

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

London Borough of Brent
15-17 July 2014



Foreword

Audits of local authorities' feed and food law enforcement services are part of the Food Standards Agency's (FSA) 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 their Environmental Health and Trading Standards Services.

The attached audit report examines the Local 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 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 the audit report can be found at Annex C.

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1.0 Introduction

- 1.1 This report records the results of an audit at the London Borough of Brent 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. Hard copies are available from the Food Standards Agency's Operations Assurance 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 the London Borough of Brent 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 the food hygiene service had not been audited by the Agency in the previous five years and Local Authority Enforcement Monitoring Systems (LAEMS) data submitted by the Authority indicated an audit would be beneficial.

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).

Scope of the Audit

- 1.5 The audit examined the London Borough of Brent's arrangements for food premises database management, food premises interventions 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 Civic Centre, Engineers Way, Wembley on 15-17 July 2014.

Background

- 1.7 The London Borough of Brent is situated in north west London, and forms part of outer London. The major areas are Kilburn, Kingsbury, Harlesden, Wembley and Willesden. Brent is home to Wembley Stadium, one of the country's biggest landmarks, housing two of the largest restaurants in the UK, as well as Wembley Arena. The Authority was one of the host London Boroughs for the 2012 London Olympics and has shared responsibility with another London Borough for Park Royal, the largest industrial park in western Europe.
- 1.8 Brent has the eighth largest population in London, with an ethnically diverse population of around 283,000. The 2011 census indicated that about 33% of the population was of South Asian heritage, 19% of African and Caribbean heritage and about 7% were other ethnic groups. About 4% of the population is White Irish, the highest in London and the highest in any local authority in England and Wales.
- 1.9 The area contains a wide mix of food business establishments, including a significant number of manufacturers, many of which require approval under Regulation (EC) No. 853/2004.
- 1.10 Food hygiene law enforcement was the responsibility of the Food, Health and Safety Team, within Regulatory Services which formed part of the Environment and Protection Division and Environment and Neighbourhoods Department. Other key activities carried out by the team included inspection of health and safety at high risk premises, investigations of infectious disease notifications, accident investigations, enforcement of smoke free legislation and licensing of

premises offering special treatments. Food standards enforcement also fell under the remit of the Service.

- 1.11 The Authority reported the profile of the London Borough of Brent's food businesses as of 31 March 2014 as follows:

Type of Food Premises	Number
Primary Producers	0
Manufacturers/Packers	104
Importers/Exporters	14
Distributors/Transporters	122
Retailers	708
Restaurant/Caterers	1,608
Total Number of Food Premises	2,556

2.0 Executive Summary

2.1 The Authority was selected for audit as it had not received an audit of its food hygiene service in the previous five years and returns made to the Agency indicated that there was a high ratio of food establishments to full time equivalent officers (FTEs).

2.2 The Authority had recently faced several challenges, including severe management cuts, centralisation of administrative and IT support and the Service had moved to a newly built civic centre a year ago. The Service had been managed for a temporary six month period in the last financial year by one of the officers acting up whilst the Regulatory Service Manager had been seconded to other health and safety duties. Following the findings of this audit, the Authority advised that approval would be sought for the appointment of an interim team leader to assist in prioritising the work that was required to address the improvements identified.

2.3 **Strength:**

Officer authorisation and competency: From audit evidence and discussion, it was clear that officers carrying out interventions were competent, experienced and knowledgeable. Although there were some issues with retrievability, records maintained by officers were generally comprehensive and detailed for all food activities examined.

2.4 **Key areas for improvement:**

Service Planning, interventions and inspections: There was a significant backlog of overdue food premises interventions. The extent of the backlog was such that it would not be possible to recover the inspection programme with the current staff resources. This was not being sufficiently addressed or highlighted in the draft Service Plan. Internal monitoring was too narrowly focussed and unable to give a broad view of performance,

Enforcement: Although officers had historically used a wide range of formal enforcement activities, a significant recent decrease in some formal enforcement actions was noted. Time consuming prosecutions and hygiene improvement notices (HINs) were diminishing as a reflection of the reduction in staff numbers though formal and voluntary closures were still being undertaken.

Database and records: There was a lack of IT support or specialist technical knowledge available to the team, which would assist in easy navigation and access of the reporting systems necessary for delivering a more effective food service. The reporting system was gradually being upgraded but officer records on food premises were

not adequately linked to ensure that a clear and easily retrievable food business compliance history was available. Reliable records are essential to inform future officer interventions, a graduated approach to enforcement and to enable effective internal monitoring.

Approved establishments: There was a particular problem with retrievability of documentation associated with approved establishments. In addition, the approvals process for product specific establishments required review to ensure compliance with the requirements of the Food Law Code of Practice and associated guidance.

3.0 Audit Findings

3.1 Organisation and Management

Strategic Framework, Policy and Service Planning

- 3.1.1 The Authority had developed a draft Health, Safety and Food Service Plan for 2014/15 which stated that the objective of the service 'is to provide a food safety and health and safety service to consumers and the business community ensuring a balance between consumer health and safety and standards and economic prosperity for businesses and local communities through advice, education and in a minority of cases, enforcement.'
- 3.1.2 Although the structure of the Service Plan was generally in line with the format of the Service Planning Guidance in the Framework Agreement, it omitted some key information about the food service. For example, the Plan did not include a sufficiently detailed comparison of the staff resources required to deliver the Food Law Enforcement Service and all the demands placed upon it, including any existing backlog of inspections and unrated establishments, i.e. those still waiting to be inspected for the first time, such as newly registered businesses. The absence of this information in the Service Plan made it difficult to quantify and demonstrate any shortfall in resources to senior management and Members.
- 3.1.3 The Plan should also usefully contain:
- an accurate breakdown of the planned intervention programme for the year, including a managed strategy for lower risk rated premises in compliance with the Food Law Code of Practice (FLCoP).
 - external factors which may impact on the service such as the percentage of food business owners whose first language is not English.
 - other demands on the service such as high business churn and imported food inspection, more emphasis on work generated at Wembley Stadium and Primary Authority Partnerships.
 - a detailed review of performance to address any variance from meeting the requirements of the previous years' Service Plans.
- 3.1.4 The 2014/15 draft Plan was intended to be brought to Cabinet for approval later in the autumn, though approval of Service Plans had not been sought from Members in recent years.

