

Report on the Audit of Local Authority Food Law Service Delivery and Food Business Compliance

Aylesbury Vale District Council
23-24 October 2012



Foreword

Audits of local authorities' feed and food law enforcement services are part of the Food Standards Agency's arrangements to improve consumer protection and confidence in relation to food and feed. These arrangements recognise that the enforcement of UK food and feed law relating to food safety, hygiene, composition, labelling, imported food and feeding stuffs is largely the responsibility of local authorities. These local authority regulatory functions are principally delivered through Environmental Health and Trading Standards Services.

The attached audit report examines the Authority's Food Law Enforcement Service. The assessment includes the local arrangements in place for database management, inspections of food businesses and internal monitoring. It should be acknowledged that there will be considerable diversity in the way and manner in which local authorities may provide their food enforcement services reflecting local needs and priorities.

Agency audits assess local authorities' conformance against the Food Law Enforcement Standard "The Standard", which was published by the Agency as part of the Framework Agreement on Official Feed and Food Controls by Local Authorities and is available on the Agency's website at: www.food.gov.uk/enforcement/auditandmonitoring.

The main aim of the audit scheme is to maintain and improve consumer protection and confidence by ensuring that local authorities are providing an effective food law enforcement service. The scheme also provides the opportunity to identify and disseminate good practice and provide information to inform Agency policy on food safety, standards and feeding stuffs. Parallel local authority audit schemes are implemented by the Agency's offices in all the devolved countries comprising the UK.

The report contains some statistical data, for example on the number of food premises inspections carried out annually. The Agency's website contains enforcement activity data for all UK local authorities and can be found at: www.food.gov.uk/enforcement/auditandmonitoring.

For assistance, a glossary of technical terms used within this audit report can be found at Annexe C.

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1.0 Introduction

- 1.1 This report records the results of an audit at Aylesbury Vale District Council with regard to food hygiene enforcement, under relevant headings of the Food Standards Agency Food Law Enforcement Standard. The audit focused on the Authority's arrangements for the management of the food premises database, food premises interventions, and internal monitoring. The report has been made available on the Agency's website at:
www.food.gov.uk/enforcement/auditandmonitoring/auditreports/audengreport/.
Hard copies are available from the Food Standards Agency's Local Authority Audit & Liaison Division at Aviation House, 125 Kingsway, London WC2B 6NH, Tel: 020 7276 8428.

Reason for the Audit

- 1.2 The power to set standards, monitor and audit local authority food law enforcement services was conferred on the Food Standards Agency by the Food Standards Act 1999 and the Official Feed and Food Controls (England) Regulations 2009. This audit of Aylesbury Vale District Council was undertaken under section 12(4) of the Act as part of the Food Standards Agency's annual audit programme.
- 1.3 Regulation (EC) No. 882/2004 on official controls performed to ensure the verification of compliance with feed and food law includes a requirement for competent authorities to carry out internal audits or to have external audits carried out. The purpose of these audits is to verify whether official controls relating to feed and food law are effectively implemented. To fulfil this requirement, the Food Standards Agency, as the central competent authority for feed and food law in the UK has established external audit arrangements. In developing these, the Agency has taken account of the European Commission guidance on how such audits should be conducted.¹
- 1.4 The Authority was selected for inclusion in the Food Standards Agency's programme of audits of local authority food law enforcement services because it had not been audited in the past by the Agency, and was representative of a geographical mix of 12 local authorities selected across England.

Scope of the Audit

- 1.5 The audit examined Aylesbury Vale District Council's arrangements for food premises database management, food premises interventions

¹ Commission Decision of 29 September 2006 setting out the guidelines laying down criteria for the conduct of audits under Regulation (EC) No. 882/2004 of the European Parliament and of the Council on official controls to verify compliance with feed and food law, animal health and animal welfare rules (2006/677/EC).

and internal monitoring, with regard to food hygiene law enforcement. This included a reality check at a food business to assess the effectiveness of official controls implemented by the Authority at the food business premises and, more specifically, the checks carried out by the Authority's officers, to verify food business operator (FBO) compliance with legislative requirements. The scope of the audit also included an assessment of the Authority's overall organisation and management, and the internal monitoring of food hygiene law enforcement activities.

- 1.6 Assurance was sought that key Authority food hygiene law enforcement systems and arrangements were effective in supporting business compliance, and that local enforcement was managed and delivered effectively. The on-site element of the audit took place at the Authority's offices at The Gateway, Gatehouse Road, Aylesbury on 23-24 October 2012.

Background

- 1.7 Aylesbury Vale makes up more than half of the County of Buckinghamshire with an area covering 350 square miles, and is located approximately 40 miles north-west of London. Parts of the area have been designated for their landscape quality, including part of the Chilterns Area of Outstanding Natural Beauty to the east and south of the District.
- 1.8 The District has a population of approximately 174,000 of which around 78,000 reside in Aylesbury, which is the administrative centre for both the District and County Councils. Other significant urban areas are Buckingham, Winslow and Wendover, and there are many mid to small parishes of which over half have less than 500 residents. The area has a mixed economic profile with large areas of predominantly agricultural activity along with small hubs of commercial and industrial activity.
- 1.9 The largest milk processing plant in Europe was being developed in the area at the time of the audit. Silverstone Race Circuit and the Buckingham County Show are significant tourist attractions in the area.
- 1.10 Food hygiene law enforcement was the responsibility of the Environmental Health Team, which was also responsible for the enforcement of statutory nuisance, public health, Building Act and housing legislation, health and safety enforcement and infectious disease control.
- 1.11 The Environmental Health Team was not responsible for food standards and feeding stuffs law enforcement, which was carried out by the Trading Standards Service at Buckinghamshire County Council.

