

Updated Action Plan for London Borough of Hackney

Audit dates: 15-16 June 2010

Action Plan updated: 18 January 2011, 16 June 2011, 16 December 2011, 11 September 2012 and 1 May 2013

TO ADDRESS RECOMMENDATION (INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	PROGRESS	ACTION TAKEN TO DATE
<p>3.1.2 Draw up, document and implement a Food Service Plan 2010/2011 in accordance with the Service Planning Guidance. The Plan should include a comparison of the resources required to deliver the food law enforcement service against the resources available to the Authority, based upon the full range of demands placed upon it, including all its statutory duties. The Authority should also undertake a documented review of the Food Service Plan for 2009/2010, and any variance in meeting the plan, and areas for improvement should be included in the 2010/2011 Plan, which should be approved by the relevant member forum or delegated senior officer. [The Standard – 3.1, 3.2 and 3.3]</p>	30/09/10	To develop Food Law Enforcement Service Plan 2010/2011 in accordance with Service Planning Guidance in the Framework Agreement on Food Law Enforcement.	Completed	<p>2010/2011 Plan presented and approved on 15/12/10 at the Regulatory Committee. Food Law Enforcement Service Plan 2011/2012 presented and approved at Regulatory Committee on 14/12/11. Resource management plan 2011/2012 on investing in EHS to meet statutory requirements is being implemented. Delivery is being driven and supported by Senior Management/Cabinet.</p>
	Completed	To include review of performance against Plan for 2009/2010.	Completed	
	Completed	To identify resources requirements and risk based priorities.	Completed	
	18/10/10	To submit to appropriate member forum.	Completed	

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<p>3.1.9 Ensure that documented procedures are developed and implemented for all enforcement activities and that these are reviewed at regular intervals and whenever there are changes to legislation or centrally issued guidance. Set up, maintain and implement a control system for all documentation relating to its enforcement activities. [The Standard – 4.1 and 4.2]</p>	31/03/11	<p>To develop and review documented procedures and include timely review periods. All procedures to include relevant enforcement pathways.</p> <p>Food Hygiene Inspections, Food Standards Inspections, Food Establishment Approval procedures and associated documents prioritised for production July/August 2010. To review and amend procedure for approval of food establishments to include enforcement framework in respect of food establishments subject to approval.</p>	Completed	<p>Action plan drawn up to programme the development of documented procedures. Completed and in use. Key procedures on formal enforcement action (1-10) have been completed. Procedures (11-12) to be drafted. Procedure for document control developed and implemented. Enforcement procedures circulated and staff received training on procedures.</p>
	30/09/10	<p>To ensure briefings/training on the use of new procedures.</p> <p>Food Hygiene procedure and practice.</p>	<p>Completed</p> <p>Completed</p> <p>Completed</p> <p>Completed</p> <p>Completed</p>	<p>1) Food standards procedure completed.</p> <p>2) Food hygiene procedure completed. Associated warning letter completed and in use. Documents templates held on Council Document Management (CDM) system.</p> <p>3) Approved establishments procedure completed. Subject to further amendment.</p> <p>4) Food and Food Premises Complaints –completed.</p> <p>5) Food Sampling completed.</p> <p>6) Seizure and detention of food completed.</p> <p>7) Hygiene Emergency Prohibition completed.</p> <p>8) Imported Foods completed.</p>

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		<p>Food Standards procedure and practice.</p> <p>Approved Establishment procedure and practice.</p>	<p>Completed</p> <p>Completed</p>	<p>9) Hygiene Improvement Notices completed.</p> <p>10) Infectious Disease Control- being completed.</p> <p>11) Legal/Prosecutions completed.</p> <p>12) Simple Cautions - completed.</p> <p>13) Food Alerts-completed.</p> <p>Amendment to include food fraud investigations by 30/11/12.</p> <p>Briefings on procedures held on 04/10/10 in respect of Food Hygiene/Food Standards procedure and practice.</p> <p>Team procedural training completed 14/01/11.</p> <p>Initial training on Approved Establishment procedure held on 22/10/10 provided jointly with external facilitator.</p> <p>External approval training held on 22/11/10.</p>

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<p>3.1.11 Review the documented authorisation procedure to ensure that it includes references to all relevant and up to date legislation, with appropriate limitations and authorisations. [The Standard - 5.1]</p>	Completed	<p>To review Induction and Training for Authorising Enforcement Officers procedure (ITA) to ensure that it includes the up to date legislation, relevant references.</p>	Completed	<p>Procedure reviewed and includes relevant amendments and updated schedule of legislation. To be regularly reviewed to ensure up-dated schedule of legislation.</p>
		<p>FEPA authorisations to be arranged.</p>	Completed	<p>Relevant officers have been appropriately authorised under FEPA.</p>
	Completed	<p>To ensure appropriate authorisations and restrictions/limitations are put in place.</p>	Completed	<p>All Authorisations signed by HS (Deputy Director).</p> <p>All officers issued with their authorisation.</p>

