

**Action Plan Denbighshire County Council (Excluding Feed Service\*)**

**Audit Date: 15<sup>th</sup> – 19<sup>th</sup> July 2013**

**Follow-Up Visit Date: 25<sup>th</sup> – 26<sup>th</sup> January 2017**

(\*) Actions arising from the audit in relation to animal feedingstuffs have not been included. A new regional feed delivery model was introduced in Wales from April 2015.

Status Key

	Completed
	Good Progress
	Limited Progress
	No Action Taken

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	STATUS	PLANNED IMPROVEMENTS	PROGRESS TO DATE	OUTSTANDING
<p>3.18 (i) Ensure that future Food Law Enforcement Service Plans are developed in accordance with the Service Planning Guidance in the Framework Agreement. In particular, a robust analysis of the resources required against those available, and plans to address any shortfalls identified should be included. [The Standard – 3.1]</p>		<p>Future Plans will include all requirements of the Standard for food hygiene, standards and feed, including the number of approved establishments to be correctly stated, full details of costs associated with providing services, work plans for food standards and feed to be appended, a comparison of resources required to deliver food and feed law enforcement services against those available will be detailed. The Plans will also address any shortfalls.</p>	<p>Service plan in accordance with Service Planning Guidance has not been developed. Authority has chosen to develop a more succinct Operational Plan that does not meet the required standard.</p>	<p>Ensure that a Service Delivery plan is developed in accordance with the service planning guidance. This must identify the programme of food hygiene and standards inspections by risk category in accordance with Annex 5 of the Food Law Code of Practice, the estimated number of revisits, likely number of infectious disease and food incident investigations, the financial allocation with breakdown of costs and an estimate of the resources required for each aspect of service delivery. There must also be an analysis of the overall staffing resource available against the total staffing resource required to deliver the service in full and where relevant plans to address any shortfall identified.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	STATUS	PLANNED IMPROVEMENTS	PROGRESS TO DATE	OUTSTANDING
3.18 (ii) Address any variance in meeting the service delivery plan in subsequent service plans. [The Standard-3.3]		A detailed review of 2013/14 food and feed law service delivery will be undertaken against the targets set in the 2013/14 Service Plan. Any variances will be addressed in the 2014/15 Service Plan.	Operational Plan does not address variances.	Ensure the review of the previous year's performance included in the service plan clearly identifies and explains any variances and includes them in the areas for improvement going forward.
4.6 (i) Ensure 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]		The authority will review its Enforcement Policy. The authority will also review all other policies and procedures in a timely manner to ensure that they remain current and valid.	The authority has adopted a process of regular review of procedural documents.	Complete the review of the Enforcement Policy.
4.6 (ii) Extend its document control system to include food standards and feed enforcement activities. [The Standard – 4.2]		The scope of Document Control Procedure to be widened to include food standards and feed.	Food standards documents added to document database.	Completed.
5.19 (i) Review and amend the scheme of delegation to ensure all relevant legislation is included and up to date. [The Standard – 5.1]		The scheme of delegation and constitution will be reviewed to ensure that all relevant, up to date legislation is included.	Scheme of Delegation has been revised.	Completed.

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>STATUS</b>	<b>PLANNED IMPROVEMENTS</b>	<b>PROGRESS TO DATE</b>	<b>OUTSTANDING</b>
<p>5.19 (ii) Ensure that all officers carrying out official controls are appropriately authorised and review, amend and implement its documented procedure for the authorisation of officers to:</p> <p>a) Specify the designation of the authorising officer;  (b) Specify that unauthorised officers are prohibited from carrying out any activities for which authorisation is required by the Codes of Practice.  (c) Ensure officers' competencies are assessed and recorded in accordance with the authorisation procedure.  [The Standard – 5.1]</p>		<p>The authority will review its Authorisation Procedure and make the necessary changes identified during the audit.</p>	<p>Authorisations updated.</p>	<p>Completed.</p>
<p>5.19(iii) Review and update the 'Assessment of Competence' matrix to include all relevant legislation and regulatory sanctions. [The Standard – 5.1]</p>		<p>The Assessment of Competency Matrix will be reviewed to ensure that it includes all relevant legislation, sanctions/enforcement actions and also includes feed enforcement.</p>	<p>Matrix for assessment of officer competence amended.</p>	<p>Completed.</p>

