



Report on the Food Law Enforcement Services

Conwy County Borough Council
14th – 18th September 2015

Foreword

Audits of local authority food and feed 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 feedingstuffs 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 Services. The assessment includes consideration of the systems and procedures in place for interventions at food businesses, food sampling, internal management, control and investigation of outbreaks and food related infectious disease, advice to business, enforcement and food safety promotion. It should be acknowledged that there may be considerable diversity in the way and manner in which authorities provide their food enforcement services reflecting local needs and priorities.

Agency audits assess local authorities' conformance against the Feed and 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 (amended April 2010) is available on the Agency's website at: www.food.gov.uk/enforcement/enforcework/frameagree

The main aim of the audit scheme is to maintain and improve consumer protection and confidence by ensuring that authorities are providing effective food and feed law enforcement services. The scheme also provides the opportunity to identify and disseminate good practice, and provides information to inform Agency policy on food safety, standards and feedingstuffs and can be found at: www.food.gov.uk/enforcement/auditandmonitoring

The report contains some statistical data, for example on the number of food establishment inspections carried out. 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 report also contains an action plan, prepared by the authority, to address the audit findings.

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

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1 Introduction

- 1.1 This report records the results of an audit of food hygiene and food standards at Conwy County Borough Council under the headings of the FSA Feed and Food Law Enforcement Standard. It has been made publicly available on the Agency's website at www.food.gov.uk/enforcement/auditandmonitoring/auditreports

Reason for the Audit

- 1.2 The power to set standards, monitor and audit local authority food and feed law enforcement services was conferred on the FSA by the Food Standards Act 1999 and the Official Feed and Food Controls (Wales) Regulations 2009. The audit of the food services at Conwy County Borough Council was undertaken under section 12(4) of the Act and Regulation 7 of the Regulations.
- 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 FSA, 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 audited as part of a three year programme (2013 – 2016) of full audits of the 22 local authorities in Wales.

Scope of the Audit

- 1.5 The audit covered Conwy's arrangements for the delivery of food hygiene and food standards enforcement services. The on-site element of the audit took place at the authority's Civic Offices, Colwyn Bay on

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).

14th – 18th September 2015, and included verification visits at food businesses to assess the effectiveness of official controls implemented by the authority, and more specifically, the checks carried out by the authority's officers, to verify food business operator (FBO) compliance with legislative requirements.

- 1.6 The audit also afforded the opportunity for discussion with officers involved in food law enforcement with the aim of exploring key issues and gaining opinions to inform Agency policy.
- 1.7 The audit assessed the authority's conformance against "The Standard". The Standard was adopted by the FSA Board on 21st September 2000 (and was subject to its fifth amendment in April 2010), and forms part of the Agency's Framework Agreement with local authorities. The Framework Agreement can be found on the Agency's website at www.food.gov.uk/enforcement/enforcework/frameagree

Background

- 1.8 Conwy County Borough Council is a unitary authority in north Wales, which covers an area of 113,000 hectares. Approximately 38% of the authority's area is within the Snowdonia National Park and it borders two other local authority areas – Gwynedd to the west and south and Denbighshire to the east.
- 1.9 With 75km of coastline, Conwy covers an area which runs from Llanfairfechan, along the north Wales coast towards Rhyl and includes the Vale of Conwy. As well as part of the Snowdonia mountains, it takes in the Gwydyr Forest in the south-west and parts of the Clocaenog Forest in the south-east.
- 1.10 Conwy is a mixed use urban and rural county including the seaside towns of Llandudno, Conwy, Colwyn Bay and Abergele. The north of the area is urbanised along the coastal strip and there is close access to the North Wales Expressway (A55). The remainder is predominantly rural.
- 1.11 According to the 2011 Census, Conwy has a population of 115,228 with 95.4% of the population being White English/Welsh/Scottish/Northern Irish/British. 40% of the population speaks, reads, writes or understands Welsh and this is concentrated mainly within the rural communities. 82%

of the population live along the coastal strip, whilst around 4% of the population live within the Snowdonia National Park. There is a large proportion of post-retirement age residents (24.6%) whilst 16.5 % of the population are aged between 0 -15 years old.

- 1.12 The economy relies heavily on tourism and this adds large numbers to the residential population; mainly during the summer. Industrial employment is limited and mainly near the coast and includes manufacturing and research concerns. Rural areas and their communities are dependent on agriculture and forestry activities with limited alternative employment and few development pressures.
- 1.13 The authority has a number of mussel beds and a cockle bed within the region for which specific resources are required to sample the waters and shellfish for 'Harvesting Waters Classification' and toxin levels. There is also a large unclassified razor clam bed within the area where there is known razor clam gathering occurring. The authority also acts as the Lead Authority for the Local Action Group for Shellfish.
- 1.14 Conwy contains indicators of deprivation mainly under or around the Wales average as determined by the 2014 Welsh Index of Multiple Deprivation. Deprivation is, however, rated lower than average with regards to access to services, probably due to the rural nature of much of the area.
- 1.15 Food law enforcement was being carried out by officers in the authority's Business Enforcement Unit within the Regulatory Services and Housing Department. The environmental health team enforced both food hygiene and food standards legislation.
- 1.16 Officers and support staff responsible for food hygiene and food standards were based at the Civic Offices, Colwyn Bay, Conwy, LL29 8AR. Services were available from 08.45 to 17.15, Monday to Thursday, and 08.45 to 16.45 on a Friday.
- 1.17 The authority reported in its Food Law Enforcement Food Service Plan 2015 / 2016 (the Service Plan) that it had a "non-guaranteed emergency out-of-hours service". The out-of-hours service was not tested as part of the audit.

- 1.18 At the beginning of 2015/16 there were 1,822 food establishments in Conwy, of which, 15 were approved food establishments.
- 1.19 The Service Plan stated that the authority had 5.5 full time equivalent (FTE) officers involved in the delivery of food hygiene related work. In respect of food standards, the authority reported that it had 0.8 FTE officers. The Business Enforcement Manager allocated 20% of his time to food hygiene and food standards services. At the time of the audit the food hygiene service was carrying a vacancy of 1.0 FTE to be used for the employment of contractors as a flexible resource. One regulatory support officer had been allocated to the food hygiene service.
- 1.20 The annual budget for the food services was £381,320 in 2015/16. This represented an increase on 2014/15 expenditure, however, the Department had been advised to expect cuts of approximately £300,000 to its operating budget in the future. It was not known whether and / or how this would impact on food services.
- 1.21 The authority had been participating in the National Food Hygiene Rating Scheme which was launched in Wales in October 2010. At the time of the audit, the food hygiene ratings of 1,410 food establishments in Conwy were available to the public on the National Food Hygiene Rating Scheme website.

2 Executive Summary

- 2.1 The audit examined Conwy County Borough Council's arrangements for the delivery of official food controls. This included reality checks at food establishments to assess the effectiveness of official controls 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 internal monitoring of food law enforcement activities.
- 2.2 The Business Enforcement Manager had overall responsibility for the delivery of food hygiene and food standards services within the Regulatory Services and Housing Department. Food hygiene and food standards official controls were generally being delivered at the same time, by the same officers. However, some food standards official controls in higher risk establishments continued to be carried out by a designated food standards officer.
- 2.3 The authority had developed a Food Law Enforcement Service Plan for 2015/16 which was broadly in line with FSA guidance. The authority's priorities and intervention targets were risk based, however, they did not meet the requirements of the Food Law Code of Practice. Further, the number of food standards interventions due had not been clearly specified. Whilst some budgetary information had been provided, a comparison of the resources required to deliver all aspects of the food law enforcement service against those available had not been carried out. The authority's own analysis of Local Authority Enforcement Monitoring System (LAEMS) data indicated that the resources it had available for food law enforcement were less than the all-Wales and north Wales averages.
- 2.4 The authority had reviewed its performance against the previous years' Service Plan in accordance with FSA guidance. A number of variances in achieving targets were identified although no reasons for the variances had been provided. Some, but not all variances from the previous plan had been addressed in the current work programme.
- 2.5 The authority had arrangements in place to ensure effective service delivery by appropriately authorised officers, including initiatives to

procure flexible resource and share expertise with other local authorities. Food hygiene officers had been authorised in accordance with their qualifications and experience whilst records of qualifications were not available for all authorised food standards officers. Not all officers had received on-going training in line with the Food Law Code of Practice.

- 2.6 A documented work procedure had been developed to ensure the accuracy of the authority's food establishments' database. Audit checks confirmed that overall, the food hygiene and food standards database was accurate and the authority had been able to provide an electronic LAEMS return to the FSA.
- 2.7 Record and database checks confirmed that the food hygiene service had prioritised inspections of higher-risk businesses whilst some lower-risk establishments were not being subject to intervention. A significant number of medium and lower risk establishments were overdue a food standards intervention, however, the authority was making progress in addressing these by combining food hygiene and food standards inspections, where appropriate.
- 2.8 Inspection records did not always demonstrate that a thorough assessment of business compliance had taken place during food hygiene and food standards inspections. Further, it was not always possible to verify that food standards risk ratings were correct or whether revisits/ follow- up action was required.
- 2.9 Food hygiene inspection records and reports were being adequately maintained by the authority; however, reports would benefit by including timescales for compliance. Records relating to approved establishments were not always sufficiently comprehensive and food standards reports did not contain all the information required by the Food Law Code of Practice.
- 2.10 Food sampling and food incident interventions had generally taken place in accordance with the Food Law Code of Practice. However, food complaints and notifications of food related infectious disease had not consistently been investigated or followed-up and appropriate records were not always being maintained.

2.11 The authority had been proactive in providing advice and guidance to food businesses in its area and undertaking promotional activity.

2.12 There was evidence of quantitative internal monitoring of the food hygiene and food standards services. However, qualitative internal monitoring of food standards work and some aspects of the food hygiene service was not being carried out. The authority would benefit from further developing and fully implementing its internal monitoring procedures to ensure that this is the case.

2.13 The Authority's Strengths

Officer authorisations

Initiatives to procure flexible resource and share authorised officer expertise with other local authorities demonstrated the efficient use of resources.

Advice to businesses

The authority had been proactive and was able to demonstrate that it worked with businesses to help them comply with the law.

Food Hygiene and Food Standards Sampling

The authority was able to evidence that it had taken appropriate action in response to unsatisfactory food samples.

Incidents

The authority was able to demonstrate that it had initiated and responded to notifications of incidents in a timely and effective manner, investigating and sharing information with the FSA and other authorities.

Service complaints

The authority had dealt with some challenging complaints about the service, involving complex legal matters and had dealt with these in a professional and satisfactory manner.

