

**Report on the Audit of Local Authority Food Law
Service Assessment of Food Businesses'
Food Safety Management System (FSMS)**

London Borough of Camden
23-24 March 2010



Foreword

Audits of local authorities' food law enforcement services are part of the Food Standards Agency's arrangements to improve consumer protection and confidence in relation to food. These arrangements recognise that the enforcement of UK food 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 Agency's website contains enforcement activity data for all UK local authorities and can be found at:

www.food.gov.uk/enforcement/auditandmonitoring.

The attached audit report examines the Local Authority's Food Law Enforcement Service. The assessment includes the local arrangements in place for officer authorisation and training, inspections of food businesses and internal monitoring. The audit scope was developed specifically to address Recommendations 9 and 15 of the Public Inquiry Report¹ into the 2005 E. coli outbreak at Bridgend, Wales. The programme focused on the local authority's training provision to ensure that all officers who check Hazard Analysis and Critical Control Point (HACCP) and HACCP based plans, including those responsible for overseeing the work of those officers, have the necessary knowledge and skills. Also, that existing inspection arrangements and processes to assess and enforce HACCP related food safety requirements in food businesses are adequate, risk based, and able to effect any changes necessary to secure improvements.

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 Local Authority Food Law Enforcement and is available on the Agency's website at:

www.food.gov.uk/enforcement/auditandmonitoring. 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.

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.

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

¹ <http://wales.gov.uk/ecolidocs/3008707/reporten.pdf?skip=1&lang=en>

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1. Introduction

- 1.1 This report records the results of an audit at the London Borough of Camden 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 food premises inspections, enforcement activities 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 Local Authority Audit and 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 London Borough of Camden was undertaken under section 12(4) of the Act as part of the Food Standards Agency's annual audit programme.
- 1.3 The Authority was included 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 25 Councils selected across England.

Scope of the Audit

- 1.4 The audit examined London Borough of Camden's arrangements for food premises inspections and internal monitoring with regard to food hygiene law enforcement, with particular emphasis on officer competencies in assessing food safety management systems based on HACCP principles. 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 other related food hygiene law enforcement activities.
- 1.5 Assurance was sought that key 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 office at the council offices, Argyle Street, London on the 23-24 March 2010.

Background

- 1.6 The London Borough of Camden forms part of the inner City of London, located to the north of the City, reaching from Holborn and Bloomsbury in the south of the Borough, to Hampstead Heath in the North. The Borough has an estimated population of 227,500.
- 1.7 The Borough has a wide socio-economic and cultural mix of residents and associated businesses, from affluent areas through to those exhibiting varying degrees of social and financial deprivation.
- 1.8 There are approximately 2,744 registered food premises in the Borough, the majority of which form part of the restaurant and catering sector, with a significant number of high profile small to medium sized retailers. There were also a relatively small number of larger manufacturers in the Authority's area, including establishments requiring approval under Regulation (EC) No. 853/2004.
- 1.9 The food safety section of the Trading Standards and Food Safety Team included a mix of Environmental Health Officers, Food Safety Officers and a Technical Officer, managed by the Operations Manager. The Team was responsible for enforcing food hygiene legislation and occupational health and safety in commercial food establishments.
- 1.10 The profile of London Borough of Camden's food businesses as of 31 March 2009 was as follows:

Type of food premises	Number
Primary Producers	0
Manufacturers/Packers	16
Importers/Exporters	1
Retailers	650
Restaurant/Caterers	2,071
Distributors/Transporters	6
Total number of food premises	2,744