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>STATUS</b>	<b>PLANNED IMPROVEMENTS</b>	<b>PROGRESS TO DATE</b>	<b>OUTSTANDING</b>
5.19 (iv) Review officer authorisations to ensure they are consistent with their qualifications, training, experience and the relevant Code of Practice. [The Standard – 5.3]		All authorisations will be reviewed and will continue to be formally reviewed at every annual performance appraisal to ensure that they are valid/correct and when there are changes to legislation.	Authorisations updated.	Completed.
5.19 (v) Ensure that authorised officers receive the training required to be competent to deliver the technical aspects of the work in which they will be involved, in accordance with the Codes of Practice. [The Standard - 5.4]		The authority will review the training requirements for officers delivering food and feed law enforcement and ensure that all Code of Practice requirements are met.	Training which has already been undertaken to date includes allergens, improvement notices, food standards for food safety officers.	Completed.
5.19 (vi) Notify the Food Standards Agency of staff who were authorised under the Food and Environment Protection Act 1985 but are no longer employed by the authority. [The Standard – 18.1]			FSA advised of all officers currently employed by the authority that require FEPA authorisation.	Completed.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	STATUS	PLANNED IMPROVEMENTS	PROGRESS TO DATE	OUTSTANDING
5.19 (vii) Appoint a sufficient number of authorised officers to carry out the work set out in the service delivery plan. (The Standard -5.3)	<i>Unable to assess progress.</i>	The authority will continue to prioritise food law enforcement within the resources that is available to it. A review of the required resources will be undertaken. Work with North Wales authorities to deliver feed collaboratively – joint service plan to be developed, including an estimate of resources required. Action taken by the authority will be risk based and priority will be given to addressing the backlog of interventions and high-risk premises.	Following a re-structure of the service a Business Manager has been appointed with lead management responsibility for food safety enforcement. Classroom training of EHOs on food standards complete – programme being developed to allow for assessing competency. Process of transfer to NTSB risk-rating scheme started and is on-going to allow for accurate profile of businesses. Resource review will be included in service plan.	Sufficient number of officers to be appointed in accordance with analysis of resources included within service plan.
6.15 (i) Ensure that equipment is properly maintained and calibrated. To support this task, maintain and implement the documented procedure for maintenance and calibration including records of calibration and other checks. [The Standard - 6.2]		Identify an officer to take responsibility for ensuring maintenance and calibration procedures are implemented and appropriate records are maintained. Improve internal monitoring to include consideration of equipment.	A new Technical Support Officer has been appointed with a responsibility for ensuring that the maintenance and calibration of equipment takes place and is recorded according to the amended procedure. Food standards sampling kit purchased. Thermometers signed out to officers in line with procedure and in use calibration checks taking place. Fridges checked.	Completed