Liaison

The authority had arrangements in place for liaising with other bodies and arrangements for sharing expertise with other local authorities to ensure consistent service delivery.

2.14 The Authority's Key Areas for Improvement

Food Hygiene and Food Standards Intervention Frequencies

The authority had not carried out food hygiene and food standards interventions at the minimum frequencies required by the Food Law Code of Practice. Interventions carried out at the minimum frequency ensure that risks associated with food businesses are identified and followed up in a timely manner.

Food Hygiene and Food Standards Establishment Interventions and Inspections

Information captured by officers during interventions was not always sufficiently detailed to demonstrate that thorough assessments of business compliance had been undertaken.

Food Standards Records and Interventions/Inspections Reports

Intervention/inspection reports provided to food business operators did not contain all the information required by the Food Law Code of Practice.

Enforcement

Escalation of enforcement action for food hygiene offences had not consistently taken place and enforcement action had not always been taken in accordance with the Food Law Code of Practice and centrally issued guidance.

Audit Findings

3 Organisation and Management

Strategic Framework, Policy and Service Planning

- 3.1 Conwy County Borough Council's food law enforcement function was overseen by the Portfolio Member for Regulatory Services and Housing. The authority's Constitution set out its decision making arrangements. Under the Constitution, decisions on most operational matters had been delegated to the Head of Service.
- 3.2 A 'Food Law Enforcement Service Plan 2015/16' ('the Service Plan') had been developed by the authority. The Service Plan had been approved by the Portfolio Member and was available on the authority's website.
- 3.3 The Service Plan contained most of the information set out in the Service Planning Guidance in the Framework Agreement, including a profile of the authority, the organisational structure and the scope of the service. The times of operation, service delivery points and aims and objectives of the service were also clearly set out.
- 3.4 The Service Plan indicated that there were 1,822 food establishments in Conwy which were subject to official controls.
- 3.5 The profile of businesses in Conwy for food hygiene and food standards was provided by establishment type and the number of planned interventions due in 2015/16 was included together with their risk ratings.
- 3.6 In respect of food hygiene the following information was provided in the Service Plan:

Risk Category	Frequency of inspection	Total Premises	Inspections Planned for 2015/16
A	At least every 6 months	7	14
B	At least every 12 months	54	54
C	At least every 18 months	628	459
D	At least every 24 months	281	135
E	Alternative Enforcement every 3 years	716	200-250
Unrated	As soon as possible	54	Approx 150
Outside the program	N/A	64	
Revisits	For premises rated 0,1 or 2	41	Approx 50-70
Food Hygiene Rating Re-inspections	Within 3 months	Approx 50-70	Approx 50-70
Outside program			Nil
Total (inc. Maximum approximations)		1,808	655 A-D 200-250 Cat E's Others – Approx 200-290 others

- 3.7 The targets and priorities for the food hygiene service had been identified in the Service Plan. These included a commitment to deliver all inspections / interventions due at higher-risk and medium risk establishments, consisting of 100% of inspections due at category A, B C and D rated establishments.
- 3.8 In respect of lower-risk establishments, the Service Plan stated that category E establishments would be subject to alternative enforcement activity or inspection; both in accordance with the Food Law Code of Practice. The figure for category E inspections included overdue inspections and it was anticipated that this would reduce throughout the year as inspections are undertaken. Further, the authority had identified 64 establishments prior to the audit that it believed did not merit inclusion in the interventions programme (called “No inspectable risk” or outside of the scheme).
- 3.9 18% of the new businesses inspections due in 2014/15 had not been achieved and were identified in the Service Plan.

3.10 The following information was provided in respect of food standards:

Risk Category	Frequency of inspection	Total Premises	Inspections planned for Food Standards Officer	Inspections planned for Food Safety Officers
High (A)	At least every 12 months	15	15	0
Medium (B)	At least every 24 months	839	99	In line with food hygiene inspection numbers
Low (C)	Alternative Enforcement every 5 years	573	0	Checks in line with food hygiene inspection numbers
Unrated	As soon as possible	300	9	295
Outside Program		81*		
Revisits	As needed	N/A	As needed	As needed
Total		1808	123	

*The authority had identified 81 establishments, on the audit pre-visit questionnaire, that it believed did not merit inclusion in the food standards interventions programme (called “No inspectable risk” or outside of the scheme).

3.11 The authority’s priorities and intervention targets as set out in the Service Plan, were risk based, however, they did not meet the requirements of the Food Law Code of Practice, as establishments marked as not having an inspectable risk should have been included within the interventions programme in accordance with Annex 5 of the Food Law Code of Practice.

3.12 The resources available to deliver food hygiene services was reported in the Service Plan to be 5.5 full time equivalent officers (FTEs) and for food standards 0.8 FTE. A breakdown was provided of the competency levels of officers available.

3.13 The authority had indicated the likely demand for most aspects of the service, including responding to food complaints, food sampling and

infectious disease control notifications; although no demand had been provided for advice to businesses or response to incidents / alerts. The requirement to estimate the resources required to deliver the full range of food official controls against those available had not been provided.

- 3.14 The Service Plan included information on the authority's Enforcement Policy and its approach to staff development.
- 3.15 The authority supported businesses through its commitment to following the Primary Authority Scheme and the Home Authority Principle. The Service Plan also highlighted other approaches it would use to ensure businesses were well informed of their legal obligations.
- 3.16 Arrangements for internal monitoring 'quality assessment' were set-out in the Service Plan and included monitoring the number and quality of inspections, inspection reports and enforcement actions.
- 3.17 The overall costs of providing food law enforcement services had been provided in the Service Plan, including the year on year trend. A breakdown had been detailed in terms of the non fixed costs such as staffing, travel and subsistence, equipment including investment in IT and a reference to the departmental financial provision for legal action.
- 3.18 Auditors were advised that the authority had the required resources to deliver the planned work programmes subject to them being able to use the vacant post as a flexible resource. Local authority monitoring data from across Wales had been analysed and was able to demonstrate that the officer resource available for food hygiene and food standards work was lower than both the all Wales and north Wales averages.
- 3.19 The Service Plan set-out how the authority's performance in delivering food official controls would be reviewed against the previous year's plan. This included ongoing monitoring and reporting against the performance indicators which had been identified, with twice yearly Service Performance Reviews being undertaken by Strategic Directors and Members external to the service.
- 3.20 Some variations in achieving the targets set-out in the previous Service Plan were identified in the 2015/16 Service Plan, however, no reasons for the variances had been given.

3.21 The authority had incorporated areas for improvement in its 2015/16 Service Plan, as follows:-

- “We will continue to review our procedures in preparation of our forthcoming FSA audit for Food Hygiene and Standards to ensure they are up to date and reflect current practices. It is also understood that regional procedures will be developed for Feed work.
- The team needs to make greater use of the Conwy Food Safety Face book pages but this is difficult at present due to other priorities. “

Food Hygiene

- Efforts are required to ensure that inspections Category (A-D) are carried out within the 28 days of the scheduled due in line with the Food Law Code of Practice (Wales). This will be carried out by closer monitoring of Officer Performance through monthly 1:1's.
- The team continues to struggle with meeting the requirement of the Food Law Code of Practice (Wales) for new businesses to be inspected with 28 days. This is a challenge for many local authorities particularly as the number of new businesses is hard to predict and provide resources for peaks of new businesses opening. This is particularly hard within Conwy due to the seasonal trading and changing of ownership over peak seasons.
- When minor contraventions relating to food samples are detected a quicker intervention is required with the food business operator.

Food Standards

- A standard inspection proforma will be introduced during 15/16 for recording information discussed during food standards inspections for high risk businesses.
- Businesses that received Food Standards inspections also need to receive a written inspection report similar to that sent to businesses for Food Hygiene.
- Sampling for the year needs to be targeted at local producers and local businesses where possible, particularly for Food Standards sampling.”

3.22 It was noted that the improvements required did not include all that was required to enable the authority to meet the requirements of the Food Law Code of Practice.

Recommendations

3.23 The authority should:

- (i) Ensure future Service Plans for food hygiene and food standards are developed in accordance with the Service Planning Guidance in the Framework Agreement. In particular, an estimate of the resources required to deliver the services against those available should be provided and an explanation provided for any variances identified in the service review. [The Standard – 3.1]

4 Review and Updating of Documented Policies and Procedures

- 4.1 The authority had developed a document control policy, covering control over the addition, deletion and amendment of documents across Regulatory Services and Housing.
- 4.2 Documents were stored electronically and had been protected from unauthorised access.
- 4.3 Managers were responsible for developing, reviewing and approving documents as well as ensuring they were subject to timely programmed review and where necessary in response to other circumstances. Permissions to make changes to the list of documents or individual documents were restricted to nominated individuals who were also responsible for ensuring the removal of superseded documents.
- 4.4 Auditors were able to verify that officers had access to policies and procedures, legislation and centrally issued guidance either in hard copy or electronically on the authority's computer drives or where applicable on the internet.
- 4.5 Not all documents had been subject to review in line with the procedure although a rolling programme of document reviews had commenced. Documents overdue for review since 2013 and 2014 included the Database Management Procedure, the Enforcement Policy, and Prohibition Procedures.

Recommendations

- 4.6 The authority should:
- (i) 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]

5 **Authorised Officers**

- 5.1 The authority's Scheme of Delegation of Powers to Officers provided the Head of Regulatory Services and Housing with delegated powers relating to powers of entry and the execution of duties applicable to the food hygiene and food standards services. The Head of Service also had the delegated authority to authorise other officers and to authorise legal action.
- 5.2 A documented procedure had been developed for the authorisation of officers based on their competencies. The process of assessing competency had not been documented.
- 5.3 Lead officers for food hygiene, food standards and communicable disease had been appointed.

Good Practice – Procurement of contractors

The authority had used the Welsh Government procurement portal 'Sell to Wales' to secure suitably experienced and qualified contractors as a flexible resource to bridge gaps in service delivery.

- 5.4 The authority had made budgetary provision for officer training and systems were in place to identify officer training needs including the Performance Development Review (PDR) process and discussions within team meetings. Officers were provided with opportunities for continuing professional development and it was clear from the records available that officers were able to access food related training. All officers were required to achieve 10 hours of continuing professional development (CPD) in accordance with the Food Law Code of Practice.
- 5.5 The authorisations, qualifications and training records of nine officers involved in delivering official food controls during the previous two years were examined. Records were being maintained by the authority electronically and on hardcopy files.