Recommendations

3.1.5 The Authority should:

- (i) Ensure future Service Plans are in full accordance with the Service Planning Guidance in the Framework Agreement, to include details of the proposed food premises intervention programme including overdue and unrated establishments for the year, and a clear comparison of resources required to carry out the full range of statutory food law enforcement activities compared to those actually available. [The Standard – 3.1]
- (ii) Ensure that a full documented review is carried out at least once a year based on the service delivery plan and submitted for approval to the relevant Member forum or, where delegated, to relevant senior officers. Any variance in meeting the Plan should be addressed in the following year's Plan. [The Standard – 3.2 and 3.3]
- (iii) Ensure that the Service has a sufficient number of suitably qualified, experienced and competent officers to carry out the work set out in the Food Service Plan. [The Standard – 5.3]

Documented Policies and Procedures

- 3.1.6 The Authority had developed policies and procedures covering most areas within the scope of the audit with the exception of some formal enforcement procedures. Many procedures required further review and updating in order to provide comprehensive operational guidance to officers and to facilitate effective qualitative internal monitoring.
- 3.1.7 Although there was no formal document control procedure in place, the Regulatory Service Manager maintained a master list of documents which identified dates for review. This document required updating. Procedures were stored on an electronic shared drive with protected access.

Recommendation

3.1.8 The Authority should:

Ensure that all documented policies and procedures are reviewed at regular intervals and whenever there are changes to legislation or centrally issued guidance. [The Standard - 4.1]

Officer Authorisations

- 3.1.9 The Authority had developed an authorisation procedure with an associated comprehensive management matrix listing up to date legislative references. The procedure required updating to include a process or methodology for assessment of competency of officers, requirements for officers to undertake induction, refresher and update training and continuing professional development (CPD) training in accordance with the FLCoP. A signed authorisation document for each individual officer would be of benefit to provide a link between the authorisation procedure and the management matrix.
- 3.1.10 Checks on authorisation records confirmed that officers were being authorised under current legislation at an appropriate level and were acting within the limits of their authorisation.
- 3.1.11 Auditors were advised that officers were responsible for identifying their own training needs. Checks on comprehensive and easily retrievable records of officer training confirmed that officers were, with the exception of one, generally meeting the FLCoP minimum 10 hours relevant training per annum based on the principles of CPD. There was little evidence of recent officer training in the inspection of specialist processes and approved establishments and enforcement training, which would be of particular assistance to officers in the Authority due to the nature of its food business profile. Additional training in IT may also be of benefit to key officers. A training matrix identifying gaps in officer training would assist in the management and planning of officer training requirements in accordance with the FLCoP.
- 3.1.12 The Authority had appointed a Lead Officer for food, who could demonstrate that they had the necessary experience and qualifications for that role.

Recommendations

3.1.13 The Authority should:

- (i) Further develop the documented procedure for the authorisation of officers to include assessment of officer competence and training needs in accordance with the Food Law Code of Practice (FLCoP).
[The Standard - 5.1]
- (ii) Ensure that all authorised officers receive training needed to be competent to deliver the technical and administrative aspects, for the work in which they are involved, including training in specialist processes, inspection of approved establishments, enforcement training, and IT training, where applicable.
[The Standard – 5.4]

3.2 Food Premises Database

- 3.2.1 Some procedural documentation for officer guidance had been developed, for example the property database management procedure, but the service would also benefit from the development of procedures on running database reports, inputting data codes and ensuring the accuracy and security of the database.
- 3.2.2 The Service operated a computer database system that was capable of providing the returns required for the Local Authority Enforcement Monitoring System (LAEMS). Generally the database appeared to be reasonably accurate for enabling LAEMS reporting to the Agency, although from audit checks and discussion with the Authority, the broad compliance figures were likely to be based on overdue and outdated risk rating scores.
- 3.2.3 The Authority advised that prior to the Olympics, a substantial amount of work was undertaken with other departments to cleanse and update the database and ensure all businesses were recorded. Audit database checks on a random selection of food businesses from a commercial directory and websites confirmed that these were all present on the Authority's database.
- 3.2.4 Officers had responsibility for entering records of enforcement activity, including inspection details and risk ratings on to the system. Auditors noted some minor errors in data codes input by officers which would affect reporting but this could be corrected by regular internal monitoring checks and additional staff training. From file checks carried out, risk rating scores appeared to be appropriate and accurate.
- 3.2.5 Checks were also carried out on a number of database reports to ensure the Service could be effectively delivered and managed using a reliable database. Generally these reports could be run, although there was some difficulty in retrieving the list of unrated establishments.
- 3.2.6 It was noted during the audit that the database reporting mechanisms were slow and difficult to navigate and retrieve information. These particular issues were noted with the statutory notice register, inspections completed by each officer, and approved establishment records. IT support had been centralised and responsibility for analysis and reporting lay with the Regulatory Services Manager. The Service would benefit from additional specialist IT support, or additional officer training, for further development, review and management of the system. The Service advised that consideration was being given to upgrading their reporting systems.