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6.15 (ii) Operate the premises database and take any necessary action to ensure reliable, food standards information can be provided to the FSA. [The Standard-6.3]		Continue to implement the Food Standards Work/Action Plan to ensure reliable food standards information can be provided to the FSA.	Summer placement student to start the work, but waiting for Uniform feedback on ability to write a script to complete electronically. Report ready in preparation for manual task. Database changed enabling upload of food standards data.	Complete upload of reliable annual enforcement monitoring data to FSA.
7.24 (i) Ensure that premises hygiene interventions/inspections are carried out at the minimum frequency specified by the Food Law Code of Practice. [The Standard -7.1]		Review the delivery of food hygiene interventions to ensure inspections, including those of approved establishments, are carried out at the required frequencies. Improve internal monitoring to monitor intervention intervals and take action accordingly.	Higher risk, unrated and approved establishments now subject to minimum frequency of intervention. Significant progress on achieving minimum inspection frequencies for lower risk establishments.	Ensure premises inspected at minimum frequencies.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	STATUS	PLANNED IMPROVEMENTS	PROGRESS TO DATE	OUTSTANDING
<p>7.24 (ii) Identify and prioritise for inspection all establishments that have been risk rated without the benefit of an inspection, partial inspection or audit; carry out hygiene interventions/inspections, and approve establishments in accordance with the relevant legislation, the Food Law Code of Practice and centrally issued guidance. [The Standard -7.2]</p>		<p>Food establishments that have been allocated a desk top risk rating will be prioritised for inspection. Officers to be reminded of the requirement to document reasons for reduced risk-ratings and discuss with relevant manager. Officers to be reminded of requirement to revisit food establishments in accordance with Revisit Policy and document findings. Approved establishment files to be reviewed to ensure all information detailed at Annexe 10 of Food Law Practice Guidance is included. Officer training to be provided to ensure sufficient information recorded on inspection forms to demonstrate officer consideration of food safety management systems based on HACCP, adequate assessment of cross contamination controls and staff training undertaken,</p>	<p>Report exists of desk top risk rated (DTRR) premises – database to be updated. All DTRR to be set to not visited. Links already established with EH &amp; TS to allow for monthly updates on open/closed businesses. Officers undertake peer audits of a sample number of inspection reports/forms/letters and provide feedback to the officers and also the team. This is undertaken on a regular basis. Risk rating mostly consistent and revisits mostly conducted in accordance with requirements. AES mostly undertaken in accordance with requirements.</p>	<p>Ensure risk ratings consistent with findings, record made of decision to reduce ratings and revisits conducted in a timely manner where appropriate. Ensure all businesses subject to AES are eligible.</p>

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		<p>flagging-up of issues requiring attention or follow up, and the correct use of risk ratings.</p> <p>Returned AES questionnaires to be reviewed by authorised officer to identify those requiring follow-up action.</p>		
<p>7.24 (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]</p>		<p>The authority will ensure planned arrangements for food hygiene interventions are in accordance with the requirements of the Food Law Code of Practice.</p> <p>The authority will identify those establishments which have been risk rated without the benefit of an inspection and re-designate them as unrated.</p>	<p>Appropriate assessments for training requirements. Assessments mostly appropriate for HACCP and cross-contamination requirements and sometimes for identification marks and imported food.</p>	<p>Improve consistency of assessment of imported food and identification marks, HACCP and cross contamination.</p>
<p>7.24(iv) Fully implement documented procedures for the range of interventions/inspections it carries out. [The Standard – 7.4]</p>		<p>A review of procedures will be undertaken to ensure work procedures are in accordance with the requirements of the Food Law Code of Practice and fully implemented for the range of food hygiene interventions including AES.</p>	<p>AES procedure revised and implemented.</p>	<p>Completed.</p>

