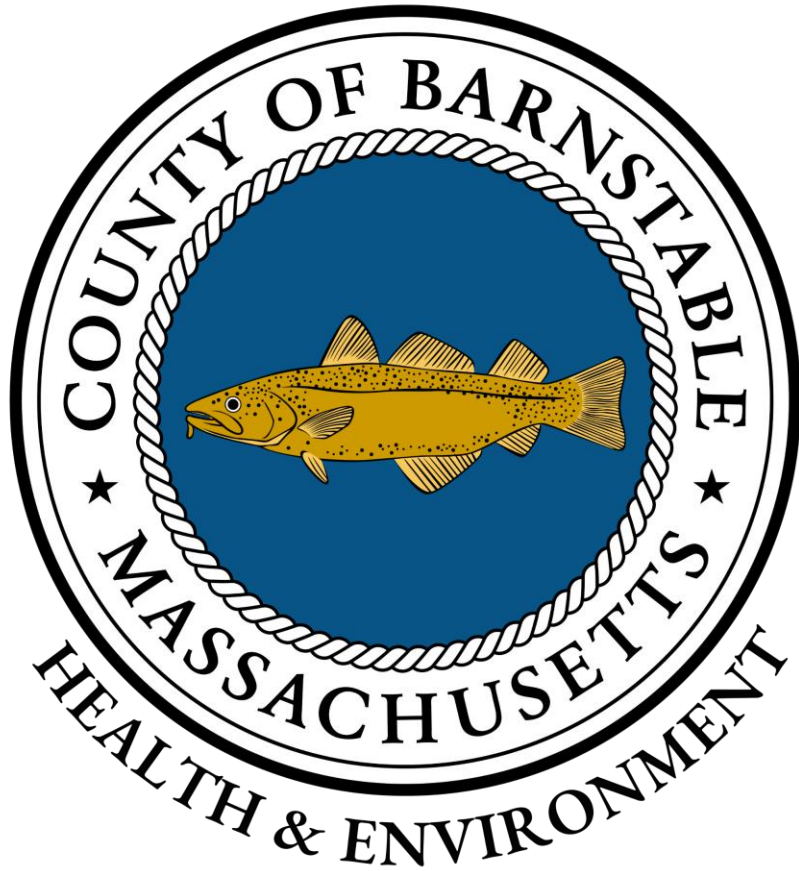




Serving Up Solutions

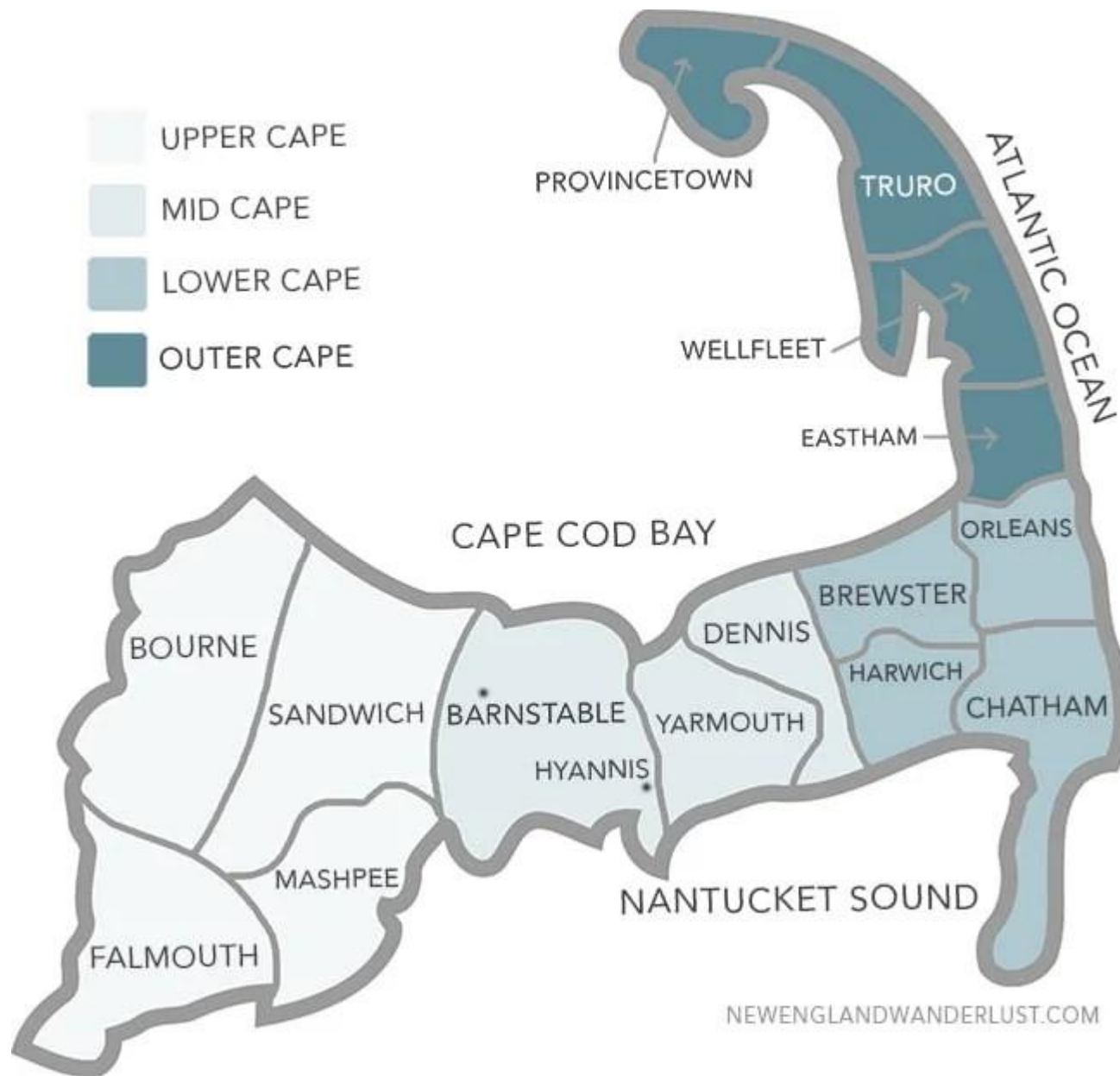
CAPE COD'S REGIONAL RECIPE FOR
FOODBORNE DISEASE CONTROL

Watch a recording of this presentation by clicking [here](#).

Hello! I am Lea Hamner



- **Contract epidemiologist** for:
 - Barnstable County Department of Health & Environment
 - Inter-Island Public Health Excellence Collaborative
- 10 years in local public health, first in WA, now in MA
- Specialty in infectious disease epidemiology, investigation, control, and prevention

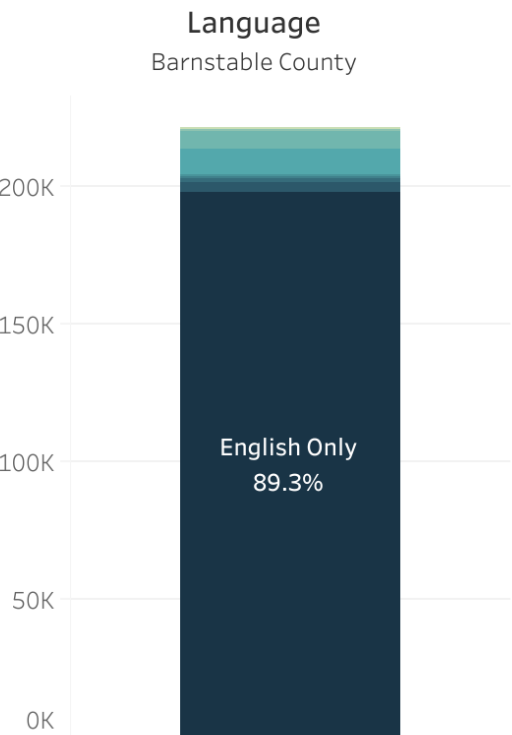
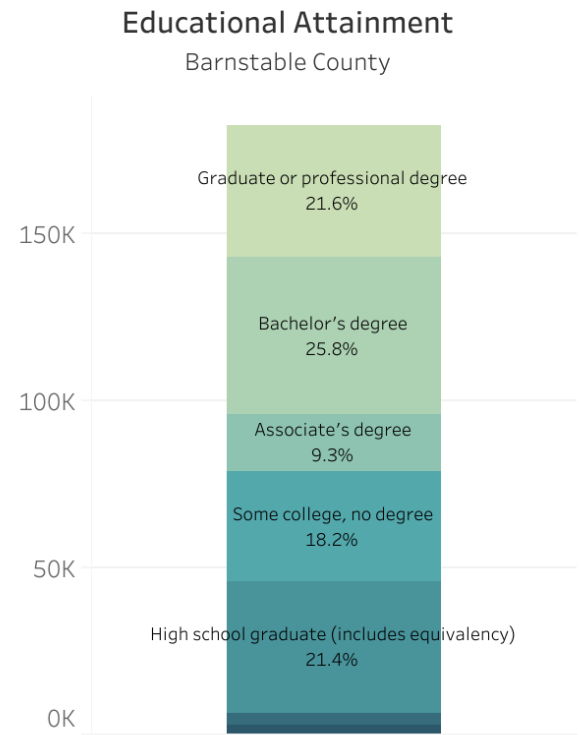
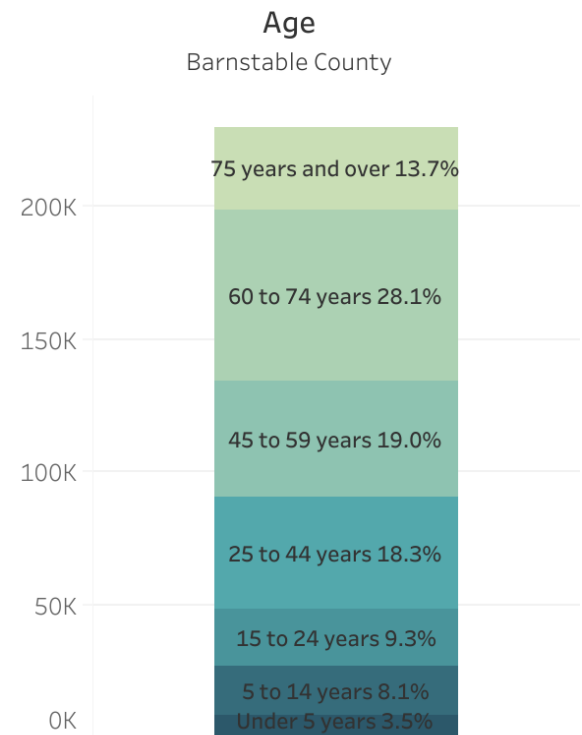
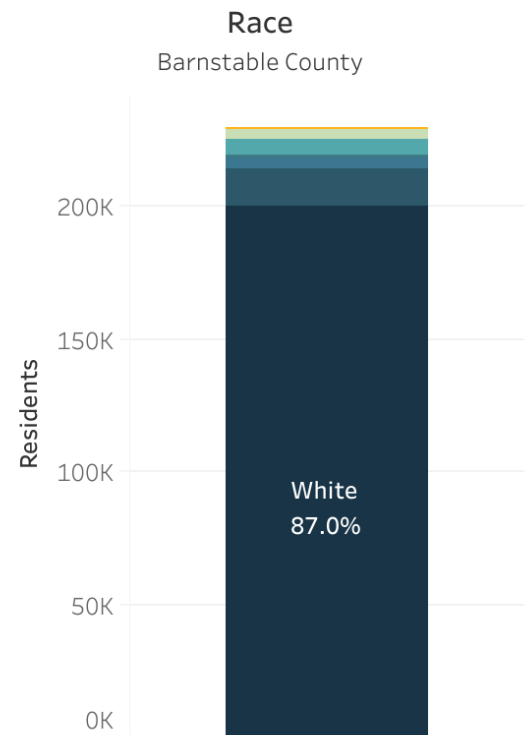
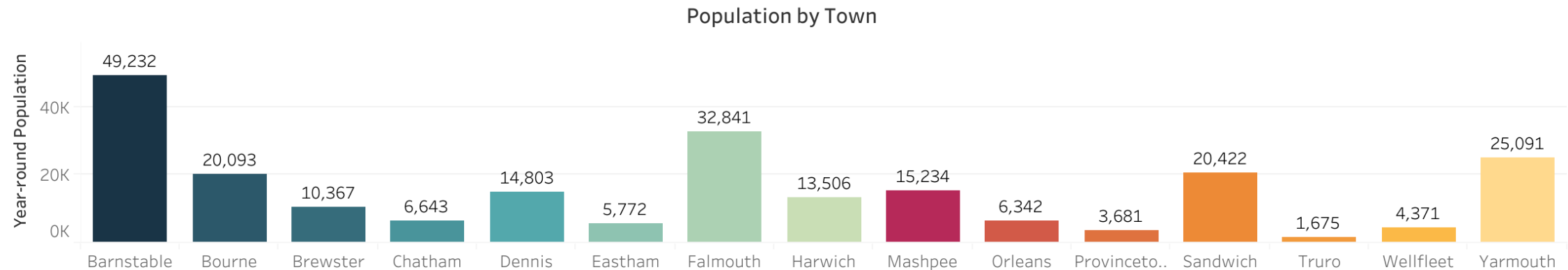


