

FOOD SAFETY INCIDENTS AND FOOD RECALLS



The role of Surveillance in putting systems in place for early detection of food safety incidents.



Khumalo MP



June 2024



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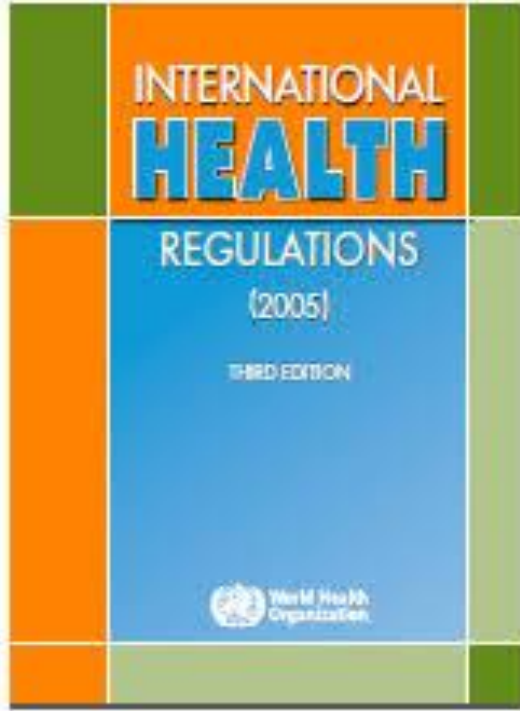


INTRODUCTION



- Public health surveillance is the **ongoing** systematic **collection, analysis,** and **interpretation of data**, closely integrated **with the timely dissemination** of these data to those responsible for preventing and controlling disease and injury. **NB! Using this Data for public health action**
- Globally, **1 out of 10** people fall ill after consumption of contaminated food, with the highest burden occurring in **Africa**.
- An effective epidemiological surveillance for food-borne diseases **leads to better management and control** of food-borne incidence.
- The surveillance of food-borne diseases is a critical component of food safety.
- Many of the food-borne disease outbreaks in South Africa have been reported by the **media but are poorly recorded** in an epidemiological surveillance system.
- Food is sold at many informal food outlets and street vendors. Foodborne illnesses maybe caused by **bacteria, viruses, chemical exposure, prions, parasites**

WHAT WE HAVE



“to prevent, protect against, control and provide a public health response to the international spread of disease in ways that are commensurate with and restricted to public health risks, avoiding unnecessary interference with international traffic and trade.”

- Through the IHR, countries agreed to build national surveillance and response systems with capacities to detect, assess, notify and report any public health emergency of international concern.
 - includes specific measures at points of entry (PoE) such as ports, airports and ground crossings to limit the spread of health risks to neighbouring countries.

PREVENT

DETECT &
REPORT

RESPOND



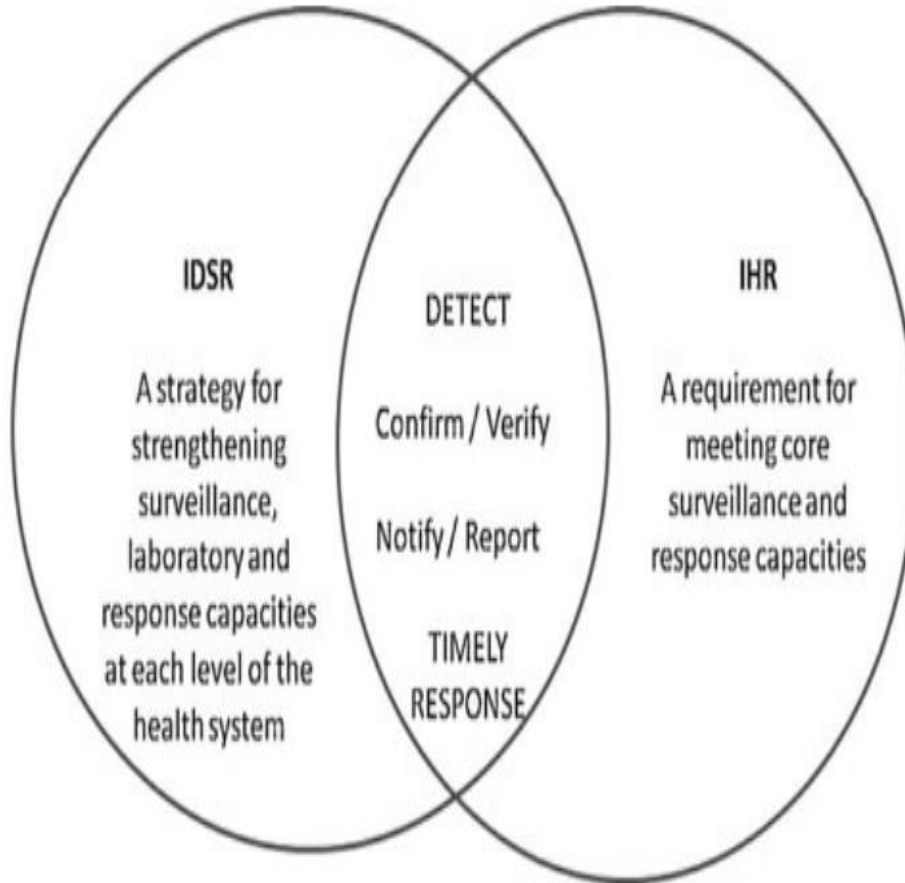
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Slide 3