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3.1.14 Ensure that complete records of training undertaken by officers are maintained and that officers receive the training that they need to maintain competency as identified in the training plan. [The Standard – 5.5]	Completed	All records of qualifications and training to be retained and maintained.	Completed	Process in place for the retention and maintenance of records in accordance with Authorisation, Induction and Training procedure.
	Completed	To use information provided from Annual Appraisals/1:1's to develop training plan for officers/team in order to maintain competencies and ensure briefings and where required training on the use of new and amended legislation, guidance and procedures.	Completed	Details of all qualifications and training held on Council Document Management (CDM) system. Internal training records to be included.
	13/09/10	Details of briefings and training will be documented and in accordance with the Induction and Training for Authorising Enforcement Officers procedure (ITA) and evaluated/monitored during monthly 1:1's/supervision meetings and case load reviews with staff.	Completed	Officer training plan completed as part of appraisals process. Pre and post training evaluation circulated to all staff. Records retained. Team training plan circulated.

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3.2.3 Set up, maintain and implement documented procedures for the range of interventions/inspections it carries out and review the procedure on enforcement against food business establishments subject to approval. [The Standard – 7.4]	30/09/10	Develop Food Safety Enforcement Policy in respect of the range of interventions activities and inspections undertaken by the Service. To include enforcement framework in respect of food establishments subject to approval in Food Safety Enforcement Policy.	Completed	Presented and approved on 15/12/10 at the Regulatory Committee. Recommendation 3.1.9 addresses formal enforcement procedures.
3.2.5 Ensure that food hygiene inspections of premises in their area are undertaken at a frequency which is not less than that determined under the food establishment intervention rating scheme set out in the Food Law Code of Practice. [The Standard – 7.1]	30/09/10	Service planning to include risk based priorities for 2010/2011 to ensure those premises posing the greatest risk receive an intervention as a priority and to ensure interventions/inspections to be carried out within 28 days of due date.	Completed Completed Completed	Priorities laid out in Food Law Enforcement Service Plan. Specifically Category A and B premises inspected within 28 days of due date. Ongoing from July 2010. Officers briefed on these priorities at audit update meetings and team meetings. Food hygiene- All Category A premises and Category B premises generally being inspected at correct frequency as on 11/09/12. The inspection of unrated businesses remains a priority and on 01/05/13 the total had been reduced to 100. One dedicated officer now deals with unrated food businesses. The auditors were informed that some businesses marked as unrated were in

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	Completed	To generate report from the database to provide spreadsheet of due interventions/inspections for allocation on a quarterly basis and develop a programme for those premises awaiting an intervention.	Completed	fact not trading. The ongoing data cleansing programme ensured that all premises where there had no activity in the past six years were deleted. As of 01/05/13 there were 37 overdue C category premises which were being prioritised for inspection. Low risk businesses were receiving questionnaires as part of an Alternative Enforcement Strategy. Reports generated on a quarterly basis. Quarterly allocations to officers of all due inspections. On-going weekly, monthly and quarterly monitoring.
	Completed	To develop and implement monitoring and validation protocols for interventions/inspections.	Completed	Weekly, monthly and quarterly monitoring implemented. On-going from July 2010.

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<p>3.2.7 Ensure that observations and data obtained during interventions/inspections are recorded to prevent loss of relevant information, is legible and stored in such a way that it is easily retrievable. Up to date, accurate and comprehensive records should be maintained for all food establishments in its area and for all food law enforcement activities in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 7.5 and 16.1]</p>	30/09/10	To develop aide-memoire as a record of observations arising from an intervention/inspection.	Completed	Template document held on CDM system. Subject to on-going review.
	31/03/11	Development of procedure on Food Hygiene and Food Standards inspects, including development of template 'warning letter'	Completed	Subject to on-going review.
	31/03/11	To carry out audit of database and review report from IT consultant, identify gaps and additional work, and implement recommendations.	Completed	On-going from 07/10/10. Initial visit and report by IT consultant. Action plan developed and fortnightly meetings arranged.
	31/03/11	Consultant has undertaken work with team to address recommendations.	Completed	A systems analyst from the database software company developed guidance in the form of procedures for the administrators.
	31/03/11	To develop action plan to build capacity and integrity of database. To carry out the following:	Completed	Codes reviewed and templates being developed.
	Completed	1) Database data cleansing		Electronic Data cleansing exercise completed. Officers from June 2011 have been visiting premises to update details of the premises.
Completed	2) Data cleansing and identify external resources		Review of codes was completed in February 2011.	
	3) Review of codes;		Software does not support mandatory	