- 5.6 Officers had been authorised under the required legislation to undertake their full range of duties and powers for individual officers had been restricted appropriately. Further, the authority had arranged for the FSA to authorise a suitable number of officers under the Food and Environment Protection Act 1985.
- 5.7 The authority provided evidence of officer authorisations consistent with their qualifications for all but two officers; both authorised food standards officers whose qualifications were not available.
- 5.8 Eight officers had received the minimum 10 hours CPD required by the Food Law Code of Practice and the authority's own procedures. Training records for the remaining two officers were not available.
- 5.9 Food hygiene and food standards officers had received much of the necessary training to deliver the technical aspects of the work in which they were involved. Officers had attended a wide range of specialist courses including sous-vide, vacuum packing, shellfish purification, allergen regulation and sampling. However, the authority would benefit from ensuring all officers receive formal HACCP training commensurate with their duties.

Recommendations

- 5.10 The authority should:
- (i) Ensure all authorised officers meet the training requirements set out in the Food Law Code of Practice; including training in HACCP. [The Standard – 5.4]
 - (ii) Maintain records of relevant academic or other qualifications for authorised food standards officers. [The Standard – 5.5]

6 Facilities and Equipment

- 6.1 The authority had most of the necessary facilities and equipment required for the effective delivery of food hygiene and food standards services, which were appropriately stored and accessible to relevant officers.
- 6.2 A procedure for the calibration and maintenance of equipment had been developed. This procedure detailed the arrangements for ensuring that equipment, such as thermometers were properly identified, assessed for accuracy and withdrawn from use when found to be faulty. The policy made reference to testing frequencies, together with action to be taken where tolerances were exceeded, however, the appropriate target tolerances had not been identified.
- 6.3 Officers had been supplied with thermometers, which were being calibrated using a laboratory calibrated reference thermometer. The equipment allocated to officers was calibrated at least annually. To ensure the accuracy of thermometers, the need for more frequent calibration checks was discussed. Records relating to calibration were being maintained by the authority.
- 6.4 An examination of records relating to the latest calibration checks confirmed that all were within acceptable tolerances in accordance with centrally issued guidance.
- 6.5 The authority's food establishment database was capable of providing the information required by the FSA. A number of checks were carried out during the audit which confirmed that the database was operated in such a way as to enable accurate reports to be generated.
- 6.6 The food establishment database, together with other electronic documents used in connection with food law enforcement services were subject to regular back-up to prevent the loss of data.
- 6.7 The authority had systems in place to ensure business continuity and minimise damage by preventing or reducing the impact of security incidents. Officers had been provided with individual passwords and access for entering and deleting data had been restricted on an individual basis. Data input protocols were also in place and database

issues were discussed during team meetings in order to achieve consistency.

Recommendation

6.8 The authority should:

- (i) Ensure temperature monitoring equipment is calibrated frequently and amend the documented procedure for calibrating temperature measuring equipment to include the appropriate tolerances in accordance with centrally issued guidance. [The Standard - 6.2]

7 Food Establishments Interventions and Inspections

Food Hygiene

- 7.1 In 2014/15 the authority had reported through LAEMS that 97.73% of category A-E rated food businesses due to be inspected had been inspected, and 93.94% of food businesses were 'broadly compliant' with food hygiene law (excluding unrated businesses and those outside the scope of the risk rating scheme). This represented an improvement of 1.4% from 92.54% of businesses reported as 'broadly compliant' in the previous year.
- 7.2 The authority had developed documented procedures aimed at establishing a uniform approach to carrying out food hygiene interventions, revisits and the approval of product specific establishments. An examination of these procedures confirmed that all made reference to relevant legislation, had been subject to recent review, and were in accordance with the requirements of the Food Law Code of Practice and relevant centrally issued guidance.
- 7.3 The intervention procedure included the approach to approving establishments handling products of animal origin, however, this did not include the process involved in inspection and enforcement in approved establishments. Further consideration should be given to the development of product specific aides-memoire (in addition to one relating to the processing of mussels) to ensure that the requirements of the applicable statutory requirements are assessed. The authority had also developed a Food Law Enforcement Revisit Policy based on one developed by the Wales Heads of Environmental Health (WHeEH) Food Safety Expert Panel for providing guidance on the timing of revisits.
- 7.4 Information supplied by the authority prior to the on-site audit indicated that there were a total of 333 establishments overdue a food hygiene intervention by more than 28 days, the majority of which were lower risk establishments. Further, the authority has assigned 29 establishments as "outside scope" which is contrary to the requirements of the Food Law Code of Practice. Nevertheless, the data supplied by the authority demonstrated that it had adopted a risk-based approach to managing its food hygiene interventions programme.

- 7.5 A food hygiene intervention aide-memoire had been developed by the authority to assist officers in their inspections of food businesses. A procedure for ensuring that concerns, potential problems or priorities for the next inspection were adequately highlighted (red flagging) had also been developed.
- 7.6 During the audit an examination of food hygiene records relating to 10 food establishments was undertaken. The file histories confirmed that in recent years six had been inspected at the frequencies required by the Food Law Code of Practice. However, four had not been inspected at the required frequencies, all of which were higher-risk i.e. one category A, two category B and one category C rated establishments. The higher-risk establishments had all been inspected within a period of between three weeks and five months after their due dates. The Food Law Code of Practice requires that interventions take place within 28 days of their due date.
- 7.7 Inspection records were available and legible in all cases with officers documenting their observations on inspection aides-memoire. Information recorded by officers was not always sufficient to demonstrate that the size and scale or food activity of the business had been fully captured and an appropriate assessment of the effectiveness of cross contamination controls had taken place.
- 7.8 Auditors were not generally able to verify that where appropriate an adequate assessment of businesses compliance with Hazard Analysis Critical Control Point (HACCP) had taken place. Further there was no evidence that discussions had taken place with responsible staff in connection with monitoring and corrective action at critical control points (CCPs). Core elements of business' HACCP plans had also not been retained.
- 7.9 Auditors were able to confirm that in all but two cases, an adequate assessment of hygiene training of food handlers had taken place and details of food suppliers had been recorded.
- 7.10 Information recorded was generally insufficient to allow auditors to determine whether health or identification marks on products received by businesses had been adequately verified or that consideration had been given to imported foods.

- 7.11 Overall, the risk ratings applied to establishments were consistent with the inspection findings. However, in one case, auditors were unable to determine whether the score applied in respect of business compliance were accurate because there was insufficient information recorded relating to compliance with temperature control requirements.
- 7.12 In all but one applicable case, where a risk rating had been revised downwards, the reasons had been documented in accordance with the Food Law Code of Practice. In the remaining case, the reason for revising the rating from a Category A to a Category C had not been recorded.
- 7.13 Where revisits were required, in general these had been carried out in accordance with the timescales stipulated in the authority's revisit policy. In one case where a 1 rating had been applied under the Food Hygiene Rating Scheme (FHRS), the establishment was overdue a revisit by two months.
- 7.14 In eight cases significant issues / contraventions had been identified requiring follow up action. In five of those cases the appropriate action had been taken place. However, in three cases, where contraventions had been identified on previous interventions, the appropriate escalation of enforcement had not taken place.
- 7.15 The authority had informed the FSA prior to the audit that there were 15 approved establishments in its area. The records relating to six of these were examined. In four cases, auditors were able to confirm that establishments had been approved without unreasonable delay. In the remaining two cases; application documents and the notification of approval document, respectively, were not available. Auditors were therefore unable to confirm that the establishment had been approved without reasonable delay by the authority.
- 7.16 Inspection histories of the approved establishments confirmed that in recent years three had been inspected at the frequencies required by the Food Law Code of Practice. Three had not been inspected at the required frequencies, of which two were higher-risk, the remaining establishment was lower-risk. The higher-risk establishment had been inspected within 5.5 months of its due date and the lower risk establishment had been inspected 19 months after its due date. The

Food Law Code of Practice requires that interventions take place within 28 days of their due date.

- 7.17 Inspections at approved establishments had taken place using a range of aide-memoire which had not generally been designed to capture information in relation to approved establishments. However, in relation to shellfish purification centres, the Centre for Environment, Fisheries and Aquaculture Science (CEFAS) aides-memoire was being used. Auditors were able to confirm that in one case, the information captured by officers was sufficient to confirm that a full-scope inspection had taken place. This had considered all aspects of the establishment, including structure, hygiene practices, food safety management and the officer had assessed the businesses against the relevant legislative requirements. In three higher-risk establishments, no contemporaneous notes were available. In the remaining two cases, the limited information recorded did not allow auditors to confirm that the businesses were assessed against the relevant legislative requirements. In one of these cases, auditors were unable to verify that the officer had confirmed the range of products produced by the business or made a suitable assessment of the effectiveness of CCPs or staff hygiene.
- 7.18 Layout plans were available for all approved establishments. However, much of the information required in Annex 10 of the Food Law Practice Guidance was either not consistently available or not up to date. Only one of the six files checked contained all the required information.
- 7.19 The risk ratings applied to approved establishments were consistent with the inspection findings in all cases. In five of the six cases examined, where risk ratings had been revised, the reasons (where applicable) had been clearly documented. In the remaining case, the reason for revising the risk rating from category A to category B had not been recorded as required.
- 7.20 An Alternative Enforcement Strategy (AES) for maintaining surveillance of category E rated establishments had been developed and was being implemented by the authority. The approach to E rated establishments being adopted consisted of issuing a low-risk establishment checklist, providing information or, in some cases, carrying out a full inspection. The information received from completed checklists was assessed by a competent officer who decided whether follow-up was required. However, auditors noted that the procedure did not set-out criteria

against which completed questionnaires were to be assessed or specify the action to be taken where no response was received.

7.21 During the audit, records of nine establishments that had been subject to AES were examined. In all nine cases, a primary inspection had been carried out prior to the business receiving a risk rating and selection for AES. In five cases the AES had been delivered at the minimum frequency specified in the Food Law Code of Practice. In the remaining cases, the AES had been delivered within a period of between six and eight years after their due dates. The Food Law Code of Practice requires that interventions take place within 28 days of their due date.

7.22 In eight cases sufficient records of the way in which the AES was carried out were available and in all relevant cases evidence of review by an appropriate officer was available on the file.