Recommendation

3.2.7 The Authority should:

Develop, maintain and implement a documented procedure to ensure that the food premises database is accurate, reliable and up to date, can be easily interrogated and that reports can be easily and reliably run for the effective delivery, management and monitoring of the food service.
[The Standard – 11.2]

3.3 Food Premises Interventions

Interventions and Inspections

- 3.3.1 Information provided in the draft Food Service Plan 2014/15 and figures submitted as part of the Authority's LAEMS return for 2013/14 indicated the following premises profile as of 31 March 2014:

Premises Risk Category	Number of Premises (from LAEMS return)	Establishments due for inspection (from draft Service Plan)
A	23	10
B	182	72
C	1,099	243
D	440	56
E	504	58
Unrated	95	91
Not in programme	213	–
Total	2,556	530

- 3.3.2 The Service Plan set out the proposed intervention programme for the year. This aimed to raise food business compliance of high risk premises and those with low food hygiene rating scheme scores that posed the highest risk to health. The Service had a key performance indicator of at least 85% food establishments broadly compliant. Once establishments were risk rated as broadly compliant they were not prioritised for intervention. In practice this meant they were generally not receiving interventions, and there was evidence of some establishments not receiving official controls for a considerable time. This included some businesses rated as higher risk category B and C and a supermarket delicatessen, risk rating D, which was due an inspection in 2007.
- 3.3.3 It was noted from LAEMS returns reported by the Authority to the FSA that the number of interventions achieved had decreased significantly during the last three years, against an increase in total number of premises in the Borough during this time from 2,431 to 2,568:

Interventions Achieved			
Premises Rating	31 Mar 2012	31 Mar 2013	31 Mar 2014
A	60	48	22
B	237	190	100
C	442	373	202
D	77	45	39
E	47	23	9
Unrated	173	166	135
Premises outside the scheme	7	7	2
Totals	1,043	852	509

- 3.3.4 The following table shows the increasing trend of overdue interventions at higher risk establishments. The figures at 30 June 2014 were established during the audit visit. The total outstanding inspections due at 30 June 2014, including lower risk rated category D and E establishments was 1,736.

Due interventions outstanding				
Premises Rating (Higher risk)	31 Mar 2012	31 Mar 2013	31 Mar 2014	30 June 2014
A	2	3	12	14
B	11	68	104	138
C	543	686	760	827
Unrated	61	46	95	137
Totals	617	803	971	1,116

- 3.3.5 Although the Authority was prioritising highest risk interventions in accordance with the FLCoP, a strategy to include and actively manage the broadly compliant and lower risk establishments in the intervention programme needed to be implemented. The number of unrated establishments was also increasing, and the LA regularly focused on these as a team. Auditors discussed prioritising the highest risk unrated establishments and inspecting these within the 28 days of registration in accordance with the FLCoP.
- 3.3.6 The Service had developed procedures for inspections of food premises and approved establishments. These would benefit from some updating and expanding to cover guidance for officers on evaluation of HACCP, the recent FSA E. coli cross-contamination guidance and imported food controls. The procedure for approved establishments contained out of date legislative and guidance references and would benefit from the inclusion of advice on serving Remedial Action Notices and withdrawal/suspension procedures as

well as reference to latest FSA guidance on approval of establishments.

- 3.3.7 File checks were carried out on a number of files from registered food establishments and the high turnover of businesses within the Borough was evident to auditors. In all cases examined, the aides-memoire used by officers were generally well completed, including HACCP assessment and basic traceability and supplier checks. Officers' risk rating and FHRS scores were found to be up to date, accurate and consistent with inspection findings and in all cases the FBO was made aware of the officer's assessment of compliance, either by way of a handwritten summary of inspection form or typed letter sent after the inspection.
- 3.3.8 Officer records should also usefully include completion of the 'summary of previous findings' section of the aide-memoire which was not being completed in all cases. It was not always clear that compliance of the business with the FSA's E. coli cross-contamination guidance or business product recall/withdrawal procedures had been adequately assessed where applicable. It would also be helpful for officers to include more information on the size and scale of the business and type of food activities being carried out at the premises. The Authority would benefit from amending their aide-memoire to create additional prompts for officers in assessments of food business compliance.
- 3.3.9 There was no evidence of a consistent approach to revisits being undertaken. In the most serious cases of non-compliance these were generally being followed up by the officer and in one case further formal action was taken. In other examples where less serious contraventions had been found, these were not always followed up with timely and effective revisits as had been advised to the FBO.
- 3.3.10 Electronic records for three approved establishment files were examined. Two of the approved establishments were overdue for inspection by up to 18 months. In all cases an appropriate aide-memoire was in use and comprehensive intervention details were recorded. However, information required by Annex 10 of the Food Law Code of Practice Guidance 'Approval of product-specific establishments subject to approval under Regulation 853/2004 - food authority files' was not always retrievable or available.
- 3.3.11 In some cases, the approval process did not follow the requirements of the FLCoP or Practice Guidance. For example, in each file examined delays were noted between conditional approval status being granted and the FBO being advised. In one file, there was no evidence of a preceding inspection or review prior to granting a full approval. Auditors also noted delays in issuing full approval letters to the FBO.

- 3.3.12 Auditors noted an exceptionally accurate correlation between the lists of approved establishments held by the Authority and those publically available from the FSA website.

Verification Visit to a Food Premises

- 3.3.13 During the audit, a verification visit was undertaken to a local catering establishment with the officer 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.
- 3.3.14 It was evident that the officer was familiar with the premises, had a good working relationship with the FBO, very thoroughly assessed the business' compliance with legal requirements, and was providing helpful advice and guidance to the FBO.