2. Executive Summary

- 2.1 The Authority had developed a Regulatory Service Plan for 2008/09-2010/11, which included details of the Food Safety Service. However, the Service had been subject to reorganisation at the end of 2008 leading to changes in the management and delivery of the Service. The Regulatory Service Plan had not been reviewed or updated to take account of these changes. Auditors were unable therefore to fully assess whether the Authority had allocated sufficient resources for the Food Safety Service to deliver effectively the full range of food law enforcement activities. As a priority, the Service needed to review fully the substantial demands placed on the Service and provide relevant Members with detailed and reasoned estimates of the resources needed to deliver the Service.
- 2.2 The Authority was able to provide evidence that it had considered the recommendations made in the Pennington Inquiry Report (into the 2005 outbreak of E. Coli in south Wales – published March 2009), but had not formally introduced any specific measures aimed at addressing relevant recommendations. However, prior to that, the Authority had developed and implemented initiatives aimed at improving business compliance with HACCP and food safety management systems (FSMS) requirements, at higher risk food establishments.
- 2.3 The Authority had developed a full range of documented policies and procedures relating to their food law enforcement responsibilities, including procedures to assist officers undertaking interventions at routine food establishments. However, it was evident that in a number of recent cases, the Authority had not always fully implemented these procedures.
- 2.4 The Authority needed to review its officer authorisation schedules, in association with their legal team, to ensure that officers were authorised under all relevant European and UK food hygiene legislation in accordance with the Food Law Code of Practice and centrally issued guidance.
- 2.5 Records indicated that some authorised officers had not completed a minimum 10 hours relevant Continuing Professional Development (CPD) training in the last year. Auditors discussed the benefits of developing a more systematic method of assessing and identifying officer competency and training requirements, and recommended further specific training for some officers regarding the assessment of HACCP and FSMS, the implementation and assessment of Safer food, better business (SFBB) and the approval and inspection of establishments subject to the specific hygiene requirements of Regulation (EC) No. 853/2004.

- 2.6 Database checks indicated that the Authority had a substantial number of overdue inspections and unrated establishments, including several higher risk catering businesses. The Authority needed to ensure that these establishments were assessed and integrated into its routine programme of inspections, in accordance with the risk-based inspection frequencies set out in the Food Law Code of Practice.
- 2.7 The Authority had developed and implemented a system for the electronic scanning of food premises inspection records and associated information. It was evident that important information relating to some higher risk food premises were missing from the electronic records. The absence of key business and intervention records made it difficult for the Authority to fully assess premises' inspection histories in each case and to carry out effective internal monitoring.
- 2.8 Auditors discussed the benefits of further expanding the food premises inspection aide-memoire to prompt officers during inspections, enable them to record inspection findings and provide evidence of their assessments of businesses progress in meeting the requirements of Article 5 of Regulation (EC) No. 852/2004.
- 2.9 Although the Authority sent detailed letters to businesses following every inspection, which highlighted most legal requirements and recommendations, businesses had not always been notified at the earliest possible occasion about documented breaches of legislation associated with HACCP and FSMS requirements. Auditors noted examples where the Authority had applied inconsistent risk ratings to businesses following inspections, and in the case of some businesses, there had not been timely enforcement to achieve compliance with food hygiene requirements.
- 2.10 The Authority had retained paper files for its approved establishments, which were generally well organised and included relevant approval and process documentation as required by Annexe 12 of the Food Law Practice Guidance. The files assessed contained detailed HACCP information and evidence that officers had reviewed and evaluated business HACCP plans. Past inspections had generally been completed using appropriate aides-memoire to record inspection findings. However for the latest round of inspections, a more basic general premises aide-memoire had been used making it difficult for officers to demonstrate that establishments had been fully assessed against all relevant hygiene legislation.
- 2.11 It was evident that in many cases officers actively worked with businesses to achieve compliance and had generally taken an appropriately graduated approach to enforcement. There was clear evidence that the Authority was willing to use the full range of informal and formal enforcement actions available to tackle serious contraventions of food hygiene legislation, including those related to HACCP and FSMS. The information reviewed relating to hygiene improvement notices, emergency hygiene prohibition notices, simple

cautions and prosecutions confirmed that in each case the enforcement decisions reached were appropriate given the contraventions identified. However, officers needed to record details consistently of all actions taken relating to these activities, in accordance with the Authority's own procedures.

- 2.12 File checks of complaint records confirmed that officers had followed the Authority's documented procedure, completed timely investigations of all complaints and notified the complainant of the investigation findings.
- 2.13 The Authority had implemented a documented food sampling procedure. Audit checks confirmed that unsatisfactory sampling results had been correctly investigated and followed up, food business operators were informed and the appropriate action was taken.
- 2.14 Whilst the Authority had developed some specific internal monitoring procedures and requirements regarding the quality of inspections and service requests, there was little evidence of any routine monitoring. The Authority's monitoring procedures needed reviewing, expanding and implementing to establish a regime of risk based qualitative and quantitative monitoring across all areas of the Service, including officer authorisations, premises risk rating and follow-up actions.