Recommendations

7.23 The authority should:

- (i) Ensure that food establishment interventions/inspections are carried out at the minimum frequency specified by the Food Law Code of Practice. [The Standard -7.1]
- (ii) Carry out interventions/inspections in accordance with the Food Law Code of Practice and centrally issued guidance, and the authority's policies and procedures. [The Standard – 7.2]
- (iii) Assess the compliance of establishments in its area to the legally prescribed standards; and take appropriate action on any non-compliance found, in accordance with the authority's Enforcement Policy. [The Standard -7.3]
- (iv) Amend its procedure for AES and fully implement its documented procedures in relation to inspections and revisits of food premises. [The Standard – 7.4]
- (v) Ensure that observations made in the course of an inspection are recorded in a timely manner to prevent loss of relevant information. [The Standard – 7.5]

Verification Visits to Food Establishments

- 7.24 During the audit, a verification visit was made to one food establishment with the authorised officer who had carried out the last food hygiene inspections. The main objective of the visits was to consider the effectiveness of the authority's assessment of food business compliance with food law requirements.
- 7.25 The officer was knowledgeable about the businesses and demonstrated an appropriate understanding of the food safety risks associated with the activities at the establishment. A detailed inspection had been carried out and compliance with legal requirements and centrally issued guidance had been assessed. The officer had also offered helpful advice to the food business operator. During the course of the visit, structural issues were noted and auditors were able to verify that the officer communicated the required action to the food business operator.

Food Standards

- 7.26 In 2014/15 the authority had reported through LAEMS that 93% (566) of risk category A-C food businesses due to be inspected had been inspected. This represented an increase from 39% in the previous year.
- 7.27 Immediately prior to the audit, the authority had a total of 1,882 food establishments on its database. A total of 82 of these had been placed outside the food standards intervention programme and 322 businesses were unrated. Planned interventions were overdue at 507 establishments. Whilst 158 of these were low-risk, 302 were medium-risk and there was one recently overdue high-risk establishment.
- 7.28 The authority's Interventions Procedure set out its approach to food standards interventions which was in accordance with the Food Law Code of Practice. The authority's approach had been recently reviewed and changed so that food standards inspections were carried out at the same time and by the same officers as food hygiene inspections. The exception was high risk food standards establishments which were inspected by the food standards officer in the Trading Standards team.

- 7.29 The Interventions Procedure had recently been amended to require unannounced inspections in accordance with the Food Law Code of Practice. The approach to the inspection of new food businesses had also been detailed in the procedure. In practice, where 'significant' issues were identified by food hygiene officers during inspections, these had been referred to the food standards officer for further investigation, however, this had not been documented in the procedure. Auditors were advised that this position had recently changed and all authorised officers would be responsible for following up food standards matters.
- 7.30 Aide-memoires have been developed to assist officers in undertaking thorough food standards inspections. Two of the three forms in use did not provide a prompt to indicate whether the inspection was unannounced. Auditors noted that the authority had developed a revisit policy.
- 7.31 Records relating to 10 food establishments that had been subject to food standards inspections were examined. Four of these had been carried out by the specialist food standards officer and six by food hygiene officers.
- 7.32 From the records available, auditors were able to verify that over the last three intervention cycles, interventions had been carried out at the required frequencies in only four out of 10 cases with six years elapsing between interventions in one case.
- 7.33 Registration forms were available in all relevant cases although it was noted these had not consistently been marked with the date of receipt.
- 7.34 Findings of the most recent inspections were available in eight out of 10 cases. In the remaining two cases, inspection forms containing information recorded during the most recent inspection were not available. Where they were available, inspection forms did not indicate whether inspections had been unannounced.
- 7.35 Aides-memoire were routinely used to capture information where food hygiene officers were carrying out interventions. The food standards officer generally captured information on a proforma which was also the report of visit form issued to food business proprietors. Due to the limited information recorded, it was not possible to verify that officers had

considered the food activities undertaken by the business, checked compliance with presentation and labelling requirements or compositional requirements, where applicable. Further, auditors were unable to verify from the records that traceability requirements, including withdrawal/recall arrangements, and the existence and effectiveness of quality management systems had, where appropriate, been consistently assessed.

- 7.36 Generally, from the information available, auditors were able to verify that food establishments inspected by the food standards officer had been correctly risk rated. Due to the limited information recorded on inspection forms by food hygiene officers and absence of reports to businesses, it was not possible to verify that the correct risk ratings had been applied.
- 7.37 It was not possible to verify from the information available, whether revisits or follow-up action were required following the latest intervention.
- 7.38 The authority had developed a Food Standards Alternative Inspection Strategy for Low Risk Food Premises which stated that the approach to alternative interventions would vary from year to year and be detailed in the Service Plan. The alternative enforcement procedure prescribed a range of interventions appropriate for maintaining surveillance on low-risk establishments such as phone call enquiries, alternative intervention visits, intelligence and information gathering and the issue of a postal questionnaire. Some activity that did not constitute surveillance was also identified contrary to the Food Law Code of Practice such as the provision of information by mailshot and training arranged by the team.
- 7.39 Despite the availability of a procedure, the authority had not implemented an alternative enforcement strategy for food standards. Food standards inspections of category C rated establishments were being carried out by food hygiene officers at the same time as food hygiene inspections.

Recommendations

- 7.40 The authority should:
- (i) Ensure that food standards interventions are carried out 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/inspections and register establishments in accordance with relevant legislation, the Food Law Code of Practice and centrally issued guidance. [The Standard - 7.2]
 - (iii) Assess the compliance of establishments in its area to the legally prescribed standards. [The Standard – 7.3]
 - (iv) Ensure the documented AES procedure reflects the requirements of the Food Law Code of Practice and Practice Guidance. [The Standard 7.4]
 - (v) Ensure that observations and/or data made in the course of an intervention/inspection are recorded in a timely manner to prevent the loss of relevant information, and that all records of interventions are stored in such a way that they are retrievable. [The Standard – 7.5]

Verification Visit to Food Establishment

- 7.41 A verification visit was made to a food establishment with an authorised officer of the authority who had carried out the most recent food standards inspection. The main objective of the visit was to consider the effectiveness of the authority's assessment of the systems within the business for ensuring that food meets the requirements of food standards law.
- 7.42 Despite the absence of sufficiently detailed records of the intervention, the officer was able to demonstrate good knowledge of the business and provide auditors with assurance that assessments of some food standards controls had taken place as part of a partial inspection. However, it was noted that this inspection had been announced contrary

to the Food Law Code of Practice. Further, given the nature and range of products being produced and handled and the absence of a recent full primary inspection, it was recommended that the authority ensure a thorough assessment of compliance with food standards requirements is undertaken at the earliest opportunity.

- 7.43 Auditors noted that the establishment which had not been approved by the authority was supplying food outside the terms of the exemption that applied to it. Officers were requested to follow-up this matter without delay and the authority responded accordingly.

8 Food and Food Establishments Complaints

8.1 The authority had developed a complaints policy which outlined the criteria for complaint investigations. The policy contained a procedural section which would benefit from further development to reflect centrally issued guidance. In particular, information on the authority's approach to responding to complaints about food establishments and food originating from other EU member states or third countries had not been detailed.

8.2 The time limits for responding to food hygiene and food standards complaints and services requests had not been documented by the authority. However, timescales for responding to complaints were allocated automatically by the database according to the category of the complaint.

Food Hygiene

8.3 An examination of the records relating to 10 food hygiene complaints received by the authority in the two years prior to the audit was undertaken. All had been actioned within the target response times.

8.4 Records were available to confirm that complaints had been appropriately investigated in accordance with centrally issued guidance in eight cases. In one case, further investigation was indicated in relation to an allegation of food poisoning, but there was no evidence that this had taken place. In the remaining case, auditors were unable to verify whether the investigation had been satisfactorily concluded due to the absence of records.

8.5 In eight out of 10 cases, there was evidence that complainants had been informed of the outcome of investigations, where this was appropriate.

Food Standards

8.6 Audit checks were undertaken of the records relating to nine food standards complaints received in the previous two years. Five had been actioned within the target response time. In the four remaining cases, delays ranged from 3 weeks to 4 months over the target response time. In three of these cases the referrals for investigation came from other officers within the team who may have already provided an initial

response. However, this does not explain the further delays in progressing the investigations.

- 8.7 In all but one case, contact had been made with suppliers and other local authorities as appropriate. Complaints had been investigated in accordance with centrally issued guidance in five cases. In the remaining four cases, records were not available to provide auditors with assurances that the complaints had been appropriately investigated.
- 8.8 In four cases there was evidence that all appropriate parties had been informed of the outcome of the investigation, where this was appropriate. However, in two cases, the supplier had not been informed, in four cases, the complainant had not been informed and in one case another local authority had not been informed of the outcome.

Recommendations

- 8.9 The authority should:
- (i) Further develop its documented procedure in relation to complaints about food and food establishments; to include details on its approach to complaints relating to food originating from other EU member states or third countries. [The Standard - 8.1]
 - (ii) Ensure food hygiene and food standards complaints are investigated in accordance with centrally issued guidance and the authority's policies and procedures; including responding within target times, and communicating with all relevant parties. [The Standard – 8.2]

9 Primary Authority Scheme and Home Authority Principle

- 9.1 The authority's commitment to the Primary Authority Scheme and Home Authority Principle was set-out in the Service Plan but had not been considered in its Enforcement Policy.
- 9.2 Primary Authority and Home Authority considerations had been included in some work procedures, for example the food sampling procedure.
- 9.3 Auditors were advised that officers had been provided with passwords to enable them to access the Primary Authority website.
- 9.4 Although the authority had no Primary Authority agreements in place, auditors were able to verify that, in its capacity as an enforcing authority, it had regard to Primary Authority guidance and followed up matters of concern with Primary Authorities, as appropriate.
- 9.5 The authority had no formal Home Authority Agreements in place, but records examined during the audit demonstrated that accurate and timely advice had been provided to businesses, and that it had responded appropriately to requests for information from other local authorities.

10 Advice to Business

- 10.1 The authority had been proactive in providing food hygiene and food standards advice to businesses. There was evidence that advice had been provided during interventions, as well as on request, both in writing and by advisory visit if the business had yet to start trading. Business requests for information and advice had been logged on the authority's database.
- 10.2 Food safety information provided on the authority's website, included advice on starting a new businesses, food hygiene legislation and inspections, the Food Hygiene Rating Scheme, Approved Premises, food safety management, food alerts, food sampling, food safety training and allergens as well as access to a newsletter.
- 10.3 The authority had also provided links to the Trading Standards Institute on its website for business advice on a comprehensive range of food standards issues.
- 10.4 The authority had participated in a 'Poor Premises Project', targeting businesses requiring further support to develop good levels of compliance. The authority had also provided training courses to businesses on request on a wide range of issues such as allergens, the Food Hygiene Rating Scheme and the control of cross contamination as well as delivering a presentation on the Primary Authority scheme.

11 Food Establishments Database

- 11.1 The authority had a documented procedure for the maintenance of its food establishment database which included the arrangements in place for ensuring its accuracy. These arrangements included information from planning applications, officers' local knowledge, business directories, business rates, advertisements, and direct notifications.
- 11.2 The authority had been proactive undertaking on-line searches to test the database for up to date information on several sectors including cold stores, supermarkets and gluten-free suppliers.
- 11.3 Auditors randomly selected nine food establishments located in the authority's area from the Internet. All had been included on the authority's database and in general, they had been registered in accordance with the Food Law Code of Practice. All had been included in the food inspection programmes or were new establishments identified for inspection.

