-food service establishments in your jurisdiction were associated with this outbreak?
 | Renumbered |
| **6b.** How many environmental assessments were conducted at non-food service establishments in your jurisdiction as part of this outbreak?  | **6a.** *If non-food service establishments* *in your jurisdiction were associated with the outbreak*: How many environmental assessments were conducted at non-food service establishments in your jurisdiction as part of this outbreak?  | * Revised for clarity
* Renumbered
 |
| 1. Was a primary agent identified in this outbreak?
* Yes
* No
 | **7**. Was a primary agent identified (suspected or confirmed) in this outbreak?* Yes, confirmed
* Yes, suspected
* No
 | * Revised for clarity
* Answer choices revised to combine the old Q7 and Q7a1
 |
| **7a.** What was the identified agent? | **7a.** *If a primary agent was identified:* What was the identified agent? | Revised for clarity |
| **7a1.** Was the agent identified suspected or confirmed?  | -- | Deleted; information is obtained in the new Q7 |
| **7b.** Was a serotype identified for this outbreak? | **--** | Deleted; not needed for independent NEARS analyses or for matching across NEARS and NORS |
| **7c.** What was the identified serotype? | **--** | Deleted; not needed for independent NEARS analyses or for matching across NEARS and NORS |
| **8**. Was this outbreak reported to a state or local Communicable Disease Surveillance Program? | **8.** Was this outbreak reported to a state or local Communicable Disease Surveillance Program? |  |
| **8a.** Select the national surveillance system(s) where this outbreak was reported and record the corresponding reporting number. | **8a.** *If the outbreak was reported to a state or local program:* Select the state or local surveillance system(s) where this outbreak was reported.  | Revised for clarity |
| **9**. Was this outbreak reported to a national surveillance system? | 1. Was this outbreak reported to a national surveillance system?
 |  |
| **9a.** Select the national surveillance system(s) where this outbreak was reported and record the corresponding reporting number.  | **9a.** *If the outbreak was reported to a national program:* Select the national surveillance system(s) where this outbreak was reported and record the corresponding reporting number.  | Revised for clarity |
|  | **10.** Was a specific ingredient or multi-ingredient food suspected or confirmed in this outbreak? | Moved from Part V, Q1 because it is an outbreak level question and fits better here |
|  | **10a.** *If an ingredient/food was not suspected or confirmed:* Explain why this outbreak was considered foodborne. | * Moved from Part V, Q2 because it is an outbreak level question and fits better here
* Revised
 |
|  | **11.** Provide any comments that would help describe the foods involved in this outbreak.  | Moved from Part V, Q12 because it is an outbreak level question and fits better here |
|  | **12.** Were any contributing factors identified in this outbreak? | Moved from Part VII, Q1 because it is an outbreak level question and fits better here |
|  | **13.** What activities were conducted during the outbreak investigation to try to identify the contributing factors?  | Moved from Part VII, Q2 because it is an outbreak level question and fits better here Revised for clarity |
|  | 1. Please rate the quality of communication between the food regulatory program and the communicable disease program during this outbreak investigation.
 | Moved from Part VII, Q3 because it is an outbreak level question and fits better here |
|  | 1. What were the environmental antecedents of this outbreak?
 | Moved from Part VII, Q11 because it is an outbreak level question and fits better here |
|  | 1. Briefly describe any other information about the underlying causes of the outbreak (ex. order of environmental antecedents).
 | * Moved from Part VII, Q11 because it is an outbreak level question and fits better here
* Revised for clarity
 |
|  | 1. Were any immediate control measures implemented for this outbreak?
 | Added; workgroup felt this was critical information to capture |
|  | **17a***. If immediate control measures were implemented*, what were they? | Added; workgroup felt this was critical information to capture |
| **# of questions:** 20 | **# of questions:** 24 | **Change:** +4 |

**Part II- Establishment characterization**

Completed for each outbreak establishment.

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| --- | --- | --- |
| **Original NEARS** | **Revised NEARS** | **Reason for change** |
| 1. Date the establishment was identified for an environmental assessment (MM/DD/YYYY):
 | **1.** Date the establishment was identified for an environmental assessment (MM/DD/YYYY): |  |
| 1. Date of first contact with establishment management (MM/DD/YYYY):
 | **2.** Date of first contact with establishment management (MM/DD/YYYY): |  |
| 1. Number of visits to the establishment to complete this environmental assessment:
 | **3.** Number of visits to the establishment to complete this environmental assessment:  |  |
| 1. Number of contacts with the establishment other than visits (for example, phone calls, phone interviews with staff, faxes, etc.) to complete this environmental assessment:
 | **4.** Number of contacts with the establishment other than visits (ex: phone calls, phone interviews with staff, faxes) to complete this environmental assessment: |  |
| 1. Facility type
 | **5.** Facility type |  |
| 1. How many critical violations/priority items/priority foundation items were noted during the last routine inspection?
 | **6.** How many critical violations/priority items/priority foundation items were noted during the last routine inspection? |  |
|  | **6a.** *If critical violations were noted*: Mark any of the following observed during the last routine inspection. | Added; workgroup felt this was critical information to capture |
| 1. What is the establishment’s source of potable water?
 | -- | Deleted; not an issue in any previous NEARS outbreaks and no variation in responses |
| 1. What is the establishment’s sewage disposal method?
 | -- | Deleted; not an issue in any previous NEARS outbreaks and no variation in responses |
| 1. Was a translator **needed** to communicate with the kitchen manager during the environmental assessment?
 | **7.** Was a translator **needed** to communicate with the kitchen manager during the environmental assessment? | Renumbered |
| **9a.** Was a translator **used** to communicate with the kitchen manager? | **7a.** *If a translator was needed:* Was a translator **used** to communicate with the kitchen manager?  | * Renumbered
* Revised for clarity
 |
| 1. Was a translator **needed** to communicate with the food workers during the environmental assessment?
 | **8.** Was a translator **needed** to communicate with the food workers during the environmental assessment? | Renumbered |
| **10a.** Was a translator **used** to communicate with the food workers? | **8a.** *If a translator was needed:* Was a translator **used** to communicate with the food workers?  | * Renumbered
* Revised for clarity
 |
| 1. Establishment Type:
 | **9.** Establishment type: | Renumbered |
| 1. Do customers have direct access to unpackaged food such as a buffet line or salad bar in this establishment?
 | 1. Do customers have direct access to unpackaged food such as a buffet line or salad bar in this establishment?
 | Renumbered |
| 1. Does the establishment serve raw or undercooked animal products (for example, oysters or shell eggs) in any menu item?
 | **11.** Does the establishment serve raw or undercooked animal products (ex: oysters, shell eggs) in any menu item? | Renumbered |