- 1.12 The Authority reported the profile of Aylesbury Vale District Council's food businesses as of 31 March 2012 as follows:

Type of Food Premises	Number
Primary Producers	21
Manufacturers/Packers	24
Importers/Exporters	2
Distributors/Transporters	19
Retailers	283
Restaurant/Caterers	1,242
Total Number of Food Premises	1,591

2.0 Executive Summary

- 2.1 The Authority had developed a Food Service Plan for 2012/13, which had been recently approved by the relevant Cabinet Member. The Plan was in line with the Service Planning Guidance in the Framework Agreement, and included a breakdown of the resources required to provide the Food Service to enable comparison with the estimated resources available. It was intended to improve the capability for time recording on the database to enable more accurate and complete resource estimations to be made.
- 2.2 The Service Plan also set out the new structure of the Environmental Health Team, which had recently been implemented. The impact on service delivery of the reorganised structure should form part of the review process in the next year's service planning arrangements.
- 2.3 The Authority had already identified that a number of procedures required either development or review, and some had been recently developed including those on the interventions strategy, and on database management. Those requiring development and implementation included procedures on enforcement in approved establishments, on some aspects of formal enforcement, the authorisation and training of officers and the investigation of complaints.
- 2.4 The Authority provided a copy of the Scheme of Delegation for officers however it was acknowledged that a documented procedure was required to set out the process for authorisations based on an assessment of the officer's individual qualifications, experience and competence. Authorisations required review to ensure they include all relevant legislation, in particular those relating to the enforcement of imported food controls.
- 2.5 Training records confirmed that officers were receiving a minimum of 10 hours relevant training per annum, based on the principles of Continuing Professional Development. The Authority had recognised that there were some gaps in update training for officers in relation to approved establishments, imported food and sous vide processes, and training had been identified for these areas.
- 2.6 The Service had recently developed a database management procedure, which documented what was undertaken in practice to ensure the database was accurate and complete. A number of checks were carried out during the audit, which confirmed that in general the database was being operated in a way that reflected the Service's activities and would enable accurate monitoring returns to be made to the Agency on the Local Authority Enforcement Monitoring System (LAEMS).

- 2.7 The Service Plan set out the priorities for the inspection programme as part of a risk-based approach. Resources were to be targeted at premises such as category A, B and non-compliant C rated establishments with compliant D and E rated premises being subject to an alternative enforcement strategy (AES). The Plan also set out the Authority's approach to the inspection of new food businesses.
- 2.8 There was an identified backlog of overdue inspections. It was clear that resources were targeted at the inspection of higher risk premises, and those overdue were lower risk. A plan had been developed to inspect these as well as the significant backlog of unrated premises. Close monitoring needed to be maintained to check that the new working arrangements in place ensure that the intervention programme is carried out and new establishments are also inspected and rated.
- 2.9 Records were examined for some inspections of general food premises. There were notable differences in the quality of inspection records. In some, clear and detailed records had been made, however in other cases it was not possible to establish basic details about the business, for example size and scale and type of food operation, or adequate information about the officers' assessments including the verification and validation of any food safety management system in place. It was not therefore possible to ascertain whether appropriate risk ratings had been consistently applied by officers. In addition, it was evident that officers had not always considered previous inspection findings to inform a graduated approach to enforcement. Increased internal monitoring of officers' records and approaches to inspection, and a system of red flagging of issues found on inspection would help to ensure that issues previously identified are followed up and appropriate escalation of enforcement is taken.
- 2.10 It was acknowledged that the Authority's approach to enforcement in approved establishments required a fundamental review to ensure that premises are properly assessed and approved and that inspections are carried out to properly assess the compliance of establishments under Regulation (EC) No. 853/2004. Consistent completion of an appropriate aide-memoire for the type of business would facilitate the maintenance of adequate records. The storage of complex and extensive approved establishment records exclusively on the database required review to improve their retrievability.
- 2.11 The Authority's policy on food and food premises complaints was set out in the Service Plan. The Authority had recognised that a documented procedure also required development. Records for a number of complaints about food and food premises confirmed that they had been appropriately investigated or referred, and actions taken were recorded.
- 2.12 The Service had developed a documented sampling policy and procedure. The Service Plan stated that the Authority participated in

nationally co-ordinated sampling programmes. Further opportunities could be considered for obtaining food samples during interventions to support inspection findings.

- 2.13 The Service had an enforcement policy dated from 2007 and a draft updated policy, which was in the process of being formalised. It had been recognised that documented procedures needed to be developed to provide guidance to officers on all enforcement options.
- 2.14 Records for enforcement activities that had taken place over the past two years were checked. In general hygiene improvement notices had been appropriately served, although there were some issues identified in their administration. Procedures undertaken in pursuance of a prosecution case were satisfactory however, it was not possible to fully establish if appropriate procedures had been implemented for the administration of a simple caution, as records of the process could not be retrieved.
- 2.15 The record management system on the database did not make it easy for officers to retrieve documents to clearly establish complete premises inspection histories, and key issues that needed to be pursued at future interventions to enable a graduated approach to enforcement to be considered. Even where records were available there were inconsistencies in their location and retrievability.
- 2.16 The Service had recognised that consistent internal monitoring procedures needed to be implemented across all food law enforcement activities. Some of the documented procedures included reference to internal monitoring activities, however it was acknowledged that either a new specific procedure should be developed or existing procedures reviewed to ensure they all contain details of the relevant internal monitoring arrangements.
- 2.17 It was evident that quantitative monitoring was being routinely undertaken and reported to senior management. The effective implementation of qualitative internal monitoring procedures would assist in ensuring there is consistency in approach from all officers in the two teams. Appropriate records of such internal monitoring activities should be maintained.

3.0 Audit Findings

3.1 Organisations and Management

Strategic Framework, Policy and Service Planning

- 3.1.1 The Service had recently undergone a re-structuring exercise and the new working arrangements were still being embedded. The District had been divided into two areas each covered by two Environmental Health Officers (EHO) and two Environmental Health Technical Officers (EHTO). The restructured arrangements were intended to address conflicting proactive and reactive work demands arising from the generalist remit of the Environmental Health Team.
- 3.1.2 An Official Food Controls Service Plan 2012/13 had been drafted and had recently received Member approval. The Plan had been drafted in accordance with the Service Planning Guidance in the Framework Agreement. The Plan linked the work of the Service to the Authority's corporate objectives as:
- "Protecting the health of residents and visitors to the Vale through inspection and interventions with food businesses, the investigation of infectious diseases and the investigation of food and food premises complaints.
 - Providing support and advice to new businesses in the Vale. Encouraging good food safety practice and improvement via participation in the National Food Hygiene Rating Scheme (FHRS).
 - Ensuring that official controls are delivered in the most effective and efficient manner by regularly reviewing and adapting the Service as required and targeting intervention on a risk prioritisation basis.
 - Ensuring that we communicate effectively and clearly with businesses and those requirements are clearly understood and can be achieved as necessary. Ensuring that we provide clear and concise information and feedback to residents and visitors to the Vale regarding food safety messages. Providing advice on food businesses in the Vale via participation in the FHRS".
- 3.1.3 A specific Food Service Plan for 2011/12 had not been developed and could not therefore be subject to review, however the Authority had identified a number of areas of improvement to be addressed in the current year's Plan. These included:
- The review and implementation of food complaint procedures.
 - Development and implementation of robust internal monitoring procedures.

