

Updated Action Plan for Flintshire County Council (Excluding Feed Service*)
Audit Date: 28 October - 1 November 2013

Follow-Up Visit Date: 26 November 2015

(*) 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 ACTIONS
3.18(i) Ensure future Food Service Plans are developed in accordance with the Service Planning Guidance in the Framework Agreement. More comprehensive information on the authority's service should be provided together with a robust analysis of the resources required to deliver the food services against those available. [The Standard – 3.1]		<p><u>Food Hygiene / Food Standards</u></p> <p>This recommendation relates to:-</p> <p>a.) Lack of inclusion of the number of approved premises in the County.</p> <p>b.) Lack of inclusion of the resource requirements to deliver the Food Service in accordance with the Food Law Code of Practice in its entirety.</p> <p>c.) Lack of inclusion of an estimate of the resources required to revisit all 0, 1 and 2 rated premises and for the inspection of new businesses.</p> <p>Future service plans will ensure that all of the above are included and will include an analysis of the</p>	<p>The majority of the planned improvements agreed have been implemented in the 2015/16 Service Plan.</p> <p>Additional improvements required in relation to resource planning have been recognised by the authority and are due to be drafted into the 2016 / 17 Service Plan, prior to the document being agreed by Cabinet.</p>	<p>Ensure that the required resources laid out in the service plan are accurate for inspections and related activity and is also specified for advice to businesses, sampling and promotional work.</p> <p>Revised date for completion: 27/05/16</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	STATUS	PLANNED IMPROVEMENTS	PROGRESS TO DATE	OUTSTANDING ACTIONS
		resources required to fully deliver the food service against those available.		
5.12(i) Review and update all officer authorisations to ensure they are appropriately authorised under current relevant legislation in accordance with their level of qualifications, training, experience and the relevant Code of Practice. [The Standard – 5.3]		<u>Food Hygiene/Food Standards</u> All authorisations will be reviewed and updated where necessary. This will be maintained in line with changes in legislation.	This has already been implemented. Many authorisations updated.	Ensure that all authorisations are updated and further amendments are made to address more recent legislation. Revised date for completion: 27/05/16
5.12(ii) Maintain records of relevant qualifications, training and experience of authorised officers and appropriate support staff in accordance with the relevant Codes of Practice. [The Standard – 5.5]		<u>Food Hygiene /Food Standards</u> Training records already held will be supplemented by copies of CPD certificates which will be held electronically in a central shared drive.	All officers have been asked to provide copies of their CPD For future courses, there is a direct instruction that all CPD is scanned on to the shared drive in addition to being written in the register.	Completed
6.11(i) Review, amend and implement the documented procedure for maintenance and calibration. [The Standard - 6.2]		<u>Food Hygiene</u> The procedure on calibration of thermometers needs to be amended to accommodate the observation that the written procedure did not make specific mention of the tolerance for the	The procedure has been reviewed and has been amended to include specific reference to the tolerance of 0.5°C in the written	Completed

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		calibration of temperature probes. Although this was cited on the record forms it was not included in the written procedure.	procedure	
<u>Food Hygiene</u> 7.19(i) Ensure that all food premises hygiene interventions/inspections are carried out at the minimum frequency specified by the Food Law Code of Practice. [The Standard -7.1]		This relates to the recommendation that all inspections should be carried out within 28 days of being due. Whilst FCC has consistently achieved 100% of the High Risk inspections due each financial year, some High Risk inspections have not been carried out within 28 days of being due, although they have been done within the annual programme in which they were due. Planned Improvements:- All High Risk inspections due this year are to be completed within 28 days of becoming due. This will be monitored by the Team Leader at monthly one to ones. Any deviations from this 28 day are to be documented on the electronic database.	The authority has instructed all officers to ensure that interventions are completed in date order and improvements have been made in the intervention lists to enable officers to prioritise their workload. Improvement in rate of inspections of all risk categories done at correct frequency.	Ensure more timely food hygiene inspections to meet the 28 day requirement. Revised date for completion: 27/05/16
7.19 (ii) Carry out hygiene interventions/inspections of lower risk premises in accordance with the Food Law Code of Practice and centrally issued guidance.		a.) All overdue D rated inspections and D rated premises due this year are to be completed this financial year. This equates to 175 inspections.	FCC has implemented an Alternative Enforcement Strategy since the	Completed