3. Audit Findings

3.1 Organisation and Management

Strategic Framework, Policy and Service Planning

- 3.1.1 The Authority had developed a Regulatory Team Service Plan (Food, Health and Safety, Trading Standards) for the period 2008/09-2010/11 which had been approved by the appropriate Members for the Environment on 19 June 2009. The document provided an overview of the Service structure, aims and objectives, and was primarily focused on providing detailed analysis of quantitative performance against various relevant local and national performance indicators.
- 3.1.2 The Plan also provided details of a “Service risk assessment review” initially carried out in 2005, which highlighted a number of risks to the Authority posed by any failings of the Service. These included practical and strategic risks to the Authority arising from major food poisoning outbreaks and poor audit findings. The Plan further identified possible risks to delivery of the Authority’s objectives, such as a lack of resources, poor management of the Service Plan and a lack of training.
- 3.1.3 In December 2008 the Service underwent significant reorganisation aimed at improving Service efficiency and effectiveness, in response to wider local and national Government initiatives. The Service Plan however had not been reviewed since 2008 to reflect the new nature and structure of the team, its aims and objectives, and the statutory demands placed upon the team. Auditors were informed that the Authority planned to develop new service planning guidance for 2011, once the existing Service Plan had officially ended. Auditors were unable therefore to confirm that appropriate Members had been informed about current demands being placed upon the Service and whether sufficient resources had been allocated from 2009.
- 3.1.4 In the absence of staff resource details in the existing Service Plan, auditors were informed that at the time of the audit there were eight officers undertaking food safety duties, which corresponded with recent data submitted to the Agency regarding resource allocation for the period 2008/2009. However these officers were also responsible for health and safety work at commercial premises. Therefore auditors were unable to assess the true number of FTE staff specifically involved in the service delivery of food law enforcement activities.

Recommendation

3.1.5 The Authority should:

Review, develop and implement its Regulatory Service Plan in accordance with Service Planning Guidance. The Plan should accurately reflect the nature of the Food Safety Service, the demands placed upon it and reasoned estimates of the resources needed to deliver the Service effectively. The Authority should also carry out a performance review of the Plan at least once a year which should be submitted to the appropriate Member forum. Any variance in meeting the Plan should be addressed in subsequent plans.

[The Standard – 3.1, 3.2 and 3.3]

3.1.6 It was clear from detailed evidence provided by the Authority, that the Service had been proactive in its efforts to improve and support business compliance with food safety legal requirements. The Authority had developed and implemented a number of past initiatives aimed at improving business compliance with legal requirements related to HACCP and FSMS. These included a fully documented campaign between 2006 and 2007 targeting poor performing higher risk businesses within the Borough, with the aim of improving their level of legal compliance. The project included a detailed evaluation, and concluded that the Authority had been successful in stimulating interest in food safety legal requirements and improving business compliance overall.

3.1.7 Although there was evidence that the Authority had reviewed and considered the recommendations made in the Pennington Inquiry Report into the 2005 E. Coli outbreak in Wales (published in March 2009), at team and local food liaison group meetings, it was not clear whether the Authority planned to make any formal changes or improvements to the Service in response to the main Report findings.

Documented Policies and Procedures

3.1.8 The Service had developed and implemented a wide range of documented policies and procedures covering most of its food law enforcement responsibilities. These documents were available to all officers in electronic format on a central directory, and those evaluated during the audit contained up to date references to legislation and official guidance, with details of their approval by a previous food safety manager. The majority of these documents dated from November 2008. Auditors discussed the benefits of setting review dates to ensure that policies and procedures are updated on a

regular basis to reflect changes in the legislation and guidance, and that amendments are formally documented.

- 3.1.9 Although the Authority did not maintain a formal document control procedure, there was an ad hoc process in place for the amendment and review of official policies and procedures including the use of issue dates and a version reference number.

Officer Authorisations

- 3.1.10 The Authority had developed a basic documented procedure for the authorisation of its officers. The procedure detailed the practical process of authorising officers, but needed further development to include suitable arrangements for assessing and reviewing officer competency requirements in relation to their level of authorisation.
- 3.1.11 Officer schedules of authorisation, which contained references to the legislation by which officers were empowered, required further review in association with the Authority's legal department. The review should seek to confirm that officers, including contractors, are authorised under the full range of relevant current legislation applicable to food safety enforcement, in accordance with the Food Law Code of Practice.

Recommendation

3.1.12 The Authority should:

Review and revise the documented procedure on the authorisation of officers to detail the competency assessment process by which authorisations are conferred, based on officer's individual qualifications, training and experience, and also ensure that officers' schedules of authorisation reflect the extent and limitations of individual officer's duties.