- Improvements to data collection and management to ensure accurate information is collected to enable the effective targeting of resources in 2013/14.
- Identified staff development requirements including training in approved establishments and sous-vide processes.
- A review of the current alternative enforcement strategy for low risk food establishments and effective implementation to address a backlog of interventions.
- Continuing review of the food inspection targets in light of the new team structure to ensure food controls are effectively delivered.

3.1.4 The Service Plan set out details of the new structure for the team, which had become operational in April 2012. One EHO post had been deleted to be replaced by two EHTO posts. The intention of this was to expand the ability of the team to respond to the increasing demands of general reactive response work. From April to July 2012 the Department had seen a 25% increase in the amount of reactive work received as well as a 20% increase in the amount of licensing consultation work that the team had been required to respond to. These and other factors had contributed to the Team not being able to meet its proactive food premises inspection targets. The impact of the new structure on the Service's ability to complete its proactive work programme could usefully be included in the review of the current Service Plan.

3.1.5 The Plan had set out the calculated resources required to provide the Food Service, which could be directly compared with the resources available. The Plan had acknowledged that further refinements were required to data collection to more accurately capture and reflect the time spent on the delivery of all food law enforcement activities. The Plan and information provided to the auditors prior to the audit visit highlighted that it would be likely that the Service would need to use the services of private contractors in order to fulfil the requirements of the food premises intervention programme and the backlog of inspections of lower risk premises and new premises which had yet to receive a risk rating.

3.1.6 The Service had been proactive in highlighting the work of the Service to the Authority's Members and a successful update event had been held for new Members to promote the range of the team's work and achievements.

Documented Policies and Procedures

3.1.7 The Authority had in the past maintained a quality management system (QMS). Although the QMS had now lapsed, the integral document control system had been retained and the status of documents was regularly reviewed. A system was in place to ensure

that all changes to documented policies and procedures were properly authorised and carried out by designated authors.

- 3.1.8 The Service had recently developed and implemented some new documented procedures, however it was acknowledged that some key procedures required development or review, including those on internal monitoring activities and on food and food premises complaint investigations.

Recommendation

3.1.9 The Authority should:

Review, expand and revise documented procedures to ensure the documents accurately reflect the Food Law Code of Practice and centrally issued guidance, to provide adequate operational guidance for staff in relation to all food law enforcement activities carried out. [The Standard – 4.1, 7.4 and 15.2]

Officer Authorisations

- 3.1.10 The Authority had a Scheme of Officer Delegations, which did not specifically set out the delegated responsibilities in relation to the authorisation of officers or detail the legislation under which officers were required to be authorised. In addition there was some ambiguity in the document relating to which officers would be authorised to serve hygiene emergency prohibition notices (HEPN). A documented procedure required development to set out the delegated powers and the process to ensure that the Authority assesses the competence of officers in accordance with the requirements of the Food Law Code of Practice. In practice, officers' competence was assessed through practical assessment and checks made on qualifications and training. Once satisfied the lead officer for food recommended the officer for authorisation.
- 3.1.11 Checks made on individual officer authorisation documents showed that they were appropriately authorised in accordance with their individual qualifications and experience. However, authorisations required review to ensure that officers were appropriately authorised under all relevant legislation including those relating to imported food controls. The Service also needed to review which officers were nominated for authorisation under the Food and Environment Protection Act 1985 and inform the Agency accordingly, as the information currently held centrally was out-dated.

3.1.12 The Authority had in place a system of annual Talent Reviews where officers' performance was reviewed. This was supported by six month interim reviews. The process included a discussion on officers' training needs and any team training requirements.

3.1.13 Officers maintained their own training records and it was recognised that a centralised record would assist in identifying further training needs and for confirming that all officers had achieved the minimum 10 hours of relevant training in accordance with the specified levels of Continuing Professional Development (CPD) training requirements in the Food Law Code of Practice. In practice officers were achieving sufficient training to satisfy the requirements. The Service Plan noted that there was an identified need for officer training on sous vide processes and on enforcement in approved establishments and it was also recognised that training in imported food enforcement was required. Available training opportunities were being identified for these areas.

Recommendations

3.1.14 The Authority should:

- (i) Develop and implement a documented procedure for the authorisation of officers based on their competence, and in accordance with the Food Law Code of Practice. [The Standard – 5.1]
- (ii) Review and update current officer authorisations as necessary to ensure that all officers are appropriately authorised under relevant current legislation in accordance with their individual level of qualification, experience and competency. [The Standard – 5.1 and 5.3]
- (iii) Maintain records of relevant qualifications, training and experience of each authorised officer in accordance with the Food Law Code of Practice. [The Standard – 5.5]

3.2 Food Premises Database

- 3.2.1 The Service operated a computer database system that was capable of providing the returns required for the Local Authority Enforcement Monitoring System (LAEMS). The operation of the system was overseen by an experienced database manager who was responsible for producing LAEMS monitoring returns.
- 3.2.2 A procedure had been recently developed and implemented which set out the means by which the accuracy and completeness of the database would be maintained. In practice this included formal mechanisms for updating records following interventions, mailshots, information exchange with other Council departments and restricted permissions for opening new premises records. The implementation of the Food Hygiene Rating Scheme (FHRS) had provided an opportunity to carry out data cleansing of the system. The database manager carried out routine checks against a master record to ensure that the database was up to date and accurate. Various checks were carried out on the data prior to submission to the Agency for the LAEMS return. Checks carried out during the audit confirmed that the database was in general accurate and reflected the Service's activities.
- 3.2.3 Checks on premises in the area identified by Internet searches confirmed that the majority were on the database and included within the Authority's intervention programme.

3.3 Food Premises Interventions

3.3.1 The Authority's Official Food Controls Service Plan 2012/2013 set out the food premises profile by risk category and the interventions programme for the year.

