

XVIII, XIX, and XXI of the Act are classified generally to subchapters XVIII (§1395 et seq.), XIX (§1396 et seq.), and XXI (§1397aa et seq.), respectively, of chapter 7 of this title. For complete classification of this Act to the Code, see section 1305 of this title and Tables.

AMENDMENTS

2016—Subsec. (d)(2)(C). Pub. L. 114-301, §3(d)(1), substituted “shall designate a member of the review panel to” for “, or an individual within the Government Accountability Office designated by the Comptroller General, shall”.

Subsec. (d)(2)(D). Pub. L. 114-301, §3(d)(2), substituted “Secretary” for “Comptroller General”.

§ 280g-16. Food Safety Integrated Centers of Excellence

(a) In general

Not later than 1 year after January 4, 2011, the Secretary, acting through the Director of the Centers for Disease Control and Prevention and in consultation with the working group described in subsection (b)(2), shall designate 5 Integrated Food Safety Centers of Excellence (referred to in this section as the “Centers of Excellence”) to serve as resources for Federal, State, and local public health professionals to respond to foodborne illness outbreaks. The Centers of Excellence shall be headquartered at selected State health departments.

(b) Selection of Centers of Excellence

(1) Eligible entities

To be eligible to be designated as a Center of Excellence under subsection (a), an entity shall—

- (A) be a State health department;
- (B) partner with 1 or more institutions of higher education that have demonstrated knowledge, expertise, and meaningful experience with regional or national food production, processing, and distribution, as well as leadership in the laboratory, epidemiological, and environmental detection and investigation of foodborne illness; and
- (C) provide to the Secretary such information, at such time, and in such manner, as the Secretary may require.

(2) Working group

Not later than 180 days after January 4, 2011, the Secretary shall establish a diverse working group of experts and stakeholders from Federal, State, and local food safety and health agencies, the food industry, including food retailers and food manufacturers, consumer organizations, and academia to make recommendations to the Secretary regarding designations of the Centers of Excellence.

(3) Additional Centers of Excellence

The Secretary may designate eligible entities to be regional Food Safety Centers of Excellence, in addition to the 5 Centers designated under subsection (a).

(c) Activities

Under the leadership of the Director of the Centers for Disease Control and Prevention, each Center of Excellence shall be based out of a selected State health department, which shall provide assistance to other regional, State, and local departments of health through activities that include—

(1) providing resources, including timely information concerning symptoms and tests, for frontline health professionals interviewing individuals as part of routine surveillance and outbreak investigations;

(2) providing analysis of the timeliness and effectiveness of foodborne disease surveillance and outbreak response activities;

(3) providing training for epidemiological and environmental investigation of foodborne illness, including suggestions for streamlining and standardizing the investigation process;

(4) establishing fellowships, stipends, and scholarships to train future epidemiological and food-safety leaders and to address critical workforce shortages;

(5) training and coordinating State and local personnel;

(6) strengthening capacity to participate in existing or new foodborne illness surveillance and environmental assessment information systems; and

(7) conducting research and outreach activities focused on increasing prevention, communication, and education regarding food safety.

(d) Report to Congress

Not later than 2 years after January 4, 2011, the Secretary shall submit to Congress a report that—

- (1) describes the effectiveness of the Centers of Excellence; and
- (2) provides legislative recommendations or describes additional resources required by the Centers of Excellence.

(e) Authorization of appropriations

There is authorized to be appropriated such sums as may be necessary to carry out this section.

(f) No duplication of effort

In carrying out activities of the Centers of Excellence or other programs under this section, the Secretary shall not duplicate other Federal foodborne illness response efforts.

(July 1, 1944, ch. 373, title III, §399V-5, as added Pub. L. 111-353, title II, §210(b), Jan. 4, 2011, 124 Stat. 3950.)

§ 280g-17. Designation and investigation of potential cancer clusters

(a) Definitions

In this section:

(1) Cancer cluster

The term “cancer cluster” means the incidence of a particular cancer within a population group, a geographical area, and a period of time that is greater than expected for such group, area, and period.

(2) Particular cancer

The term “particular cancer” means one specific type of cancer or a type of cancers scientifically proven to have the same cause.

(3) Population group

The term “population group” means a group, for purposes of calculating cancer rates, defined by factors such as race, ethnicity, age, or gender.