[The Standard - 5.1]

- 3.1.13 Audit checks confirmed that all officers' qualifications were available and in general, copies of relevant qualification certificates had been retained by the Authority.
- 3.1.14 The Authority had not formally produced a documented training plan for 2009/2010. Officer training needs had been identified on an ad hoc basis in the past. A review of officer training records revealed a wide degree of variation in the range of experience and training achieved by officers. In particular several officers required detailed training regarding the inspection and approval of relevant approved establishments, specialist complex processes and formal enforcement actions. Several officers also required update training on HACCP

assessment and auditing of HACCP based FSMS, and the implementation and evaluation of Safer food, better business (SFBB). Auditors were informed that plans were in place to provide officers with suitable training related to approved establishments in the near future. It was not clear from training records that all officers had undertaken the required minimum 10 hours CPD in the last year, based on the principles of continuing professional development.

Recommendation

3.1.15 The Authority should:

Develop and implement a suitable method for the systematic review and identification of officer training needs and provide suitable training for officers, commensurate with the range of duties performed, and in line with individual levels of authorisation. Officer training requirements should be documented in a training plan. [The Standard – 5.3 and 5.4]

3.2 Food Premises Inspections

- 3.2.1 The Authority had developed a detailed documented procedure to assist officers in completing interventions at food premises that also included guidance to officers when evaluating FSMS based on HACCP. The procedure would benefit from further review and development to reflect actual working practices and the new administrative arrangements in place and also reference to the full range of intervention options open to officers in different types of establishment, in accordance with the Food Law Code of Practice.
- 3.2.2 As part of the process of change, the Authority had introduced a system of transferring the majority of its paper premises files and records to an electronic system. This had involved the procurement of an external data management company to transfer and store file information. Officers were required to request individual food premises records, essential for effective case reviews prior to inspection, on an individual basis. Auditors were informed during the audit that a number of past records associated with certain higher risk premises had gone missing since the data transfer process began.
- 3.2.3 Officer interviews revealed that in practice, the system in place for requesting past premises records required review, as some officers were depending solely upon the last inspection letter stored on the database to review the premises history prior to inspection.
- 3.2.4 The Authority was able to provide evidence of a service level agreement with the data management company, but was unable to establish how many documents linked to higher risk food premises may have been missing. There was no evidence that the Authority had investigated the reasons for these significant system failings in the data transfer process.

Recommendation

3.2.5 The Authority should:

Maintain up to date and accurate records in easily retrievable form for all food premises in its area, in accordance with Food Law Codes of Practice and centrally issued guidance. These records should include reports of all inspections, and the determination of compliance with legal requirements made by officers including business compliance with HACCP and food safety management systems requirements, as well as details of any follow-up action taken, results of any sampling, details of any complaints and actions taken. [The Standard – 7.5 and 16.1]

- 3.2.6 File checks revealed that the Authority had not always managed to inspect food premises at the correct frequency prescribed in the Food Law Code of Practice. Database checks also highlighted a substantial number of overdue and unrated food premises, which included a number of higher risk catering establishments.

Recommendation

3.2.7 The Authority should:

Carry out food hygiene inspections of premises in their area at a frequency which is not less than that prescribed by the Food Law Code of Practice or other centrally issued guidance. [The Standard – 7.1]

- 3.2.8 The Authority had developed separate catering and retail premises aides-memoire or “Food Safety Inspection Checklists”, to record basic information about food businesses, including information about business compliance with HACCP and FSMS requirements. These checklists required further review and development to allow officers to demonstrate that businesses were being inspected against all relevant aspects of food hygiene legislation, including a more detailed assessment of business compliance and progress with HACCP requirements.
- 3.2.9 File record checks on general food hygiene premises confirmed that although aides-memoire had in general been appropriately completed, the process of electronically scanning records had led to records frequently being difficult to read or sometimes illegible in places.
- 3.2.10 All officers provided written letters to businesses outlining inspection findings which clearly differentiated between recommendations and legal requirements. Letters also generally included timescales for any works that were required. Officers had not always informed businesses on every occasion regarding any non compliance with HACCP and FSMS requirements identified during inspections, due to the development of an informal policy of initially identifying and informing businesses about HACCP pre-requisite requirements.
- 3.2.11 In a few cases, although officers had identified contraventions at food premises, some risk ratings following inspection appeared to be inconsistent with inspection findings.