3.3.2 The Plan confirmed the following breakdown of premises requiring inspection:

Premises Risk Category	Number of Premises
A	5
B	47
C	440
D	275
E	662
Unrated	*211
Outside programme	0
TOTAL	1,640

*Includes 52 childminders awaiting inspection.

3.3.3 In response to competing resources, the Authority had taken into account the flexibilities available in the Food Law Code of Practice, and this was reflected in the Service's Food Hygiene Intervention Policy. In addition the Service Plan set out the priorities for inspection based on a risk prioritisation scheme. Interventions were to be carried out in accordance with date due and in the following priority order:

- A rated
- B rated
- Non-compliant C rated
- New businesses registered from January 2011 onwards
- Compliant C rated
- Non-compliant D rated.

3.3.4 Compliant D, and E rated premises were to be subject to alternate interventions and an Alternative Enforcement Strategy (AES), comprising a mixture of inspection or audit and other interventions, including the use of questionnaires.

3.3.5 The Plan acknowledged that there was a significant backlog of premises that were unrated and awaiting an initial inspection. This included 52 childminders. The Service had recognised that the unrated premises that were not childminders should take priority in accordance with their prioritisation scheme as these potentially could be high risk food operations. These had therefore been targeted for inspection above compliant category C establishments. Premises which

registered with the Authority prior to January 2011 and remained unrated would be contacted to determine if they were still trading and then be subject to inspection as required. Minutes from team meetings confirmed that the backlog was of concern to the team and additional resource pressures from covering reactive work were further impacting on the Team's ability to reach targets. Solutions included the potential for out of hours inspections being carried out by officers and the use of contractors for lower risk premises.

- 3.3.6 The Plan also acknowledged that there were 154 overdue interventions of compliant category D, and E premises from 2011/12. It was proposed that these would be addressed by AES and some by inspection. If resources allowed, this would be carried out by the use of a contractor.
- 3.3.7 The Service's policy in relation to the inspection of childminders was again based on a judgement of risk, and those that were preparing higher risk foods would be included in the list of unrated premises requiring inspection. This was established by use of a comprehensive childminders' questionnaire which was issued at the time of registration. The Service was considering a workshop initiative aimed at childminders to offer basic food hygiene guidance and introduce the specific Safer food, better business (SFBB) pack for childminders, to those registered with the Authority.
- 3.3.8 A report produced during the audit indicated that there was one category A (a seasonal business) and no category B premises overdue an inspection, confirming that the Authority was focusing their resources at higher risk premises interventions. 109 category C's were overdue, and numerous D and E category premises, with a total of around 315 overdue premises.
- 3.3.9 Another report produced during the audit of unrated premises indicated that there were 199 premises awaiting inspection. The list included some caterers, childminders and some premises whose activities may not require inclusion within the interventions programme as there is effectively no inspectable risk. The Food Hygiene Intervention Policy stated that all new food businesses would be inspected as soon as possible and within three months of the date of registration. This is not in accordance with the Food Law Code of Practice, which requires new premises to be inspected within 28 days. In practice, the Service would attempt to carry out the initial inspection within the 28 day period, but this was not always possible with the resources available.

Recommendation

3.3.10 The Authority should:

Ensure that food hygiene interventions at food premises in their area are carried out at a frequency which is not less than that determined under the intervention rating scheme set out in the Food Law Code of Practice.

[The Standard – 7.1]

- 3.3.11 The Authority had developed and implemented documented procedures on the inspection of general food premises. There was also a procedure providing guidance on the implementation of the FHRs, which had been launched in April 2012. It had been recognised that the procedures required expansion to include guidance on the specific enforcement procedures for the inspection of approved establishments. Procedures could also be usefully expanded to include specific guidance on imported food checks as part of interventions.
- 3.3.12 Auditors were advised that following the publication of guidance from the Food Standards Agency on E. coli O157 and Control of Cross Contamination, the Authority had identified all relevant premises which had been sent a letter and a copy of the guidance. Consideration of the guidance would also now form an integral part of inspections.
- 3.3.13 The Authority had developed a comprehensive inspection aide-memoire for caterers and a form for lower risk retail premises. The catering form included useful prompts for officers to consider whether the establishment might be carrying out activities subject to approval, and whether they handled goods directly imported from non-EU countries. A system for 'red flagging' any significant inspection findings would be a useful addition to the aide memoire, to inform future interventions.
- 3.3.14 Records of a sample of premises were checked during the audit. The Authority operated a 'paperless office' system. It was not possible to retrieve the latest inspection aides-memoire for two premises, and there was a general lack of consistency in the way that inspection records and associated documents were stored on the system. This made it difficult to establish whether a comprehensive inspection history was being retrieved, and if officers had adopted an appropriate graduated approach to enforcement.
- 3.3.15 Where inspection aides-memoire were available there was a variable level of detail recorded of the officers' findings, and in some cases the records did not appear to match the assigned risk rating following inspection, or clearly set out the justification for the three scores which

would determine the premises' rating under the FHRS. Whereas some records were very detailed, in some cases it was not possible to establish basic details about the business, for example size and scale and type of food operation, or adequate information about the officers' assessments including the verification and validation of any food safety management system in place.

- 3.3.16 There was also evidence of an inconsistent approach to revisiting premises where contraventions had been identified and consideration of appropriate and timely follow-up action, including formal enforcement measures where appropriate. The inspection procedure and draft enforcement policy stated that a revisit must be carried out where a food business significantly failed to comply with food safety requirements; this could be non compliance with a single requirement which compromises food safety or public health, or a number of requirements that indicate ineffective management. It was apparent that officers were not always routinely following up on previous findings, even where significant failings of food hygiene requirements had been identified, and the food business operator (FBO) had been advised that the matters were urgent and a revisit would follow. Conversely it was also found that officers had been revisiting the same premises on a number of occasions to focus on particular aspects of compliance rather than adopting a proportionate and graduated approach to enforcement of requirements.
- 3.3.17 Inspection report forms were consistently provided to the FBO following each intervention, which confirmed the key points found on inspection and any proposed follow-up action to be taken by the Authority.
- 3.3.18 The Authority had approved eight establishments under Regulation (EC) No. 853/2004 and had carried out a review following the requirement in August 2011 to re-assess for approval all establishments that have changed FBO since 1 January 2006. All records relating to approved establishments were held on the food premises database. By their nature, such records are complex and extensive, and their means of storage made it difficult to establish whether a full history and all relevant details had been retrieved.
- 3.3.19 Findings from inspections of approved establishments were not routinely recorded and it was not possible to establish if the establishments had been properly assessed against all relevant legislative requirements. Key information including details of the Company's food safety management system was not consistently available on all establishment records checked. It was acknowledged that the Authority's approach to enforcement in approved establishments required a fundamental review to ensure that premises are properly assessed and approved and that inspections are carried out to adequately assess the compliance of establishments under Regulation (EC) No. 853/2004. Consistent

completion of an appropriate aide-memoire for the type of business would help in maintaining adequate records.

