The RRT Program uses a cooperative agreement vehicle to support RRT development and maintenance. Total funding for awards made in FY19 is ~$4,600,000.

The desired outcome of RRT development is to minimize the time between agency notification of a human or animal food contamination event and implementation of effective control measures. To accomplish this, RRTs develop and maintain processes to:

- Prepare for and effectively respond to foodborne illness outbreaks and other food emergencies.
- Enhance intra-agency and inter-agency collaboration and communication.
- Jointly train and exercise staff to be ready to respond to events when they occur.
- Identify potential preventive practices to reduce foodborne illness and injury.
- Establish national best practices and tools that can be shared with other states to improve their response to food emergencies.

Started in 2008, the RRT program has grown to include 24 states, six of which participate in a voluntary capacity outside of the funded cooperative agreement program.

**What are RRTs?**

RRTs are multi-agency, multi-disciplinary teams that operate using Incident Command System (ICS)/National Incident Management System (NIMS) principles within an integrated or coordinated response structure to respond to human and animal food emergencies.

**Why establish RRTs?**

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**Sharing what we’ve learned**

The RRT Manual contains 15 chapters. Each chapter contains best practices (processes, templates, and examples) for a specific topic, such as tracebacks or joint investigations.

**Interested in the RRT Manual?**

Find it on our [website](#) or email [OP.Feedback@fda.hhs.gov](mailto:OP.Feedback@fda.hhs.gov)
RRTs are one of our most successful examples of how an integrated food safety system should work. The best part is that it’s not overly complex: Provide a small amount of resources to states and then put experienced, trained federal and state investigators in the same room and ask them to come up with creative ways to investigate outbreaks.

- Jeff Farrar, Director of Intergovernmental Relations and Partnerships, FDA Office of Foods and Veterinary Medicine

Food safety challenges can never be completely eliminated as our food supplies become more global and diverse. We cannot solve food safety problems individually; we are stronger working as partners to combat the constant threat in food safety. As a Rapid Response Team, [our] mission is to protect public health by continuing to monitor, evaluate and respond to food and feed threats through coordination and collaboration with our multidisciplinary team of federal, state and local regulatory partners.

- Darla Bracy, District Director, FDA ORA San Francisco District

One Bad Apple: The Response to the Caramel Apple Outbreak

A deadly outbreak of listeriosis linked to consumption of caramel apples dominated the headlines during the 2014 holiday season. RRT actions taken to protect public health in response to this outbreak included:

- California, Minnesota and Missouri RRTs conducted follow up investigations at caramel apple manufacturers associated with ill patients.
- Using the records and information collected by these RRTs, FDA was able to trace back the apples consumed by 11 case patients through four manufacturing legs, leading to a convergence at a single apple grower.
- The California Food Emergency Response Team (CalFERT) investigation at the implicated apple grower identified *L. monocytogenes* matching the outbreak strain in environmental samples from the packing facility.

Thanks to swift action on the part of these RRTs and other public health and regulatory partners, a full recall was in effect three weeks after caramel apples were first identified as a possible outbreak vehicle.

Caramel Apples By the Numbers

✓ 1 week from first identification of caramel apples as potential food vehicle to first apple grower recall
✓ 3 RRT Activations; 5 RRT Joint Investigations at firms
✓ 15 days (2 weeks) from apple grower’s first limited recall to just 3 caramel apple manufacturers to a recall of all Gala and Granny Smith apples produced in 2014
✓ 35 confirmed illnesses nationwide (including 4 MN, 3 CA, 5 MO cases), 34 hospitalizations, 7 deaths
✓ 4 recalls issued by the Canadian Food Inspection Agency