Let me tell you about Cape Cod:

- 15 towns
- 1 county (Barnstable County)
- 2 Bridges connecting the peninsula to the mainland
- Main ferry ports to Martha's Vineyard, Nantucket, & Elizabeth Islands

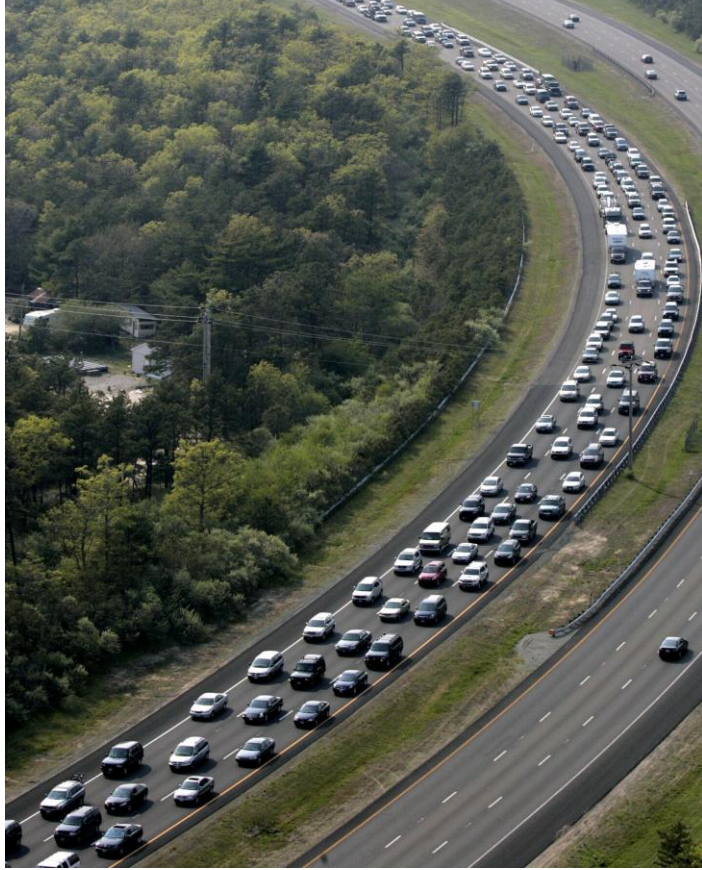
Year-Round Population ~ 230,000 people

Select Geography
Barnstable County



Data Source: American Community Survey, 2023 5-Year Estimates. Educational attainment for population 25 years and older; language for population 5 years and older.

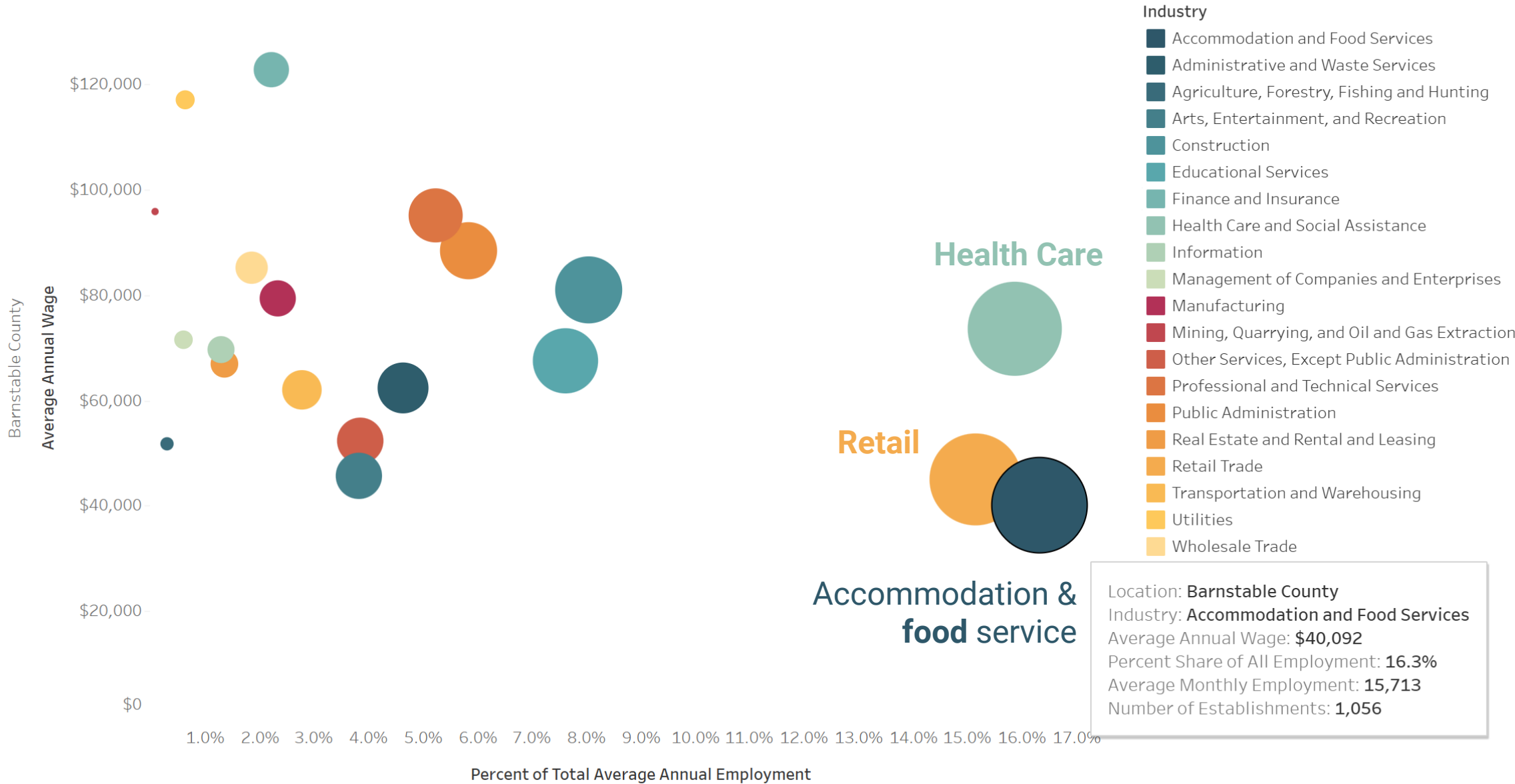




Employment & Wages by Industry

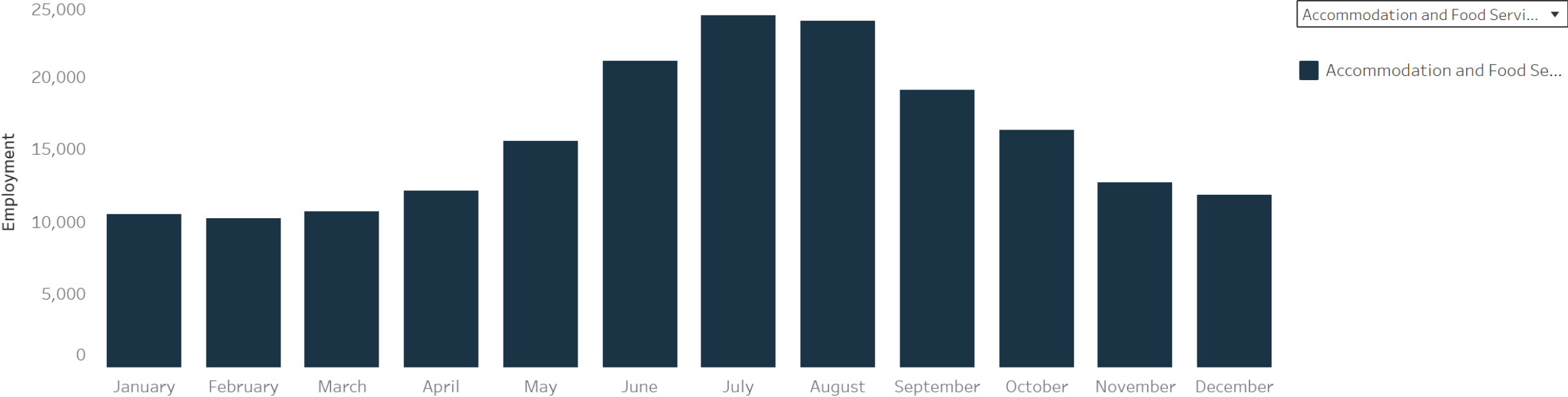
Select Geography

Barnstable County



Data Source: Massachusetts Department of Economic Research, Labor Market Information ES-202 2024 Annual Data, not seasonally adjusted

Monthly Employment by Industry | Barnstable County (2024)





NORTH
JUNG

"ANY OTHER INJURIES BESIDES WHIPLASH?"

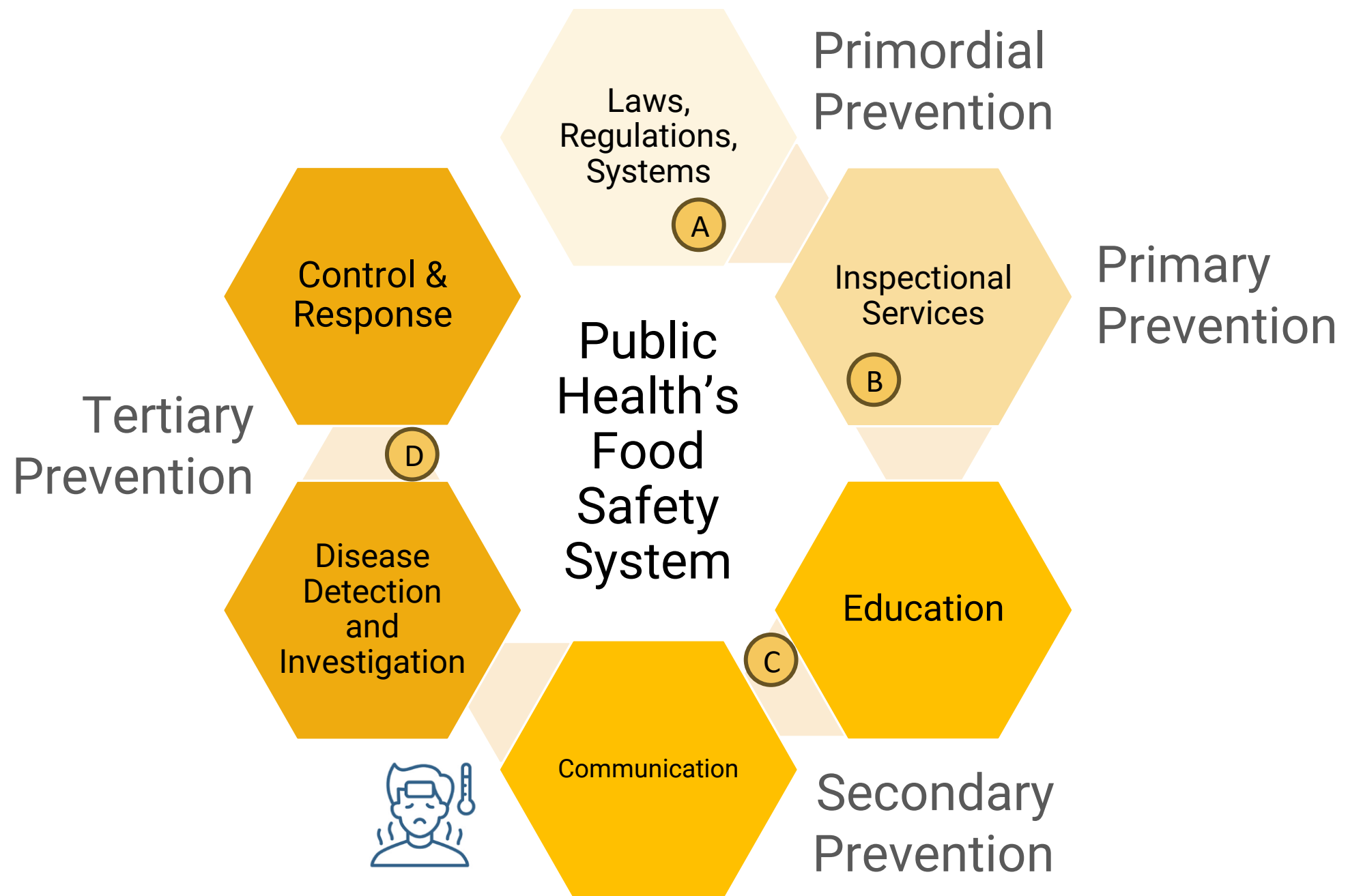
How do we survive the
whiplash?