Recommendations

3.3.20 The Authority should:

- (i) Further develop its documented procedures to provide operational guidance to officers on the inspection of approved establishments, in line with the Food Law Code of Practice and centrally issued guidance. [The Standard – 7.4]
- (ii) Assess the compliance of food premises to legally prescribed standards to confirm compliance with current legislation, the Food Law Code of Practice and centrally issued guidance, and take appropriate action on any non-compliance found, in accordance with the Authority's enforcement policy. [The Standard – 7.2 and 7.3]
- (iii) Ensure that product-specific establishments subject to approval under Regulation (EC) No. 853/2004 are inspected and approved in accordance with relevant legislation, the Food Law Code of Practice and centrally issued guidance. [The Standard – 7.2]
- (iv) Maintain up to date, accurate and comprehensive records for all establishments including those approved under Regulation (EC) No. 853/2004. The records should detail the determination of compliance with legal requirements and comprehensive reports of all inspections, visits and where relevant the basis for approval, in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard –16.1]
- (v) Ensure that observations made and/or data obtained in the course of an inspection/intervention are legible and stored in such a way that they are easily retrievable. [The Standard – 7.5]

Verification Visit to a Food Premises

- 3.3.21 During the audit, a verification visit was undertaken to a local takeaway restaurant with an experienced officer of the Authority, who had carried out the last food hygiene inspection of the premises. The main objective of the visit was to assess the effectiveness of the Authority's assessment of food business compliance with food law requirements. The specific assessments included the conduct of the preliminary interview of the FBO by the officer, the general hygiene checks to verify compliance with the structure and hygiene practice requirements and checks carried out by the officer to verify compliance with HACCP based procedures.
- 3.3.22 The officer was able to demonstrate general familiarity with the premises, however it was not clear that a full assessment of the key operations carried out at the business had taken place at the previous inspection, including the adequacy of the operator's food safety management system, or staff training and cross-contamination issues. In addition the records relating to the inspection were inadequate and did not confirm the full scope or extent of the inspection that had been undertaken. Whilst some progress was noted on some issues and an hygiene improvement notice (HIN) had been complied with in relation to the absence of a food safety management system, significant food hygiene issues were found on the verification visit, including poor practices resulting in actual cross contamination risks, poor levels of hygiene and cleanliness, and lack of staff training. Some of the issues had not been appropriately picked up from previous visit records. The officer had adopted an approach of encouraging the business to address issues over time but this had only been partially successful and a more rigorous approach to enforcement required consideration.

3.4 Enforcement

- 3.4.1 The Authority had developed an enforcement policy, dated 2007, which set out available enforcement options. A revised and updated policy had been developed which contained an appendix providing specific guidance on the enforcement of food hygiene legislation. The formal approval of the revised policy was being pursued at the time of the audit.
- 3.4.2 The Service had developed documented procedures on the service of HEPNs. Additional procedures required development to cover the whole range of available enforcement actions, including those specifically available for approved establishments.

Recommendation

3.4.3 The Authority should:

Further develop the documented procedural guidance for officers on all formal enforcement options in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 15.2]

- 3.4.4 Records of four HINs were examined served by three different officers who were all correctly authorised and had witnessed the contravention. Service of the notices was found from the premises records and inspection history to be the appropriate course of action. Confirmation that the notices had been properly served was available for all the notices examined. Two of the notices relating to the same premises had been served on more than one person, rather than separate notices being served on the individual recipients. Another was served on the Company Secretary rather than citing the name of the limited company as the recipient. Standard notice templates required review to ensure they included details of the local court. There was a delay in checking one of the notices relating to the absence of a food safety management system of four months, and a letter confirming compliance of the notice with the FBO could not be found on two of the notices.
- 3.4.5 Records for a voluntary closure procedure were examined. The agreement had been confirmed in writing by the FBO and the officer. Although auditors were advised that routine checks were made to confirm the premises remained closed, this was not clear from the available records. There was no evidence of any internal monitoring of the closure procedures.
- 3.4.6 Available records for a prosecution and a simple caution were examined. The prosecution was found to be appropriate and action

taken in line with the Authority's enforcement policy. The complete records for the simple caution were not available, however background information confirmed that it was an appropriate course of action, and a record that the admission of the offence had been signed by the FBO was available.

- 3.4.7 There were records available for one voluntary surrender of food that had taken place in the last two years. The action was found to be appropriate. At the time the food was surrendered the Service did not have the appropriate template forms to confirm that the food had been voluntarily surrendered for destruction. These have subsequently been made available for future actions.

Recommendation

3.4.8 The Authority should:

Ensure that officers carry out formal food law enforcement actions in accordance with the Food Law Code of Practice, centrally issued guidance and the Authority's own enforcement policy. [The Standard – 15.3 and 15.4]

3.5 Internal Monitoring, Third Party or Peer Review

Internal Monitoring

- 3.5.1 The Authority had recognised the need to develop and implement documented procedures to set out the process for quantitative and qualitative monitoring across the food law enforcement service. There were references to internal monitoring in new or revised procedures, including reference in the Interventions procedure to on-going proportionate, routine qualitative and quantitative monitoring. which may include database and records checks; shadowing and joint inspections; inter authority audit (IAA) consistency exercises and business satisfaction questionnaires. There was also a consistency framework for administration of the FHRS, which included references to various internal monitoring activities.
- 3.5.2 In practice there had been some ongoing temporary changes in direct management of the team and routine qualitative monitoring had lapsed over time, and with competing resource priorities. Apart from checks on HINs, evidence of qualitative monitoring was in the main historic, however there were plans to reinstate some routine checks. It was evident that routine and effective quantitative monitoring checks were being carried out particularly in relation to adherence to the inspection programme and to response targets. These were being reported to and considered by senior managers.
- 3.5.3 Audit checks confirmed some variance in the quality of records maintained by different officers on food law enforcement activities and some inconsistent approaches to enforcement. These could be identified and addressed through the implementation of effective and regular internal monitoring across all areas of food law enforcement work.