12 Food Inspection and Sampling

- 12.1 The 2015/16 Service Plan contained details of the food sampling programmes in which the authority participated. The sampling programme targeted local producers, retailers and manufacturers, including all butchers producing and handling cooked meats for microbiological sampling. The authority was participating in national and regional sampling surveys including the Welsh Shopping Basket Survey. The programme included an estimate of the number of samples that would be taken in 2015/16.
- 12.2 A documented food sampling policy and a procedure had also been developed by the authority. The policy, updated in 2015, stated that additional food sampling activities may be undertaken outside of the programme for routine inspection based monitoring or in connection with enforcement investigations.
- 12.3 The procedure set-out the approach to sampling food for microbiological analysis in accordance with the Food Law Code of Practice and official guidance.
- 12.4 In addition to funding its own sampling, the authority had successfully applied for grants from the FSA in previous years to fund its sampling programme.
- 12.5 The authority had appointed a Food Examiner and Public Analyst for carrying out examination and analyses of food samples, and had a formal agreement in place with Public Health Wales (PHW) for the microbiological analysis of food. The appointed laboratories were both accredited and were on the recognised list of UK Designated Official Laboratories.
- 12.6 All samples and results were being entered on the FSA's central UKFSS Net database.
- 12.7 During the audit, records of 10 samples submitted for microbiological analyses and 10 food standards samples were examined. All results had been unsatisfactory. Records indicated that sampling activity was well organised and all documentation relating to sampling was easily legible and retrievable. All samples had been taken by an appropriately

authorised officer, results were available on food establishment files and appropriate action had been taken by officers in response to unsatisfactory samples in all cases. This included notifying businesses, providing them with appropriate advice and liaising with Primary or Home Authorities as appropriate.

13 Control and Investigation of Outbreaks and Food Related Infectious Disease

- 13.1 The authority had identified a lead officer for communicable disease who had attended events as part of the Wales Lead Officer Training programme.
- 13.2 An Outbreak Control Plan had been developed in consultation with relevant stakeholders. The plan was based on a template that had been produced by a multi-agency group, including Public Health Wales and Welsh Government. Auditors noted that the template plan had not been amended to include local information.
- 13.3 The authority had arrangements in place for responding to cases of food related infectious disease out-of-office hours. These arrangements were not tested as part of the audit.
- 13.4 A procedure for investigating sporadic cases of foodborne disease had been produced by the authority but did not adequately cover the full scope of the infectious disease investigation. Auditors were advised that it was the authority's policy not to follow up implicated food business unless more than one case of illness was linked. Auditors discussed the benefit of further developing the procedure to include the method for cross referencing common notifications to identify the source and the follow up of implicated food establishments.
- 13.5 Notifications relating to 10 sporadic cases of food related infectious disease were examined. In nine cases, adequate and appropriate records had been retained by the authority and appropriate action had been taken by officers to investigate the cases. In the remaining case, involving a suspected food poisoning, auditors were unable to verify that appropriate action had been taken as insufficient records were available.
- 13.6 There had been one outbreak of food related infectious disease reported by the authority in the two years prior to the audit. This was not selected for audit.

Recommendations

13.7 The authority should:

- (i) Amend its Outbreak Control Plan to include local information. [The Standard -13.1]
- (ii) Amend and fully implement its documented procedure for investigation of infectious diseases to include the method for cross referencing common notifications to identify the source and the follow up of implicated food establishments. [The Standard -13.2]
- (iii) Ensure that all records relating to the control and investigation of outbreaks and food related infectious disease are kept for at least 6 years. [The Standard -13.3]

14 Food Safety Incidents

- 14.1 The authority had developed a Food Alerts and Food Incidents Procedure. The Principal Environmental Health Officer was responsible for implementing the procedure or in her absence Senior Environmental Health Officers.
- 14.2 The procedure detailed the arrangements in place for recording and responding to food alerts and incidents, and the requirement for notifying the FSA of any serious localised incident or a wider food safety problem arising in its area. The arrangements in place for dealing with out-of-hours emergencies were also detailed in the procedure. The procedure would benefit from further development to provide more detail of the arrangements in place for receiving alert notifications out of office hours.
- 14.3 Auditors were able to verify that a sample of five recent food alerts for action notified to the authority by the FSA had been received and actioned, as appropriate, in accordance with the instructions issued. However, the authority should ensure that all decisions in relation to food alerts for action are documented, whether or not it intends to take action.
- 14.4 Auditors were able to verify that the authority was aware of the requirement to notify the FSA of any potential food alerts arising locally. The authority had initiated and responded to notifications of incidents in several recent cases and had worked closely with the FSA incidents team and other authorities to investigate and provide the information required to manage the incident effectively.
- 14.5 Action taken by the authority had been documented and correspondence, including officer e-mails relating to food alerts, had been maintained and were easily retrievable.

Recommendation

- 14.6 The authority should:
- (i) Further develop the documented procedure for initiating and responding to food alerts to include arrangements for receiving food alert notifications out- of hours. [The Standard – 14.1]

15 Enforcement

- 15.1 The authority had developed a Regulatory Services Enforcement Policy that covered food hygiene and food standards services. At the time of the audit the Policy was being reviewed although it was available to the public and food businesses on the authority's internet site.
- 15.2 The Enforcement Policy had been developed largely in accordance with the Food Law Code of Practice and official guidance. It included the approach to dealing with contraventions at local authority operated establishments but did not make reference to Primary Authority/Home Authority. The policy provided criteria for instigating prosecutions. Whilst the criteria for taking other enforcement actions were contained in enforcement procedures, they should be included within the Policy.
- 15.3 The authority had developed procedures for some follow-up and enforcement actions. Procedures for the service of Hygiene Improvement Notices and Hygiene Emergency Prohibition Notices had been developed which were in accordance with the Food Law Code of Practice. The Hygiene Emergency Prohibition Notice Procedure made reference to the use of Voluntary Closure, although no procedure for Voluntary Closures had been developed. A procedure for Improvement Notices was under development. The authority had developed a procedure for the Detention and Seizure of Food which would benefit by including local information for taking food before a Justice of the Peace and the destruction and disposal of food. Procedures had not been developed for the service of Remedial Action Notices (RANs), the Voluntary Surrender of food or for preparing Prosecutions and issuing Simple Cautions.
- 15.4 In the two years prior to the audit the authority had used a range of enforcement options to secure compliance with food law including Hygiene Improvement Notices, Remedial Action Notices (RANs), Voluntary Closures, Detention and Voluntary Surrender of food.
- 15.5 An examination of database records, indicated that there were no 0 rated establishments under the Food Hygiene Rating Scheme. There were 18 establishments rated 1 which had all been subject to appropriate enforcement action. Action had been taken to close nine food establishments in the two years prior to the audit due to poor hygiene

conditions. These had all closed using voluntary procedures. No prosecutions had taken place in the same two year period. Where serious hygiene contraventions are identified, auditors advised of the need to document decisions in accordance with its Enforcement Policy.

15.6 Auditors were advised that, in respect of food standards, no formal enforcement had been carried out in the two years prior to the audit. A range of formal enforcement action was reported, in pre-audit documentation for food hygiene/safety contraventions:

- 10 Hygiene Improvement Notices (HINs);
- 12 Remedial Action Notices;
- 9 Voluntary Closures;
- 2 Food Detention Notices;
- 2 Voluntary Surrenders of food;
- 1 Simple Caution.

15.7 Ten Hygiene Improvement Notices served on two food establishments were selected for audit. In all cases HINs had been an appropriate course of action, notices had been signed by appropriately authorised officers, details of the contraventions had been provided on the notices and the wording of notices was clear, could be easily understood and measures to be taken by food businesses were specified. Appropriate time limits for compliance had been specified on the notices and the right of appeal and details of the local magistrates court had also been provided.

15.8 One of the food businesses subject to HINs was a limited company. Auditors noted that the notices had not been served on the limited company at its registered office although the authority's procedure was clear on this requirement. This business subsequently closed so follow up to check compliance with the notices was not required. The notices relating to the other food business had been followed up but follow up had not been timely – it had been delayed by three months. Auditors were not able to evidence that the notices had been properly served and there was no correspondence with the food business confirming that the notices had been complied with.

15.9 Audit checks were undertaken of 10 RANs relating to five establishments. In all cases, RANs had been an appropriate course of action, the nature of the breach had been specified on the notices, the

wording of the notices was clear and easily understood, notices had been signed by a correctly authorised officer that had witnessed the contravention and the right of appeal was included on notices. However, it was noted that details of the local magistrates had not been included on any of the notices.

- 15.10 In eight out of 10 cases notices had been served on the food business operators. In the remaining two cases relating to a limited company, the notices had not been served on the limited company. Further, the notices went to the food establishment rather than to the Head Office of the Limited Company. Auditors were able to verify that timely checks on compliance had been carried out at four out of five establishments, and notices had been properly served in only two cases.
- 15.11 No withdrawal notices had been issued by the authority in respect of the 10 RANs audited. Officers advised that notices relating to two establishments remained valid as the circumstances that led to their service prevailed.
- 15.12 The records relating to nine voluntary closure agreements were subject to audit checks. Voluntary undertakings had either been recorded in officers' notebooks and signed by food business operators or, in some cases, officers had used hardcopy or electronic proforma voluntary closure notices.
- 15.13 Voluntary closure had been an appropriate course of action in all cases and had been confirmed in writing with food business operators in all but one case. In five cases there was evidence that frequent checks had been carried out to ensure the terms of the agreements were being observed. Businesses were advised they could resume trading in six cases. In a further case this was not appropriate as a RAN was subsequently served and in another case there had been a change in food business operator. In the remaining case, it was not clear due to an absence of records.
- 15.14 Auditors noted that the authority did not routinely require food businesses operators to sign an undertaking that, by making an offer to close voluntarily, they would lose their right to compensation.