IDSR STRATEGIC PLAN



Integrated Disease Surveillance and Response (IDSR) is **strategy to assist member states to improve detection, reporting and responding to priority conditions**



Has three components namely:

Community-Based Surveillance

Event-Based Surveillance

Indicator-Based Surveillance



Integrated Disease Surveillance and Response (IDSR) Strategic Plan for South Africa at consultation stage



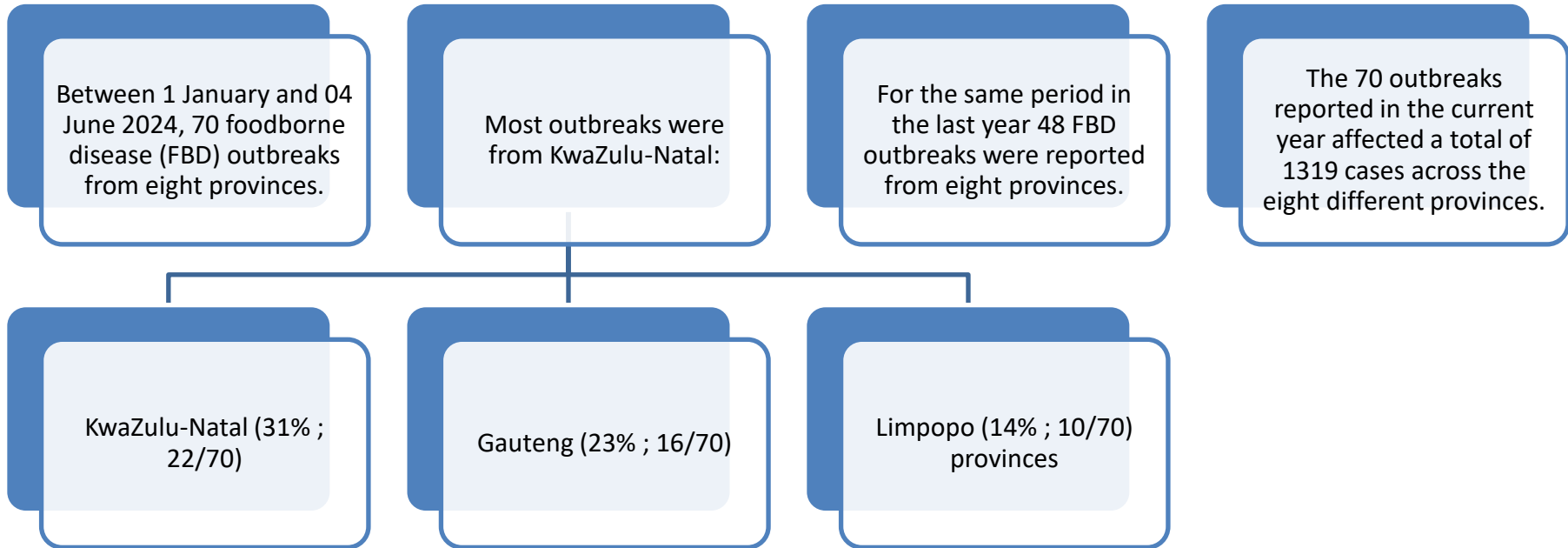
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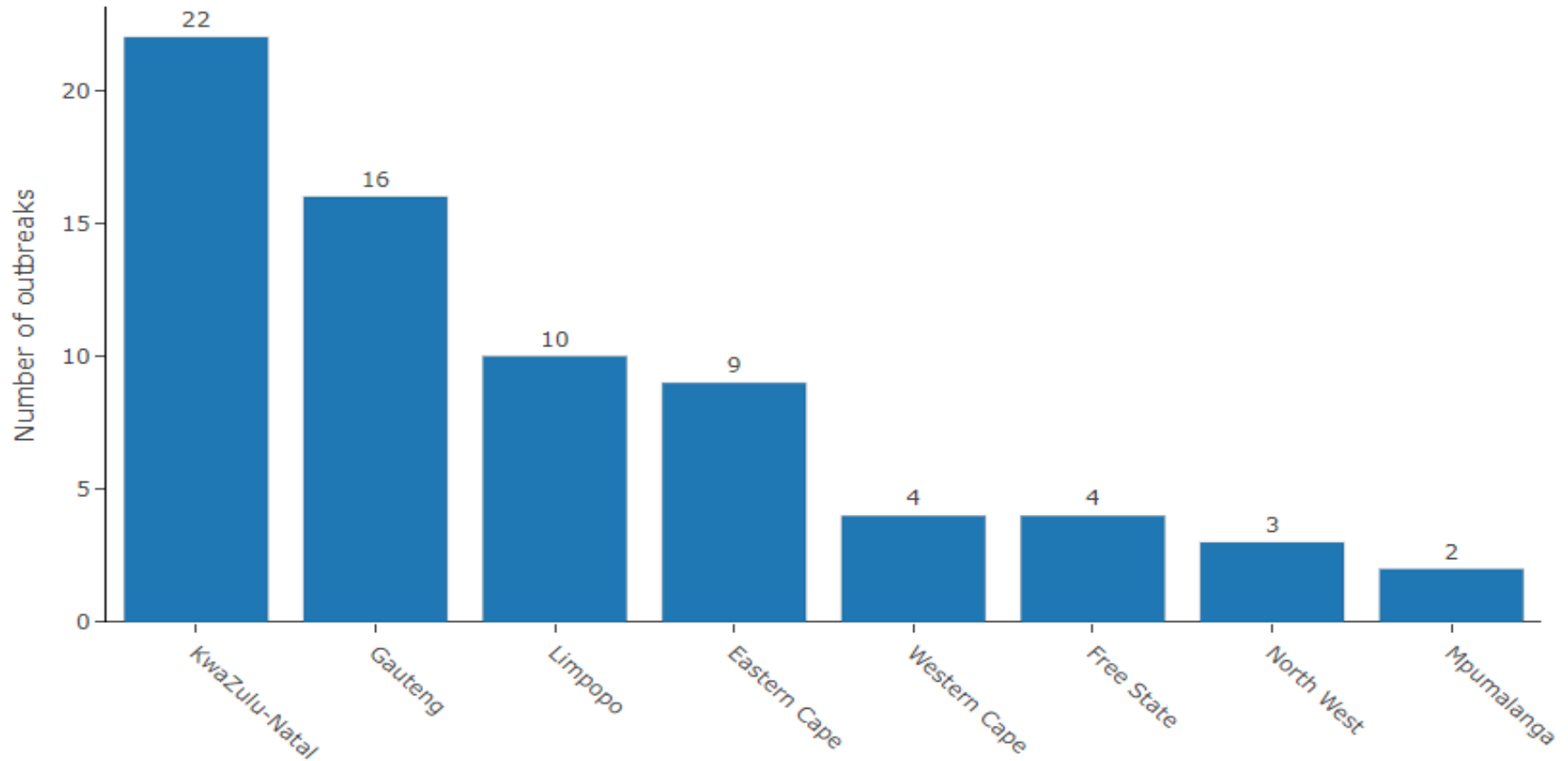
Slide 4



CURRENT STATUS ON FBI'S OUTBREAKS REPORTED THROUGH NOTIFIABLE MEDICAL CONDITIONS SURVEILLANCE SYSTEM (NMCSS)