Recommendations

3.5.4 The Authority should:

- (i) Ensure that internal monitoring procedures are documented and implemented across all food law enforcement activities in accordance with Article 8 of Regulation (EC) No. 882/2004 (Official Feed and Food Controls), the Food Law Code of Practice and centrally issued guidance. [The Standard – 19.1]
- (ii) Verify its conformance with the Standard, relevant legislation, the Food Law Code of Practice, centrally issued guidance and the Authority's own documented policies and procedure across all the Authority's food law enforcement activities. [The Standard – 19.2]
- (iii) Ensure that records of monitoring activities are maintained. [The Standard – 19.3]

Food and Food Premises Complaints

3.5.5 The Official Food Controls Service Plan included reference to the Authority's policy to investigate all complaints. The Service had identified that a documented procedure on the investigation of food and food premises complaints required development.

3.5.6 Checks made on records for five food and food premises complaints showed that in general officers had carried out thorough and appropriate investigations, maintained detailed records of the investigation and ensured that all interested parties were informed of progress of the investigation.

Recommendation

3.5.7 The Authority should:

Develop and implement documented procedures to provide guidance to officers on the investigation of food and food premises complaints. [The Standard – 8.1]

Food Inspection and Sampling

3.5.8 The Authority had produced a combined sampling policy and procedure which set out the Authority's aim to participate in local,

national and EU sampling programmes, and to use food sampling activities to support interventions at food premises and in response to complaints as necessary. The sampling programme focused on participation in national and regional sampling initiatives. Consideration could be given to further use of food sampling and environmental swabbing to support the food premises inspection programme.

- 3.5.9 Checks were made on records for three recent samples, all of which had satisfactory examination results. The samples were found to be in accordance with the Authority's sampling policy and part of the sampling programme, and had been taken by a trained, authorised officer.

Records

- 3.5.10 Records of food law enforcement activities were maintained electronically on the food premises database system. In general, records were not easily retrievable during the audit, particularly those relating to inspection findings in both general and approved establishments. The lack of cohesive records made it difficult throughout the audit to ascertain the extent of officers' assessments. Poor quality records would also hinder effective internal monitoring by managers and provide limited information to inform a considered graduated approach to enforcement or justify the basis for a rating given under the FHRS.

Recommendation

3.5.11 The Authority should:

Maintain easily retrievable records for all food establishments and related food law enforcement activities in accordance with the Food Law Code of Practice.

[The Standard – 16.1]

Third Party or Peer Review

- 3.5.12 The Authority advised that there had not been any IAA or peer review exercises in the past two years, and there were none planned for the near future. Officers had participated in some consistency exercises with neighbouring authorities as part of preparation for the launch and implementation of the FHRS.

3.5.13 Auditors were advised that until last year the Department had been accredited under a corporate quality management scheme. The focus had now moved to achievement of an environmental sustainability standard which would not cover the work of the food service. It had been agreed that the food service would instead be brought into the corporate internal monitoring schedule for 2013/14.

Auditors: **Yvonne Robinson**
Christina Walder
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Food Standards Agency
Local Authority Audit and Liaison Division