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[The Standard -7.2]		<p>b.) D rated inspections due this year are to be done within 28 days of being due.</p> <p>c.) An Alternative Enforcement Strategy (AES) is to be devised and implemented to pull in all overdue E rated premises within a 2 year period.</p>	<p>audit was undertaken.</p> <p>Improvements to process of approvals, risk rating & revisits.</p>	
7.19 (iii) Ensure that observations made and/or data obtained in the course of an inspection is recorded in a timely manner. [The Standard – 7.5]		<p>This recommendation relates to the auditors view that insufficient information was being provided by officers in some instances on the aide memoir that is used to assist officers during their inspections.</p> <p>Planned Improvements:- Officers are to complete the aide memoir to sufficient detail to enable other officers to make the necessary assessment to inform risk-based, graduated action.</p>	<p>Officers have been directed to complete as much of the aide memoir they need to, to ensure the next inspecting officer can ascertain the level of practices in place at the time and the assessment of whether those practices etc were adequate.</p> <p>The Internal Monitoring procedure already included an assessment of this form being filled in comprehensively, prior to the FSA audit.</p> <p>Some improvements</p>	<p>Ensure further improvements to capture of officer observations during food hygiene interventions including assessments of HACCP, cross contamination and training compliance and checking of ID marks for incoming food.</p> <p>Revised date for completion: 27/05/16</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	STATUS	PLANNED IMPROVEMENTS	PROGRESS TO DATE	OUTSTANDING ACTIONS
<p><u>Food Standards</u> 7.34 (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 by the Food Law Code of Practice and assess the compliance of establishments and systems to the legally prescribed standards. [The Standard -7.1 & 7.3]</p>		<p>This relates to the recommendation that all inspections should be carried out within 28 days of being due. Whilst FCC has consistently achieved 100% of the High Risk inspections due each financial year, some High Risk inspections have not been carried out within 28 days of being due.</p> <p><u>Low and Medium Risk Premises</u> There is a back log of premises that are overdue their food standards inspection.</p>	<p>made.</p> <p>The authority has instructed all officers to ensure that interventions are completed in date order and improvements have been made in the intervention lists to enable officers to prioritise their workload. The Team Leader had already identified this was an issue in the 2013/14 Service Plan prior to the audit and had devised an Action Plan.</p> <p>All EHOs have been allocated Food Standards inspections to do at the same time as they carry out Food Hygiene Inspections as of March 2014.</p>	<p>Ensure food standards interventions are carried out at the required frequency.</p> <p>Original date for completion: March 2017.</p>

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			<p>Since the audit, 2 Food Safety Officers are completing the Food Standards module to enable them to be competent to carry out food Standards work.</p> <p>The Team has all been bought together in to the same office which is assisting in communication, monitoring of work being undertaken and aligning work culture and processes.</p>	
7.34(ii) Carry out interventions/inspections and register establishments in accordance with the relevant legislation, Codes of Practice, and centrally issued guidance. [The Standard -7.2]		<p><u>Food Standards</u></p> <p>This recommendation relates to announced Food Standards inspections taking place but the reason for the visit being announced, (rather than unannounced) not being recorded.</p>	<p>Inspections are to be unannounced, unless there is valid, documented reason for the visit to be announced.</p> <p>Improvements in inspection coding.</p>	<p>Ensure further improvements to food standards intervention and intervention records to capture information on announcement and ensure consistent risk rating.</p> <p>Revised date</p>

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7.34 (iii) Set up, maintain and implement a documented food standards revisit procedure. [The Standard 7.4]		<p>This recommendation relates to the Revisit Procedure not mentioning Food Standards revisits in it.</p> <p>Planned Improvement:- A Revisit Procedure / Policy for Food Standards will be written.</p>	A revisit policy / procedure has been written for Food Standards.	<p>for completion: 27/05/16</p> <p>Completed</p>
7.34 (iv) Record observations made and/or data obtained in the course of an inspection/intervention in a timely manner to prevent loss of relevant information. [The Standard 7.5]		An aide memoir is to be produced for Food Standards inspections that is used by all officers undertaking Food Standards inspections.	EHOs undertaking Food Standards work have been recording findings on their aide memoir in the relevant Food Standards section. This has not been done by the TSO and TSEO. A draft form has just been produced and has been sent to the team for comment.	Completed
8.12 (ii) Investigate complaints received in accordance with the Food Law Code of Practice, centrally issued guidance and its own policy and procedures. [The Standard – 8.2]		In light of the auditors view that the Complaint procedure for Food Hygiene and Food Standards had not been followed in all instances, this procedure will be amended to allow deviation from it in circumstances when it is not appropriate to investigate a complaint. A clear policy on when a	The procedure has been amended to include reference to an investigating officer being able to deviate from the procedure as long as they record the reason for this	<p>Ensure that food hygiene and standards complaints are processed without significant delays.</p> <p>Revised date for completion: 27/05/16</p>