Recommendations

3.3.15 The Authority should:

- (i) Carry out food hygiene interventions/inspections at a frequency which is not less than that determined by the Food Law Code of Practice. [The Standard – 7.1]
- (ii) Carry out interventions and inspections and approve relevant establishments in accordance with relevant legislation and centrally issued guidance. [The Standard - 7.2]
- (iii) Assess the compliance of establishments and systems including those in approved establishments to legally prescribed standards and take appropriate and timely action on any non-compliance found in accordance with the Authority's enforcement policy. [The Standard – 7.3]
- (iv) Review, update and implement the procedures for interventions and inspections at general and approved establishments in accordance with the FLCoP and practice guidance. [The Standard – 7.4]
- (v) Ensure that information obtained during interventions is stored in such a way that it can be easily retrieved. [The Standard – 7.5]

3.4 Enforcement

- 3.4.1 The Authority's corporate wide enforcement policy required review and updating to have regard to the Regulators' Compliance Code. Auditors were advised this policy was being revised.
- 3.4.2 Templates and flowcharts for a number of food safety enforcement procedures, including inspection, detention and seizure of foods, imminent risk and closure of premises and review of prosecutable offences had been provided for officers as annexes to the inspections procedure. These would benefit from being further developed to provide more detailed guidance for officers. The Authority would also benefit from producing guidance for officers in procedures for prosecutions, simple cautions, voluntary surrenders and closures, hygiene improvement notices (HIN) and remedial action notices in accordance with the requirements of the FLCoP.
- 3.4.3 It was evident that historically the Authority had been using the full range of enforcement powers available as part of a robust graduated approach to enforcement. Auditors noted that there was significantly less evidence of formal action being undertaken during 2013/14 than in previous years.
- 3.4.4 Files were examined for a wide range of enforcement actions including HINs, a voluntary surrender, a seizure, voluntary closures, hygiene emergency prohibitions and prosecutions. From file checks carried out it was noted that generally these enforcement actions had been an appropriate course of action, were well documented, and carried out by authorised officers.
- 3.4.5 In two of the three files examined for HINs served, this was found to be an appropriate course of action. There was no evidence on the files examined of proof of service of notice, though this may have been an electronic recording/reporting failure. In all cases there had been follow-up checks made and written confirmation provided to the FBO confirming compliance of the contravention. There was little evidence of internal monitoring of HINs.
- 3.4.6 The Authority's notice register was unable to report HINs served and was not supported by IT. Auditors discussed the overall significant decrease in HINs recently served and the observation that they had all been served by only one officer.
- 3.4.7 Hygiene emergency prohibition notices for formal closures and a voluntary closure file were examined. In all cases the action was appropriate and taken in accordance with the Authority's own policies and procedures. Appropriate follow up visits were made by officers and closures were lifted in a timely manner. There was evidence of internal monitoring of these formal actions.

- 3.4.8 Prosecution files were examined from the year 2012/13. In all cases the action taken was appropriate, however auditors noted an increasing delay in taking prosecutions. The Authority advised of a system of reviewing prosecutions, including completion of two weighting mechanisms; a scoring matrix and an evidence test which were in place to consider whether prosecutions should proceed to the Authority's legal department. Auditors were advised that this review system was creating a back log of prosecutions and there had been no prosecutions taken yet from 2013/14. A number of FBOs had been sent warning letters instead of formal enforcement being undertaken.
- 3.4.9 Files examined for a voluntary surrender and seizure of food showed that again this was an appropriate course of action, undertaken by authorised officers. It was difficult to retrieve evidence of waste transfer and destruction documentation. There were no records of internal monitoring of actions undertaken.

Recommendations

3.4.10 The Authority should:

- (i) Review and update the Authority's documented enforcement policy which should be approved by the appropriate Member forum or relevant senior officer.
[The Standard – 15.1]
- (ii) Develop, review, update and implement documented enforcement procedures for all food enforcement activities including prosecutions, simple cautions, voluntary surrenders and closures, hygiene improvement notices and remedial action notices.
[The Standard – 15.2]
- (iii) Carry out timely food law enforcement in accordance with the Food Law Code of Practice.
[The Standard – 15.3]

3.5 Internal Monitoring, Third Party or Peer Review

Internal Monitoring

- 3.5.1 An internal monitoring procedure had been developed which included monitoring of food law enforcement activities such as inspections, sampling and food complaints/service requests. Auditors discussed the importance of internal monitoring checks to ensure compliance with official guidance and the Authority's own procedures as well as ensuring consistency between officers.
- 3.5.2 The ad hoc internal monitoring being undertaken did not in all cases reflect the monitoring procedure in practice. The procedure would benefit from review, expansion and implementation to also include risk based and proportionate monitoring of the database, and enforcement activities.
- 3.5.3 There was little evidence of qualitative internal monitoring recorded in files checked during the audit, for example interventions undertaken, notices served, food sampling or requests for service. From officer discussion and as advised by the Authority, ad hoc day to day qualitative monitoring was undertaken for officer food safety activities but this was not generally recorded.
- 3.5.4 Auditors were advised of staff 'one to one' meetings which were carried out four to six weekly, annual appraisals and half yearly reviews. Regular team meetings were held and minutes of these maintained.
- 3.5.5 A procedure for the collection of quantitative performance monitoring data was also available, but the team was no longer supported by an administrative support officer who had historically collated the performance monitoring data.