CURRENT STATUS ON FBI's OUTBREAKS



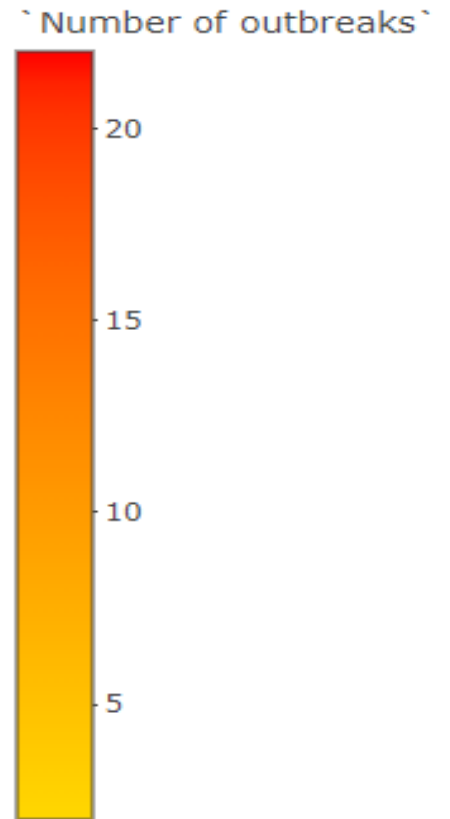
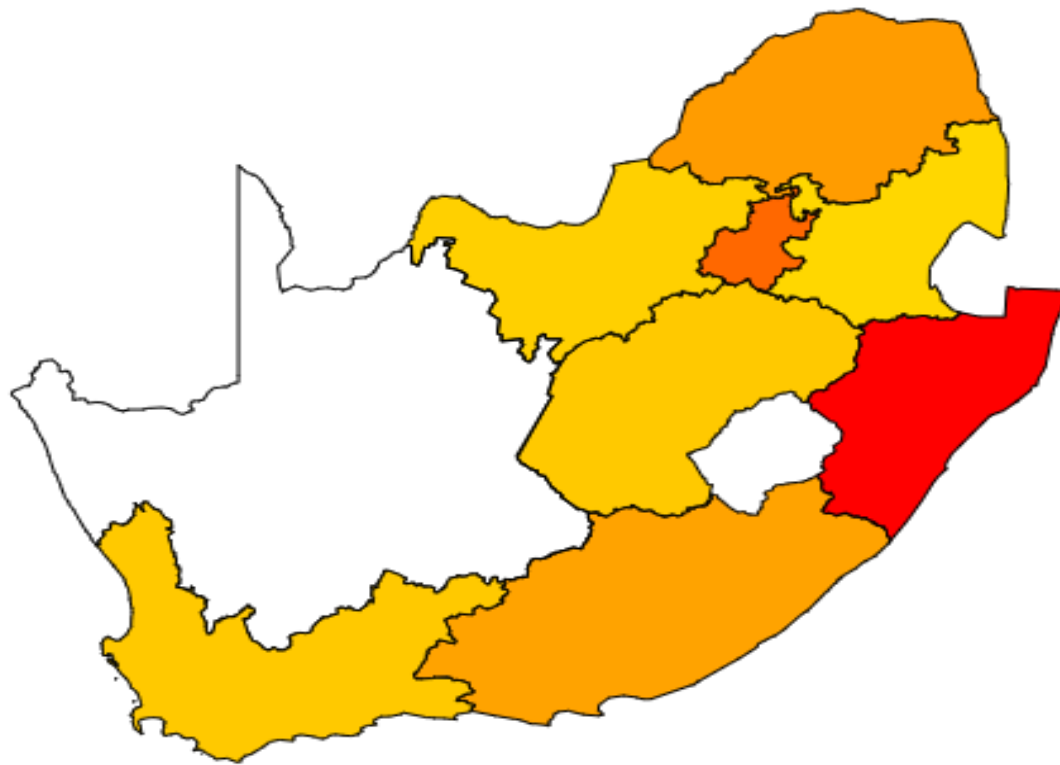
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Slide 6



CURRENT STATUS ON FBI's OUTBREAKS



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IDSR STRATEGIC PLAN – EVENT-BASED SURVEILLANCE (EBS)



- EBS is the organized collection, monitoring, assessment and interpretation of mainly unstructured ad hoc information regarding health events or risks which may represent an acute risk to health
- Serve the Early Warning and Response (EWAR) function of the public health surveillance system.
- EBS approaches:
 - Hotline
 - Community EBS by community members
 - Media scanning
 - Health facility EBS
- Currently **picking up and following up** on signals detected through these approaches;
- Needs to be formalised/standardised , rolled out provide a reporting platform

IDSR STRATEGIC PLAN – EVENT-BASED SURVEILLANCE (EBS)



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WHAT WE HAVE – FOODBORNE DISEASE OUTBREAK SURVEILLANCE



Government Gazette

REPUBLIC OF SOUTH AFRICA

Vol. 469 Cape Town 23 July 2004 No. 26595

THE PRESIDENCY

No. 869

23 July 2004

It is hereby notified that the President has assented to the following Act, which is hereby published for general information:-

No. 61 of 2003: National Health Act, 2004.