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		<p>Develop the use of mandatory fields. Addressed by software company consultant</p> <p>4) Limit permissions for use for creation/deletion of premises records.</p> <p>5) Develop document templates for mail merge</p> <p>6) Develop process templates</p> <p>7) Training/updating staff via 1:1/ coaching. IT consultant to undertake training, coaching and support to maintain integrity to system</p> <p>To develop procedure manual for staff covering all aspects of the database and service activities. To Audit of Council Data Management system (CDM)</p> <p>To carry out the following:</p> <p>1) Identify internal/external service resources</p>	<p>Completed</p> <p>Completed</p> <p>Completed</p>	<p>fields at present. Permissions were limited January 2011.</p> <p>Premises cannot be deleted without checks from the Technical Business Support Team. Liaison in place with other Council departments with the aim of maintaining accurate premises information on the database. CDM system fully implemented and staff training provided. When an officer clicks the document reference, it presents the document to them</p> <p>Technical Business Support Team implemented the project plan. Process templates have been developed for handling food complaints, the food standards alerts for action, suspected food poisoning, new food business registration and requests from other departments to licence food businesses to trade.</p> <p>Training/updating of staff to support the launch of each action template process was carried out on a rolling basis via 1:1/ coaching training sessions. Guidance documents to support the use of the process templates added to the procedures manuals for all aspects of the database and service activities.</p>

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		<p>2) Review of file paths and develop an agreed file path for document storage;</p> <p>3) Liaise with CDM team to audit system and develop procedure for controlling creation /deletion and amendments to premises records premises;</p> <p>4) Develop monitoring process to ensure integrity of files;</p> <p>5) Training/updating staff via 1:1/ coaching;</p> <p>6) Development of procedure manual as a guide to staff in respect of service activities.</p> <p>Training/updating staff via 1:1/coaching.</p> <p>To maintain paper files/hard copies as archive only with the exception of premises subject to the approval process. To set up paper files for all premises subject to approval.</p>		<p>Audit of naming convention within CDM files carried out. Previous issues with the storage area (e.g. not being to save documents) have now been addressed.</p> <p>A new CDM skeleton file structure has been agreed with affiliated services – (e.g. Trading Standards, Licensing) to include every premises in Hackney and mirror the premises file structure in the database. The CDM team have worked with team representatives to audit system and develop procedure to control creating/deletion of premises files to prevent duplications. Contact made regarding CDM training. Bespoke training needs identified and coaching/training to commence.</p> <p>Process in place for maintenance and storage of records in respect to premises subject to approval.</p> <p>Implemented.</p>

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<p>3.2.10 Review and develop its inspection aides-memoire to allow officers to clearly demonstrate that on every occasion, they fully assess the compliance of all establishments and their systems against legally prescribed standards and centrally issued guidance, including where appropriate a detailed assessment of business compliance with HACCP based food safety management system requirements. [The Standard – 7.3 and 16.1]</p>	30/09/10	<p>To develop inspection aide-memoire for food hygiene and food standards, and food premises approvals to ensure appropriate assessment of businesses compliance with HACCP based food safety management system requirements are undertaken.</p>	Completed	<p>Food Hygiene and Standards inspection aide-memoire completed.</p> <p>Aides-memoire for manufacturers and distributors completed. Additional addendums for approved establishments.</p> <p>Documents subject to on-going review.</p>

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<p>3.2.12 Assess the compliance of all food premises, including approved establishments to legally prescribed standards, including where appropriate a detailed assessment of business compliance with HACCP based food safety management system requirements, taking appropriate action on any non-compliance found in accordance with the Authority's enforcement policy. [The Standard – 7.3]</p>	31/03/11	<p>Assessment of compliance with HACCP based food safety management system requirements of all approved establishments to be recorded on aide-memoire to evidence of enforcement decision making process in respect of non-compliance.</p>	<p>On-going</p> <p>Completed</p>	<p>Assessment and decision making process included in aide-memoires and enforcement policy. Bedding in of system and procedures completed and ongoing.</p> <p>Additional guidance and training developed.(CDM5177990/5177991) Guidance revised in relation to high risk butchers and other specialist retailers including fishmongers and bakers.</p>
	30/09/10	<p>To develop an aide-memoire to ensure recording of assessments of compliance with HACCP based food safety management system requirements, to evidence of enforcement decision making process in respect of non-compliance.</p>	<p>Completed</p>	<p>Aide-memoire completed. Documents signed off. Subject to on-going review.</p>
	17/09/10	<p>To undertake internal monitoring to validate officer's assessment. Monitoring of approval process included in the internal monitoring procedure.</p>	<p>Completed</p>	<p>Review of documentation undertaken. Internal monitoring being undertaken. Issues identified being addressed.</p>