Recommendations

3.5.6 The Authority should:

- (i) Review, expand and implement the documented internal monitoring procedures to also include qualitative and quantitative monitoring of the database, interventions, enforcement actions and food law activities to ensure compliance with official guidance, the Standard, the Authority's own documented policies and procedures and consistency of enforcement between officers.
[The Standard – 19.1]
- (ii) Maintain records of internal monitoring for at least two years. [The Standard – 19.3]

Food and Food Premises Complaints

- 3.5.7 The Service had produced a policy and procedure 'Responding to Service Requests' which included the investigation of food and food premises complaints.
- 3.5.8 Checks were made on records for five complaints relating to food and food premises received by the Authority in the last six months. Comprehensive records of progress and follow-up of investigations confirmed that generally they were appropriately and thoroughly investigated as part of a risk based approach.
- 3.5.9 Although there was no evidence recorded of internal monitoring of complaints or requests for service, the Manager advised that these were discussed at staff 'one to one' meetings.

Food Inspection and Sampling

- 3.5.10 The Authority had developed and recently reviewed their sampling policy and procedures. A local sampling programme had been drafted for 2014/15 which was awaiting Senior Manager approval, and no food samples during this financial year had yet been taken at the time of audit. The programme appeared to be targeted and appropriate to the type of food businesses in the Borough. The Authority made use of its credit allocation for sampling from the Health Protection Agency.
- 3.5.11 Records of four food samples were examined, all as part of a local survey and in each case, sampling officers had promptly made the FBO aware of the results with a useful advisory letter and a copy of the results was provided to the FBO in all cases. Consideration

should be given to effective additional follow-up sampling where unsatisfactory results were noted.

Recommendation

3.5.12 The Authority should:

Take appropriate action in accordance with its enforcement policy once reviewed, where sample results are not considered to be satisfactory.

[The Standard – 12.7]

Records

- 3.5.13 All records of food law enforcement activities were maintained electronically on the food premises database system. Generally, documented records maintained by officers were comprehensive for food law service activities including officer interventions, requests for service, sampling, and enforcement actions.
- 3.5.14 There were issues in retrieving some documentation, for example for approved establishments. The Authority advised of a system of three recording systems on the database which created difficulties in linking documentation to food establishments generally.
- 3.5.15 A further issue noted by auditors was a lack of signatures, electronic or otherwise recorded in formal enforcement documentation.

Recommendation

3.5.16 The Authority should:

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

Records for individual establishments should be easily linked to enable easy retrieval and provide a complete history of food law enforcement activity.

[The Standard – 16.1]

Third Party or Peer Review

- 3.5.17 There had been no relevant regional food liaison group inter-authority audit initiatives in the past two years though the Authority advised they were proactively pursuing potential inter authority auditing within

the North West London Sector food liaison group of which they were members.

Auditors: Jane Tait
Sarah Green

Food Standards Agency
Operations Assurance Division

ANNEX A Action Plan for the London Borough of Brent

Audit date: 15-17 July 2014

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.1.5(i) Ensure future Service Plans are in full accordance with the Service Planning Guidance in the Framework Agreement, to include details of the proposed food premises intervention programme including overdue and unrated establishments for the year, and a clear comparison of resources required to carry out the full range of statutory food law enforcement activities compared to those actually available. [The Standard – 3.1]</p>	<p>31/03/15</p>	<p>Brent Council takes food safety seriously. We share responsibility for Park Royal, Western Europe’s largest industrial trading estate; we have the two largest restaurants in London at Wembley Stadium, and we have a disproportionately large number of food manufacturing or importing businesses compared to other similar authorities reflecting in part our historic industrial base and in part the diversity of our community. The safety of our residents is a critical concern for us.</p>	<p>Work has begun to determine the resources necessary to achieve full compliance with The Standard and the FLCoP for the future, together with options for funding them. October 2014</p> <p>The service pressure has been identified to the Portfolio Holder. The importance of identifying a realistic and sustainable service level for 2015/16 and future years having regard to seriously limited and reducing resources is a key issue. October 2014</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.1.5(i) continued		<p>Completely rewrite the Regulatory Services' Food Safety Service Plan ready for the 2015/16 municipal year to include a detailed food premises intervention programme including overdue and unrated establishments for the year, and a clear comparison of staff resources required to carry out the full range of statutory food law enforcement activities compared to those actually available.</p> <p>Develop options for funding any increases in staffing identified as necessary and ensure these are considered as part of the Council's 2015/16 budget processes.</p> <p>The service plan will be put forward for Members Approval by end March 2015.</p>	A draft of the 2015/16 Food Safety Service Plan has been prepared for senior manager input. November 2014