Together.

Public Health is a Team Sport



Food & Teamwork
Two of my favorite things





Strategy A: Build Better Infrastructure

Policies, systems, and capacities aimed at preventing disease altogether for whole population

The Foundation

Barnstable County Government first established in 1685, then recodified as a modern regional government in 1988

Barnstable County transcends municipal boundaries to address the vital needs of its residents across the 15 towns on Cape Cod. We provide solutions to regional challenges, deliver exceptional government services, and ensure the **health, safety, economic strength, and environmental protection** of our communities.

Towns still have home-rule authority and autonomous Boards of Health.

The County has no regulatory authority unless requested on behalf of the town.

The Foundation - for food & water safety

Barnstable County Department of Health & Environment was founded in 1926, making it one of the first regional public health departments in the state.

Environmental Health

- Landfill monitoring
- Summer Public Health Assistants

Community Services

- Public Health Nursing
- Vaccine Clinic
- Health education

Emergency Preparedness

- Multi-Agency Coordination Center
- Medical Reserve Corps
- Cape & Island Health Agent Coalition

Communications

- Press
- Website
- Social media
- CARE Line

Water & Wastewater

- Water Quality Lab
- Alternative Septic System Testing Center
- Bathing beach water quality & cyanobacteria monitoring



The Foundation - for regional collaboration



Cape & Islands
Health Agents Coalition



-
- Created in 2002 as part of Public Health Emergency Preparedness Grants
 - Membership: 23 municipalities, 2 tribes, 3 counties, Medical Reserve Corps, healthcare partners
 - Meet monthly for:
 - PHEP training, drilling, full-scale exercises
 - Situational awareness, regional coordination and problem solving
 - Workforce development and continuing education credits

Pre-2020 Regional Food Safety Staffing

Position	FTE	Funding	Inspections	MAVEN	Nursing & Vaccine	Education & Outreach
Seasonal Public Health Assistant	3 (summer)	General Fund	X			X
Public Health Nurse	2.5	General Fund		X	X	X
Communications Specialist	1	General Fund				X
Food Safety Specialist	1	General Fund				X

The Foundation - for regional collaboration

Blueprint for Public Health Excellence

Recommendations for Improved
Effectiveness and Efficiency of
Local Public Health Protections

REPORT OF THE SPECIAL COMMISSION ON
LOCAL AND REGIONAL PUBLIC HEALTH

EXECUTIVE SUMMARY

JUNE 2019

The Blueprint set Massachusetts into motion towards **regional collaboration** to build **better public health infrastructure**

Shared Services aim to increase efficiency, consistency, and capacity across municipalities



POLICIES

- Blueprint for Public Health Excellence
- State Action for Public Health Excellence (SAPHE)
- SAPHE 2.0



FRAMEWORKS

- Performance Standards
- Foundational Public Health Services
- Training Hubs



FUNDS

- Public Health Excellence (PHE)
- Case Investigation & Contact Tracing (CICT)
- American Rescue & Protection Act (ARPA)
- Training Hub



**How does
this relate
to food?**

Performance Standards for Local Public Health

Food Protection

Learn more about this topic on Bureau of Climate and Environmental Health - [Food Protection Program](#).

[105 CMR 500](#) →

Enforce 105 CMR 500: Good Manufacturing Practices for Food

[105 CMR 590](#) →

Enforce State Sanitary Code Chapter X: Minimum Sanitation Standards for Food Establishments

[M.G.L. c. 94, s. 10A](#) →

Permit facilities that are manufacturing or bottling carbonated non-alcoholic beverages or water, both carbonated and noncarbonated, for human consumption

[M.G.L. c. 94, s.33*](#) →

Appoint an inspector of milk in cities

[M.G.L. c. 94, s. 40-42*](#) →

Permit anyone who wishes to sell milk in cities or towns where an inspector of milk is appointed

[M.G.L. c. 94, s. 48A](#) →

License and inspect establishments for the pasteurization of milk

[M.G.L. c. 94, s. 65H](#) →

License all frozen dessert manufacturers

[M.G.L. c. 94, s. 67](#) →

Inspect all cold storage or refrigerating warehouses

[M.G.L. c. 94, s.89*](#) →

Issue a license for the breaking and canning of eggs in communities over 5,000 residents

[M.G.L. c. 94, s.186-195](#) →

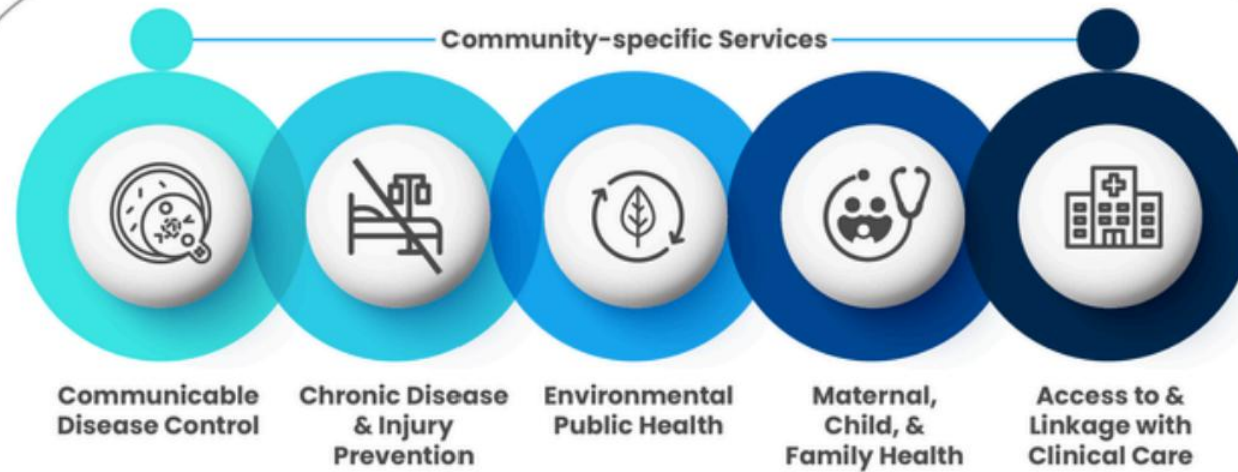
Enforce statutes and regulations relative to the adulteration and misbranding of food [Please note: referenced citations should be taken as a set to understand full intent]

[M.G.L. c. 130, s. 80-81](#) →

Enforce prohibition of importation of shellfish which have not been certified by a United States or foreign shellfish regulating agency

Foundational Public Health Services

Foundational Areas



Foundational Capabilities

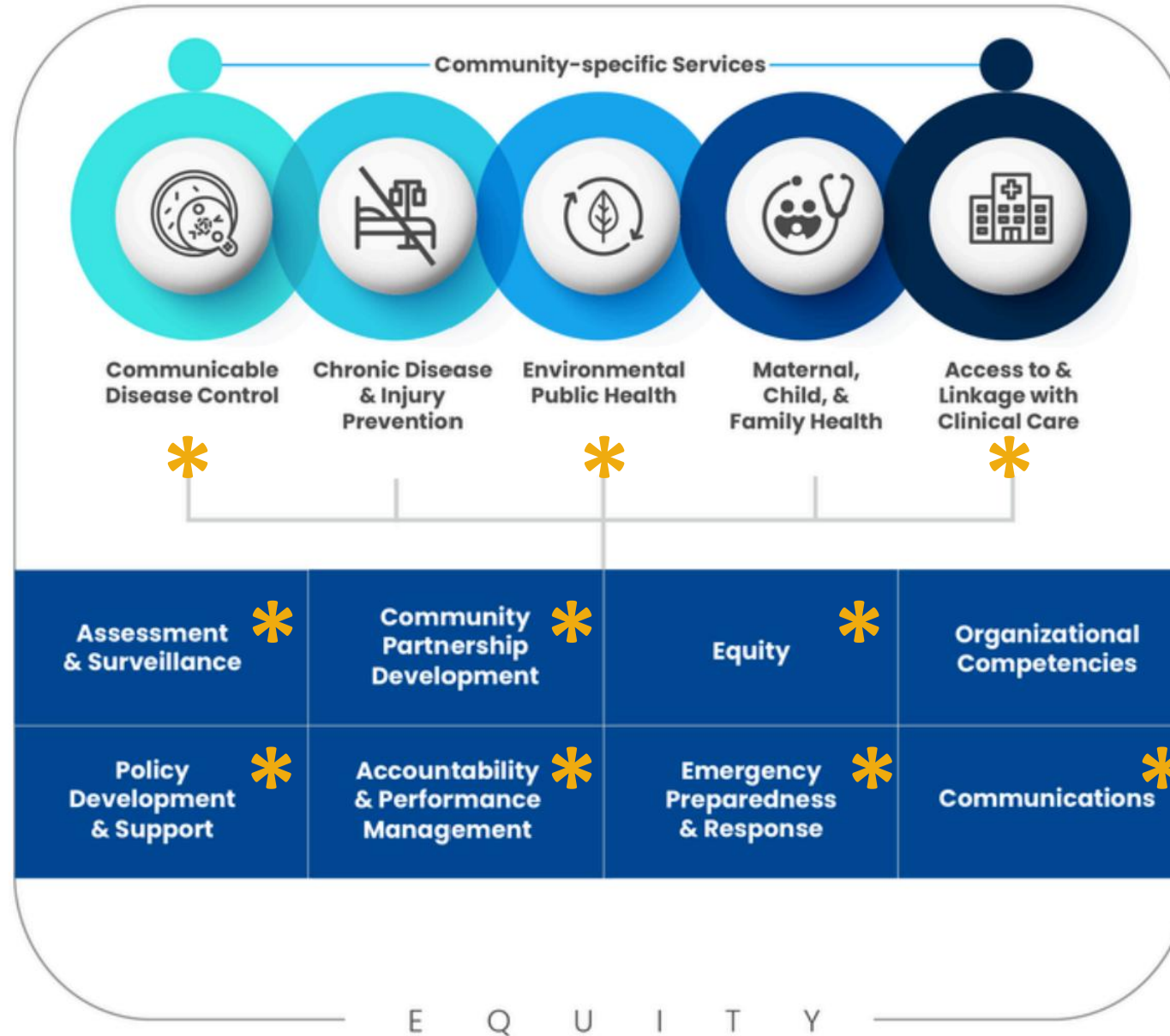
Assessment & Surveillance	Community Partnership Development	Equity	Organizational Competencies
Policy Development & Support	Accountability & Performance Management	Emergency Preparedness & Response	Communications

