

Updated Action Plan for East Dorset District Council

Audit date: 23-24 February 2010

Action Plan updated: 4 February 2013

TO ADDRESS RECOMMENDATION (INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	PROGRESS	ACTION TAKEN TO DATE
3.1.5 Ensure that future Food Service Plans or equivalent, are developed in line with the Service Planning Guidance in the Framework Agreement and are submitted for appropriate Member approval. [The Standard – 3.1]	30/04/11	The intention is to recombine the information currently located in different documents into one. Currently the Council's governance do not require Member approval of the Service Plan but will now be reported to Members.	Completed	Work has begun to revise and combine information.
3.1.13(i) Set up, maintain, and implement a documented procedure on the authorisation of officers to detail the competency assessment process by which authorisations are conferred based on officer's individual qualifications, training and experience. [The Standard – 5.1]	31/01/11	A detailed procedure is to be developed in consultation with legal department.	Completed	Authorisation procedure being developed in conjunction with training matrix

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3.1.13(ii) Review and revise officers' schedules of authorisation to ensure they include reference to all relevant and up to date legislative provisions, and the extent and limitations of each officer's duties based on an assessment of their individual levels of qualification, training and experience. [The Standard – 5.3]	31/01/11	To be reviewed in conjunction with 3.1.13(i) above.	Completed	
3.1.16(ii) Maintain records of relevant qualifications and training of each authorised officer in accordance with the Food Law Code of Practice. [The Standard – 5.5]	Completed	The existing training matrixes which include relevant qualifications have been reviewed and updated. Records of qualifications and training being maintained by the Authority.		Outstanding qualification and EHORB registration certificates maintained and sent to FSA as evidence.
3.2.2 Review and expand documented inspection procedures in both general and approved establishments in accordance with the FLCoP to include the full assessment of the compliance of premises and systems, particularly in relation to HACCP based food safety management systems. [The Standard – 7.2, 7.3 and 7.4]	31/10/10	Inspection procedure documentation to be revised in accordance with the FLCoP to include guidance on FSMS and also update risk ratings for approved establishments.	Completed	Inspection document reviewed and amended.
3.2.4 Ensure that officers' contemporaneous records of inspections are legible and stored in such a way that they are readily retrievable. [The Standard – 7.5]	Completed	Officers have been told to ensure that written notes are legible.		More quality checks are being made and officers advised where improvements are required. The scanning quality has been improved.

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3.2.6 Carry out food hygiene inspections in their area at a frequency which is not less than that determined by the inspection rating system set out in the Food Law Code of Practice. [The Standard – 7.1]	31/12/11	Shared service development with neighbouring authority will improve capacity to carry out inspections. Staffing issues over the last few years including maternity and long term illness within the team will be resolved during 2011. Consideration is being given to implementation of alternative enforcement strategy for low risk food premises.	Completed	
3.2.9 Ensure that records, observations and data obtained during the course of inspections, particularly in relation to the verification of structural compliance and HACCP based food safety management systems include sufficient detail to demonstrate whether the compliance history of the premises and systems has been comprehensively assessed to legally prescribed standards. All records shall be kept for at least six years. [The Standard - 16.1 and 16.2]	31/03/11	Approved establishment records will be maintained as all hard copy files and our electronic data management will be cross referenced as necessary. It is intended to introduce an expanded inspection form that does not solely rely on exception reporting. There will be a training programme to support the introduction of the new document.	Completed	60% of approved premises files have been now been reviewed and converted to hard copy files. Evidence of detailed inspection reports from different officers sent to FSA.

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<p>3.2.13 Inspect general food premises and approved establishments in accordance with the relevant legislation and assess the compliance of premises to the legally prescribed standards, taking appropriate action on any non-compliance found in accordance with the Authority's enforcement policy. [The Standard – 7.2 and 7.3]</p>	31/12/10	Review current departmental guidance and implement changes.	Completed	
<p>3.3.5 Ensure that hygiene improvement notices are appropriately served, and follow up actions are taken in accordance with the Food Law Code of Practice, centrally issued guidance and the Authority's own enforcement policy. [The Standard – 15.3]</p>	31/12/10	Revise Checklist to include requirement to issue withdrawal of notice and letters confirming compliance to go to FBOs. Additional monitoring of follow up actions. Discuss with staff.	Completed	
<p>3.4.6 Develop, maintain and implement the internal monitoring procedure and implement to ensure it covers quantitative and qualitative internal monitoring of all aspects of the food law enforcement service's activities in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 19.1]</p>	31/01/11	Develop, maintain and implement the internal monitoring procedure as per recommendation. Introduce automated reports from database to supplement the qualitative checks currently being undertaken by management.	Completed	Trial reports are being generated and tested.