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.1.5(ii) Ensure that a full documented review is carried out at least once a year based on the service delivery plan and submitted for approval to the relevant Member forum or, where delegated, to relevant senior officers. Any variance in meeting the Plan should be addressed in the following year's Plan. [The Standard – 3.2 and 3.3]</p>	<p>31/03/15</p>	<p>The importance of a review is understood. Future food service plans will include a review of the previous year's activity and will be submitted to Members for approval each municipal year.</p>	<p>The 2015/16 service plan has been drafted to include a review section. November 2014</p> <p>The plan will be presented to Members by 31 March 2015.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.1.5(iii) Ensure that the Service has a sufficient number of suitably qualified, experienced and competent officers to carry out the work set out in the Food Service Plan. [The Standard – 5.3]	31/06/15	<p>Review staff resources required to carry out the full range of statutory food law enforcement as detailed in the Service Plan by 31st March 2015.</p> <p>Seek political agreement as to the priority to be given to an increase in food law resources and appropriate adjustments to resources by 31st March 2015.</p> <p>Undertake any necessary new recruitment or structural changes if Members agree to provide additional resources from 2015/16 onwards, by 30 Jun 2015.</p>	<p>An Interim Regulatory Team Leader has been appointed and is developing the necessary compliance documentation identified in the Audit which will assist Enforcement Officers, Managers and Members. October 2014</p> <p>Work on the advertising and recruitment of a permanent Regulatory Team Leader has commenced and advertisements are scheduled before 9 January 2015.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.1.5(iii) continued		<p>In early 2014 the council restructured a number of its regulatory functions including food law enforcement bringing many services together under a single Head of Regulatory Services. Prior to the FSA audit the council determined that a strategic review of Regulatory Services in 2015/16 should consider:</p> <ul style="list-style-type: none"> • the statutory requirement to deliver these services; • the scope for shared regulatory services with other councils; • the scope for income generation and commercial activity; and • alternative service delivery arrangements including out-sourcing either to the private sector, management buy-out; or cooperative or mutual organisations. <p>The council intends to consider the FSA's recommendations regarding long term resourcing in the context of this review of regulatory services, so that decisions can be made about priorities for all regulatory functions.</p>	<p>Two vacant EHO posts were advertised for permanent recruitment, but no suitable candidate identified. October 2014</p> <p>These posts have now been reviewed and revised and will be advertised. November 2014</p> <p>In the meantime, two interim agency staff have been identified to cover the vacant posts and will be appointed in December 2014.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.1.8 Ensure that all documented policies and procedures are reviewed at regular intervals and whenever there are changes to legislation or centrally issued guidance. [The Standard - 4.1]	31/03/15	<p>All policies and procedures will be reviewed and revised to ensure compliance with FLCoP and to facilitate improved operational standards and consistency.</p> <p>The Document Control Procedure is being improved to ensure policies and procedures will be kept up to date with changes in legislation or guidance in the future.</p>	<p>A project plan has been put in place to ensure all food policies and procedures will be reviewed and updated as appropriate. December 2014</p> <p>Procedures and plans have been prioritised to ensure early benefit will be derived for crucial operational procedures such as Approvals and Food Law Enforcement.</p> <p>It is anticipated this process will be completed in time to support presentation of the Food Safety Service Plan to Members by 31st March 2015.</p>
3.1.13(i) Further develop the documented procedure for the authorisation of officers to include assessment of officer competence and training needs in accordance with the Food Law Code of Practice (FLCoP). [The Standard - 5.1]	31/03/15	The authorisation of officers procedure shall be reviewed and updated as part of the review of policies, procedures and operational standards (as above)	Work has begun to update authorisation of officers' procedure. This procedure has been prioritised for early completion. Proposed 31st January 2015 .