- 15.15 Two Detention Notices had been issued in the two years prior to the audit. This had been the appropriate course of action in both cases, and Detention Notices had been signed by an appropriately authorised officer who had taken the decision to detain the food. Detention Notices clearly specified the food to be detained. In both cases detained food was subsequently voluntarily surrendered by the food business operators.
- 15.16 In the two cases where food had been voluntarily surrendered, this had been the appropriate course of action following receipt of unsatisfactory microbiological sampling results. Voluntary surrender records had been signed by an appropriately authorised officer and counter signed by the persons surrendering the food. The voluntary surrender record did not include space for recording the time, place and method of destruction of the food. Notwithstanding this, in the two cases audited, a record of destruction for the food was available. It was noted that the authority had not secured as part of the voluntary surrender process, an agreement by the owners of the food to pay the reasonable expenses of destruction or disposal.
- 15.17 In both cases, the circumstances that led the food to fail food safety requirements was investigated and the businesses advised in writing of several significant contraventions of food hygiene requirements. Auditors noted that no re-appraisal of the favourable food hygiene ratings had taken place.
- 15.18 The authority had issued one Simple Caution in the two years prior to the audit. This had been an appropriate course of action, the evidence had been adequately documented and there was a record of the admission of the offence signed by the food business operator. The Simple Caution had been administered in accordance with centrally issued guidance although there was no evidence that that the authority's enforcement policy had been considered. The Simple Caution had been signed by the Head of Regulatory and Housing Services who had been appropriately authorised.

Recommendations

15.19 The authority should:

- (i) Review and amend its enforcement policy to include criteria for the use of all available food enforcement options and reference to the Primary and Home Authority Schemes. [The Standard – 15.1]
- (ii) Set up, maintain and implement documented enforcement procedures for follow up and enforcement actions in accordance with the Food Law Code of Practice and official guidance. [The Standard -15.2]
- (iii) Ensure that food hygiene enforcement is carried out in accordance with the Food Law Code of Practice and centrally issued guidance, and ensure all decisions on enforcement action are made following consideration of the authority's Enforcement Policy. Document the reasons for any departure from the criteria set-out in the Enforcement Policy. [The Standard - 15.3 and 15.4]

16 Records and Interventions/Inspections Reports

Food Hygiene

- 16.1 Food business records, including registration forms, inspection aide-memoires and inspection reports were being maintained by the authority in hard copy and on its electronic food establishment database. Details of the date and types of intervention undertaken at food businesses, as well as the establishments risk profile and food hygiene ratings, were being maintained on the database.
- 16.2 Information relating to food establishments selected for audit were accessible and retrievable. Where relevant, information relating to the last three inspections was available and records were being retained for six years.
- 16.3 In eight of the 10 files examined, food business registration forms were available, and in six cases, they had been stamped by the authority to indicate the date of receipt.
- 16.4 Copies of correspondence provided to food businesses following interventions were available in all cases. Officers were using inspection letters to communicate inspection findings, which differentiated between legal requirements and recommendations for good practice. These letters also contained details of corrective actions required. However, timescales for achieving compliance and details of any further follow-up action intended by the authority had not been provided on correspondence in accordance with the Food Law Code of Practice.
- 16.5 Post-inspection report forms and inspection letters contained most of the information required to be provided to food business operators under Annex 6 of the Food Law Code of Practice. However, in three of the files examined, no indication of whether a sample had been taken was specified.
- 16.6 In seven cases, auditors were able to confirm that correspondence had been sent to food business operator at the registered business address. In one case the letter had been addressed to the trading name of the establishment rather than the food businesses operator and in the remaining two cases a different address to that specified on the registration forms was used on the inspection report.

- 16.7 In general, the most recent inspection letters and notification of food hygiene ratings had been sent to businesses within 14 days from the date of the visit. In one case, although correspondence had been sent outside of the statutory 14 days reasonable justification had been provided and documented by the officer.

Recommendation

- 16.8 The authority should:
- (i) Maintain up to date, accurate records in a retrievable form on all relevant food establishments in accordance with the Food Law Code of Practice and centrally issued guidance. These records should include food registration and approval information, reports of all interventions / inspections, the determination of compliance with legal requirements made by the officer and details of action taken. The authority should also record, with reasons, deviations from set procedures. [The Standard – 16.1]

Food Standards

- 16.9 Where food standards inspections had been carried out by the food standards officer, the inspection form used to capture information during inspections also served as the report of visit form provided to food business operators following inspections. These had been left with food business operators at the time of inspection in two out of four relevant cases.
- 16.10 Where food standards inspections had been carried out at the same time and by the same officer as food hygiene inspections, no information had been provided to food business operators on food standards issues following the intervention.
- 16.11 Where records made at the time of an intervention were available these were legible and stored in such a way that they were retrievable by all appropriate officers.

16.12 Where they were available, inspection reports contained most of the information required by Annex 6 of the Food Law Code of Practice. Information not consistently provided including the specific food law under which the inspection was conducted, the documents and/or other records examined, contact details of a senior officer (in case of dispute) and the food authority's address. Further, it was not sufficiently clear on report of visit forms what were legal requirements and what were recommendations of good practice. Additionally, in neither of the two cases, where inspection report forms were available, was an indication of timescales for compliance provided.

16.13 The authority was able to demonstrate that where records were available these were being kept for at least six years.

Recommendation

16.14 The authority should:

- (i) Maintain up to date, accurate food standards records on food establishment files including reports of all interventions/inspections, the determination of compliance with legal requirements made by officers, details of action taken where non-compliance is identified and details of any enforcement action taken. The authority should also record, with reasons, deviations from set procedures. [The Standard – 16.1]

17 Complaints about the Service

- 17.1 The authority had developed a corporate complaints policy and procedure which was available to the public and food businesses on its website.
- 17.2 Complaints were dealt with under a two stage procedure, initially by the relevant service manager and then, if the customer was not satisfied by the department's complaints officer.
- 17.3 Four complaints had been received in the two years prior to the audit and the authority was able to demonstrate that effective arrangements were in place within the service to investigate and report on the outcome of complaint investigations.
- 17.4 Auditors noted that in respect of food hygiene the contact details of a senior officer were provided on correspondence should businesses wish to complain following an inspection or other intervention. This was not consistently the case for food standards correspondence.

18 Liaison with Other Organisations

18.1 The authority had liaison arrangements in place with a number of external groups aimed at ensuring efficient, effective and consistent enforcement. Auditors were able to confirm that the authority had been represented on the following forums for local authority regulatory services:

- North Wales Food Group;
- North Wales Heads of Public Protection Group;
- Directors of Public Protection and Wales Heads of Environmental Health Group;
- Wales Food Hygiene Rating Scheme Steering Group;
- North Wales Food and Metrology Panel;
- All Wales Communicable Disease Expert Panel;

18.2 The authority had entered into an agreement with other north Wales local authorities to share expertise in relation to the regulation of processes requiring specialist skills and knowledge. A Memorandum of Understanding for Approved Premises and Major Food Manufacturers had been developed to facilitate this process.

18.3 The authority had also liaised with north Wales authorities with regards to promotional and business advice projects on allergen management and poor premises.

18.4 The authority also provided evidence of effective liaison arrangements with the following external organisations:

- Department for the Environment Fisheries and Rural Affairs (DEFRA);
- Care and Social Services Inspectorate for Wales (CSSIW);
- Health and Safety Executive;
- Public Health Wales;
- Welsh Water;
- Centre for the Environment, Fisheries and Aquaculture Science (CEFAS)
- Food Standards Agency;
- Welsh Food Fraud Coordination Unit;
- Medicines and Healthcare Products Regulatory Agency;
- Animal and Plant Health Agency;

18.5 Auditors were able to verify that mechanisms were in place for effectively liaising with internal departments, including Planning and Building Control, Licensing, Education and Social Services.

19 Internal Monitoring

- 19.1 Internal monitoring is important to ensure performance targets are met, services are being delivered in accordance with legislative requirements, centrally issued guidance and the authority's procedures. It also ensures consistency in service delivery.
- 19.2 The Principal Environmental Health Officer was responsible for internal monitoring of food enforcement services.
- 19.3 A number of key performance indicators had been identified for the food hygiene and standards services. Quantitative internal monitoring arrangements were in place to monitor performance against the targets, which had been set-out in the Service Plan.
- 19.4 A documented internal monitoring procedure had been developed. The procedure would benefit from further development to ensure services are delivered fully in accordance with the Food Law Code of Practice. The authority should also ensure the procedure is implemented to include activities other than proactive interventions and service requests.
- 19.5 Auditors were able to verify that some qualitative monitoring was being undertaken across the food hygiene service including database checks, accompanied inspections and record checks. Records maintained, in accordance with the procedure, confirmed the nature and extent of the monitoring activity.
- 19.6 Regular team meetings and one to one meetings with officers had taken place. Auditors were advised that officer progress in meeting performance targets, training and qualitative aspects of the work had been discussed in team meetings and during individual supervision meetings but no records of team meetings were available to confirm this.
- 19.7 Officers had attended training to ensure the consistent application of food hygiene risk ratings, in accordance with Annex 5 of the Food Law Code of Practice.
- 19.8 Internal monitoring records were being maintained by managers for two years.

Recommendations

19.9 The authority should:

- (i) Revise and fully implement documented internal monitoring procedures to improve the qualitative assessment of the full range of food hygiene and food standards activities. [The Standard – 19.1]
- (ii) For food hygiene and food standards, verify its conformance with the Standard, relevant legislation, the Food Law Code of Practice, centrally issued guidance and the authority's documented policies and procedures. [The Standard – 19.2]

20 Third Party or Peer Review

- 20.1 In January 2014 the authority, in common with the other 21 local authorities in Wales, had submitted information in respect of two FSA focused audits - Response of Local Government in Wales to the Recommendations of the Public Inquiry into the September 2005 Outbreak of *E. coli* O157 in South Wales and Local Authority Management of Interventions in Newly Registered Food Businesses. These focused audit reports are available at: www.food.gov.uk/enforcement/auditandmonitoring and had informed the FSA's July 2014 report to the Minister for Health and Social Services, Food and Feed Law Enforcement in Wales
- 20.2 The authority's arrangements for responding to emergencies out-of-office hours were tested by the FSA in March 2014. An appropriate response was received.
- 20.3 The authority's specialist work in regulating the shellfish industry was subject to a shellfish traceability exercise in 2014. The authority had prepared an action plan in response to the findings and reported the matter to the relevant elected member forum. Auditors were able to verify that actions had been implemented to address the findings.
- 20.4 The authority's Environmental Health functions, which included the food hygiene service and the investigation of food related infectious disease, had been subject to a review by the Wales Audit Office in 2013/14. The authority had prepared an action plan in response to the findings and reported to the relevant member forum.

21 Food Safety and Standards Promotion

21.1 The authority had delivered a number of initiatives with the aim of promoting food hygiene and standards. Activities included:

- talks to various organisations;
- development of bespoke allergen training for local businesses;
- promotion of the food hygiene rating scheme;
- provision of Chinese language food hygiene training for businesses using FSA grant funding;
- provision of information for consumers via the authority's website;
- promotion of food standards advice via TSI Interlink

21.2 Information on food hygiene and food standards services was available for consumers and businesses on the authority's website.