|  |  |  |
| --- | --- | --- |
| **13a.** Is a consumer advisory regarding the risk of consuming raw or undercooked animal products provided (for example, on the menu, on a sign)? | **11a.** *If establishment serves raw or undercooked animal products:* Is a consumer advisory regarding the risk of consuming raw or undercooked animal products provided (ex: on the menu, on a sign)? | * Renumbered
* Revised for clarity
 |
| **13b.** Where is the consumer advisory located? *(check all that apply)* | **11a1.** *If establishment serves raw or undercooked animal products and has an advisory:* Where is the consumer advisory located?  | * Renumbered
* Revised for clarity
 |
| 1. Which one of the options below best describes the menu for this establishment?
 |  **12.** Which one of these options best describes the menu for this establishment? | Renumbered |
|  | **13.** Were any samples taken in this establishment? | Moved from Part VI , Q1 because it is an establishment level question and fits better here |
|  | **13a.** *If environmental samples were taken:* Where were they taken? *(Check all locations that apply and enter the number of samples taken at each location.)* **13b.** *If food samples were taken:* What foods or ingredients were sampled? *(Check all that apply and enter the number of samples taken of each food.)* | In the old Part VI, Q3-5a had to be completed for each sample, even if it wasn’t positive. We restructured these questions so that we collect summary level data on all the samples here and only collect detailed information on positive samples in Part VI. |
| **# of questions:** 18 | **# of questions:** 20 | **Change:** +2 |

**Part III- Manager interview**

Completed for each outbreak establishment.

**Major changes:** This form was restructured to:

* Improve the flow of cleaning policy questions (old questions 21-27d)
* Reduce redundancy and improve flow of the ill worker policy questions (old questions 30-32c)