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7.24(v) Ensure observations made in the course of an intervention/inspection are recorded in a timely manner to prevent loss of relevant information. [The Standard –7.5]		All officers will be reminded of the need to record observations in a timely manner. Training to be provided to officers on the level of detail required to demonstrate that an adequate assessment of compliance has been undertaken. Improved monitoring will be undertaken.	Officers now undertake peer audits of a sample number of inspection reports/forms/letters and provide feedback to the officers and also the team. This is undertaken on a regular basis. Appropriate records of observations for training requirements. Records mostly appropriate for HACCP and cross-contamination requirements and sometimes for identification marks and imported food.	Improve consistency of inspection records of imported food and identification marks, HACCP and cross contamination.
7.40 (i) Ensure that food standards interventions are carried out at a frequency not less than that determined under the intervention rating scheme set out in the Food Law Code of Practice. [The Standard -7.1]		The authority will review the resource requirement for undertaking food standards interventions according to Food Law Code of Practice requirements and the skills and competencies that currently exist or could be developed within the authority. The authority will prioritise its available resources according to risk. Improved internal monitoring will also be undertaken to ensure interventions are undertaken as required.	We have started to develop the competency of food safety officers to undertake food standards interventions. Classroom training of officers is complete and work starting on programme for competency assessment. Medium and low risk food standards inspection now being conducted at the same time as food hygiene inspections.	Ensure premises inspected at minimum frequencies.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	STATUS	PLANNED IMPROVEMENTS	PROGRESS TO DATE	OUTSTANDING
7.40 (ii) Identify and prioritise for inspection all establishments that have been risk rated without the benefit of an inspection, partial inspection or audit; carry out food standards interventions/inspections in- accordance with relevant legislation, Codes of Practice, and centrally issued guidance. [The Standard -7.2]		<p>All these premises will be reviewed and amended on the premises database. These will be included into the programme to receive an appropriate intervention.</p> <p>An alternative risk rating scheme for food standards which is equivalent to Annex 5 scheme will be implemented.</p> <p>A review of the inspection aide-memoire for food standards will be undertaken to ensure sufficient information is captured to inform a graduated approach to enforcement.</p>	<p>Process to move to NTSB risk rating scheme begun – at stage of waiting for database programmers report.</p> <p>New risk rating scheme in accordance with Annex 5 of the Food Law Code of Practice being applied and ratings only being awarded following an inspection.</p>	<p>Ensure all inspections unannounced or where decision made to announce an inspection, a record of reason made on establishment file.</p>
7.40 (iii) Assess the compliance of establishments and systems to the legally prescribed standards. {The Standard -7.3]		<p>Review and update aide-memoire and visit sheets to ensure all aspects of requirements are covered.</p> <p>Monitor completion of forms through internal quality monitoring scheme (to be developed)</p>	<p>Food Safety visit sheet reviewed alongside work on EHO competency. Not field tested yet.</p> <p>Assessments of compliance of compliance, traceability and withdrawal and recall procedures sometimes consistent.</p>	<p>Improve consistency of assessment of compliance, traceability and withdrawal and recall procedures.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	STATUS	PLANNED IMPROVEMENTS	PROGRESS TO DATE	OUTSTANDING
7.40 (iv) Set up, maintain and implement documented procedures for the range of interventions it carries out. [The Standard -7.4]		A review of food standards and feed procedures will be undertaken and required procedures will be developed and stored on a document controlled system. This will include regional/national development of policies and procedures.	Development of food standards intervention procedures underway. Food standards intervention procedures developed jointly within food hygiene procedures.	Completed.
7.40 (v) Ensure that officers' contemporaneous records of interventions are stored in such a way that they are retrievable. [The Standard -7.5]		The authority will develop a system of storing such records and train officers on the new system. A monitoring system will also be developed.	Some inspection records of supplier and customer details, compliance, traceability and withdrawal and recall procedures appropriate.	Improve inspection records of supplier and customer details, compliance, traceability and withdrawal and recall procedures.
8.14 (i) Review and update the Complaints Procedure to provide guidance for officers on capturing key information. [The Standard – 8.1]		The complaints procedure will be revised to facilitate the recording of date and time of complaint and the target response time will be clarified (3 days or 3 working days). All officers will be trained on the requirement of the new procedure, including how information must be stored.	Procedure updated. Information capture now digitalised on database.	Completed.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	STATUS	PLANNED IMPROVEMENTS	PROGRESS TO DATE	OUTSTANDING
8.14 (ii) Investigate complaints received in accordance with the Codes of Practice, centrally issued guidance and its own policy and procedures. [The Standard – 8.2]		Improved internal monitoring will be undertaken to ensure complaints are adequately investigated, actions adequately documented and customers aware of the outcomes.	Complaints investigated in accordance with all requirements.	Completed