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		complaint should not be investigated will be set out.	deviation on the complaint file and this deviation can be justified on public health grounds. Some improvements in complaint investigations.	
12.12(ii) Review, update where necessary, maintain and implement the documented sampling procedures in respect of the procurement and preservation of samples (food), in accordance with the relevant Codes of Practice and centrally issued guidance. [The Standard - 12.5]		<u>Food</u> The Food Hygiene Sampling Procedure will be amended to cover specific instructions on the storage of food samples following sampling. This was already in place at the time of audit for the Food Standards Sampling Procedure. The Food Sampling Policy already sets out the information on procurement of samples.	The Food Hygiene Sampling Procedure has been amended to include this additional safeguard. Food procedures amended.	Ensure unsatisfactory food standards samples are followed up appropriately Revised date for completion: 27/05/16.
14.8 (i) Ensure the feed incidents procedure includes out-of-hours contact arrangements and guidance for officers on responding to feed alerts notified by the FSA and the procedure for responding to food safety incidents is suitably amended to include the back-up		Procedure to be reviewed in line with FSA's comments. There are no formal out of hours arrangement in place. However, details of current out of hours arrangements (as per animal health/disease incidents dealt with by AH&HP Team) through Call-Connect to be shared with FSA.	Recommendation completed in relation to Food Safety	Completed

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arrangements.. [The Standard – 14.1 and 14.4]				
15.14 (i) 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 Standard -15.2 & 15.3]		a) The team are to attend Enforcement Sanctions training in May 2014. b) Explanations to always be recorded on premises file when procedure has been deviated from.	Review has been undertaken of detailed points raised by the FSA audit and corrective measures put in place where necessary.	Ensure Hygiene Improvement Notice is appropriate course of action and that compliance is confirmed in writing in all cases. Ensure the service of Remedial Action notices is on the correct food business operator in all cases.
15.14(ii) Ensure all enforcement decisions are made following consideration of the authority's enforcement policy and the reasons for departure from the policy are documented. [The Standard -15.4]		This recommendation relates to there not being explicit explanation as to why a food business operator had not been prosecuted instead of being served with a hygiene improvement notice.	The aide memoir form had already been amended prior to the audit to include a section on enforcement action and rationale.	Ensure decisions on enforcement actions are escalated in accordance with the enforcement policy or reasons given for departure from the policy.
<u>Food Hygiene</u> 16.7(i) Record, with reasons any deviations from set procedures. [The Standard – 16.1]		This recommendation relates to instances of audit reports being sent out after 14 days to the food business operator but there being no explanation for the delay in it being sent recorded on file. In future deviations on the reports	The Team Leader had already introduced a system for identifying when reports are being sent out to ensure that reports were	Completed

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		being sent out later will be recorded on file.	being sent out within 14 days in compliance with the Food Hygiene Rating Scheme. Any deviation on reports going out is recorded on the database.	
<p><u>Food Standards</u> 16.15(i) Maintain up to date and accurate 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, details of any enforcement action taken, and relevant food registration information. [The Standard -16.1]</p>		<p>This recommendation relates to:</p> <ul style="list-style-type: none"> a.) Paper-based premises files not being available for all premises in relation to Food Standards. b.) The database records not being comprehensive. c.) Inspection report forms not giving a breakdown of legal contraventions and what was only recommendation. d.) The report of inspection form did not have all the information on it that it is supposed to have. <p>Improvements:-</p> <ul style="list-style-type: none"> a.) Merge premises files between Food Hygiene and Food Standards. b.) Database records to be comprehensive by scanning 	<p>All team members are now in the same office. This has allowed the merging of premises files to start. Food Safety already had a file for each premises and so Food Standards information is being put on to these same files. All documents are being scanned on to the database as part of the new Mobile and Agile working practice. Prior to the audit, documented instruction had been given to ensure</p>	<p>Ensure food standards reports / records distinguish clearly between contraventions and recommendations and clearly specify the legislation.</p> <p>Revised date for completion: 27/05/16</p>

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		<p>on all documents as of February 2014.</p> <p>c.) Provide a clear distinction between legal contravention and recommendation.</p> <p>d.) Devise a new report of inspection form for Food Standards and set up a template letter for use, similar to Food Hygiene templates.</p>	<p>there was a clear distinction between legal contravention and recommendation. This is also being monitored by the Team Leader.</p> <p>Quotes have been requested for the alterations to be made to the Food Standards Inspection Form.</p>	

Summary (excluding feed)

Total Recommendations	18
Completed	7
Good Progress	11
Limited Progress	0
No action	0
Total Outstanding	11