ANNEXE A Action Plan for Aylesbury Vale District Council

Audit dates: 23-24 October 2012

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.1.9 Review, expand and revise documented procedures to ensure the documents accurately reflect the Food Law Code of Practice and centrally issued guidance, to provide adequate operational guidance for staff in relation to all food law enforcement activities carried out. [The Standard – 4.1, 7.4 and 15.2]</p>	<p>31/05/13</p>	<p>The review, development and implementation of the following documented procedures: internal monitoring, officer authorisations, the inspection and enforcement of approved establishments, imported food controls, the investigation of food and food premises complaints and the seizure and detention of food.</p>	<p>Externally provided approved establishments training and imported food controls training has been sourced for officers and is scheduled between January and March 2013.</p> <p>Sector specific aides-memoire for approved establishments have been obtained and reviewed for inclusion within approved establishments procedures.</p>
<p>3.1.14(i) Develop and implement a documented procedure for the authorisation of officers based on their competence, and in accordance with the Food Law Code of Practice. [The Standard – 5.1]</p>	<p>31/03/13</p>	<p>To introduce a documented competency based authorisation procedure which demonstrates the level of officer authorisation in line with each officer's qualifications, competencies and training.</p>	<p>A review of another Authority's authorisation procedures has been carried out to aid development of our own procedure.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.1.14(ii) Review and update current officer authorisations as necessary to ensure that all officers are appropriately authorised under relevant current legislation in accordance with their individual level of qualification, experience and competency. [The Standard – 5.1 and 5.3]	31/03/13	To review and update current officer authorisations in line with the new documented competency based authorisation procedures.	
3.1.14(iii) Maintain records of relevant qualifications, training and experience of each authorised officer in accordance with the Food Law Code of Practice. [The Standard – 5.5]	Completed	To establish a centralised departmental documented record of training received by officers.	Centralised training record sheets have been set-up for all officers in the team to record the details of training that they receive.
3.3.10 Ensure that food hygiene interventions at food premises in their area are carried out at a frequency which is not less than that determined under the intervention rating scheme set out in the Food Law Code of Practice. [The Standard – 7.1]	31/03/13	<p>To use additional contractor resources during the 2012/13 period to reduce the backlog of overdue premises as far as is possible.</p> <p>To continue to inspect food premises in accordance with risk (and as resources allow) by prioritising higher risk premises and new premises above those lower risk premises and new premises where food safety risks are considered to be low e.g. child-minders preparing snacks only and cake makers.</p>	<p>There has been a continuing focus on the number of outstanding food inspections and the resource required to complete them.</p> <p>A contractor has recently been employed to undertake a number of food inspections.</p> <p>On-going monitoring of the implementation of the Alternative Enforcement Strategy in low-risk premises is being carried out.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.3.20(i) Further develop its documented procedures to provide operational guidance to officers on the inspection of approved establishments, in line with the Food Law Code of Practice and centrally issued guidance. [The Standard – 7.4]	31/03/13	<p>The development and implementation of a procedure for the inspection and enforcement of establishments subject to approval under Regulation (EC) No. 853/2004.</p> <p>The provision of external training on approved establishments to officers with responsibility for food controls in approved establishments.</p> <p>The provision of training on the new procedure for officers.</p>	Externally provided approved establishments training has been sourced for officers. Sector specific aide-memoires for approved establishments have been obtained and reviewed for inclusion within the approved establishments' procedures.
3.3.20(ii) Assess the compliance of food premises to legally prescribed standards to confirm compliance with current legislation, the Food Law Code of Practice and centrally issued guidance, and take appropriate action on any non-compliance found, in accordance with the Authority's enforcement policy. [The Standard – 7.2 and 7.3]	31/03/13	<p>The provision of consistency training exercises for officers to include refresher training on the enforcement policy.</p> <p>The development and implementation of a robust internal monitoring procedure to ensure the consistent delivery of food controls by officers and that enforcement action is taken where appropriate and in all cases.</p> <p>To include file audits and shadow visits with PEHO.</p>	A copy of the Food Standards Agency audit report and feedback has been provided to all officers. Consistency training is to be actioned following the introduction of new internal monitoring procedures and competency based authorisation procedures.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.3.20(iii) Ensure that product-specific establishments subject to approval under Regulation (EC) No. 853/2004 are inspected and approved in accordance with relevant legislation, the Food Law Code of Practice and centrally issued guidance. [The Standard – 7.2]</p>	<p>31/03/13</p>	<p>The development and implementation of a procedure for the inspection and enforcement of establishments subject to approval under Regulation (EC) No. 853/2004. The provision of external training on approved establishments to officers with responsibility for food controls in approved establishments. The provision of training on the new procedure for officers.</p>	<p>Externally provided approved establishments training has been sourced for officers. Sector specific aide memoires for approved establishments have been obtained and reviewed for inclusion within the approved establishments procedures.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.3.20 (iv) Maintain up to date, accurate and comprehensive records for all establishments including those approved under Regulation (EC) No. 853/2004. The records should detail the determination of compliance with legal requirements and comprehensive reports of all inspections, visits and where relevant the basis for approval, in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard –16.1]</p>	<p>31/05/13</p>	<p>Review the way that information is input and held on the database for approved establishments and other food premises with the aim of ensuring that all relevant information is centrally located and easily accessible for officers, including for red-flagging issues of non-compliance for future inspections.</p> <p>The use of sector specific aides-memoire for approved establishments to ensure that the necessary information is obtained from the food business prior to the issue of approval under Regulation (EC) No.853/2004.</p> <p>Look into the viability of using an alternative electronic database management system for scanned documents to ease accessibility.</p> <p>Checks on the quality of officers' records will be included as part of the implementation of robust internal monitoring procedures.</p>	<p>There has been some consideration of the viability of the resurrection of paper based files for approved establishments to be used alongside centrally held electronic premises records. Arrangements have been made with IT to discuss the possibility of the use of alternative data management systems.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.3.20 (v) Ensure that observations made and/or data obtained in the course of an inspection/intervention are legible and stored in such a way that they are easily retrievable. [The Standard – 7.5]	31/05/13	As for 3.3.20 (iv)	As for 3.3.20 (iv)
3.4.3 Further develop the documented procedural guidance for officers on all formal enforcement options in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 15.2]	31/05/13	The review, development and implementation of documented enforcement procedures in the following areas: approved establishments, imported food controls, the seizure and detention of food.	Externally provided approved establishments training and imported food controls training has been sourced for officers. Sector specific aides-memoire for approved establishments have been obtained and reviewed for inclusion within approved establishments procedures.
3.4.8 Ensure that officers carry out formal food law enforcement actions in accordance with the Food Law Code of Practice, centrally issued guidance and the Authority's own enforcement policy. [The Standard – 15.3 and 15.4]	3/03/13	The provision of consistency training exercises for officers to include refresher training on the enforcement policy. The development and implementation of a robust internal monitoring procedure to ensure the consistent delivery of food controls by officers and that enforcement action is taken where appropriate and in all cases.	A copy of the FSA audit report and feedback has been provided to all officers. Consistency training is to be actioned following the introduction of new internal monitoring procedures and competency based authorisation procedures.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.5.4(i) Ensure that internal monitoring procedures are documented and implemented across all food law enforcement activities in accordance with Article 8 of Regulation (EC) No. 882/2004 (Official Feed and Food Controls), the Food Law Code of Practice and centrally issued guidance. [The Standard – 19.1]	31/03/13	The development and implementation of a documented qualitative internal monitoring system.	
3.5.4(ii) Verify its conformance with the Standard, relevant legislation, the Food Law Code of Practice, centrally issued guidance and the Authority's own documented policies and procedure across all the Authority's food law enforcement activities. [The Standard – 19.2]	31/03/13	The development and implementation of a documented qualitative internal monitoring system.	
3.5.4(iii) Ensure that records of monitoring activities are maintained. [The Standard – 19.3]	31/03/13	Develop standard internal monitoring activity record sheets and maintain a record of all monitoring activity that is carried out in line with the new monitoring procedure.	Standard record sheets have been used during shadow visits with officers to record observations. A system has been established to ensure that these records are centrally retained on departmental electronic files.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.5.7 Develop and implement documented procedures to provide guidance to officers on the investigation of food and food premises complaints. [The Standard – 8.1]	31/05/13	<p>Current operational system requires documentation.</p> <p>Review, develop and implement documented procedures for the investigation of food and food premises complaints.</p>	
3.5.11 Maintain easily retrievable records for all food establishments and related food law enforcement activities in accordance with the Food Law Code of Practice. [The Standard – 16.1]	31/05/13	<p>Review the way that information is input and held on the database for approved establishments and other food premises with the aim of ensuring that all relevant information is centrally located and easily accessible for officers.</p> <p>Look into the viability of using an alternative electronic database management system for scanned documents to ease accessibility.</p> <p>Checks on the quality of officers' records will be included as part of the implementation of robust internal monitoring procedures.</p>	

ANNEXE B Audit Approach/Methodology

The audit was conducted using a variety of approaches and methodologies as follows:

(1) Examination of LA policies and procedures.