|  |  |  |
| --- | --- | --- |
| **Original NEARS** | **Revised NEARS** | **Reason for change** |
|  | **1**. How long was the interview(s)? *Number of minutes:* | Added to assess burden |
| **1**. Date the manager interview was conducted (MM/DD/YYYY): | **2**. Date the manager interview was initiated (MM/DD/YYYY): | * Renumbered
* Revised for clarity
 |
| **2**. Is this an independent establishment or a chain establishment? | **3**. Is this an independent establishment or a chain establishment? | Renumbered |
| **3**. Approximately how many meals are served here daily? | **4**. Approximately how many meals are served here daily? Meals can be estimated using number of customers served or ticket orders | Renumbered |
| **4**. What is the establishment’s busiest day, in terms of number of meals served? | **5**. What is the establishment’s busiest day, in terms of number of meals served? | Renumbered |
| **5**. Are any foods prepared or partially prepared at a commissary or other location? | **6**. Are any foods prepared or partially prepared at a commissary or other location? | Renumbered |
| **6**. Other than daily specials, when was the last time food items were added to your menu(s)? | **7**. Other than daily specials, when was the last time food items were added to your menu(s)? | Renumbered |
| **7**. Where does the establishment purchase or acquire its food? | -- | Deleted; lower priority |
| **8**. In total how long have you worked as a kitchen manager? |  | The order of the old questions 8 and 9 were reversed to improve flow; the old 8 is now the new 9 and the old 9 is now the new 8 |
| **9**. Approximately how long have you been employed as a kitchen manager in this establishment? |  | The order of the old questions 8 and 9 were reversed to improve flow; the old 8 is now the new 9 and the old 9 is now the new 8 |
|  | **8.** Approximately how long have you been employed as a kitchen manager in this establishment?  | The order of the old questions 8 and 9 were reversed to improve flow; the old 8 is now the new 9 and the old 9 is now the new 8 |
|  | **9.** Approximately how long have you worked as a kitchen manager? | The order of the old questions 8 and 9 were reversed to improve flow; the old 8 is now the new 9 and the old 9 is now the new 8 |
| **10**. How many kitchen managers, including you, are currently employed in this establishment? If you aren’t sure, use your best guess. | **10**. How many kitchen managers, including you, are currently employed in this establishment? If you aren’t sure, use your best guess. |  |
| **11**. What language(s) do you and other managers in this establishment speak fluently? | **11**. What language(s) do you and other managers in this establishment speak fluently? |  |
| **12**. What languages do you and other managers speak *at work*? | **12.** What languages do you and other managers speak *at work*?  |  |
| **13.** In your opinion, how well do you communicate verbally with your food workers: very well, somewhat well, or not well at all? | **--** | Deleted; there was little variability in responses |
| **14.** Do any kitchen managers receive food safety training? This training can be a course or a class, or it can be training that occurs on the job. | **13.** Do any kitchen managers receive food safety training? This training can be a course or a class, or it can be training that occurs on the job. | Renumbered |
| **14a.** How many kitchen managers have had food safety training? If you aren’t sure, use your best guess. | **13a.** How many kitchen managers have had food safety training? If you aren’t sure, use your best guess. | Renumbered |
| **14b.** What type of food safety training do kitchen managers (you) receive? Is it on the job or a class or a course taken somewhere other than work, or both of these types? | **13b.** What type of food safety training do kitchen managers (you) receive? Is it on-the-job, a class or a course, or a class or course from an ANSI accredited program, such as ServSafe? It could be any or all of these. | * Renumbered
* Revised to add new option
 |
| **15.** Does this establishment require that kitchen managers have a food safety certification? | **14**. Are any kitchen managers, including you, food safety certified? | * Renumbered
* The old Q15 and Q16 were switched to improve flow; they are now the new Q16 and Q15
 |
| **16.** Are any kitchen managers, including you, food safety certified? | **15.** Does this establishment require that kitchen managers have a food safety certification? | * Renumbered
* The old Q15 and Q16 were switched to improve flow; they are now the new Q16 and Q15
 |
| **16a.** How many kitchen managers in this establishment, including yourself, are food safety certified by an ANSI accredited program such as ServSafe National Registry of Food Safety Professionals Prometric, or 360Training? If you aren’t sure, use your best guess. | **15a.** How many kitchen managers in this establishment, including yourself, are food safety certified by an ANSI accredited program? These include National Restaurant Association’s ServSafe, National Registry of Food Safety Professionals, Prometric, 360 Training, or AboveTraining/ StateFoodSafety.com? If you aren’t sure, use your best guess. | * Renumbered
* Revised to add new option
 |
|  | **15b.** How often is a certified kitchen manager present during hours of operation? Is it all of the time, most of the time, some of the time, rarely, or none of the time?  | * Renumbered
* Added to assess new Food Code provision
 |
| **17.** How many food workers do you have? If you do not know the exact number, an estimate will be fine. | **16.** How many food workers do you have? If you do not know the exact number, an estimate will be fine. | Renumbered |
| **18.** What language(s) do food workers in this establishment speak fluently? | **16a.** What language(s) do food workers in this establishment speak fluently? | Renumbered  |
| **19.** What languages do food workers speak *at work*? | **16b.** What languages do food workers speak *at work*? | Renumbered  |
| **20.** Do any food workers receive food safety training? This training can be a course or a class, or it can be training that occurs on the job. | **16c.** Do any food workers receive food safety training? This training can be a course or a class, or it can be training that occurs on the job. | Renumbered  |
| **20a.** How many food workers have had food safety training? Please make your best estimate if you do not know the exact number. | **16c1.** How many food workers have had food safety training? Please make your best estimate if you do not know the exact number. | Renumbered  |