21.3 Records of promotional activities were being maintained by the lead officer.

Auditors:

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Auditors: Owen Lewis
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Action Plan for Conwy County Borough Council**Audit Date: 14th – 18th September 2015**

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.23 (i) Ensure future Service Plans for food hygiene and food standards are developed in accordance with the Service Planning Guidance in the Framework Agreement. In particular, an estimate of the resources required to deliver the services against those available should be provided and an explanation provided for any variances identified in the service review. [The Standard – 3.1]	Completed		<p>The 2016-17 Service Plan has been amended to include the areas highlighted during audit. In particular:</p> <ul style="list-style-type: none"> • A statement regarding the assessment of resources needed to deliver the work plan has now been made clearer. • A more comprehensive review of variances has been included.
4.6 (i) 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]	March 2017	<p>The following procedures are overdue for review and will be completed before March 2017:</p> <ul style="list-style-type: none"> • Database Accuracy Procedure • Regulatory & Housing Enforcement Policy • Detention & Seizure • EPN <p>All other procedures have already been reviewed or will be reviewed as per the procedure review plan.</p>	A policy/procedure review plan has been introduced which lists all policies and procedure, details when they were last review and the scheduled next review date for the year. This allows for an annual review of all policies and procedures to ensure they are kept up to date.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
5.10 (i) Ensure all authorised officers meet the training requirements set out in the Food Law Code of Practice; including training in HACCP. [The Standard – 5.4]	Completed		<p>This related to 2 Officers whose CPD records were not up to date due to individual circumstances. Training needs are identified for all Officers as part of the PDR process and Officers book onto appropriate courses. PDR's recently completed for the Team.</p> <p>2 Officers attended 'formal' HACCP training as a refresher.</p>
5.10 (ii) Maintain records of relevant academic or other qualifications for authorised food standards officers. [The Standard – 5.5]	Completed		Qualification records were shown during the Audit which are now kept on file.
6.8 (i) Ensure temperature monitoring equipment is calibrated frequently and amend the documented procedure for calibrating temperature measuring equipment to include tolerances in accordance with centrally issued guidance. [The Standard - 6.2]	Completed		The tolerance record sheet was amended during the audit and monthly checks have now been introduced.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
7.23 (i) Ensure that food hygiene establishment interventions/inspections are carried out at the minimum frequency specified by the Food Law Code of Practice. [The Standard -7.1]	March 2017	<p>99 businesses are still due for an AES from 2015/16 which have been programmed into the intervention plan for 16-17.</p> <p>The requirement to carry out new business inspections within 28 days remains a challenge for the team given the seasonal nature of the area which leads to significant peaks in work during certain months of the year. Where it is not possible to inspect a business within 28 days then electronic file notes will be made to account for the delay.</p>	<p>This relates to the recommendation that all food hygiene inspections should be carried out within 28 days of being due. There has been significant improvement in this area in the last few years. For 2015-16 85% of inspections were carried out within 28 days compared with 68% for 14-15 and 44% for 13-14.</p> <p>A plan was in place during 2015/16 to ensure all historic overdue Category E rated businesses were programmed for an AES or Inspection to remove the backlog.</p>
7.23 (ii) Carry out food hygiene interventions / inspections in accordance with the Food Law Code of Practice and centrally issued guidance, and the authority's policies and procedures. [The Standard – 7.2]	March 2017	<p>Intervention procedure to be reviewed to include the process involved in inspection of approved establishments.</p> <p>In addition a review of 'Approved Premises' files is planned for 2016/17.</p>	<p>New way of recording 'approvals' electronically has been introduced.</p> <p>Revisits are generally carried out in accordance with the procedure however this is monitored through internal monitoring and where timescales are not achieved Officers must record file notes to account for the delay.</p> <p>The reasons for revising a risk rating from an A downwards is normally recorded on the intervention form. Internal monitoring now includes discussion and review of A rated premises to ensure reasons for revising the rating are recorded.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>7.23 (iii) Assess the compliance of establishments in its area to the legally prescribed standards; and take appropriate action on any non-compliance found, in accordance with the authority's Enforcement Policy. [The Standard -7.3] (Food Hygiene)</p>	<p>March 2017</p>	<p>A standard intervention form is used for all premises inspected however consideration will be given to the development of a Manufacturers Intervention Form or other 'Premises Specific' intervention forms.</p> <p>In addition a review of 'Approved Premises' files is planned for 2016/17.</p> <p>Enforcement Policy is to be reviewed and changes communicated to the team. Internal monitoring will include monitoring of appropriate escalation of enforcement and discussed during 1:1's.</p>	
<p>7.23 (iv) Amend its procedure for Food Hygiene AES and fully implement its documented procedures in relation to inspections and revisits of food premises. [The Standard – 7.4]</p>	<p>Completed</p>		<p>AES procedure has been reviewed and updated to include the criteria against which completed questionnaires are to be assessed and include the action to be taken where no response is received.</p> <p>Revisits are monitored during 1:1's and routine internal monitoring undertaken to verify compliance.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
7.23 (v) Ensure that observations made in the course of a Food Hygiene inspection are recorded in a timely manner to prevent loss of relevant information. [The Standard – 7.5]	March 2017	Communicate the requirement for officers to make appropriately detailed records of observations made during inspections through team meetings, 1:1's, performance reviews, and undertake routine internal monitoring to verify compliance.	
7.40 (i) Ensure that food standards interventions are carried out at a frequency which is not less than that determined by the Food Law Code of Practice. [The Standard - 7.1]	April 2017	Overdue and due 'B' rated premises will be inspected before the end of the financial year. From 2017-18 the inspection programme will be based on the earliest due date for either Food Standards or Food Hygiene. These requirements will be monitored via 1:1's, performance reviews, and routine internal monitoring to verify compliance.	Historically resources for Food Standards have been limited however the function has recently moved to the Food Safety Team. EHO's are now carrying out Food Standards Inspection at the same time as Food Hygiene which has improved compliance in this area.
7.40 (ii) Carry out food standards interventions / inspections and register establishments in accordance with relevant legislation, the Food Law Code of Practice and centrally issued guidance. [The Standard - 7.2]	March 2017	These requirements will be communicated via Team Meetings, 1:1's, performance reviews, and routine internal monitoring undertaken to verify compliance.	

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
7.40 (iii) Assess the compliance of establishments in its area to the legally prescribed standards for Food Standards [The Standard – 7.3]	March 2017	These requirements will be communicated via team meetings, 1:1's, performance reviews, and routine internal monitoring undertaken to verify compliance.	
7.40 (iv) Ensure the documented AES procedure for Food Standards reflects the requirements of the Food Law Code of Practice and Practice Guidance. [The Standard 7.4]	Completed		AES procedure has been reviewed and updated to include a reference to low risk premises generally being inspected for food standards in line with a food hygiene inspection rather than an alternative intervention.
7.40 (v) Ensure that observations and/or data made in the course of a Food Standards intervention/inspection are recorded in a timely manner to prevent the loss of relevant information, and that all records of interventions are stored in such a way that they are retrievable. [The Standard – 7.5]	Completed		A new intervention form was introduced for high risk food standards inspections by TSO during 2015 to record Officers findings.
8.9 (i) Further develop its documented procedure in relation to complaints about food and food establishments; and, amend the procedure to include details of its approach to complaints relating to food originating from other EU member states or third countries. [The Standard - 8.1]	August 2016	This procedure is scheduled for review during 16-17 and will be updated to include the approach to complaints that originate from other EU states.	

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
8.9 (ii) Ensure food hygiene and food standards complaints are investigated in accordance with centrally issued guidance and the authority's policies and procedures; including responding within target times, and communicating with all relevant parties. [The Standard – 8.2]	September 2016	These requirements will be communicated via team meetings, 1:1's, performance reviews, and routine internal monitoring undertaken to verify compliance.	Officers reminded that they must feedback findings to customers at the conclusion of an investigation. Sometimes this is not always possible but file notes must be made where contact has not been possible.
13.7 (i) Amend its Outbreak Control Plan to include local information. [The Standard -13.1]	September 2016	Local Contact Details to be updated in the Plan.	
13.7 (ii) Amend and fully implement its documented procedure for investigation of infectious diseases to include the method for cross referencing common notifications to identify the source and the follow up of implicated food establishments. [The Standard -13.2]	September 2016	This procedure is scheduled for review during 16-17 and will be updated to cross reference how the team communicate potentially implicated food establishments.	
13.7 (iii) Ensure that all records relating to the control and investigation of outbreaks and food related infectious disease are kept for at least 6 years. [The Standard -13.3]	September 2016	'Alleged Food Poisoning' questionnaire to be developed that can be completed or e-mail to customers for completion.	This relates to a single case of 'alleged food poisoning' that had been incorrectly recorded on the database and therefore not updated/responded to appropriately. As a matter of routine all cases are investigated in accordance with procedure and electronic copies of all completed/returned questionnaires kept and linked to records.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
14.5 (i) Further develop the documented procedure for initiating and responding to food alerts. The procedure shall include arrangements for receiving food alert notifications out- of hours. [The Standard – 14.1]	Completed		Principal EHO has signed up to the FSA's Text Alert System. This has now been included in the procedure.
15.19 (i) Review and amend its enforcement policy to include criteria for the use of all available food enforcement options and reference to the Primary and Home Authority Schemes. [The Standard – 15.1]	March 2017	<p>Enforcement Policy to be reviewed during 2016-17 and updated to include recommendations.</p> <p>Communicate the requirements of the Enforcement Policy, and expectations in line with Codes of Practice and guidance.</p> <p>Undertake routine internal monitoring to verify compliance in this area.</p>	
15.19 (ii) Set up, maintain and implement documented enforcement procedures for follow up and enforcement actions in accordance with the Food Law Code of Practice and official guidance. [The Standard -15.2]	March 2017	<p>A prosecution template is in use which includes formal cautions however a specific procedure will be written as recommended.</p> <p>All other procedures will be reviewed in line with the review plan.</p>	RAN Procedure and Voluntary Closure procedures have now been produced.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>15.19 (iii) Ensure that food hygiene enforcement is carried out in accordance with the Food Law Code of Practice and centrally issued guidance, and ensure all decisions on enforcement action are made following consideration of the authority's Enforcement Policy. Document the reasons for any departure from the criteria set-out in the Enforcement Policy. [The Standard - 15.3 and 15.4]</p>	<p>March 2017</p>	<p>Internal monitoring procedure will be reviewed and developed to ensure that actions are taken in accordance with the relevant legislation and guidance.</p> <p>Communicate the requirements of the Food Law Code of Practice, centrally issued guidance and the authority's procedures to officers, and routinely undertake internal monitoring to verify compliance</p>	
<p>16.8 (i) Maintain up to date, accurate records in a retrievable form on all relevant food establishments in accordance with the Food Law Code of Practice and centrally issued guidance. These records should include food registration and approval information, reports of all interventions / inspections, the determination of compliance with legal requirements made by the officer and details of action taken. The authority should also record, with reasons, deviations from set procedures. [The Standard – 16.1] (Food Hygiene)</p>	<p>December 2016</p>	<p>To communicate the need to ensure a review of the information recorded on APP prior to inspections to ensure that food business registration details are up to date. This will help ensure letters are sent to the appropriate head office/registered office address.</p> <p>Timescales for compliance to be included within inspection reports.</p> <p>Review of 'Approved Premises' files planned for 16/17.</p>	<p>It is not routine for food Officers to take samples during food hygiene inspections however some inspection reports did not indicate whether samples had been taken. This was purely an oversight by the Officer when writing the inspection report.</p> <p>Electronic records now in place.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>16.14 (i) Maintain up to date, accurate food standards records on food establishment files including reports of all interventions/inspections, the determination of compliance with legal requirements made by officers, details of action taken where non-compliance is identified and details of any enforcement action taken. The authority should also record, with reasons, deviations from set procedures. [The Standard – 16.1] (Food Standards)</p>	<p>September 2016</p>	<p>Timescales for compliance to be included within inspection reports.</p>	<p>Standard Inspection Report Letter template now used by TSO.</p> <p>New section for Food Standards contraventions has been included in the standard Inspection Report Template used by Food Officers.</p>
<p>19.9 (i) Revise and fully implement documented internal monitoring procedures to improve the qualitative assessment of the full range of food hygiene and food standards activities. [The Standard – 19.1]</p>	<p>July 2016</p>	<p>Whilst the Authority already has an Internal Monitoring Procedure in place, this will be reviewed to improve the qualitative assessment and wider scope of activities.</p>	
<p>19.9 (ii) For food hygiene and food standards, verify its conformance with the Standard, relevant legislation, the Food Law Code of Practice, centrally issued guidance and the authority's documented policies and procedures. [The Standard – 19.2]</p>	<p>March 2017</p>	<p>Additional internal monitoring to be undertaken to verify compliance.</p>	