11.5 (i) Set up, maintain and implement a documented procedure to ensure that its food standards and feed premises databases are accurate, reliable and up to date. [The Standard - 11.2]		The authority will incorporate food standards and feed premises database accuracy into the existing food safety procedure and implement accordingly. Monitoring will also be undertaken to verify the accuracy of data.	Food hygiene procedure developed to include food standards.	Completed.
12.15 (ii) Review and update the documented sampling procedures in accordance with the relevant Codes of Practice and centrally issued guidance. [The Standard - 12.5]		The authority will amend its food sampling procedure to include reference to Primary/Home Authority, out of hours arrangements, and sampling methodology, including information on the procurement of samples.	Review of procedures completed to include Home and Primary Authority scheme considerations and out of hours arrangements.	Completed
12.15(iii) Take appropriate action where sample results are not considered to be satisfactory. [The Standard - 12.7]		Internal monitoring will be improved to ensure unsatisfactory sampling results are appropriately actioned.	Appropriate action taken in response to some unsatisfactory samples.	Ensure food business operators and other local authorities are consistently notified of unsatisfactory results where appropriate and appropriate action is taken to address the marketing of unsatisfactory food.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	STATUS	PLANNED IMPROVEMENTS	PROGRESS TO DATE	OUTSTANDING
13.8 (i) Ensure the plan for controlling outbreaks of food related infectious disease is maintained and fully implemented. [The Standard – 13.1]		Review and update Outbreak Control Plan to ensure the information provided is current paying particular attention to legislation.	Updated Outbreak Control Plan available.	Completed.
13.8 (ii) Ensure the procedure for the investigation of confirmed or suspected cases of notifications of food related infectious disease is implemented. [The Standard – 13.2]		Reference to the investigation of linked food establishments will be included in the procedure for the investigation of confirmed or suspected cases of notifiable disease. Internal monitoring of officer actions in response to notifications of ID will be improved to ensure procedures are being followed and adequate records are being maintained.	Procedure amended to include investigation of linked food businesses. Investigations mostly completed in accordance with procedures.	Ensure all notifications of cases of infectious disease deemed to be low-risk are fully investigated, including thorough completion of questionnaires, in accordance with the authority's procedure and relevant centrally issued guidance.
13.8 (iii) Ensure all records relating to the control and investigation of outbreaks and food related infectious diseases are kept for at least six years. [The Standard-13.3]		Internal monitoring of actions in response to notifications and outbreaks of ID will be improved to ensure adequate records are being maintained.	All records available.	Completed.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	STATUS	PLANNED IMPROVEMENTS	PROGRESS TO DATE	OUTSTANDING
15.16 (i) Ensure its Enforcement Policy is maintained and fully implemented in accordance with the relevant Codes of Practice and other official guidance. [The Standard- 15.1]		Carry out review of Enforcement Policy in conjunction with all P & PP to ensure service wide consistency and to include reference to Primary Authority.	Service wide enforcement policy in development.	Complete the development of enforcement policy, ensuring it contains considerations of the Primary Authority scheme.
15.16 (ii) Set up, maintain and implement documented procedures for follow-up and enforcement action in relation to prosecutions, food standards and feed. [The Standard -15.2 ]		Any procedures found to be not in place during the audit will be produced and communicated to all officers. Develop and maintain a documented prosecution procedure and ensure its effective implementation. Develop procedures for food standards and feed enforcement in conjunction with all P & PP to ensure service wide consistency.	Prosecution procedure developed and food hygiene procedures amended to include food standards. Procedure for the use of improvement notices for food standards matters added to procedure.	Completed.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	STATUS	PLANNED IMPROVEMENTS	PROGRESS TO DATE	OUTSTANDING
<p>15.16 (iii) Ensure that food hygiene law enforcement is carried out in accordance with the Food Law Code of Practice, centrally issued guidance and the authority's own documented procedures. The reasons for any departures should be documented. [The Standard - 15.3 &amp; 15.4]</p>		<p>The authority's internal monitoring procedure will be reviewed and developed to ensure that actions are taken in accordance with the relevant legislation and guidance.</p>	<p>All Hygiene Improvement Notices (HINs) and voluntary closure agreements available and all voluntary matter relating to voluntary closures have been addressed. The wordings of all HINs were consistent, served on correct person and revisited in a timely manner. All prosecutions were progressed in a timely manner and the disclosure officer was clearly specified.</p> <p><i>Many aspects of this recommendation were unable to be assessed due to the nature of enforcement activity that had taken place.</i></p>	<p>Ensure proof of service of HINs is maintained, any extension is properly administered, and compliance is confirmed in writing.</p> <p>With regard to any prohibition notice, ensure that Court details are provided to the business, there is a record of the granting of the Court Order and the request to lift the Notice or Order. Ensure appropriate monitoring of the closure is undertaken.</p> <p>Where food is seized or voluntarily surrendered (VS), there is a record of the presentation to a Court and of the destruction / disposal (including the time and place). Ensure the VS is recorded as such on the database.</p> <p>Ensure simple cautions are only issued in appropriate circumstances and in accordance with the Enforcement Policy and that the decision is correctly taken on the basis of all of the available evidence in accordance with Ministry of Justice guidance.</p> <p>Ensure a copy of the approval of</p>