E Q U I T Y

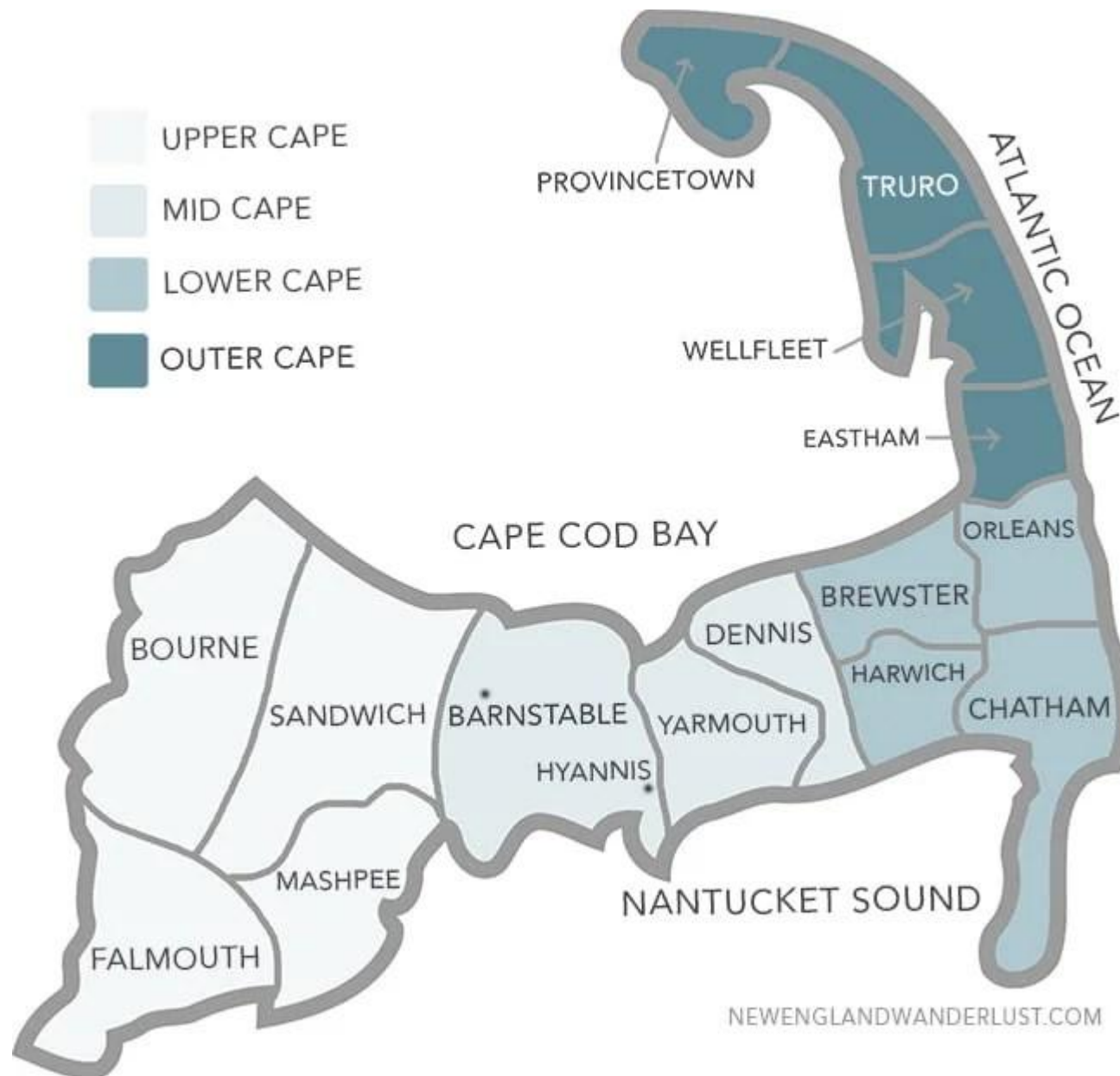
Foundational Public Health Services

Foundational
Areas

Foundational
Capabilities



An **integrated public health food safety system** touches most FPHS areas and domains!



New Ground: Cape-wide Systems Building

The Blueprint and **Shared Services** have allowed us to do **even more**.



POLICIES

- Blueprint for Public Health Excellence
- State Action for Public Health Excellence (SAPHE)
- SAPHE 2.0



FRAMEWORKS

- Performance Standards
- Foundational Public Health Services
- Training Hubs



FUNDS

- Public Health Excellence (PHE)
- Case Investigation & Contact Tracing (CICT)
- American Rescue & Protection Act (ARPA)
- Training Hub

Growing Infrastructure, Growing Careers

	Position	FTE	Funding	Inspections	MAVEN	Nursing & Vaccine	Education & Outreach
	Seasonal Public Health Assistant	3 (summer)	General Fund	X			X
	Public Health Nurse	2.5	General Fund		X	X	X
	Communications Specialist	1	General Fund				X
	Food Safety Specialist	1	General Fund				X
*	Shared Services Coordinator	1	PHE & Training Hub	X	X		X
*	Contracted Regional Inspector	0.25	PHE	X			X
*	Health Education Specialist	1	PHE		X		X
*	Care Resource Coordinators	2	CICT		X		X
*	Contract Epidemiologist	0.6	ARPA & CICT		X		X
*	Food Inspection Trainers	Contract Services	Training Hub	X			X

Growing Infrastructure, Growing Careers

We're Hiring! Seasonal Job Openings with Barnstable County Department of Health and Environment

Published on: March 12, 2024



Barnstable County Department of Health & Environment (BCDHE) is seeking **seasonal full-time** staff to fill the following positions:

- [Seasonal Beach Sampler/Analyst](#) (\$21/hr plus mileage)
- [Seasonal Environmental Laboratory Assistant](#) (\$21/hr)
- [Seasonal Public Health Assistant](#) (\$21/hr plus mileage)

Applicants must be available to work the entire duration of the summer season from 5/28/2024 until 8/30/2024, no exceptions.

Each summer, BCDHE hires a team of seasonal staff to fulfill the busy demands of the summer season here on Cape Cod. As our population doubles with part-time residents and visitors, so do the responsibilities of our local municipalities in keeping our communities safe and informed.

Barnstable County Department of Health and Environment functions to serve the 15 towns of Cape Cod. This includes providing a diverse array of regional programs and services that benefit the entire region, such as water quality monitoring and inspectional services. We want YOU to become part of our team!

de Beaumont

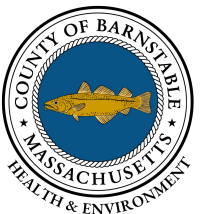
40 Under 40 in Public Health

Katie O'Neill

Public Health Shared Services
Program Manager

Barnstable County

Class of 2025



**Katie
started
in 2009!**

Strategy B: Inspectional Services

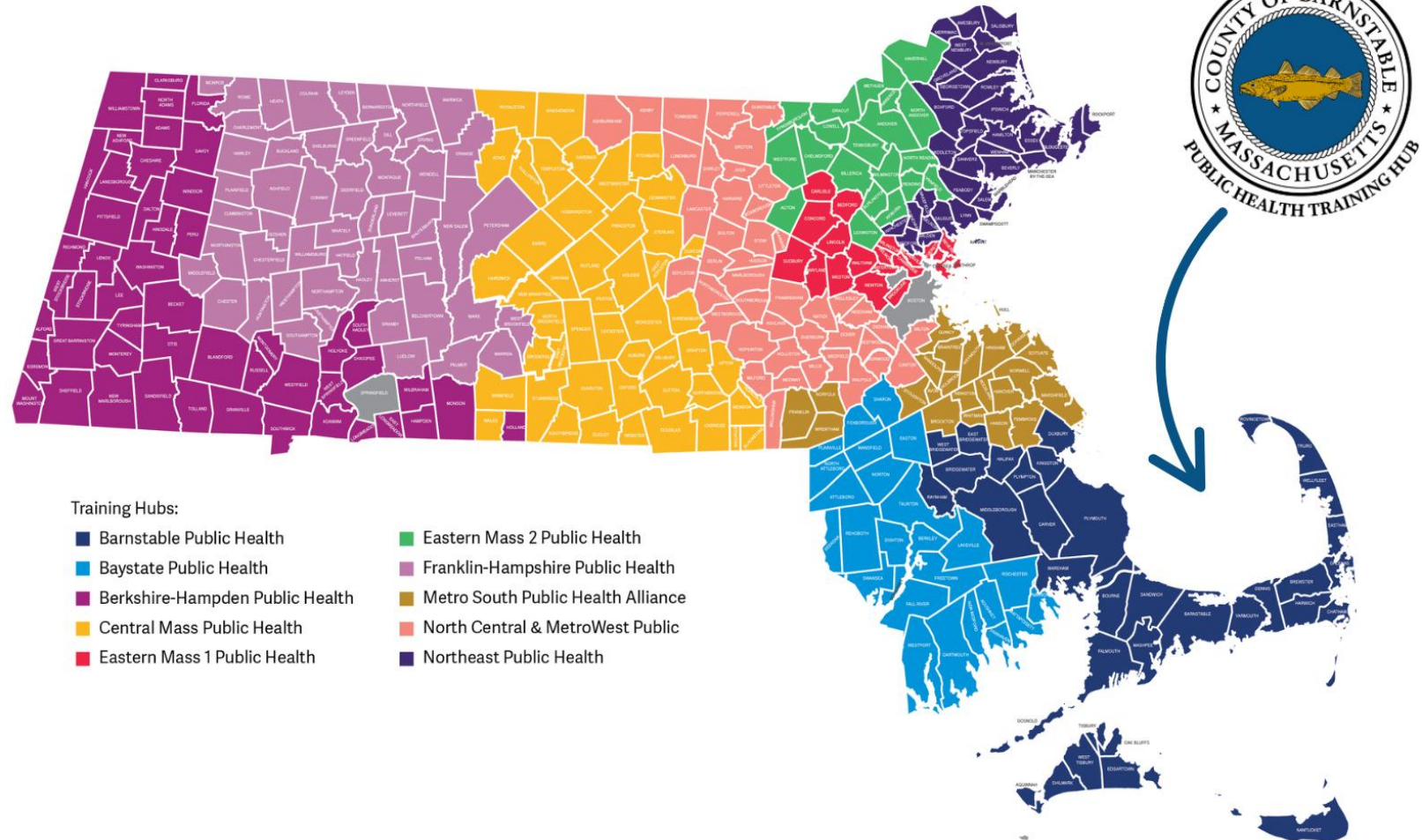
Ensure science-backed safety standards are implemented faithfully to protect consumers, employees, and businesses.



Training Hub & Workforce Development

35 Municipalities

Aquinnah
Barnstable
Bourne
Brewster
Bridgewater
Carver
Chatham
Chilmark
Dennis
Duxbury
East Bridgewater
Eastham
Edgartown
Falmouth
Gosnold
Halifax
Harwich
Kingston
Mashpee
Middleborough
Nantucket
Oak Bluffs
Orleans
Plymouth
Plympton
Provincetown
Raynham
Sandwich
Tisbury
Truro
Wareham
Wellfleet
West Bridgewater
West Tisbury
Yarmouth



Training Hub & Workforce Development

Focus areas:

- Food safety and foodborne illness response
- Emergency preparedness
- Continuing education and workforce development

Food Safety Goals of Training Hub:

- Standardize tools for inspections and reporting
- Ensure all staff are trained to consistent standards
- Practice field skills with food safety investigation workshops and side-by-side inspections with trainers

Regional Annual Mobile Food Inspection Program

This PHE program allows for one coordinated inspection to satisfy multiple town permits.

In 2025, **23** mobile food inspections conducted across **7** towns and looking to expand!

A Win for Businesses & Local Health Departments

“It’s one stop, one inspection, and you’re done — everyone wins.”

— Russ Woollacott, Veterans Lunch Box



Donna Miorandi, R.S. Contracted Health Inspector
conducting a food truck inspection

Learn more about the program [here](#).

Summer Public Health Assistants

The Workforce of Tomorrow Tackles the Summer Surge

Formerly known as the **Summer Sanitarians**, these young professionals conduct inspections for:

- Food establishments
- Housing
- Swimming pools

across Cape Cod!

In **2025**, PHAs conducted **~900** inspections of food establishments, housing, and swimming pools



From left to right: 2025 Seasonal Public Health Assistants Heather Holbrook, Jason Adamsky, and Orla Delaney at a Tick Talk Pop-Up event at Wiley Park in Eastham.



Strategy C: Educate & Inform

Prevent foodborne illnesses before they occur. This includes promoting healthy behaviors such as proper food handling, cooking to safe temperatures, and avoiding cross-contamination.



Partner Highlight: Barnstable County Cooperative Extension

Meet **Kim Concra**, full-time Community Nutrition-Food Safety Specialist

- ServSafe and Volunteer Food Safety
- Shellfish Safety
- SNAP education
- Home Canning Safety
- Starting A Food Business: with Cape Development Partnership (CDP) and Culinary Incubator
- Nutrition Education - always can tie in food safety!
- Holiday and Emergency Food Safety

How do we double down on Kim's impact,
using **public health surveillance data** to
inform strategies?