Recommendation

3.2.12 The Authority should:

Review, develop and implement its inspection aides-memoire to allow officers to clearly demonstrate that businesses are fully assessed against all legally prescribed standards during food hygiene inspections. Businesses should be informed of all legal contraventions and recommendations discovered, including those related to HACCP and food safety management systems in accordance with the Food Law Code of Practice and centrally issued guidance.
[The Standard – 7.3]

3.2.13 Appropriate revisits had generally been made to premises where necessary, to ensure that required works had been completed. However, auditors noted two cases, involving high risk premises, where the Authority had apparently struggled to achieve timely business compliance despite a number of serious contraventions being identified and recorded during previous interventions.

Recommendation

3.2.14 The Authority should:

Take appropriate and timely action on any non-compliance found during inspections, particularly when associated with contraventions related to HACCP and food safety management systems requirements, in accordance with the Authority's Enforcement Policy and the Food Law Code of Practice. The reasons for any departure from the criteria set out in the Authority's Enforcement Policy should be documented. [The Standard – 7.3 and 15.4]

3.2.15 The Authority had developed a documented procedure and guidance notes for officers, on the inspection and approval of establishments subject to the specific hygiene requirements set out under Regulation (EC) No. 853/2004. The procedure and guidance note contained reference to superseded centrally issued guidance, and would benefit from further review to include more detailed guidance for officers in the assessment and review of HACCP and FSMS in approved establishments.

Recommendation

3.2.16 The Authority should:

Review develop and implement its documented inspection procedures, including those related to the inspection and approval of establishments subject to the specific requirements of Regulation (EC) No. 853/2004, to ensure that they contain reference to appropriate centrally issued guidance and provide officers with detailed guidance on the audit and assessment of HACCP based food safety management systems.
[The Standard – 7.4]

3.2.17 Files checks for two approved establishments in the Authority's area were examined during the audit. Both establishments had been appropriately re-approved under relevant EU legislation, and establishment files were generally well ordered and contained most of the information required by Annexe 12 of the Food Law Practice Guidance.

3.2.18 In the past, inspection findings had generally been recorded on prescribed aides-memoire in accordance with official guidance. However the latest inspections had been recorded using general premises inspection forms. It was therefore difficult to establish from the file records whether an appropriate detailed evaluation had recently been carried out, and the basis of the officer's assessment of compliance.

3.2.19 Although each approved establishment file contained details of a relevant FSMS there was insufficient evidence related to the latest inspection to determine whether officers had completed a thorough assessment of the system's effectiveness.

Recommendation

3.2.20 The Authority should:

Inspect its approved establishments in accordance with the relevant legislation and the Food Law Code of Practice and any centrally issued guidance.
[The Standard – 7.2]

Verification Visit to a Food Premises

- 3.2.21 During the audit, a verification visit was undertaken to a local butcher with an officer from 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.
- 3.2.22 Although the audit visit confirmed that the checks carried out by the officer covered the majority of food law requirements, including an assessment of the businesses compliance with HACCP based FSMS requirements, the visit highlighted a number of concerns relating to the structure and layout of equipment in the premises. Auditors discussed these matters with the Authority and appropriate action was taken to address the issues found.

3.3 Enforcement

- 3.3.1 The Authority had developed a documented but undated Regulatory Team Enforcement Policy, which outlined the Authority's commitment to a risk based approach to food safety enforcement. Auditors discussed the benefits of revising the policy to also include a statement regarding the Authority's commitment to a graduated approach to enforcement. The Service had developed a range of detailed procedural guidance for most formal food law enforcement options available to officers, including a detailed set of prosecution documentation.
- 3.3.2 There was clear evidence that the Authority was willing and able to use the full range of enforcement options available to tackle serious contraventions of food hygiene legislation, and to secure food business compliance. Examples of measures taken included the service of hygiene improvement notices (HINs), voluntary closure and hygiene emergency prohibition notices (HEPNs), simple cautions and prosecutions.
- 3.3.3 Three HINs, which had been served against businesses that had failed to comply with Regulation (EC) No. 852/2004 Article 5, were selected for review. In each case, the use of the notice had been the appropriate course of action and had been served in accordance with the Authority's own procedures. Database records indicated that officers had generally conducted timely checks on compliance. However, problems retrieving file information meant that the Authority was, in some cases, unable to provide copies of letters sent to FBOs to confirm compliance with the notices.
- 3.3.4 Three cases were reviewed where HEPNs had been served in relation to serious contraventions of hygiene legislation. The actions taken appeared to have been in line with the Authority's Enforcement Policy and appropriate given the circumstances in each case. However, database and file records relating to actions taken by officers were sometimes incomplete, and it was not always possible to assess if appropriate follow-up actions, such as checks on compliance, had been taken in accordance with the Authority's own procedures and the Food Law Code of Practice.
- 3.3.5 One simple caution and one prosecution file relating to the lack of a FSMS were examined as part of the audit. In both cases the actions appeared to be appropriate and in line with the Authority's Enforcement Policy. Auditors were unable to fully assess whether the actions taken in relation to the simple caution fully complied with the Authority's procedures due to difficulties with the retrieval of the appropriate records. Although the Authority had developed a comprehensive range of prosecution guidance and related administration, including a prosecution checklist, this had not been fully completed in the case reviewed.