| **20b.** What type of food safety training do food workers receive? Is it on the job or a class or course taken somewhere other than work, or both of these types? | **16c2.** What type of food safety training do food workers receive? What type of food safety training do kitchen managers (you) receive? Is it on-the-job, a class or a course, or a class or course from an ANSI accredited program, such as ServSafe? It could be any or all of these. | * Renumbered
* Revised to include new option
 |
| **21.** Does this establishment have a cleaning policy or schedule for the kitchen floor?**21a.** Is this policy written?**22.** Does this establishment have a cleaning policy or schedule for the refrigerator units, such as a walk-in or reach-in?**22a.** Is this policy written?**23.** Does this establishment have a cleaning policy or schedule for the cutting boards?**23a.** Is this policy written?**24.** Does this establishment have a cleaning policy or schedule for the food slicers?**24a.** Is this policy written?**25.** Does this establishment have a cleaning policy or schedule for the food preparation tables?**25a.** Is this policy written?**26.** Does this establishment have a policy concerning disposable glove use?**26a.** Is this policy written?Does the glove policy require that food workers wear gloves:**27a.** at all times while working in the kitchen?**27b.** when handling ready-to-eat foods?**27c.** when handling raw meat or poultry?**27d.** when they have cuts or other skin injuries? | Does this establishment have a cleaning policy or schedule for **17a.** cutting boards?**17b.** food slicers? **17c.** food preparation tables? **17d.** frequently touched customer surfaces like menus, tables, and condiments?**17f.** *If they have any of these policies:* Are any of these policies written? **17f1.** Which ones? 🞏 Cutting boards 🞏 Food slicers 🞏 Frequently touched customer surfaces 🞏 Food preparation tables **18.** Does this establishment have a policy for disposable glove use?**18a.** *If there is a glove use policy:* Does the glove policy require that food workers wear gloves:**18a1.** when they have cuts or other injuries?**18a2.** when handling ready-to-eat foods?**18a3.** when handling raw meat or poultry?**18a4.** at all times while working in the kitchen?**18b.** *If there is a glove use policy:* Is the policy written? **19.** Does this establishment have a policy for cleaning up after someone has vomited or had diarrhea in the establishment?**19a.** Is this policy written? | * Renumbered
* Old Q21-27d were restructured to improve flow and reduce repetition
* Old Q21, 21a, 22, 22a were deleted because they were of lower priority
* Q17d, 19, 19a were added because the workgroup felt they were critical to understanding norovirus prevention
 |
| **28.** Does this establishment have a policy to take the temperature of any incoming food products? | **20.** Does this establishment have a policy to take the temperature of any incoming food products? |  |
| **28a.** Are temperatures of incoming products recorded? | -- | Deleted, lower priority |
| **29.** Excluding incoming products, does this establishment have a policy to take food temperatures? | **21.** Excluding incoming products, does this establishment have a policy to take food temperatures? |  |
| **29a.** Are these food temperatures recorded? | -- | Deleted, lower priority |
| **30.** Does this establishment have a policy or procedure that requires food workers to tell a manager when they are ill?**30a.** Is this policy in writing?**30b.** Does this policy require ill workers to tell managers what their symptoms are?**30c.** Does this policy specify certain symptoms that ill workers are required to tell managers about?**30c1.** What are those symptoms?**30d.** Does this policy apply to kitchen managers as well as food workers? For example, are kitchen managers required to tell their managers or owners when they are ill?**31.** When food workers say they are ill, do you typically ask if they are experiencing certain symptoms?**31a.** What are those symptoms?**32.** Does this establishment have a policy or procedure to restrict or exclude ill workers from working? By restrict I mean the worker can work, but is not allowed to handle food, and by exclude I mean the worker does not work at all.**32a.** Is this policy in writing?**32b.** Does this policy specify the specific symptoms that would prompt excluding or restricting ill workers from working?**32b1.** What are those symptoms?**32c**. Does this policy apply to kitchen managers as well as food workers? For example, are ill kitchen managers excluded or restricted from working? | **22.** When food workers say they are ill, do you typically ask if they are experiencing certain symptoms?**23.** Does this establishment have a policy or procedure that requires food workers to tell a manager when they are ill?**23a.** Is this policy in writing?**23b.** Does this policy require ill workers to tell managers what their symptoms are?**23c.** Does this policy specify certain symptoms that ill workers are required to tell managers about?**23c1.** What are those symptoms? **24.** Does this establishment have a policy or procedure to restrict or exclude ill workers from working? By restrict I mean the worker can work, but is not allowed to handle food, and by exclude I mean the worker does not work at all.**24a.** Is this policy in writing?**24b.** Does this policy specify the specific symptoms that would prompt excluding or restricting ill workers from working? **24b1.** What are those symptoms?  | * Renumbered
* Old Q30-32c were restructured to improve flow and reduce repetition
* Old Q30d and 32c were deleted because they are lower priority
 |
| **33.** Do any kitchen managers (you) ever get paid when they miss work because they are ill? | **25**. Do any kitchen managers (including you) ever get paid when they miss work because they are ill? | Renumbered |
| **33a.** How many kitchen managers get paid when they miss work because they are ill? Please make your best estimate if you do not know the exact number. | **25a**. How many kitchen managers get paid when they miss work because they are ill? Please make your best estimate if you do not know the exact number. | Renumbered |
| **34.** Do any food workers ever get paid when work is missed because they are ill? | **26**. Do any food workers ever get paid when work is missed because they are ill? | Renumbered |
| **34a.** How many food workers get paid when they miss work because they are ill? Please make your best estimate if you do not know the exact number. | **26a**. How many food workers get paid when they miss work because they are ill? Please make your best estimate if you do not know the exact number. | Renumbered |
|  | **27**. Have any practices or policies changed since you were first notified about a potential problem in your restaurant? | Added to identify interventions |
|  | **27a**. What were those changes? | Added to identify interventions |
| **# of questions:** 62 | **# of questions:**58 | **Change:** -4 |