The National Health Act, 61 of 2003 in South Africa

- strategy for the prevention and control of epidemic prone diseases

Regulations Relating to the Surveillance and the Control of Notifiable Medical Conditions, 2017 were developed in terms of the National Health Act

Foodborne diseases outbreaks are notifiable as per the Regulations under **Category 1** (Immediate notification)



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WHAT WE HAVE – FOODBORNE DISEASE OUTBREAK SURVEILLANCE - NMC



- Health facility based
 - Public facility
 - Private facility

- Role based
 - National
 - Province
 - District
 - Sub-district

WHAT WE HAVE – FOODBORNE DISEASE OUTBREAK SURVEILLANCE - NMC



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Notifiable Medical Conditions (NMC) Case Notification Form
(Sections 10 (1) (g), (h) and (j) of National Health Act, 2003 (Act No. 61 of 2003))
This form must be completed immediately by the health care provider who diagnosed the condition. Please mark applicable areas with an X

Health facility name (with provincial prefix) **CHRIS HANI BARA HOSP** Health facility contact number **0119809000** Health sub-district **COJ**
Patient file/folder number **003** Patient HPRS-PRN N/A Date of notification **2 0 1 8 - 0 4 - 1 0**

Patient demographics

First name **OLIVE** Patient residential address **10 VILAKAZI STREET**
Surname **MINT** **Orlando East**
S.A ID number **2 0 0 5 1 8 0 2 3 8 0 8 9** **Soweto**
Passport/other ID number **2 0 0 5 1 8 0 2 3 8 0 8 9** **Gauteng** Post code **1910**
Citizenship **SOUTH AFRICAN** Employer/educational institution address
Date of birth **2 0 0 0 - 0 5 - 1 8** Months (if less than 1 year) Days (if less than 1 month) Institution name **UNEMPLOYED**
Age **18** Street name, building, location description
Gender **Female** Sub-place, suburb, village, postal area
Is patient pregnant? **No** Town/city Post code
Contact number **0 7 8 1 7 5 1 1 1 1 1** Contact number

Medical conditions details

NMC diagnosed **MALARIA** History of possible exposure to NMC in the last 60 days No Yes Unknown
Method of diagnosis Clinical signs and symptoms ONLY Rapid test Laboratory confirmed Other
Clinical symptoms relating to the NMC **LETHARGY, FEVER, CONFUSION**
Treatment given for the NMC **COARTEM**
Date of diagnosis **2 0 1 8 - 0 4 - 0 9** Date of symptom onset **2 0 1 8 - 0 4 - 0 2**
Patient admission status **Outpatient** Inpatient Ward name **20**
Patient vital status **Alive** Deceased Date of death **y y y y - m m - d d**

Travel history in the last 60 days

Did patient travel outside of usual place of residence? Yes No If yes, complete the travel details below
Place travelled to or place travelled from **Province of Country** Locality/village/town Date of exit from South Africa Date of entry into South Africa

Vaccination history for the NMC diagnosed above (complete only for vaccine preventable NMC)

Vaccination status Date of last vaccination

Specimen details

Was a specimen collected? Yes No
Date of specimen **2 0 1 8 - 0 4 - 0 9**
Specimen barcode **ACDB425PZ1**

Notifying health care provider's details

First name Surname
Mobile number
SANC/HPCSA number
Notifier's signature

The top copy (white) must be sent to the sub-district/district office. The middle copy (blue) must be attached to the patient referral letter or patient file. The bottom copy (pink) must remain in the booklet

9:44

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NATIONAL INSTITUTE FOR COMMUNICABLE DISEASES
Division of the National Health Laboratory Service

NMC Reporting
Please login to proceed

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LOG IN

[Don't have an account yet?](#)