Recommendation

3.3.6 The Authority should:

Record details of all the actions taken in relation to follow up and enforcement activities, in accordance with the Authority's own procedures, the Food Law Code of Practice and any centrally issued guidance.

[The Standard – 15.3]

3.4 Internal Monitoring and Third Party or Peer Review

Internal Monitoring

- 3.4.1 The Service had developed a documented internal monitoring procedure to monitor the consistency and quality of food hygiene inspections, dated March 2009, and a separate procedure to monitor service requests, dated April 2007. Although other individual procedures also contained internal monitoring instructions, in practice auditors noted little evidence of any recent qualitative monitoring of inspection records or enforcement activity. Quantitative monitoring of inspection targets took the form of regular meetings between enforcement officers and senior management, however there was only limited documentary evidence available of any formal planning related to inspection targets and actions proposed to address any shortfalls.
- 3.4.2 There was evidence provided of detailed internal audits having taken place, the latest in 2006, undertaken by the Authority's Internal Audit Team. The audit in 2006 concluded that, at that time, "*internal controls and the management of a risk based programme fundamental to the monitoring of the food businesses in Camden is considered, in general, to be adequate and operating satisfactorily*".

Recommendation

3.4.3 The Authority should:

Review, expand and fully implement its internal monitoring procedures to include qualitative monitoring arrangements of all areas of food law enforcement activity, including officer authorisations and follow-up actions.
[The Standard – 19.1 and 19.2]

Food and Food Premises Complaints

- 3.4.4 The Authority had developed a detailed risk based procedure for the investigation of food and food premises complaints. The procedure for complaint investigation provided guidance to officers when investigating complaints and included specific details of the administration to be completed and specified the appropriate follow-up actions.
- 3.4.5 Audit checks were completed of four separate complaint files. In all cases timely investigations had taken place and officer follow-up actions had generally been recorded on the Authority's database.

Complainants and businesses had been notified of the investigation findings. No evidence of internal monitoring was observed relating to the four cases reviewed.

Food Sampling

- 3.4.6 The Authority had developed a documented prioritised Food Sampling Policy, which expressed the Authority's commitment to proactive and reactive sampling activity. The Authority had also developed some practical guidance on the collection and delivery of samples, and in conjunction with the North East London Sector Sampling Group had actively participated in local, regional and national food sampling programmes.
- 3.4.7 Audit checks of three unsatisfactory sample results were carried out. It was evident from file records that the results had been brought to the attention of the relevant FBO, and that in general appropriate follow-up action had been taken. However, in common with other service activities, the Authority needed to record details of all the follow-up actions taken by officers in relation to unsatisfactory sample results. No evidence of internal monitoring was seen in relation to any of the cases reviewed.

Third Party or Peer Review

- 3.4.8 Auditors were informed that although no recent formal Inter-Authority Audits had taken place in the area, the Authority had participated in recent benchmarking exercises with other London authorities, involving a range of general service performance indicators, such as the numbers of broadly compliant and unrated premises in each Borough, and general demographic data such as numbers of businesses and population sizes in each location.