**Part IV- Establishment observation**

Completed for each outbreak establishment.

**Major changes:** The form was restructured to improve flow.

|  |  |  |
| --- | --- | --- |
| **Original NEARS** | **Revised NEARS** | **Reason for change** |
|  | **1.** How long was the observation(s)? | Added to assess burden |
| 1. Date observations were made (MM/DD/YYYY):
 | **2.** Date observations were initiated (MM/DD/YYYY): | * Renumbered
* Revised for clarity
 |
| 1. Are hand sinks available in the employee restroom(s)?
 | -- | Deleted; information obtained in the new Q3 |
| **2a**. How many hand sinks are in the employee restrooms?  | **3.** How many hand sinks are in or adjacent to the employee restrooms? | * Revised for clarity
* Renumbered
 |
| **2b**.Is warm water (minimum 100°F) available at all employee restroom hand sinks? | **3a.** *If there is at least one hand sink in the employee restrooms:* Is warm water (minimum 100°F) available at all employee restroom hand sinks? | * Revised for clarity
* Renumbered
 |
| **2c**.Is soap available at (or near) all employee restroom hand sinks? | **3b.** *If there is at least one hand sink in the employee restrooms:* Is soap available at (or near) all employee restroom hand sinks? | * Revised for clarity
* Renumbered
 |
| **2d**. Are paper or cloth drying towels available at (or near) all employee restroom hand sinks? | **3c.** *If there is at least one hand sink in the employee restrooms:* Are paper or cloth drying towels or electric hand dryers available at (or near) all employee restroom hand sinks? | * Revised for clarity
* Renumbered
 |
| 1. Is a hand sink available in the work area(s)?
 | -- | Deleted; this information is now obtained in the new Q4 |
| **3a**.How many hand sinks are located in the work area(s)?  | **4.** How many hand sinks are located in the work area? | Renumbered |
| **3b**.Is warm water (minimum100°F) available at all hand sinks in the work area? | **4a.** *If there is at least one hand sink in the work area:* Is warm water (minimum 100°F) available at all hand sinks in the work area? | * Revised for clarity
* Renumbered
 |
| **3c**.Is soap available at (or near) all hand sinks in the work area? | **4b.** *If there is at least one hand sink in the work area:* Is soap available at (or near) all hand sinks in the work area? | * Revised for clarity
* Renumbered
 |
| **3d**. Are paper or cloth drying towels available at (or near) all hand sinks in the work area? | **4c.** *If there is at least one hand sink in the work area:* Are paper or cloth drying towels or electric hand dryers available at (or near) all hand sinks in the work area? | * Revised for clarity
* Renumbered
 |
|   | **5*.***Are food workers observed washing their hands using water, soap, appropriate drying methods, and for the appropriate amount of time?  | Added; workgroup felt this was critical information to capture |
| 1. Are there cold storage units in the establishment?
 | **--** | Deleted; information is now gathered in the new Q6 |
| **4a.** How many cold storage units are in the establishment?  | **6.** How many cold storage units are in the establishment? | Renumbered |
| **4b.** Which types of units did you observe?  | **6a.** *If there is at least one cold storage unit:* Which types of units do you observe?  | * Revised for clarity
* Renumbered
 |
| 1. Are all cold storage units maintained at a temperature of 41°F or below?
 | **--** | Deleted; lower priority |
| **5a.** How many cold storage units are above 41°F?  | **--** | Deleted; lower priority |
| **5b.** Which types of units did you observe to be above 41°F? | **--** | Deleted; lower priority |
|  | **7.** Are any foods observed in cold holding? | Reorganized; this was the old Q14  |
|  | **7a.** *If cold holding is observed:* Are the temperatures of all foods measured in cold holding at 41°F or below? | Reorganized; this was the old Q14 |
|  | **8**. Which of the following practices, if any, are observed during this visit? *(Check all that apply)** Bare hands to touch non-RTE food
* Bare hands to touch RTE food
* Gloved hands to touch non-RTE food
* Gloved hands to touch RTE food
* Other method to prevent bare hands from touching RTE food (ex: tissue paper, tongs, utensil)
 | This questions gathers better information than old Q6 and Q8 and replaces them |
| 1. Are any food workers using gloves while handling food?
 | -- | Deleted; information is now gathered in the new Q8 |
| 1. Is there a supply of disposable gloves available in the establishment?
 | **9.** Is there a supply of disposable gloves available in the establishment? | Renumbered |
| 1. Are any food workers handling ready-to-eat foods with bare hands?
 | **--** | Deleted; information is now gathered in the new Q8 |
| 1. Are there records to indicate that the temperatures of incoming ingredients are being taken and recorded?
 | **10.** Are there records to indicate that the temperatures of incoming ingredients are being taken and recorded? | Renumbered |
| 1. Are there records to indicate that the temperatures of foods, excluding incoming ingredients, are being taken and recorded?
 | **11.** Are there records to indicate that the temperatures of foods, excluding incoming ingredients, are being taken and recorded? | Renumbered |
| 1. Is there any evidence of direct cross contamination of raw animal products with ready-to-eat foods?
 | **12.** Is there any evidence of direct cross contamination of raw animal products with ready-to-eat foods? | Renumbered |
| **11a.** Please describe the evidence of cross contamination observed. | **12a.** *If there is evidence of cross contamination:* Describe: | Renumbered |
| 1. Is there cooling of hot foods in this establishment?
 | **13.** Is there any evidence of cooling of hot foods observed in this establishment? | * Revised for clarity
* Renumbered
 |
| **12a.** What cooling method(s) are used? | **13a.** *If there is cooling of hot foods:* What cooling method(s) are used?  | * Revised for clarity
* Renumbered
 |
|  | **13b.** *If there is cooling of hot foods:* Are the cooling methods properly implemented? | Added; users consider critical to gather |
| 1. Were any foods observed in hot holding?
 | **14.** Are any foods observed in hot holding? | * Revised for consistency
* Renumbered
 |
| **13a**. Were the temperatures of any foods in hot holding measured? | **--** | Deleted; question not needed |
| **13b**. Were the temperatures of all foods measured in hot holding at 135°F or above? | **14a.** *If there are foods in hot holding:* Are the temperatures of all foods measured in hot holding at 135°F or above? | * Revised for clarity
* Renumbered
 |
| 1. Were any foods observed in cold holding?
 |  | Reorganized; this is now the new Q7 |
| **14a**. Were the temperatures of any foods in cold holding measured? | **--** | Deleted; question not needed |
| **14b**. Were the temperatures of all foods measured in cold holding at 41°F or below? |  | Reorganized; this is now the new Q7a  |
| 1. Were any foods observed during cooking?
 | **15**. Are any foods observed during cooking? | Revised for consistency |
| **15a**. Were the temperatures of any foods being cooked measured? | **--** | Deleted; question not needed |
| **15b**. Were the temperatures of all foods measured during cooking at the recommended temperatures? | **15a.** *If there are foods cooking:* Are the temperatures of all foods measured during cooking at or above the recommended temperatures? | * Revised for clarity and consistency
* Renumbered
 |
|  | **16.** Are there any thermometers observed in food preparation areas to measure internal food temperatures? | Added; workgroup felt this was critical information to capture |
|  | **16a.** *If there are thermometers observed:* Are any thermometers observed being used? | Added; workgroup felt this was critical information to capture |
| 1. Are wiping cloths used in establishment?