A Tool for Public Health Planning

Evidence-Informed

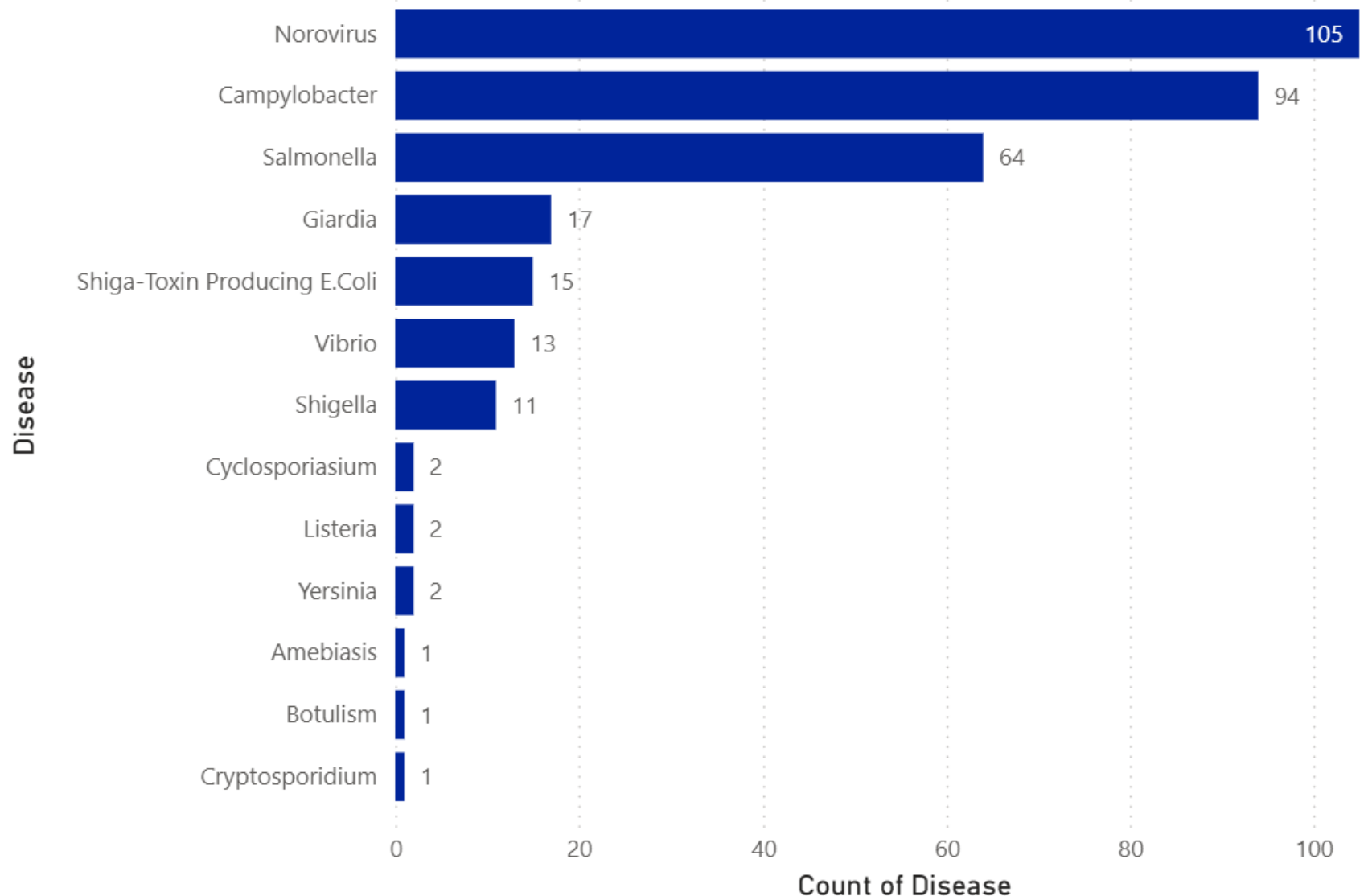
Knowing the WHAT and WHEN alone can help us plan.

First looked at our **disease burden**.

What are the biggest drivers of illness?

When do they happen?

Barnstable County, 2024 MAVEN Data



A Tool for Public Health Planning

Evidence-Informed

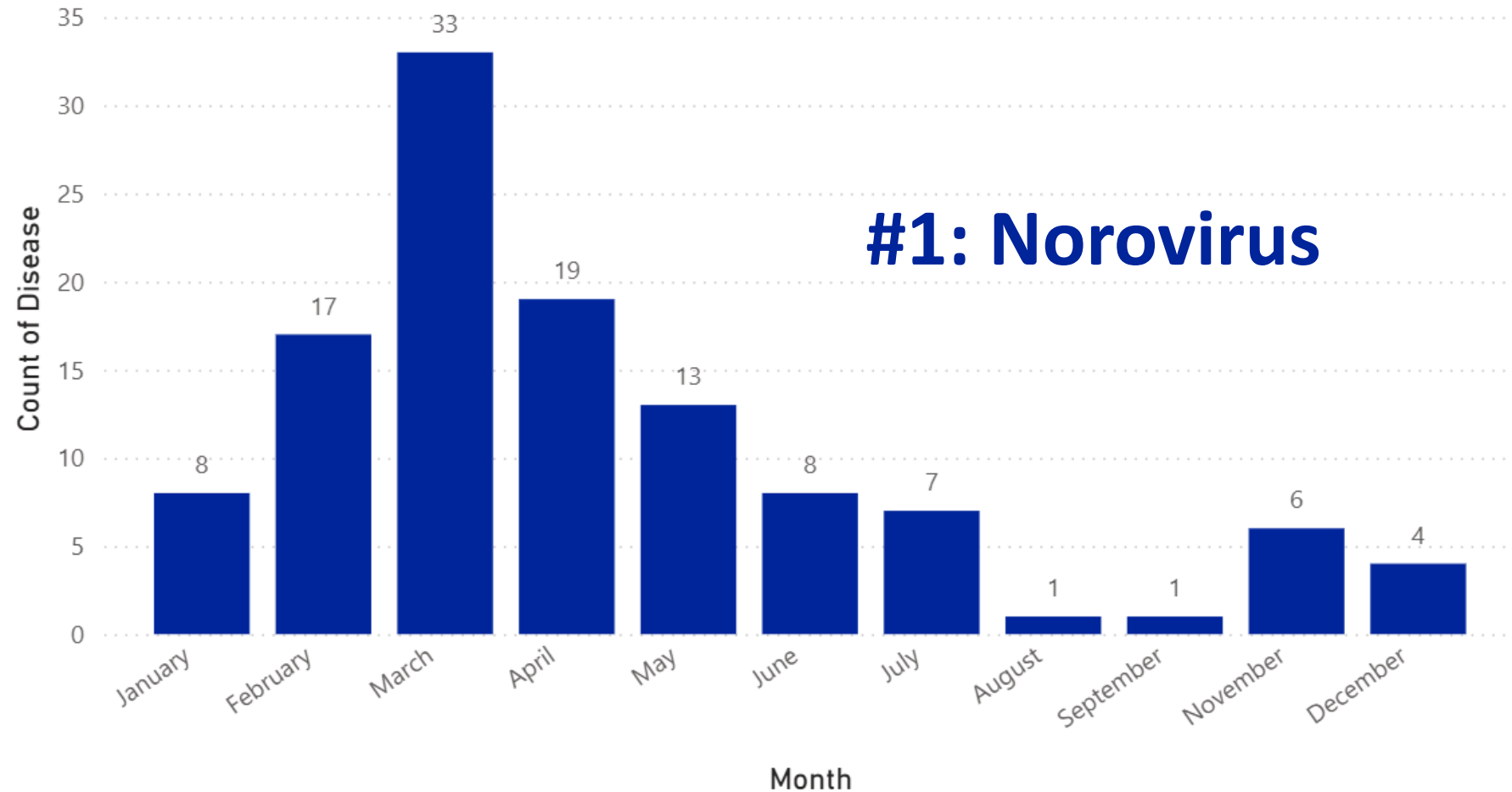
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A Tool for Public Health Planning

Evidence-Informed

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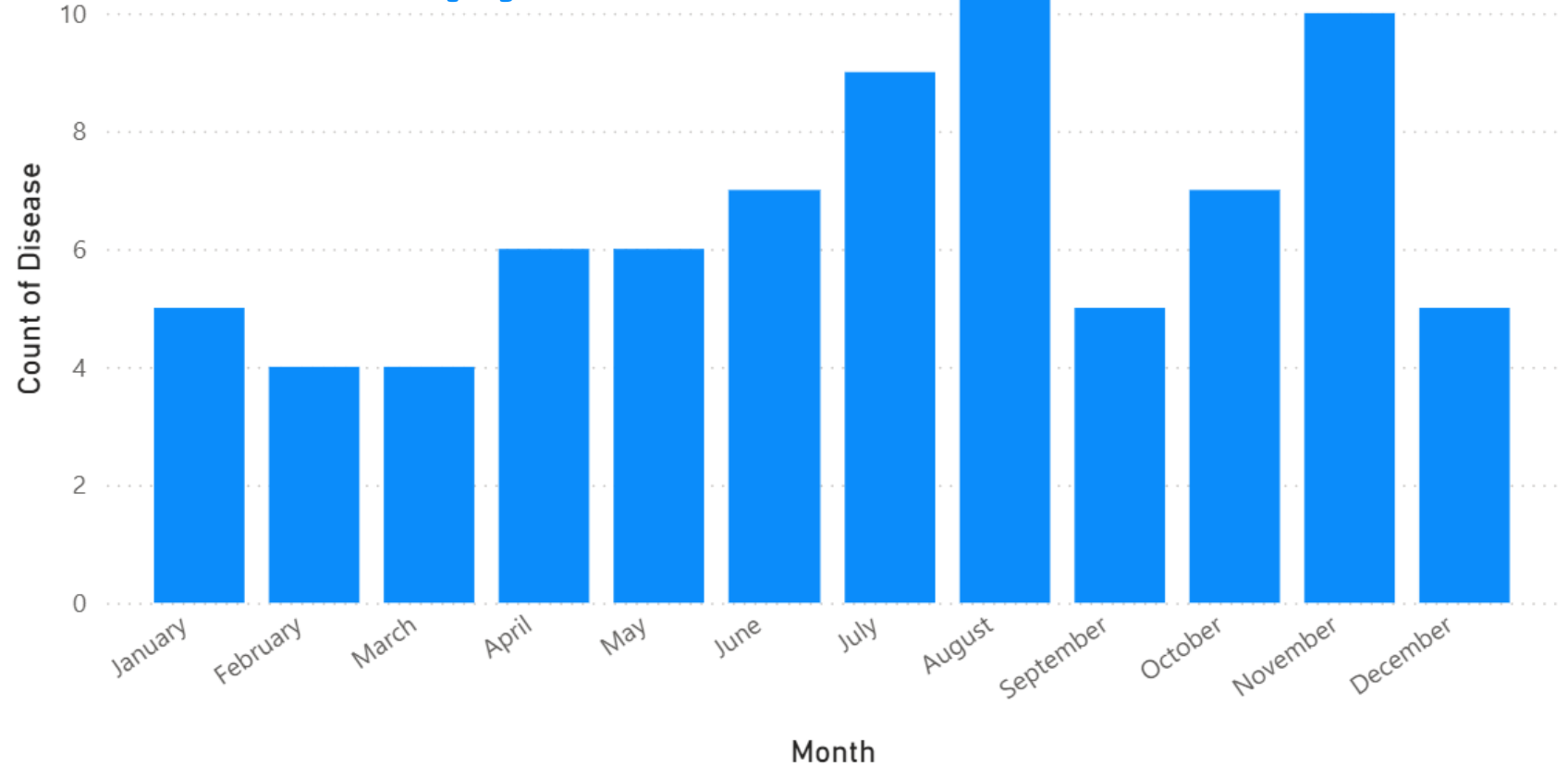
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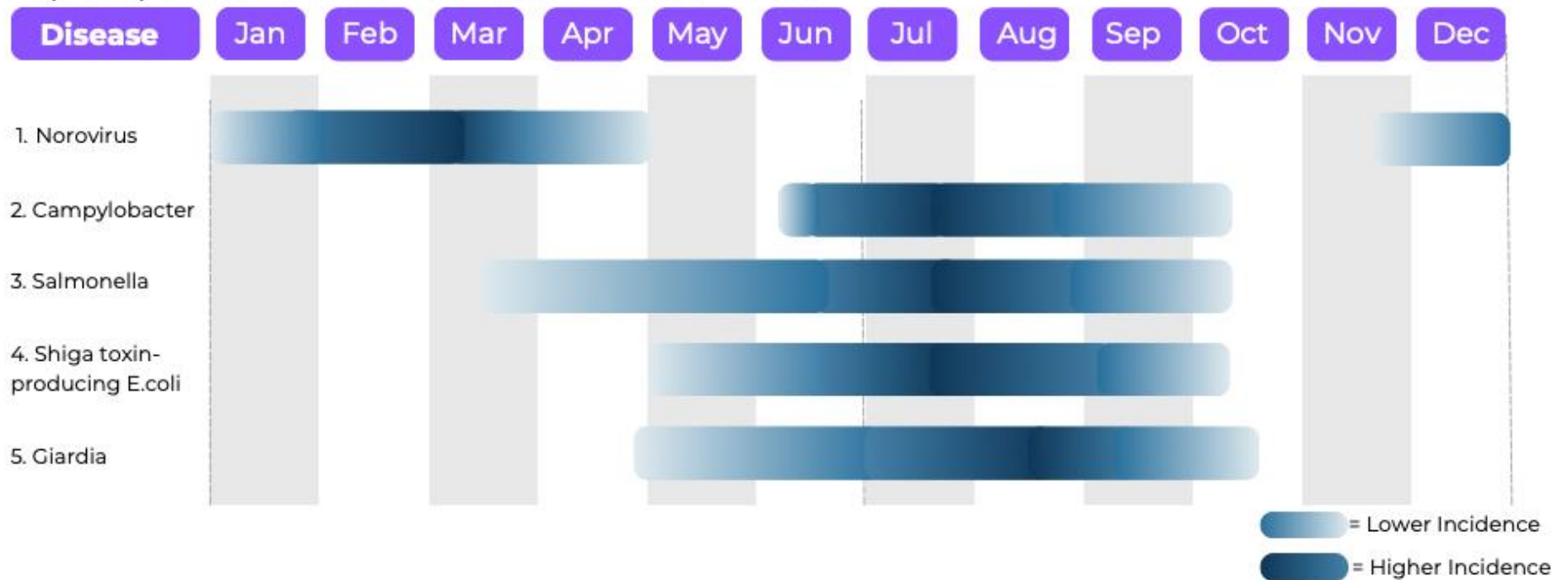
Barnstable County, 2024 MAVEN Data