Audit Approach/Methodology

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

(1) Examination of Local authority policies and procedures

The following policies, procedures and linked documents were examined:

- Document control system procedure and training guide - A/D/PR/1 (06/02/2007)
- Document list referencing system and guidance document - A/D/PR/2 (06/02/2007)
- Facilities & Equipment Procedure FD/I/PR/63 (27/4/15)
- Approval of Product Specific Establishments Procedure FD/I/PR/18 (28 April 2015)
- Food Safety and Food Standards Interventions Procedure FD/I/PR/5 (11th May 2015)
- Food Safety Intervention Record
- Food Standards Inspection Form V1
- Food Standards Inspection Form V2 General
- Food, Feed and Food Establishments Complaints Policy C/SRC/PO/12 (19th July 2012)
- Maintaining an accurate premises database and food & feed registration procedure October 2012
- Food & Feedingstuffs Sampling Policy C/S/PO/4 (26/09/2012)
- Food sampling procedure (v2) Sampling of Foods for Microbiological Analysis FD/S/PR/7 15/6/15
- Sampling Policy C/S/PO/4 (15/06/2015)
- Food Standards Sampling Plan 15-16 'Part of North Wales Regional Sampling Plan'
- Shellfish Sampling Plan 2015-16
- Communicable Disease Outbreak Plan For Wales ('The Wales Outbreak Plan') – April 2014
- Investigation and Control of Single Cases of Food Poisoning Procedure FD/ID/PR/9 (29/6/15)
- Food Alerts and Food Incidents Procedure C/M/PR/10 (12th August 2015)
- Detention and Seizure of food procedure C/E/PR/56 (7th May 2013)
- Food Hygiene Emergency Prohibition Notice Procedure FD/E/PR/58 (7th May 2013)
- Food Hygiene Improvement Notices Procedure FD/E/PR/57 (30th July 2015)

- Internal Monitoring Procedures for Business Enforcement D/E/PR/62 (24th June 2014)
- Internal Audit Services – Internal Audit Report Food Safety (JEW/GR/2-09)
- Internal Audit Services – Internal Audit Report Trading Standards
- Appointment of Public Analysts Letter - July 2012 Regulatory & Housing Services - Food Law Enforcement Service Plan 2015/16 (23/07/2015)

(2) File and records reviews

A number of local authority records were reviewed during the audit, including:

- General food establishment records
- Approved establishment files
- Food and food establishment complaint records
- Food and feed sampling records
- Informal and formal enforcement records
- Officer authorisations and training records
- Internal monitoring records
- Calibration records
- Records of food related infectious disease notifications
- Food Incident records
- Minutes of internal meetings and external liaison meetings
- Advisory and promotional materials provided to businesses and consumers
- Advice to Business Summary
- Maintenance of the authorisation document of officers within Regulatory services & Housing.
- Performance review form
- Proper officer authorisation (13 Oct 2014) Confirmation of proper officers authorised to exercise powers under the Public Health (Control of Disease Act 1984 (as amended by the Health and Social Care Act 2008) and regulations made under the 1984 act in respect of Conwy County Borough Council.
- Officer Authorisations, Schedule 1 (23/04/2015)
- Officer Authorisations, Schedule 2 (11/11/2013)
- Officer Authorisations, Schedule 3 (23/04/2015)
- Authorisation Signed Agreement Form

(3) Review of Database records:

A selection of database records were considered during the audit in order to:

- Review and assess the completeness of database records of food inspections, food and food establishment complaint investigations, samples taken by the authority, formal enforcement and other activities and to verify consistency with file records.

- Assess the completeness and accuracy of the food establishment database.
- Assess the capability of the system to generate food law enforcement activity reports and the monitoring information required by the Food Standards Agency.

(4) *Officer interviews*

Officer interviews were carried out with the purpose of gaining further insight into the practical implementation and operation of the authority's food control arrangements. The following officers were interviewed:

Business Enforcement Manager
Principal Environmental Health Officer
Senior Environmental Health Officer
Food Safety Officer
Senior Trading Standards Officer
Enforcement Officer
Enforcement Assistant
Contractor

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

(5) *On-site verification checks:*

Verification visits were made with officers to two local food establishments, one food hygiene and one food standards. The purpose of these visits was to consider the effectiveness of the authority's assessment of food business compliance with relevant requirements.

Glossary

Approved establishments	Food manufacturing establishment that has been approved by the local authority, within the context of specific legislation, and issued a unique identification code relevant in national and/or international trade.
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.
CPIA	The Criminal Procedures and Investigations Act 1996 – governs procedures for undertaking criminal investigations and proceedings.
Critical Control Point (CCP)	A stage in the operations of a food business at which control is essential to prevent or eliminate a food hazard or to reduce it to acceptable levels.
Directors of Public Protection Wales (DPPW)	An organisation of officer heading up public protection services within Welsh local authorities.
Environmental Health Professional/Officer (EHP/EHO)	Officer employed by the local authority to enforce food safety legislation.
Food Examiner	A person holding the prescribed qualifications who undertakes microbiological analysis on behalf of the local authority.
Food Hazard Warnings/ Food Alerts	This is a system operated by the Food Standards Agency to alert the public and local authorities to national or regional problems concerning the safety of food.

Food/feed hygiene	The legal requirements covering the safety and wholesomeness of food/feed.
Food Hygiene Rating Scheme (FHRS)	A scheme of rating food businesses to provide consumers with information on their hygiene standards.
Food standards	The legal requirements covering the quality, composition, labelling, presentation and advertising of food, and materials in contact with food.
Food Standards Agency (FSA)	The UK regulator for food safety, food standards and animal feed.
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 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.

Home authority	An authority where the relevant decision making base of an enterprise is located and which has taken on the responsibility of advising that business on food safety/food standards issues. Acts as the central contact point for other enforcing authorities' enquiries with regard to that company's food related policies and procedures.
Hygiene Improvement Notice (HIN)	A notice served by an Authorised Officer of the local authority under Regulation 6 of the Food Hygiene (Wales) Regulations 2006, requiring the proprietor of a food business to carry out suitable works to ensure that the business complies with hygiene regulations.
Inspection	The examination of a food or feed establishment in order to verify compliance with food and feed law.
Intervention	A methods or technique used by an authority for verifying or supporting business compliance with food or feed law.
Inter authority Auditing	A system whereby local authorities might audit each others' food law enforcement services against an agreed quality standard.
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.
National Trading Standards Board (NTSB)	An association of chief trading standards officers.
OCD returns	Returns on local food law enforcement activities required to be made to the European Union under the Official Control of Foodstuffs Directive.
Official Controls (OC)	Any form of control for the verification of compliance with food and feed law.

Originating authority	An authority in whose area a business produces or packages goods or services and for which the authority acts as a central contact point for other enforcing authorities' enquiries in relation to the those products.
PACE	The Police and Criminal Evidence Act 1984 – governs procedures for gathering evidence in criminal investigations.
Primary authority	A local authority which has developed a partnership with a business which trades across local authority boundaries and provides advice to that business.
Public Analyst	An officer, holding the prescribed qualifications, who is formally appointed by the local authority to carry out chemical analysis of food samples.
Registration	A legal process requiring all food business operators to notify the appropriate food authority when setting-up a food business.
Remedial Action Notices (RAN)	A notice served by an Authorised Officer of the local authority under Regulation 9 of the Food Hygiene (Wales) Regulations 2006 (as amended) on a food business operator to impose restrictions on an establishment, equipment or process until specified works have been carried out to comply with food hygiene requirements.
Risk rating	A system that rates food establishments according to risk and determines how frequently those establishments should be inspected. For example, high risk hygiene establishments 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 service within a local authority which carries out, amongst other responsibilities, the enforcement of food standards and feedingstuffs legislation.

Trading Standards Officer (TSO)	Officer employed by the local authority who, amongst other responsibilities, may enforce food standards and feedingstuffs legislation.
Unitary authority	A local authority in which all the functions are combined, examples being Welsh Authorities and London Boroughs. A Unitary authority's responsibilities will include food hygiene, food standards and feedingstuffs enforcement.
Unrated business	A food business identified by an authority that has not been subject to a regulatory risk rating assessment.
Wales Heads of Environmental Health (WHeEH)	A group of professional representatives that support and promote environmental and public health in Wales.