**16a**. Are all wiping cloths stored in a sanitizer solution between uses? | 1. Are any of these items observed for cleaning and sanitizing food contact surfaces and in-place equipment?

**17a.** *If wiping cloths are in use*: Are all wet wiping cloths stored in sanitizer solution between uses?**17b.** *If sanitizer buckets or bottles are in use:*Pick one sanitizer bucket (or bottle) and test sanitizer concentration. Is it in the proper range? | * Revised Q17 and Q17a for consistency
* Added Q17b; workgroup felt this was critical information to capture
 |
| **17.** Are there mechanical washing machines for dishes, utensils, or other equipment?**17a**. Does the wash cycle reach the temperatures recommended for that washing machine?**17b**. Does the sanitizing cycle reach the temperatures recommended for sanitization?**17c**. Is chemical sanitizing used?**17d**. Did the chemical sanitizing cycle have the required levels of chemical sanitizer recommended for the machine?**18**. Are there any hand washed dishes, utensils, or other equipment?**18a**. Are hand washed dishes, utensils, or other equipment washed, rinsed and sanitized (either with heat or chemical)? **18b**. Is the sanitizing method (heat or chemical) properly implemented? | **18.** Which of the following methods does the establishment use to clean dishes, utensils, or other food equipment that is not cleaned in place? **18a.** *If there is a mechanical washer:*Does the wash cycle reach the temperatures recommended for the mechanical washing machine?**18b.** *If there is a mechanical washer:*How is sanitization achieved? **18b1.** *If heat used to sanitize:*Does the sanitizing cycle reach the temperatures recommended for sanitization?**18b2.** *If chemical used to sanitize:*Does the chemical sanitizing cycle have the required levels of chemical sanitizer recommended for the machine?**18c.** *If there is manual washing:* What type of sink is used for manual washing? **18d.** *If there is manual washing:* Are dishes, utensils, etc. washed, rinsed, and sanitized (either with heat or chemical) properly? | * The new Q18 was added and the new questions Q17a-18b were restructured to improve flow
* New questions Q18c and Q18d were added because workgroup felt this was critical information to capture
 |
| 1. Did you observe signs and instructions posted in the establishment?
 | **19.** Are any signs and instructions posted in the establishment? | Revised for clarity |
| **19a**. Did any signs or posted instructions use pictures or symbols to communicate a message? | **19a.** *If yes:* Do any use pictures or symbols to communicate a message? | Revised for clarity |
| **19b**. What languages did you observe on signs or instructions posted for food workers?  | **19b.** *If yes:* What languages do you observe on signs or instructions posted for food workers? | Revised for clarity |
|  | **20**. Do you observe any of these items for responding to vomit and/or diarrheal incidents? *(Check all that apply)* | Added; workgroup felt this was critical information to capture |
|  | **20a.** *If any of these are observed:* Are any of these things located together (ex: in a kit)? | Added; workgroup felt this was critical information to capture |
| 1. Were there any differences to the physical facility, food handling practices you observed on your initial visit, or other circumstances that were different at the time of exposure?
 | **21.** Are there any differences to the physical facility, food handling practices you observed on your initial visit, and/or other circumstances that were different at the time of exposure? | * Revised for consistency
* Renumbered
 |
| **20a.** Briefly explain | **21a.** *If there are differences:* Describe:  | * Revised for clarity
* Renumbered
 |
| **21.** Comments: | **22.** Comments: | Renumbered |
|  | **23.** Is a certified kitchen manager present at the time of data collection? | Added; workgroup felt this was critical information to capture |
|  | **24.** Does the written employee health policy or procedure*:* | Added; workgroup felt this was critical information to capture |
| **# of questions:** 51 | **# of questions:** 50 | **Change:** -1 |

**Part V- Suspected/Confirmed Food**

Part Va- Completed for each suspected/confirmed foods.

Part Vb- Completed for each individual ingredient of suspected/confirmed foods.

**Major changes:** This form was restructured to:

* Be broken into two parts- the first on the food, the second on the individual ingredients.
* Improve flow.