REGISTER

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WEB PORTAL



ANDROID APP



HUAWEI APP



APPLE APP

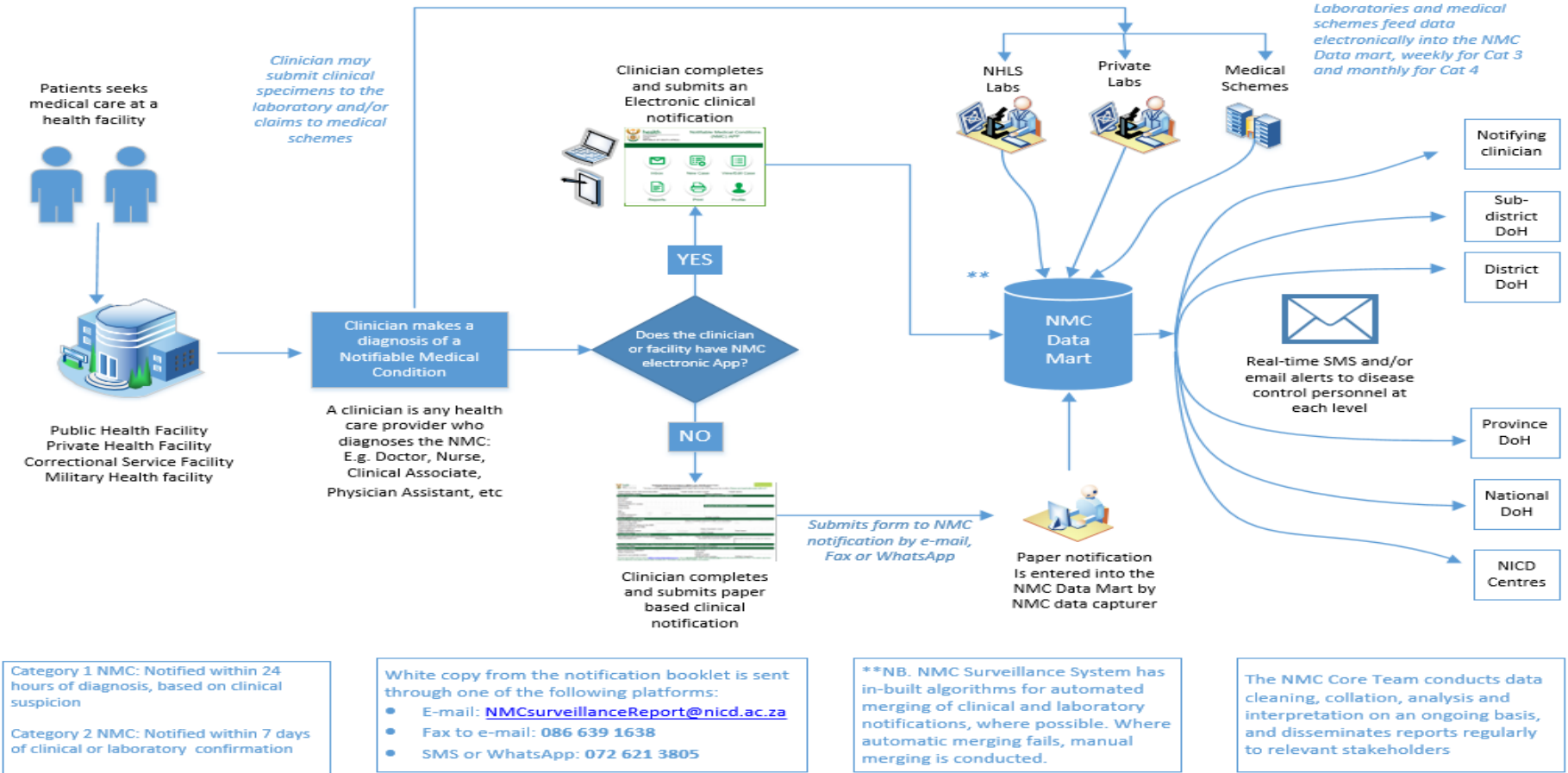


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NMC DATAFLOW PROCESS



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NEXT STEPS



1. Full rollout of the IDSR Strategic Plan which include rollout of EBS

2. Engage other key stakeholders

- Environmental Health
- Water and Sanitation
- DALRRD
- DFFE
- COGTA

3. Strengthen areas of integration with key stakeholders

4. Leverage on existing multisectoral-multidisciplinary coordination platforms (i.e., **MNORT**) to monitor FBIs detected through **IBS** (NMCCSS) and **EBS** (community EBS, Facility EBS, Media scanning and Hotline)



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Thank You



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