Auditors: **Andrew Gangakhedkar**
Robert Hutchinson

Observer: Abimbola Adeyemi

Food Standards Agency

Local Authority Audit and Liaison Division

Action Plan for London Borough of Camden

Audit date: 23-24 March 2010

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.1.5 Review, develop and implement its Regulatory Service Plan in accordance with Service Planning Guidance. The Plan should accurately reflect the nature of the Food Safety Service, the demands placed upon it and reasoned estimates of the resources needed to deliver the Service effectively. The Authority should also carry out a performance review of the Plan at least once a year which should be submitted to the appropriate Member forum. Any variance in meeting the plan should be addressed in the subsequent plans. [The Standard – 3.1, 3.2 and 3.3]</p>	<p>31/07/10 31/07/10 30/09/10 31/10/10</p>	<p>Develop separate Service Plan for Food Safety Team reflecting nature of the service, its demands and resources needed. (Operations Manager – lead officer)</p> <p>Review of proposed plan by Food Safety Team at July team meeting, and by senior management to ensure compliance with LB Camden's service planning guidance.</p> <p>Gain member approval of new plan and implement it upon approval.</p> <p>Review performance of team against new plan, identifying and instigating any appropriate corrective action. (Operations Manager – lead officer)</p>	
<p>3.1.12 Review and revise the documented procedure on the authorisation of officers to detail the competency assessment process by which authorisations are conferred based on officer's individual qualifications, training and experience, and also ensure that officers' schedules of authorisation reflect the extent and limitations of individual officer's duties. [The Standard - 5.1]</p>	<p>31/05/10 30/06/10</p>	<p>Legal Services to review current documented procedure and procedure appropriate scheme of authorisation.</p> <p>Code of Practice statutory lead officer to be identified and appointed. Their first task to ensure that all officers are appropriately authorised given their qualifications training and experience.</p>	<p>Completed.</p> <p>Expressions of interest sought for lead officer role from officers already employed by LB Camden who meet the Code of Practice criteria.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.1.15 Develop and implement a suitable method for the systematic review and identification of officer training needs and provide suitable training for officers, commensurate with the range of duties performed, and in line with individual levels of authorisation. Officer training requirements should be documented in a training plan. [The Standard – 5.3 and 5.4]	31/07/10 Monthly from 31/08/10	Once extent of individual officers' duties are established, the Operations Manager will meet with each officer to establish training needs and to produce a documented training plan for the service. Training needs to be reviewed at monthly meetings between individual officers and Operations Manager to identify ongoing progress and changing needs.	
3.2.5 Maintain up to date and accurate records in easily retrievable form for all food premises in its area, in accordance with Food Law Codes of Practice and centrally issued guidance. These records should include reports of all inspections, and the determination of compliance with legal requirements made by officers including business compliance with HACCP and Food Safety Management Systems requirements, as well as details of any follow up action taken, results of any sampling, details of any complaints and actions taken. [The Standard – 7.5 and 16.1]	Ongoing from April 2010 Ongoing from 15/06/10, every quarter.	All relevant documentation generated from all inspections now stored against the relevant premises file held on service's APP data storage system. Original paper files on premises due for comprehensive inspection to be retrieved on a quarter by quarter basis, sifted for the relevant documentation by officers from the service, and then scanned to be stored against the relevant premises file held on service's APP data storage system. This will continue until all relevant data is stored on the APP data storage system.	Started and ongoing. First quarter's files already requested and awaiting delivery.
3.2.7 Carry out food hygiene inspections of premises in their area at a frequency which is not less than that prescribed by the Food Law Code of Practice or other centrally issued guidance. [The Standard – 7.1]	31/05/10 Ongoing from June 2010	All food premises requiring a comprehensive inspection to be identified and allocated to appropriate officers Progress to be reviewed at monthly meetings between individual officers and Operations Manager to monitor ongoing issues and identify changing needs. Possible need for appropriately authorised temporary staff to be drafted in, if required, has already been raised with Head of Service.	Full year's comprehensive visits have been identified and allocated to appropriate officers. June 2010 meetings have taken place.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.2.12 Review, develop and implement its inspection aides-memoire to allow officers to clearly demonstrate that businesses are fully assessed against all legally prescribed standards during food hygiene inspections. Businesses should be informed of all legal contraventions and recommendations discovered, including those related to HACCP and FSMS in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 7.3]	31/05/10 31/07/10 30/09/10	Operations Manger to remind all officers to provide as much information as possible on their current inspection forms and to ensure all such information is in a legible form. Review of 'aide memoire' to be undertaken to allow greater degree of information gathered at time of inspection is recorded 'on site'. New 'aide-memoire' to be trialled during second quarter comprehensive visits and subsequently reviewed by service at team meeting to identify any further improvements.	Completed - all officers reminded at individual monthly meeting with Operations Manager. Review started (Principal EHO – lead officer).
3.2.14 Take appropriate and timely action on any non-compliance found during inspections, particularly when associated with contraventions related to HACCP and FSMS requirements, in accordance with the Authority's Enforcement Policy and the Food Law Code of Practice. The reasons for any departure from the criteria set out in the Authority's Enforcement Policy should be documented. [The Standard – 7.3 and 15.4]	Ongoing from May 2010 31/08/10	Actions taken to address infringements of food legislation to be reviewed at monthly meeting between the individual officers and Operations Manager. Serious infringements to be reviewed on a weekly basis. New enforcement policy specifically for the service to be developed and introduced after member approval gained.	Started and ongoing. New enforcement policy ready for review by officers and Head of Service.
3.2.16 Review develop and implement its documented inspection procedures, including those related to the inspection and approval of establishments subject to the specific requirements of Regulation (EC) No 853/2004, to ensure that they contain reference to appropriate centrally issued guidance and provide officers with detailed guidance on the audit and assessment of HACCP based FSMS. [The Standard – 7.4]	31/07/10	Code of Practice statutory lead officer to be identified and appointed, who will review documented procedures, to ensure they reference all appropriate guidance including the audit and assessment of HACCP systems, and that this procedure is fully implemented.	Expressions of interest sought for lead officer role from officers already employed by LB Camden who meet the Code of Practice criteria.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.2.20 Inspect its approved establishments in accordance with the relevant legislation and the Food Law Code of Practice and any centrally issued guidance [The Standard – 7.2]	Ongoing throughout year	Inspection plan for all approved premises to be drawn up. Inspections to be led by one identified officer with other officers from the service shadowing that officer at different premises to gain experience of this type of inspection.	Inspection plan drawn up and 'lead officer' and all 'second officers' for individual premises identified.
3.3.6 Record details of all the actions taken in relation to follow up and enforcement activities, in accordance with the Authority's own procedures, the Food Law Code of Practice and any centrally issued guidance. [The Standard – 15.3]	31/05/10 Ongoing from June 2010	Operations Manager to remind all officers to properly record all actions taken relating to inspections and any follow-up activities, in accordance with documented procedure. Compliance with documented procedure to be reviewed at monthly meetings between individual officers and Operations Manager.	Completed - all officers reminded at individual monthly meeting with Operations Manager. June 2010 meetings have taken place.
3.4.2 Review, expand and fully implement its internal monitoring procedures to include qualitative monitoring arrangements of all areas of food law enforcement activity, including officer authorisations and follow-up actions. [The Standard – 19.1 and 19.2]	31/07/10	Code of Practice statutory lead officer to be identified and appointed, who will review internal monitoring procedure, to ensure that it covers monitoring of all areas of enforcement activity, and that this procedure is fully implemented.	Expressions of interest sought for lead officer role from officers already employed by LB Camden who meet the Code of Practice criteria.