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| --- | --- | --- |
| **Original NEARS** | **Revised NEARS** | **Reason for change** |
| **Part V- Suspected/confirmed food** | **Part Va- Suspected/confirmed foods**: Complete this section for EACH suspected/confirmed food.  | Revised to create two forms- one for information on the food and one for information on individual ingredients |
| 1. Was a specific ingredient or multi-ingredient food suspected or confirmed in this outbreak?
 | -- | Moved to Part I because it collects data at the outbreak level and fits better there |
| **1a**. If *No*, explain why food was the suspected vehicle in this outbreak and skip to Part VI (Sampling). | -- | Moved to Part I because it collects data at the outbreak level and fits better there |
|  | * + - 1. What is the name of the suspected or confirmed ingredient/food vehicle? *Note*: Name should match Part I, 13b.
 | Reordered from Q3 to the new Q1 |
| * + - 1. Is this food a single specific ingredient or multi-ingredient?
 | **2.** Is this food a single specific ingredient or multi-ingredient? |  |
| * + - 1. What is the name of the suspected or confirmed ingredient/food vehicle?
 |  | Reordered from old Q3 to the new Q1 |
| **4**. Select the reason that best describes how this single specific ingredient or multi-ingredient food was implicated in the outbreak: | **3.** Select the reason that best describes how this single specific ingredient or multi-ingredient food was implicated in the outbreak. | Renumbered |
| **5**. Which of the following best describes the food preparation process used for this specific ingredient or multi-ingredient food before consumption? | **4.** Which of the following best describes the food preparation process used for this specific ingredient or multi-ingredient food before consumption? | Renumbered |
| **6**. During the likely time the ingredient/food was prepared, were any events noted that appeared to be different from the ordinary operating circumstances or procedures as described by managers and/or workers? | **5.** During the likely time the ingredient/food was prepared, were any events noted that appeared to be different from the ordinary operating circumstances or procedures, as described by managers and/or workers? | Renumbered |
| **6a.** If yes, how would they be best characterized:  | **5a.** *If events appeared to be different from ordinary circumstances:* How would those events best be characterized?  | * Renumbered
* Revised for clarity
 |

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| ***Ingredient Description***Please answer # 7-11 separately for each ingredient identified as a suspected/confirmed vehicle in this outbreak. | **Part Vb- Suspected/confirmed Food, ingredients:** Complete this section for EACH ingredient in the suspected/confirmed food(s).  | Revised to create two forms- one for information on the food and one for information on individual ingredients |
| **7**. Name of the single specific ingredient: | **1.** Name of ingredient | Revised for clarity |
|  | **2.** If any information is present (product manifests, records, tags) that shows this ingredient is an imported food item or from an unapproved source or recall, describe: | The old Q11 and Q11a were combined and moved to become this new Q2, to improve flow |
|  | **3**. Did any of the following intend for the food to be consumed raw or undercooked? | Added; workgroup felt it was critical information to capture |
| **8**. Is the ingredient an animal product?**8a**. Select the type of animal product:**8b**. If poultry, select the type and *skip to #8d*:**8c**. If seafood, select the type:**8d**. For beef, poultry, pork, lamb, and seafood products select the best description of the product upon arrival at the foodservice establishment. **8e**. For dairy, select the best description of the product **upon arrival** at the food service establishment and skip to #9.**8f**. For eggs, select the best description of the product **upon arrival** at the food service establishment:**9**. Is this ingredient a plant or plant product?**9a**.Select the type of plant product (*select only one*):**9b**. If produce, select type *(select only one)*:**9c**. Provide the best description of the plant product upon arrival of the product to the food service establishment (*select only one*).**10**. Was the ingredient described in #8 or #9?**10a**. Please describe the ingredient class/category: | **4. If ingredient is:****a.** *Poultry*, Select the type:**b.** *Seafood,*Select the type:**c.** *Beef, pork, lamb, other meat,*Select the type:**d.** *Poultry, seafood, beef, pork, lamb, other meat,*Select the best description of the product *upon arrival* at the food service establishment:**e.** *Dairy,*Select the best description of the product *upon arrival*at the food service establishment:**f.** *Eggs,*Select the best description of the product *upon arrival*at the food service establishment:**g.** *If ingredient is a plant or plant product,*Select the type:1. *If ingredient is produce,* Select the type:

**i.** *If ingredient is a plant or plant product,*Select the best description of the plant product *upon arrival* at the food service establishment: **j.** *If ingredient is not described in the previous categories,*Describe the ingredient: | The old Q8-10 were restructured to improve flow and renumbered; data are now captured in the new Q4 |
| 1. Is any information present (product manifests, records, tags, etc.) that shows this ingredient is an imported food item?

**9a**. Please describe the information used to indicate this is an imported food item (receipt information such as company, location of origin, lot number, tag numbers, etc.): |  | The old Q11a were combined and moved to become the new Q2, to improve flow |
| 1. **Comments:** Provide any comments that would help describe the foods involved in this outbreak.
 | -- | Moved to Part I, Q11 |
| **# of questions:** 25 | **#of questions:** 19 | **Change:** -6 |

**Part VI- Sampling**

Completed for each positive sample.

**Major changes:** This form was restructured to:

* Only collect data on the individual sample level.
* Only collect data on positive samples.

In the revised NEARS, summary level data on all samples taken in an establishment are collected in Part II; data on individual samples are only collected on positive samples, and are collected in Part VI.

These changes reduce data reporting burden.

|  |  |  |
| --- | --- | --- |
| **Original NEARS** | **Revised NEARS** | **Reason for change** |
| 1. Were any samples taken?
2. How many samples were taken?
 |  | These questions were moved to Part II, Q13a and Q13b because they are establishment level questions and fit better there  |
| ***Individual Sample Description***Please answer #3-#5 separately for each sample taken in this outbreak.  |  |  |
| 1. What type of sample was taken?