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				prosecutions by the prosecuting officer is available.
16.6 (i) Maintain up to date records that include reports of all interventions/inspections, the determination of legal requirements made by authorised officers, details of action taken where non-compliance was identified, details of any enforcement action taken, results of any sampling, details of any complaints and action taken, and also relevant food and/or feed registration and approval information. Further, record with reasons any deviations from set procedures. [The Standard – 16.1]		Further training will be provided to officers on the importance of keeping detailed records and audits will continue of officer files/records.	File history was consistently available for establishments examined whilst a record of CCPs was sometimes available. Timescales were mostly being cited in reports.	Ensure a record of CCPs is available on file for each establishment in accordance with centrally issued guidance. Also ensure that timescales for compliance are consistently included for each contravention in inspection reports.

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16.12 (i) Maintain up to date records in retrievable form on all food establishments in its area in accordance with the Food Law Code of Practice and centrally issued guidance. These records shall include reports of all interventions/inspections, the determination of compliance with legal requirements made by the authorised officer, details of action taken where non-compliance was identified, and relevant food registration information. [The Standard -16.1]		Further training will be provided to officers on the importance of keeping detailed records, file storage practices and audits will continue of officer files/records/file storage.	Inspection reports sometimes available and where available mostly contained contact details of a senior officer, timescales for compliance and distinguished between legal requirements and recommendations.	Ensure that inspection reports are consistently available and contain contact details for a senior officer, timescales for compliance and distinguished between legal requirements and recommendations.
16.12 (ii) Ensure records are kept for at least 6 years. [The Standard - 16.2]		All records will be kept for 6 years and procedures will also be amended to include this fact.	Records sometimes available.	Ensure establishment records are available.
19.13 (i) Further develop and fully implement the internal monitoring procedure for food hygiene and food standards to ensure all aspects of the Framework Agreement are covered. [The Standard – 19.1]		Put in place an internal monitoring procedure for all official controls in relation to feed. Review internal monitoring procedures for food hygiene and standards to ensure all aspects of the Standard are covered.	Internal monitoring procedure developed to include identify staff responsible for internal monitoring and to include some aspects of service delivery.	Further develop the procedure to include AES, responses to food alerts and incidents and cross reference to monitoring aspects of database management procedure.

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19.13 (ii) Verify conformance with the Standard, relevant legislation, the relevant Codes of Practice, relevant centrally issued guidance and the authority's own documented policies and procedures. [The Standard – 19.2]			Internal monitoring of food inspections and infectious disease investigations.	Include internal monitoring of unsatisfactory sample files, complaints and service requests, AES, responses to alerts and incidents, enforcement actions.

Summary.

<b>Total Recommendations</b>	<b>39</b>
<b>Completed</b>	<b>17</b>
<b>Good Progress</b>	<b>13</b>
<b>Limited Progress</b>	<b>6</b>
<b>No action</b>	<b>2</b>
<b>Untested</b>	<b>1</b>
<b>Total Outstanding</b>	<b>22</b>