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.1.13(ii) Ensure that all authorised officers receive training needed to be competent to deliver the technical and administrative aspects, for the work in which they are involved, including training in specialist processes, inspection of approved establishments, enforcement training, and IT training, where applicable. [The Standard – 5.4]</p>	<p>31/03/15</p>	<p>Ensure all CPD records are brought up to date forthwith.</p> <p>Review training around technical areas identified in the audit report.</p> <p>Continue to review training needs during appraisal review and 121 meetings.</p> <p>Training needs assessment scheduled for January/February 2015.</p>	<p>Our previous audit by the Food Standards Agency (FSA) was in 2003 and identified “no key areas for improvement”. We are pleased that this audit recognised that our high professional standards had been maintained.</p> <p>All officers have updated their CPD records. October 2014</p> <p>In the meantime, there is a strong commitment to ensure training opportunities are taken wherever possible such as the recent PHE Food and Environment Sampling training course completed for all Enforcement Officers. 6 November 2014</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.2.7 Develop, maintain and implement a documented procedure to ensure that the food premises database is accurate, reliable and up to date, can be easily interrogated and that reports can be easily and reliably run for the effective delivery, management and monitoring of the food service. [The Standard – 11.2]</p>	<p>31/03/15</p>	<p>Review and update property database management and collection of performance monitoring data procedures including updating software reports that are used to capture performance data.</p> <p>Analysis of options for future monitoring reports and support of data integrity is being undertaken and will be implemented once agreed. December 2014</p> <p>Where the development of these reports is beyond the capacity or skills of the in – house resources, these will be commissioned externally. January 2015</p>	<p>Database management procedure has been reviewed and will be updated as part of the Policy and Performance review programme referred to earlier.</p> <p>Regulatory Service Manager and Performance Standards Officer have both attended refresher software report training which will assist with future report preparation. October 2014</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.3.15(i) Carry out food hygiene interventions/inspections at a frequency which is not less than that determined by the Food Law Code of Practice. [The Standard – 7.1]</p>	<p>30/06/15</p>	<p>The key issue is the identification, agreement to and recruitment of additional resources as described at 3.1.5 (iii) above. This will be completed by 31 March 2015.</p> <p>The priority given to performance monitoring has increased. The data collected will be assessed expediently to ensure any deviance from the FLCoP and the intervention plan once developed, will be identified and acted upon early.</p> <p>We additionally plan to completely review internal arrangements for performance monitoring to give greater transparency to any slippage from the FLCoP, by 31 December 2014.</p> <p>Advertise to recruit existing vacant posts by 31 December 2014.</p> <p>Recruit additional temporary agency / contracted inspectors by 31 December 2014.</p>	<p>Overdue inspections have been prioritised and targeted in risk category and overdue date order. October 2014</p> <p>This has enabled calculations to be made showing the anticipated staffing shortfall which will feed into the 2015/16 Food Safety Service Plan. November 2014.</p> <p>In order to carry out the interventions referred to in this recommendation, it will be necessary to complete the recruitment proposals set out in response to Recommendation 3.1.5 (iii)</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.3.15(i) continued		Any increase in permanent staffing, will result in recruitment, which if successful, will provide additional permanent employees by 30 June 2015 .	
3.3.15(ii) Carry out interventions and inspections and approve relevant establishments in accordance with relevant legislation and centrally issued guidance. [The Standard - 7.2]	30/06/15	<p>Previously good arrangements for internal monitoring were compromised by reductions in managerial capacity and support capacity.</p> <p>The Document Control Procedure is being reviewed to ensure policies and procedures will be kept up to date with changes in legislation or guidance in the future. December 2014</p> <p>A data control procedure is also being developed to ensure close monitoring of data inputs and ensure early warnings of any issues threatening data integrity. December 2014</p> <p>The recruitment to the vacant Regulatory Team Leader post will restore part of the internal monitoring capacity. April 2015</p>	<p>Recruitment plans have been set out in response to earlier recommendations. This is to ensure sufficient resources are available to undertake the identified interventions.</p> <p>Database management procedure has been reviewed and will be updated as part of the Policy and Performance review programme referred to earlier. October 2014</p> <p>Regulatory Service Manager and Performance Standards Officer have both attended refresher Crystal Reports training which will assist with future report preparation. October 2014</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.3.15(ii) continued		The remaining absent internal monitoring capacity will be reviewed as part of the 2015/16 Food safety service plan. 30 June 2015	A report identifying options for how future monitoring reports can ensure data integrity is being considered and will be implemented once agreed. November 2014
3.3.15(iii) Assess the compliance of establishments and systems including those in approved establishments to legally prescribed standards and take appropriate and timely action on any non-compliance found in accordance with the Authority's enforcement policy. [The Standard – 7.3]	30/06/15	<p>Review and update all approved premises records and address any non-conformities.</p> <p>Review inspection regularity of all such premises, giving priority to any overdue premises for re-inspection.</p> <p>This is a resource dependent action, and the intermediate milestones are:</p> <p>Advertise permanent Regulatory Team Leader vacancy by 31 December 2014.</p> <p>Subject to successful recruitment, a new Regulatory Team Leader to have started work by April 2015.</p> <p>Regulatory Team Leader to complete required assessment by 30 June 2015.</p>	<p>Approved premises records being updated and FSA notified of changes identified. October 2014</p> <p>Future integrity of this system will be ensured through improved data integrity checks and enforcement procedures as indicated in response to recommendation 3.1.15 (ii) above.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.3.15(iv) Review, update and implement the procedures for interventions and inspections at general and approved establishments in accordance with the FLCoP and practice guidance. [The Standard – 7.4]</p>	<p>31/03/15</p>	<p>Review and update procedures for approved premises interventions to include withdrawal/surrender, remedial action notices and E. coli guidance.</p> <p>To aid consistency and ensure compliance with FLCoP the existing checklist and post inspection report will be reviewed and revised. November 2014</p>	<p>A project plan has been put in place to ensure all Food policies and procedures will be reviewed and updated as appropriate. December 2014</p> <p>Procedures and plans have been prioritised to ensure early benefit will be derived for crucial operational procedures such as Approvals and Food Law Enforcement.</p> <p>It is anticipated this process will be completed in time to support presentation of the Food Safety Service Plan to Members in March 2015. 31 March 2015</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.3.15(v) Ensure that information obtained during interventions is stored in such a way that it can be easily retrieved. [The Standard – 7.5]</p>	<p>30/06/15</p>	<p>Review and update the manner in which premises records are held in the property database.</p> <p>Upgrade of back-office database being considered to simplify system arrangements.</p> <p>This relates to concerns about three separate systems being used. A review of the back-office systems is planned to consider scope for simplifying arrangements. This is expected to reach a conclusion by 31 March 2015.</p> <p>Subject to the findings of the above review, it is proposed to establish a system improvement project by 30 June 2015.</p>	<p>Work to explore the simplification of back-office systems has started. October 2014</p> <p>Options for ensuring a comprehensive system for ensuring data integrity are being considered. November 2014</p> <p>In addition a data control procedure has been included in the prioritised programme of procedural development and improvements. November 2014</p> <p>Consideration is also being given to moving to a system upgrade for Document Management System which may improve data retrieval. Software upgrade being reviewed. November 2014</p>
<p>3.4.10(i) Review and update the Authority's documented enforcement policy which should be approved by the appropriate Member forum or relevant senior officer. [The Standard – 15.1]</p>	<p>31/03/15</p>	<p>Review and update Council's Enforcement Policy. Present to future Cabinet for approval. By 31st March 2015</p>	<p>Work on a new Corporate Enforcement Policy is well-underway. A first draft has been produced by legal, and a second draft is being worked on for circulation to other enforcement teams within the Council by 31 December 2014.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.4.10(ii) Develop, review, update and implement documented enforcement procedures for all food enforcement activities including prosecutions, simple cautions, voluntary surrenders and closures, hygiene improvement notices and remedial action notices. [The Standard – 15.2]	31/12/14	<p>Review and update enforcement procedures and operational standards including all those specifically mentioned in the audit report.</p> <p>Review arrangements for routinely and regularly reviewing such documents, including the resources necessary to undertake this work.</p>	The review and update of this procedure has been prioritised for immediate attention. Work has started.
3.4.10(iii) Carry out timely food law enforcement in accordance with the Food Law Code of Practice. [The Standard – 15.3]	31/03/15	<p>Monitor and audit enforcement actions including prosecution reviews. Identify and forward warning letters, simple cautions or prosecution files to legal services.</p> <p>The procedure to improve actions for the future has been identified in the timetable for review; enforcement procedure and data control procedures in particular are relevant here.</p>	A full list of those cases requiring review has been confirmed and reviews commenced December 2014 .