#2: Campylobacter



There is a **seasonality** to foodborne illnesses.

- Staffing
- Communications
- Outreach
- Education
- Partners



A Tool for Public Health Planning

This project was part of Stephanie Barth's MPH Practicum

Internship! Student support has helped us launch meaningful projects putting data to action.



Foodborne Illness Year Plan 2025

Key Communication Dates:

January 23.....Maternal Health Awareness Day
February 9.....Superbowl parties
April 7-13.....National Public Health Week
April 20.....Easter
May 5.....World Hand Hygiene Day
May 14-28.....Nantucket Wine & Food Festival
May 26.....Memorial Day
May 28-June 3...Wellfleet Restaurant Week
June 19.....Juneteenth
July 4.....Independence Day
July 11-12.....Osterville Greek Festival
July 28.....World Hepatitis Day
August 16.....Cape Cod Food Truck & Craft Beer Festival

September.....Food Safety Education Month
September.....Baby Safety Month
September 1.....Labor Day
October 4.....SandwichFest
October 4.....Mashpee Oktoberfest
October 13.....Indigenous Peoples Day
October 15.....Global Hand Washing Day
October 18-19.....Wellfleet Oyster Fest
October 19-25.....National Health Education Week
November 11.....Veterans Day
November 27.....Thanksgiving
December 7-13...National Handwashing Awareness Week
December 15.....Hanukkah Begins
December 25.....Christmas



Plug-and-Play Communications Toolkit

We don't need to reinvent the wheel or fancy branding packages.

We just need good tools at the right time.

Our solution: An editable, shareable Word document mapped onto before the risk and during the risk with:

- Key dates to be aware of
- Sources, handouts, links
- Key messages

This way **busy departments can still engage in proactive messaging.**

May

Date(s)	Event	Data/Sources	Key Messages
May 5	World Hand Hygiene Day	• Handwashing for cooking	Control foodborne illness <u>transfer</u> by knowing <u>the HOW</u> and <u>WHEN</u> to wash your hands.
May 14-28	Nantucket Wine & Food Festival		• Food Truck Safety
May 26	Memorial Day	• Food Safety with Potlucks & Community Dinners • Safe Seafood • Food Safety with Hiking & Camping	Safe food handling is important, especially when groups of people are <u>fed</u> at community events. Temperature control is a critical issue for volunteer food handlers.
May	Vibrio Season Begins	• Vibrio & Oysters - CDC • Vibrio & Oysters- FoodSafety.gov	Most vibrio infections occur in the warmer summer months. Hot sauce, alcohol, or lemon juice does not kill vibrio. Only properly <u>cooking</u> oysters does.

Strategy D: Identify, Investigate, Intervene

Once illness is in the community, prevent the spread of disease through disease control strategies.



THIS IS DISEASE INTERVENTION

Disease intervention professionals are **essential members of the national public health workforce** and **reduce community spread of infectious diseases** through contact tracing, partner services, health education, and facilitating access to health care.

In Massachusetts,

- Public health nurses
- Epidemiologists
- Community health workers
- Contact tracers
- Health directors

= Disease intervention professionals



Core Job Functions of Disease Intervention Professionals

- Person-centered interviews
- Collection of enhanced surveillance and community assessment data
- Contact tracing
- Field specimen collection
- Field investigation in outbreaks
- Emergency preparedness
- Community outreach
- Collaboration with medical providers



**NEW Certification developed by
ASPPH, CDC, and NBPHE**

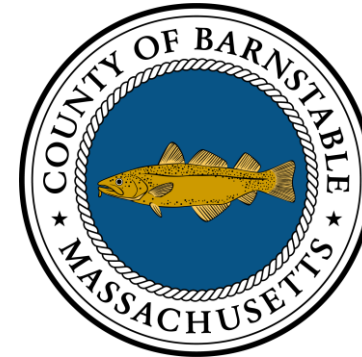
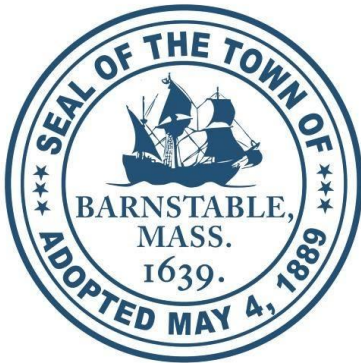
Check out: **[ThisIsDiseaseIntervention.org](https://thisisdiseaseintervention.org)**

Disease Intervention on Cape Cod



VISITING NURSE
ASSOCIATION
OF CAPE COD

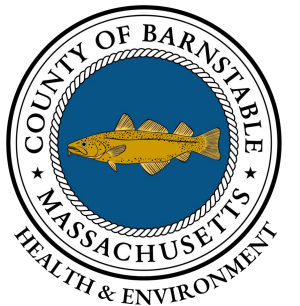
Member
Cape Cod Healthcare



Barnstable County Department of Health & Environment as the Host Agency for

1. CAPE Public Health Excellence Collaborative
2. Barnstable County Training Hub
3. Case Investigation & Contact Tracing Grant

In early 2024, epidemiologist pitched and developed a Foodborne Illness Investigation program.
Program launched in April 2024.



Program Building for Disease Intervention

In early 2024, epidemiologist pitched and developed a Foodborne Illness Investigation program. Program launched in April 2024. Program components include:

Investigation Protocols

- Co-created full investigation protocol
- Case assignment
- Prioritization table
- Medical records fax requests

Case Management Workflow

Shared Excel spreadsheet with process measures not captured in MAVEN

Pathogen-Specific Work Restriction Letters

Template letters with details about “food handler” designation and return to work criteria

Training Program

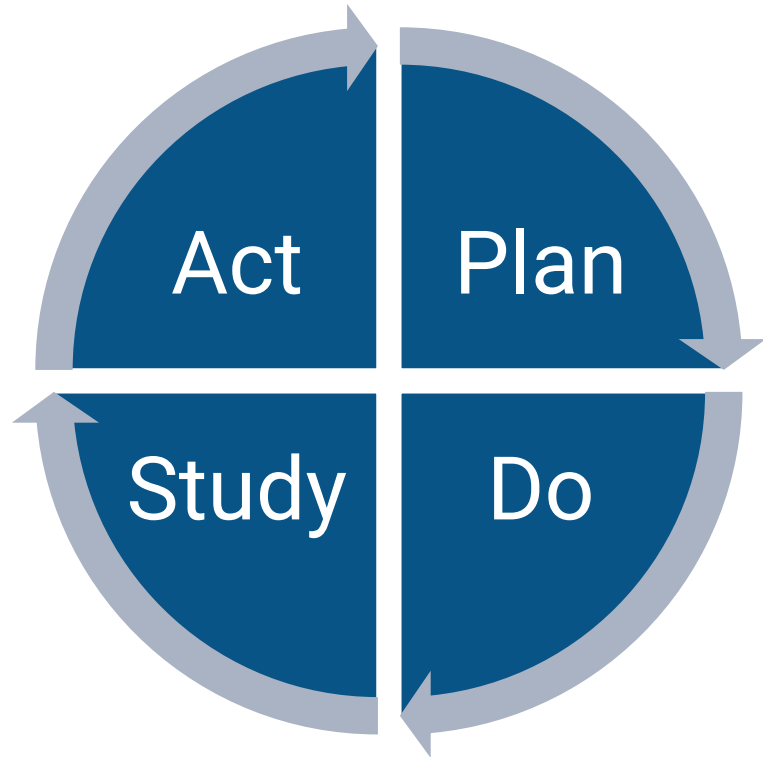
- Shadowing
- Recorded resources
- AI practice tools (CaseBot)
- Centers of Excellence
- Epidemiology of pathogens

Weekly Team Huddle

Case review to implement continuous performance improvement & **cultivate culture of learning & teamwork**



Goal is to Cultivate a *Culture of Learning & Teamwork*

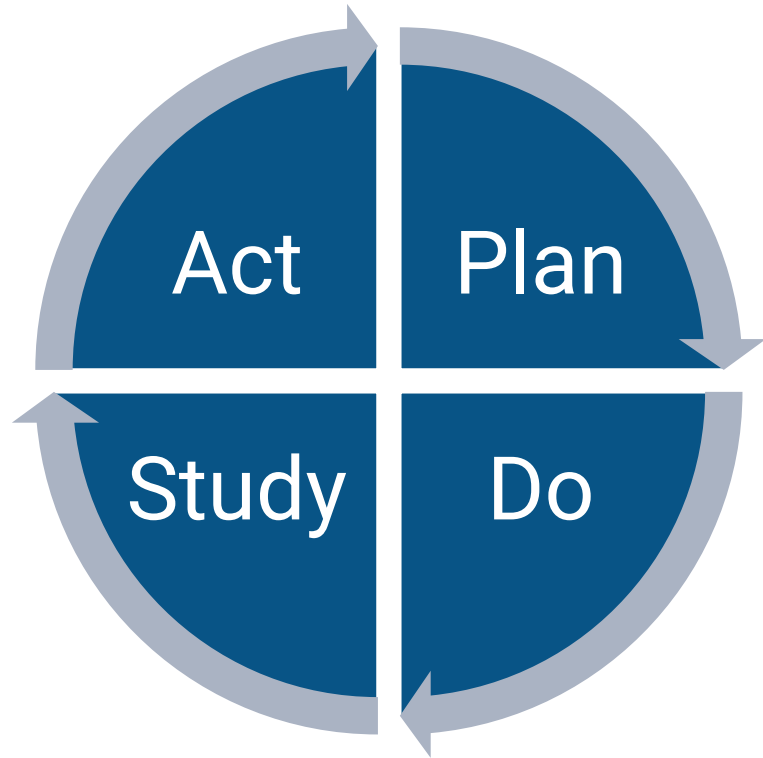


Disease investigation is as much **science** as it is **judgement calls** and **skilled communication**.