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

- Regulatory Service Plan 2008-09/2010-11 and associated appendices;
- The Authority's procedure for the authorisation of officers, officer training and qualification records;
- Food Premises and Inspection/Intervention aides-memoire;
- Procedure for Inspection of Food Premises and Other Food Safety Related Work;
- The Authority's Food Law Enforcement Policy Procedure;
- Food Complaints Procedure;
- Food Sampling Procedure and related documents;
- The Authority's Internal Monitoring Procedure related to Inspections.

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

- General food premises inspection records;
- Approved establishment files;
- Food complaint records;
- Food sampling records;
- Formal enforcement records.

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

- Audit Liaison Officer
- Environmental Health Officer

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

(4) 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 specific regard to LA checks on FBO compliance with HACCP based food management systems.

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.
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 geographic area and situated within a County Council whose responsibilities include food hygiene enforcement.
E. coli	<i>Escherichia coli</i> microorganism, the presence of which is used as an indicator of faecal contamination of food or water. <i>E. coli</i> 0157:H7 is a serious food borne pathogen.
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 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 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 law enforcement.</p> <p>The Monitoring Scheme requires local authorities to submit quarterly returns 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 law enforcement services of local authorities against the criteria set out in the Standard.</p>
Full Time Equivalents (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 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.
OCD returns	Returns on local food law enforcement activities required to be made to the European Union under the Official Control of Foodstuffs Directive.
Regulators' Compliance Code	Statutory Code to promote efficient and effective approaches to regulatory inspection and enforcement which improve regulatory outcomes without imposing unnecessary burdens on businesses.
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 6 months.
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.