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.5.6(i) Review, expand and implement the documented internal monitoring procedures to also include qualitative and quantitative monitoring of the database, interventions, enforcement actions and food law activities to ensure compliance with official guidance, the Standard, the Authority's own documented policies and procedures and consistency of enforcement between officers. [The Standard – 19.1]</p>	<p>30/06/15</p>	<p>Review and update internal monitoring procedures to include qualitative and quantitative monitoring of the database, interventions, enforcement actions and food law activities.</p> <p>Proposals for resourcing qualitative internal monitoring have commenced and will be reviewed as part of a wider range of requirements that depend on increases in staffing and will be considered as part of the 2015/16 Food Safety Service Plan which is going to Members in March 2015.</p> <p>The intermediate milestones for resourcing internal auditing requirements are:</p> <p>31 March 2015 – Food Service Plan agreed by Members</p> <p>30 June 2015 recruitment of any additional posts funded.</p>	<p>Database management procedure has been reviewed and will be updated as part of the Policy and Performance review programme referred to earlier.</p> <p>Regulatory Service Manager and Performance Standards Officer have both attended refresher software report training which will assist with future report preparation. October 2014</p> <p>A report identifying options for how future monitoring reports can ensure data integrity is being considered and will be implemented once agreed. This will have regard to both qualitative and quantitative data. November 2014</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.5.6(ii) Maintain records of internal monitoring for at least two years. [The Standard – 19.3]	31/03/15	Records will be kept for two years as specified.	<p>Existing records of internal monitoring have been retrieved or organised to be accessible. October 2014</p> <p>Measures are now in place to ensure suitable and sufficient records kept for the future. November 2014</p> <p>A procedure is being developed which will establish which records are to be kept and how. These have been prioritised for completion.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.5.12 Take appropriate action in accordance with its enforcement policy once reviewed, where sample results are not considered to be satisfactory. [The Standard – 12.7]</p>	<p>30/06/15</p>	<p>Monitor and audit sampling results to ensure appropriate action taken for unsatisfactory sampling results.</p> <p>Previously good arrangements for internal monitoring were compromised by reductions in managerial capacity and support capacity.</p> <p>It is planned to re-establish a new internal monitoring regime, supported by restoring the support capacity that has been lost and recruiting to a vacant managerial post. This will be subject to the same intermediate dates as for 3.5.6(i) above.</p>	<p>As indicated in response to recommendation 3.1.13 (ii) all Enforcement Officers have attended retraining on sampling</p> <p>Officers are now clear on action to be taken should an unsatisfactory sample result be received. This will be included in the sampling procedure.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.5.15 Maintain records in retrievable form for all food establishments and related food law enforcement activities in accordance with the Food Law Code of Practice. Records for individual establishments should be easily linked to enable easy retrieval and provide a complete history of food law enforcement activity. [The Standard – 16.1]	31/12/15	<p>Review and update the manner in which premises records is held in the property database. Review reports to retrieve premises records. Explore and adopt document management system for storing premises records.</p> <p>This will be subject to the same intermediate dates as 3.1.5(v) above.</p>	<p>Review of issues involved in IT simplification and upgrade programme has commenced. October 2014</p> <p>Database management procedure has been reviewed and will be updated as part of the Policy and Performance review programme referred to earlier.</p> <p>Regulatory Service Manager and Performance Standards Officer have both attended refresher software report training which will assist with future report preparation. October 2014</p> <p>A report identifying options for how future monitoring reports can ensure data integrity is being considered and will be implemented once agreed. November 2014</p>

Where actions in the action plan above depend upon a long-term increase in resources, target dates are provisional and will depend on budget process decisions Where improvements are dependent upon recruitment to posts that are currently vacant, but already funded, delivery of the improvements by the target date is dependent on successful recruitment and a prompt employment start date for the new staff.

ANNEX 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:

- Draft Health, Safety and Food Service Plan 2014/2015 with accompanying organisational structure.
- List of operational standards procedures, undated.
- The Authorising of Officers to Exercise Powers policy November 2002.
- Inspections procedure (including a number of enforcement flowcharts/templates for officer guidance). Issue 5.1 June 2014.
- Approval and Inspection of Product Specific Premises. Issue 3.
- Procedure for the Approval of Food Business Establishments. April 2009.
- Responding to Service Requests. November 2012.
- Procedures for Sampling and Swabbing for Analysis/Examination June 2014.
- Sampling of Foods and Feedstuff Issue 5, June 2014.
- Sampling plan for 2014/2015 (still requiring management approval).
- Regulatory Services Enforcement Policy 2005.
- Procedure for the Collection of Performance Monitoring Data Version 10, undated.
- Monitoring Service Quality procedure Issue 5 September 2004.
- Examples of recent team and food liaison group meeting minutes.

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

- General food premises inspections
- Approved establishments
- Food and food premises complaints
- Food sampling
- Formal enforcement activities.

(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) Discussions with Officers

- Head of Regulatory Services
- Regulatory Services Manager
- Environmental Health Officers
- Technical Officer.

(5) On-site verification check:

A verification visit was made with the Authority's officer 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.

ANNEX 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.
Environmental Health Officer (EHO)	Officer employed by the local authority to enforce food safety legislation.
External Temporary Storage Facility (ETSF)	A warehouse (formerly known as an enhanced remote transit shed or ERTS) designated by HM Revenue and Customs (HMRC), where goods are temporarily stored pending clearance by HMRC, and prior to release into free circulation.
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

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

The Framework Agreement consists of:

- Food and Feed Law Enforcement Standard
- Service Planning Guidance
- Monitoring Scheme
- Audit Scheme

The **Standard** and the **Service Planning Guidance** set out the Agency's expectations on the planning and delivery of food and feed law enforcement.

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.

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.

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	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.