Any interview can go any which way.



Goal is to Cultivate a *Culture of Learning & Teamwork*

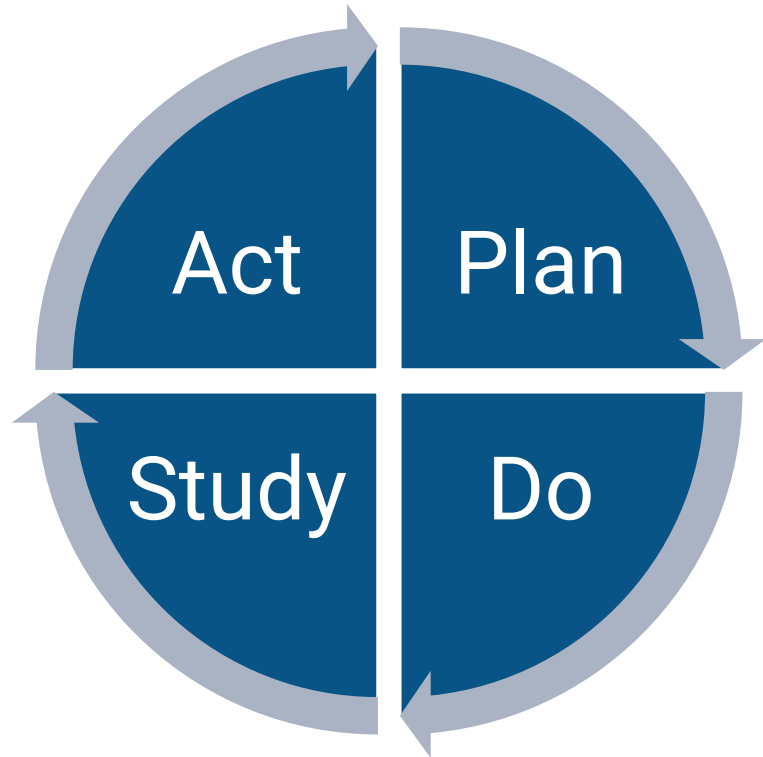


Beneficial in “normal” routine times.

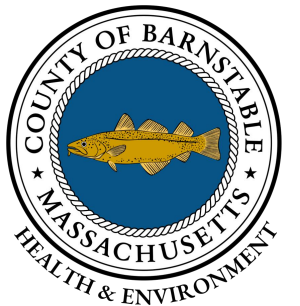
Critical in peak season or outbreak times.



Goal is to Cultivate a *Culture of Learning & Teamwork*



Used weekly team huddles to also identify areas where we could improve and try new things like...



A Foodborne Illness Interview Protocol

Contents

Notifiable Foodborne/Waterborne Diseases for Public Health Investigation	1
Introduction	2
The Goals of Disease Investigation	2
To Accomplish These Goals, Investigators Need to be:	2
Getting Trained Up	4
Know Your Resources & Learn About the Diseases	4
Practice Your Interview	7
Case Intake	10
Working a Case: Before the Interview	12
Review all relevant information in MAVEN	13
Revisit Source Material to Reestablish Pertinent Information	13
Request the Medical Record	14
Working a Case: The Interview	15
Protocol for Contact Attempts	16
Anatomy of an Interview	16
Introduction	16
After the Interview: Data Entry	26
Patient Education Follow Up	26
After the Interview: Handing Off Information for Inspection, Assurance, or Enforcement	27
DPH Food Protection Program Contacts	28
Town Health Department Contacts for URGENT notifications	28
Resources for reference	30

Co-created as a team at start-up to refine process.

Serves as onboarding and training tool.

Establishes a **good foundation**, then staff begin to find their most effective process.

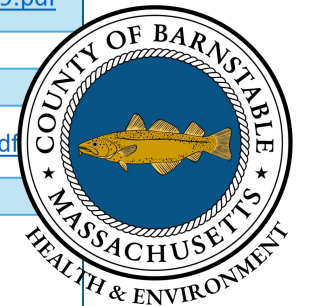


A Prioritization Table

Notifiable Disease	Case Prioritization (Immediate diseases always prioritized)	Health Care Provider Contact	Guide to Surveillance Reporting and Control	Case Report Forms (CRFs don't have new demographics. Make sure to ask those from MAVEN)
Amebiasis	Routine.	Call HCP first	Link	No PDF, use MAVEN
Botulism	Immediate	Call HCP first	Link	No PDF, use MAVEN
Campylobacter	Priority. Working age	Call Pt first, HCP if LTFU	Link	MDPH SAL/CAMPY crf final 05 19.pdf
Cryptosporidiosis	Routine.		Link	MDPH Enteric crf final 04 18.pdf
Cyclosporiasis	Immediate (summer)		Link	Use MAVEN, more Qs depending on answers
Giardiasis	Routine. Working age		Link	
Hemolytic Uremic Syndrome	Immediate	Call HCP first	(See Shiga Toxin)	MDPH HUS crf 10 06.pdf
Hepatitis A	Immediate. Working age	Call HCP first Might not be a	Link	MDPH HepA crf final 10 06.pdf
Listeriosis	Immediate		Link	CDC report form (Saved to Teams here)
Norovirus/Calicivirus	Routine. Daycare-age or long-term care age; LTC/SNF facility as a home address	Only if LTFU	Link	No PDF, use MAVEN
Shiga toxin producing e. Coli	Priority. Working age & children		Link	MDPH STEC crf final 03 18.pdf
Salmonellosis (non-typhi/paratyphi)	Priority Working age		Link	MDPH SAL/CAMPY crf final 05 19.pdf
Salmonellosis (typhi/paratyphi)	Immediate Working age		See salmonella link	
Shigellosis	Priority		Link	No PDF, use MAVEN
Vibriosis	Immediate (summer). Admin QP has cholera variable		Link	MDPH Vibriosis crf final 06 14.pdf
Yersiniosis	Routine		Link	No PDF, use MAVEN
Clusters	Immediate! Notify MA DPH ASAP about clusters. Might get NORS or outbreak questionnaire from DPH.			MA DPH Gastrointestinal Illness Healthcare Cluster Reporting Form

Priority order: All immediates > Priority diseases [STEC > Salmonella > Shigella (esp young children) > Campylobacter] > Routine enterics

Target investigation timeline: Immediates started within 1 business day. Priority diseases started within 2 business days. Routine started within 3 business days.



Medical Records Fax Requests



Barnstable County

Regional Government of Cape Cod
Department of Health and Environment

3195 Main Street | Barnstable, Massachusetts 02630

STAT REQUEST

TO: _____
FAX: _____
DATE: _____
PAGES: 2
FROM: Barnstable County Department of Health and Environment (BCDHE)
STAFF CONTACT: _____
FAX: (508) 203-4135
PHONE: _____

Barnstable County Department of Health and Environment (BCDHE) is requesting a patient's medical records (identified on fax page 2) for the purpose of reportable disease investigation under Massachusetts General Law. c. 111, § 6-7 and 105 CMR 300.000. Timely fulfillment of this request is essential for timely response and control of threats to public health.

HIPAA specifically allows public health reporting and access to PHI for public health activities without requiring an individual's authorization. The Massachusetts Department of Public Health (MDPH) is a public health authority as defined by the HIPAA Privacy Regulation (45 CFR §§ 164.501 and 164.512(b)). Local boards of health have coordinated authority with the MDPH to access PHI for the public health activities. Staff of the Bureau of Infectious Disease and Laboratory Sciences and local boards of health (or authorized agents) are authorized to inspect certain medical records in the course of official public health duties.

For more information, see the memo "Permitted Public Health Reporting" issued by the Commonwealth of Massachusetts Executive Office of Health and Human Services, available here: https://www.maven-help.maventraining.com/pdf/PROVIDER_HIPAA_LETTER.pdf.

Why Fax?

- Medical records departments trained appropriately
- Authority documentation
- Sensitize healthcare to public health's roles and responsibilities
- Trackable # of requests also helps build up to direct EHR access request to our main hospital systems

Keep in mind:

- Slow processing times so send early in investigation



Pathogen-Specific Work Restriction Template Letters

QR code with our template materials at the end of this presentation!



Barnstable County

Regional Government of Cape Cod
3195 Main Street | Barnstable, Massachusetts 02630

Department of Health and Environment

Case Name
Street Address
City, Town Zip

RE: Information about your recent *Campylobacter* diagnosis

Dear [PATIENT NAME],

On [DATE OF INTERVIEW], I spoke to you about your *Campylobacter* diagnosis, and asked questions about how you may have become ill, your food history, travel, symptoms, activities, and job. Thank you for taking the time to speak with me. I gave you directions about follow up care and not spreading the illness to others. This letter summarizes that information for your reference.

Your diagnosis was reported to the town health department because your stool tested positive for *Campylobacter*. Labs and healthcare providers are required by law to report positive results to town health departments. Then, town health departments are required by law to investigate these illnesses to prevent further spread and provide information (105 CMR 300). Barnstable County Department of Health and Environment follows up with patients diagnosed with these illnesses on behalf of Cape Cod town health departments.

There are important instructions at the end of this letter. Please read it in its entirety.

WORK RESTRICTIONS:

To prevent the spread of *Campylobacter* and protect the public, employees or volunteers who handle food outside their home must follow rules below set out by a Massachusetts Reportable Disease Law 105 CMR 300 and Food Handler Code 105 CMR 590. This might apply to you or another person in your household who develops symptoms of campylobacter, even if they have not been tested for it. "Food-Handlers" include:

- People like cooks, waiters, dishwashers, bussers, bartenders, hosts/hostesses, staff in grocery stores, food processors as well as staff in daycares, assisted living, skilled nursing, or residential programs that serve food or snacks. Anyone who handles unpackaged food, food equipment, plates, utensils, trays, or food contact surfaces.
- Anyone who handles medication that will be going into someone else's mouth. This includes but is not limited to healthcare workers.
- Anyone who provides mouth or denture care to another person.

Even if you normally wear gloves while doing these activities, as a Food Handler who has tested positive for *Campylobacter* and/or has symptoms of *Campylobacter*, you **must**:

- 1) **Inform your employer of your diagnosis.** Food handlers are required to report information about their health as it relates to diseases transmissible through food to their employer per 105 CMR 590.
- 2) **Modify duties so you are not touching items that could go into someone's mouth or stay out of work until you are no longer infectious to others.** You **must stay out of food handling duties until your diarrhea goes away AND you get ONE stool sample that tests**

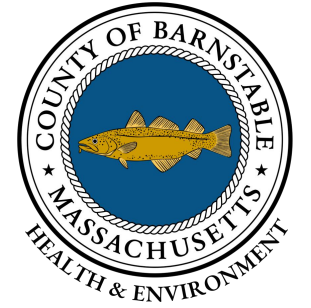
Disease Intervention Program Metrics

Since April 1, 2024:

- 452 enteric case investigations
- Average time to **patient interview**: <1 day (0.82)
- Average time to closing case in MAVEN (CRF complete): 2.2 days
- 86 cases (19%) lost to follow-up
 - Contact standard: 3 call attempts + 3 texts unless extenuating circumstances; rely on medical records on those cases
- 96 FBI complaints created
- 12 food handlers identified



Partnership Building



To build our team beyond our agency, we met with:

DPH

- Program discussion and feedback loop with DPH Epidemiology *and* Food Protection

Infection Preventionists

- Calls to check in (not just request records)
- Heads up on infectious disease patterns

Cape Cod Extension

- Food safety program
- Shellfish & marine fisheries program
- Coordinating messaging

Regional Disease Investigators

- Monthly Community of Practice for all disease intervention professionals in region to discuss trends and workshop case investigation challenges

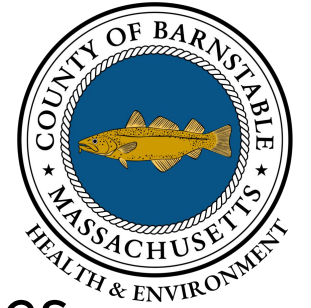
Town Public Health, Animal Health, & Environmental Health

- Biweekly Community of Practice called Cape & Islands One Health Office Hours to discuss situations & train on new topics

Remember, **public health is a team sport!**



Tabletops & Exercises



Simulated outbreak response exercises through Emergency Preparedness Division

Epi proposed a Hepatitis A exposure in a shelter.
Meets several PHEP deliverables including:

- Medical countermeasures (vaccine)
- Logistics & coordination
- Communication & equitable access

Conducted tabletop exercise in March 2024

We prepare, practice, perfect



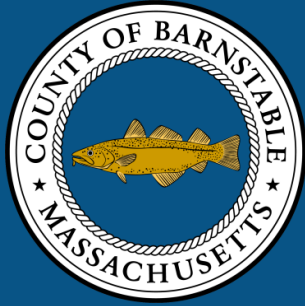
So that when the **rubber hits the road,**
we are ready

LONG WEEKEND



Loading...