**3a**. Where was the sample taken from?**3b**. What was the name of the specific food sampled*?* This should match the name of a specific food characterized in Part V.**3c**. What was the name of the multi-ingredient food sampled? This should match the name of the multi- ingredient food characterized in Part V.1. **Comments:** Please provide any comment or additional information about the specific sample**.**
 |  | * The questions Q3-5a were restructured because they had to be completed for each sample, even if it wasn’t positive. We restructured these questions so that we collect summary level data on all the samples here and only collect detailed information on positive samples in Part VI. This reduces burden.
* The revised questions were moved to Part II because they collect data at the establishment level, not the sample level.
 |
| **5**. Was an agent identified in this sample?**5a**. How many agents were isolated from this sample? | -- | Deleted; information on positive samples is collected in the new Q1-3. |
| ***Agent Description***Please answer #6, #6a, and #6b separately for each agent found in one specific sample taken during the environmental assessment. | **Part VI- Positive samples:** Complete this section for EACH positive sample. | Revised to only collect sample level information on positive samples. |
| **6**. What was the identified agent?**6a**. Was a serotype of the agent identified?**6b**. Was a PFGE pattern identified for the agent? | Describe the agent(s) found in the sample.**1a**. Agent *(check all that apply)***1b**. Serotype, if identified**1c**. Matched a clinical sample? | * Restructured to allow multiple agents to be selected
* Added Q1c; workgroup felt was critical to capture
* Deleted old Q6b; PFGE no longer used
 |
|  | **2**. **2**. Where was the sample taken? | Restructured to collect these data only on positive samples |
|  | **3.** Provide any other information about the specific sample**.** Include presence/ absence, detect/non-detect, and results with a value (pH, X ppm, X cfu/g). | Restructured to collect these data only on positive samples |
| **# of questions:**12 | **#of questions:** 5 | **Change:** -8 |

**Part VII- Contributing factors**

Completed for each contributing factor identified.

**Major changes:** This form was restructured to:

* Collect only collect data at the individual contributing factor level. In the revised NEARS, all outbreak level questions on this form were moved to Part I; only data on individual contributing factors are collected in Part VII.
* Delete questions that are redundant (old questions 4-6a).

These changes reduce data reporting burden.

|  |  |  |
| --- | --- | --- |
| **Original NEARS** | **Revised NEARS** | **Reason for change** |
| 1. Were any contributing factors identified in this outbreak?
 |  | Moved to Part I because it is an outbreak level question and fits better there (new Part I Q12) |
| 1. During the outbreak investigation, what activities were used to try to identify the contributing factors?
 |  | * Moved to Part I because it is an outbreak level question and fits better there (new Part I Q13)
* Revised for clarity
 |
| 1. Please rate the quality of communication between the food regulatory program and the communicable disease control program during this outbreak investigation.
 |  | Moved to Part I because it is an outbreak level question and fits better there (new Part I Q14) |
| 1. Were any contamination factors identified in this foodborne illness outbreak?

**4a.** How many contamination factors were identified in this outbreak?1. Were proliferation/amplification factors identified in this foodborne illness outbreak?

**5a.** How many proliferation/amplification factors were identified in this outbreak? 1. Were any survival factors identified in this foodborne illness outbreak?

**6a.** How many survival factors were identified in this outbreak?  | **--** | Deleted; this information can be obtained from new Part VII Q1-4  |
| ***Contributing Factor Description***Please answer #7-10 separately for each contributing factor identified in this outbreak. | **Part VII—Contributing factors:** Complete this section for each identified contributing factor in this outbreak.  | Revised to only collect contributing factor information at the contributing factor level. |
| 1. Which contributing factor was identified?
 | **1.** Which contributing factors were identified?  | Renumbered |
| **8**. In your judgment, was this the primary contributing factor for this outbreak? | **2.** In your judgment, was this the primary contributing factor for this outbreak? | Renumbered |
| **9**. Briefly explain why this is a contributing factor in this outbreak. | **3.** Briefly explain why this is a contributing factor in this outbreak. | Renumbered |
| **10**. When did this factor most likely occur? | **4.** When did this factor most likely occur? | Renumbered |
| **11**. What were the environmental antecedent(s) of this outbreak? |  | Move to Part I because it is an outbreak level question and fits better there (new Part I Q15) |
| Briefly describe the specific root causes that occurred in this outbreak and if they are ordered, the order of their occurrence. |  | Move to Part I because it is an outbreak level question and fits better there (new Part I Q16)Revised for clarity |
| **# of questions:**15 | **#of questions:** 4 | **Change:** -11 |

**Summary of question number changes**

|  |  |
| --- | --- |
|  | **# of questions** |
|  | **Original NEARS** | **Revised NEARS** | **Change** |
| Part I-General characterization of outbreak response (outbreak level) | 20 | 24 | +4 |
| Part II- Establishment description (establishment level) | 18 | 20 | +2 |
| Part III- Establishment manager interview (establishment level) | 62 | 58 | -4 |
| Part IV- Establishment observation (establishment level) | 51 | 50 | -1 |
| Part V- Suspected/Confirmed food (Va: food level; Vb: ingredient level) | 25 | 19 | -6 |
| Part VI- Sampling (sample level) | 12 | 5 | -7 |
| Part VII- Contributing factors (contributing factor level) | 15 | 4 | -11 |
| **Total** | **203** | **180** | **-23** |