The following relevant LA policies, procedures and linked documents were examined before and during the audit:

- Official Food Controls Service Plan 2012/13
- Food Hygiene Intervention Policy and Alternative Enforcement Strategy documents
- Food Hygiene Inspection Procedure
- FHRs Procedure and Consistency Framework
- Food inspection documentation including aides-memoire and business questionnaires
- Food Database Management Procedure
- Food Sampling Policy and Procedure
- Enforcement Policy Statement 2007 and draft Enforcement Policy and appendix
- Hygiene Emergency Prohibition and Voluntary Closure Procedure
- Minutes of recent Buckinghamshire Food Group meetings.

(2) File reviews – the following LA file records were reviewed during the audit:

- General food premises inspection records
- Approved establishment records
- Food complaint records
- Records of food sampling
- Internal monitoring records
- Formal enforcement records.

(3) Review of Database records:

- To review and assess the completeness of database records of food hygiene inspections, food and food premises complaint investigations, samples taken by the authority, formal enforcement and other activities and to verify consistency with file records
- To assess the completeness and accuracy of the food premises database
- To assess the capability of the system to generate food law enforcement activity reports and the monitoring information required by the Food Standards Agency.

(4) Officer interviews – the following officers were interviewed:

- Acting Principal Environmental Health Officer
- Two District Environmental Health Officers

Opinions and views raised during office interviews remain confidential and are not referred to directly within the report.

(5) On site verification check:

A verification visit was made with the Authority's officers to a local food business. The purpose of the visit was to verify the outcome of the last inspection carried out by the Local Authority and to assess the extent to which enforcement activities and decisions met the requirements of relevant legislation, the Food Law Code of Practice and official guidance, having particular regard to LA checks on FBO compliance with HACCP based food management systems.

ANNEXE C Glossary

Authorised officer	A suitably qualified officer who is authorised by the local authority to act on its behalf in, for example, the enforcement of legislation.
Broadly Compliant	An outcome measure which the Food Standard Agency has developed with local authorities to monitor the effectiveness of the regulatory service relating to food law. It is based on the risk rating scheme in the Food Law Code of Practice which is currently used by food law enforcement officers to assess premises which pose the greatest risk to consumers failing to comply with food law.
Codes of Practice	Government Codes of Practice issued under Section 40 of the Food Safety Act 1990 as guidance to local authorities on the enforcement of food legislation.
County Council	A local authority whose geographical area corresponds to the county and whose responsibilities include food standards and feeding stuffs enforcement.
District Council	A local authority of a smaller geographical area and situated within a County Council whose responsibilities include food hygiene enforcement.
E. coli O157	E.coli O157 belongs to the group of verotoxigenic E. coli (VTEC) bacteria which are a toxin-producing strain of Escherichia coli that occur naturally in the gastrointestinal tract of animals such as cattle and sheep, and are pathogenic to humans. E.coli O157 is the VTEC strain that has been most commonly implicated in human infection in the UK.
Enhanced Remote Transit Shed	A warehouse designated by HM Revenue and Customs (HMRC), where goods are temporarily stored pending clearance by HMRC, and prior to release into free circulation.
Environmental Health Officer (EHO)	Officer employed by the local authority to enforce food safety legislation.
Feeding stuffs	Term used in legislation on feed mixes for farm animals and pet food.

Food hygiene	The legal requirements covering the safety and wholesomeness of food.
Food Hygiene Rating Scheme (FHRS)	The Food Hygiene Rating Scheme provides information to the public about hygiene standards in catering and retail food establishments. It is run by local authorities in partnership with the Food Standards Agency. Businesses that fall within the scope of the scheme are given a 'hygiene rating' which shows how closely the business was meeting the requirements of food hygiene law at the time of inspection. The scheme also encourages businesses to improve hygiene standards.
Food Safety Management System	A written permanent procedure, or procedures, based on HACCP principles. It is structured so that this requirement can be applied flexibly and proportionately according to the size and nature of the food business.
Food standards	The legal requirements covering the quality, composition, labelling, presentation and advertising of food, and materials in contact with food.
Framework Agreement	<p>The Framework Agreement consists of:</p> <ul style="list-style-type: none"> • Food and Feed Law Enforcement Standard • Service Planning Guidance • Monitoring Scheme • Audit Scheme <p>The Standard and the Service Planning Guidance set out the Agency's expectations on the planning and delivery of food and feed law enforcement.</p> <p>The Monitoring Scheme requires local authorities to submit yearly returns via LAEMS to the Agency on their food enforcement activities i.e. numbers of inspections, samples and prosecutions.</p> <p>Under the Audit Scheme the Food Standards Agency will be conducting audits of the food and feed law enforcement services of local authorities against the criteria set out in the Standard.</p>
Full Time Equivalent (FTE)	A figure which represents that part of an individual officer's time available to a particular role or set of duties. It reflects the fact that individuals may work part-time, or may have other responsibilities within

the organisation not related to food and feed enforcement.

HACCP	Hazard Analysis and Critical Control Point – a food safety management system used within food businesses to identify points in the production process where it is critical for food safety that the control measure is carried out correctly, thereby eliminating or reducing the hazard to a safe level.
LAEMS	Local Authority Enforcement Monitoring System is an electronic system used by local authorities to report their food law enforcement activities to the Food Standards Agency.
Member forum	A local authority forum at which Council Members discuss and make decisions on food law enforcement services.
Metropolitan Authority	A local authority normally associated with a large urban conurbation in which the County and District Council functions are combined.
Risk rating	A system that rates food premises according to risk and determines how frequently those premises should be inspected. For example, high risk premises should be inspected at least every six months.
Safer food, better business (SFBB)	A food safety management system, developed by the Food Standards Agency to help small catering and retail businesses put in place food safety management procedures and comply with food hygiene regulations.
Service Plan	A document produced by a local authority setting out their plans on providing and delivering a food service to the local community.
Trading Standards	The Department within a local authority which carries out, amongst other responsibilities, the enforcement of food standards and feeding stuffs legislation.
Trading Standards Officer (TSO)	Officer employed by the local authority who, amongst other responsibilities, may enforce food standards and feeding stuffs legislation.
Unitary Authority	A local authority in which the County and District Council functions are combined, examples being Metropolitan District/Borough Councils, and London

Boroughs. A Unitary Authority's responsibilities will include food hygiene, food standards and feeding stuffs enforcement.