Hepatitis A Virus in a Food Handler

MEMORIAL DAY WEEKEND 2025 RESPONSE

Fast Facts about Hepatitis A

- **Transmission:** fecal-oral with low infectious dose and can survive in environment
- **Onset:** Following exposure, can take 15 to 50 days (average of 30 days) to show symptoms
- **Symptoms**
 - Fever, anorexia, nausea, vomiting, diarrhea, myalgia, jaundice (usually 5-7 days into illness)
 - Usually mild to moderate illness, self-limiting and resolves in 1 to 2 weeks. Can last up to several months for some patients.
 - Young children (under 6) can be asymptomatic, but infectious
- **Mortality:** Uncommon (2.4%) but higher risk in people with liver disease.
- **Vaccine:** highly effective and lifelong. 1 dose >95% protection.

Friday before Memorial Day Weekend

✓ Notification & Initial Investigation

- Series of interviews **reveal case is a food handler at the Red Inn in Provincetown & worked while infectious**
- **Post exposure prophylaxis window is closing in 3 days**

✓ BCDHE Internal Huddle to scale up resources

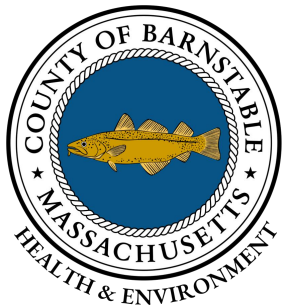
✓ Multi-agency conference call: Provincetown, DPH, BCDHE

- Case investigation
- Restaurant follow up
- Contact tracing
- Coordination with healthcare provider in area – situation, testing, vaccine
- Press release discussion



Saturday of Memorial Day Weekend

- ✓ Multi-agency conference call – Provincetown, BCDHE
- ✓ Vaccine transfer from County to Outer Cape Health Services in Provincetown
- ✓ Contact tracing and referring employees to vaccine PEP
- ✓ Healthcare partner notifications (clinics, hospitals, pharmacies, VNA)
- ✓ Press releases & websites
 - Provincetown – [Press release](#); [website](#); [social media](#)
 - BCDHE - [Website](#)
 - DPH – [Press release](#)



www.capecod.gov/HepatitisA

May 24, 2025

Health Officials Respond to a Hepatitis A Virus Exposure in Provincetown

On Saturday, May 24, 2025, Provincetown public health officials announced that patrons who dined at The Red Inn in Provincetown **between April 30 and May 15** could have been exposed to the hepatitis A virus. Patrons are advised to contact their healthcare provider as soon as possible to discuss a potential exposure. If you are a food handler (either paid or unpaid) and believe you have been exposed to the hepatitis A virus, call your local board of health immediately or call the Barnstable County Care Line at [\(774\) 330-3001](tel:7743303001).

NOTE: Individuals infected with Hepatitis A virus are infectious to others two weeks before they develop the initial symptoms of jaundice (yellowing of skin or eyes).

The Red Inn is cooperating fully with officials in the public health investigation.

For further information on this case, please visit the [Provincetown Health Department Website](#). You can also read the recent press release issued by the Massachusetts Department of Public Health (MADPH) at: [State health officials warn of potential exposure to Hepatitis A after infection in food service worker in Provincetown | Mass.gov](#)

Sunday of Memorial Day Weekend

Pharmacies are only open option for vaccine

- ✓ Public phone line (BCDHE CARE Line) staffing referring callers to open pharmacies

Able to refer **8** patrons for Post-Exposure Prophylaxis vaccine on the **last** day of the window!

Monday

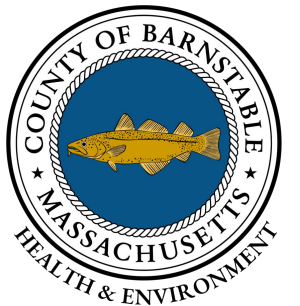
Local clinic open for limited hours; some pharmacies open

- ✓ Public phone line (BCDHE CARE Line) staffing to clinics and pharmacies



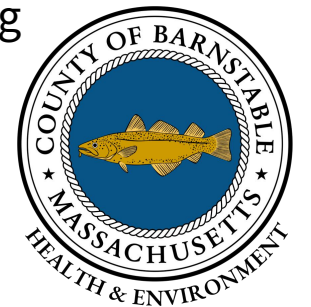
Tuesday after MDW

- **Wider Communications & Debrief**
 - Cape & Islands Health Agent Coalition
 - Website and social media blasts
 - Media interviews
 - DPH sent out Epi-X
- **What next?**
 - Need to keep this in the public consciousness for **6 weeks (50 days)** post-exposure so any secondary cases seek care and are identified.
 - Use media coverage to improve vaccine coverage



“Never let a good crisis go to waste” **Vaccinate!**

- Health Fair already scheduled for Provincetown on June 18
 - **Vaccinated 22 people with a life-long effective vaccine!**
 - Built relationships with AIDS Group of Cape Cod to **continue providing Hep A vaccine** for free through Adult Immunization program
- DPH resources
 - Received approval for special request to DPH SSA to purchase vaccine and subsidized testing for uninsured individuals, if needed
 - DPH offered Mobile Vaccine operations through Health Innovations for future efforts



Results

No reports of secondary hepatitis A cases related to this exposure, in-state nor out-of-state

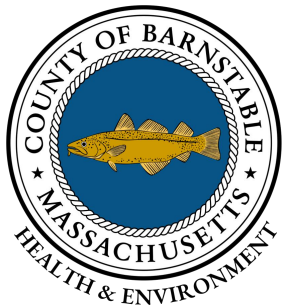
More people vaccinated with an effective, life-long vaccine



Contained situation



Future prevention



Responding staff

- **Provincetown**
 - Lezli Rowell, agent
 - Board of Health
- **Barnstable County Department of Health and Environment (BCDHE)**
 - Contract Epidemiologist: Lea Hamner
 - Contact tracers: Patrice Barrett, Fran Gonnella, Kayla Champagne
 - Public Health Nurses: Wendy Judd, Jennifer McPherson
 - Communications: Bethany Traverse
 - Leadership: Erika Woods, Katie O'Neill
- **Massachusetts Department of Public Health (DPH)**
 - Epidemiologists – special shout out to the epi-of-the-days Mia Haddad, Elizabeth Traphagen
 - Leadership
 - Press team
 - Vaccine team
- **Healthcare**
 - Outer Cape Health Services (OCHS)
 - Pharmacies
 - Cape Cod Healthcare (CCH)
 - Visiting Nurse Association of Cape Cod (VNA)

Public Health is a Team Sport



Teamwork Gets RESULTS



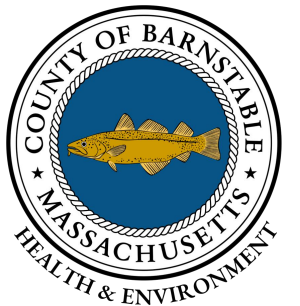
How Shared Services Improve Investigations

- **Faster response times** due to pooled resources and staff
- **Unified protocols** reduce variation in investigation quality
- **Centralized data systems** improve case tracking and follow-up
- **Cross-town coordination** for outbreaks linked to regional food sources



Outcomes and Impact

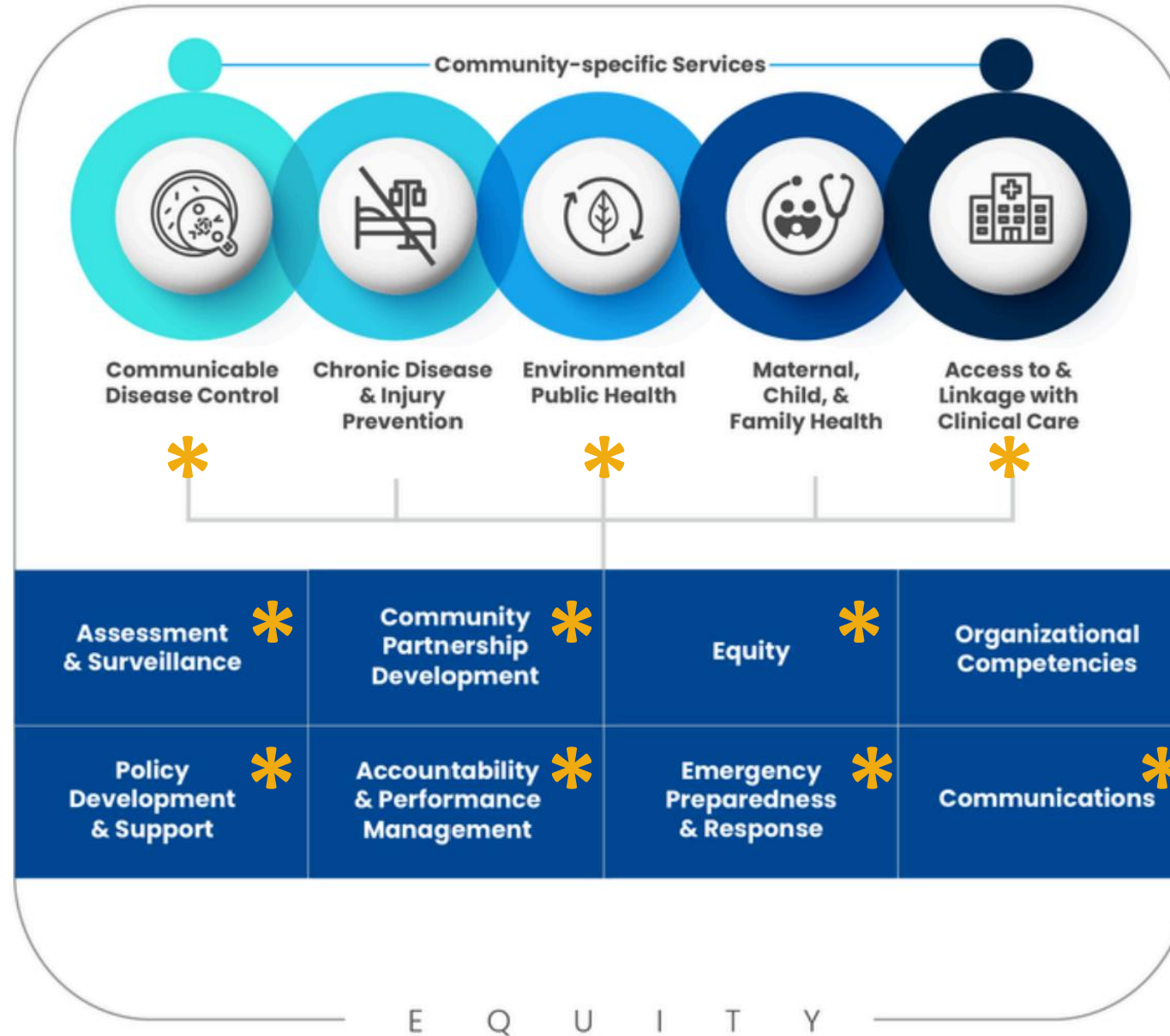
- More efficient and **coordinated outbreak response**
- Better **data sharing and disease surveillance**
- Increased capacity for **multi-jurisdictional outbreaks**
- Increased public trust through **improved communication and transparency**



Foundational Public Health Services

Foundational
Areas

Foundational
Capabilities



**Shared
Services** means
capacity to
implement the
FPHS model

Leading to
**healthier,
happier,
thriving
communities**

[Click for
Resource Folder](#)



Thank you!

QUESTIONS & COLLABORATIONS:

LEA HAMNER, CONTRACT EPIDEMIOLOGIST

LEA.HAMNER-CONTRACTOR@CAPECOD.GOV