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<p>3.2.14 Carry out an urgent review of approved establishments, taking appropriate action on non-compliance, in accordance with the Authority's enforcement policy. Undertake interventions/inspections and formally approve establishments in its area in accordance with relevant legislation, the Food Law Code of Practice and other centrally issued guidance. Maintain up to date, accurate and comprehensive records for all approved establishments subject to Regulation (EC) No. 853/2004 in accordance with Annexe 12 of the Food Law Practice Guidance. [The Standard – 16.1, 7.2 and 7.3]</p>	30/09/10	Immediate review of all approved establishments to assess compliance/non-compliance including benchmarking with neighbouring LA.	Completed	Immediate review has been carried out and benchmarking undertaken with a neighbouring Council.
	Completed	Decision and action following non-compliance to be identified and documented using aide-memoire.	Completed	Programme for re-assessment of all approved establishments completed. All cases to be reviewed at monthly 1:1's/supervision meetings. Appropriate and timely action to be taken where appropriate.
	Completed	Develop process for maintenance of up to date, accurate and full records relating to establishments subject to ensure records comply with Food Law COP.	Completed	Up to date, comprehensive records maintained. Proforma developed as an index/checklist in accordance with Annexe 12. All case files reviewed for compliance with Annexe 12. All new case files to be reviewed by line manager and signed off.

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<p>3.3.8 Ensure that all food law enforcement is undertaken in accordance with the Food Law Code of Practice and official guidance. Decisions following consideration of the Authority's Enforcement Policy, including any reasons for departure from the criteria set out in the policy should be documented. [The Standard - 15.3 and 15.4]</p>	<p>Completed</p>	<p>Decisions to be made in accordance with respective procedure and Food Safety Enforcement Policy and departures from procedures and the Policy to be documented as stated therein.</p>	<p>Completed and on-going</p>	<p>Each procedure for food safety activities includes reference to decision-making and departure from procedure.</p> <p>Decision sheet produced as part of Food Hygiene, Food Standards inspection and approved premises aide-memoire. Implementation on-going.</p> <p>Implementation - Bedding in of Enforcement Policy and procedures required and on-going internal monitoring.</p>

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<p>3.4.3 Set up, maintain and implement documented qualitative and quantitative procedures on internal monitoring for all areas of the food law enforcement service. Verify its conformance with the Standard, relevant legislation, the Food Law Code of Practice, relevant centrally issued guidance and the Authority's own policies and procedures and maintain records of all internal monitoring undertaken. [The Standard - 19.1, 19.2 and 19.3]</p>	Completed	Review, set up and implement documented procedure for internal monitoring of Inspection documentations, letters and notices and approvals documentations.	Completed Completed and on-going	<p>Procedure completed.</p> <p>Implementation progressing. Internal monitoring of Hygiene Improvement Notices (HIN), Food Complaints, Warning Letters, Approved Premises and documentation arising from food premises inspections.</p> <p>Case reviews and HIN checklist being carried out. Other monitoring checklists to be rolled out from February 2011.</p>
	31/03/11	Review, set up and implement documented procedure for internal monitoring of activities of food sampling.	Completed	<p>Once all procedures reviewed, to be put on the Intranet as appropriate.</p> <p>To develop monitoring tools/proforma as appendices to documented procedure for internal monitoring to ensure all relevant activities are included.</p>
		Review and set up documented procedure for internal monitoring of activities and extend to include infectious disease notifications, emergency prohibition proceedings, seizure/detention and voluntary surrender	Completed	<p>Additional focused internal monitoring undertaken for officers where it has been identified that appropriate follow up action has not been taken following inspections or reactive work. This informs the allocation of work in relation to higher risk food businesses.</p>

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		actions, food complaints, service requests, prosecutions.		The following Monitoring proformas developed: 1. Hygiene emergency prohibition proceedings (CDM: 2543563) 2. Seizure/detention and voluntary surrender actions, (CDM: 3268940) 3. Food complaints, (CDDM:3269129) 4. Infectious disease notifications(CDM4915469) 5. Food Premises Complaints- (CDM4915439) 6. Prosecutions- (CDM5178041/5178042)
3.4.5 Set up, maintain and implement a documented procedure dealing with food and food premises complaints. Ensure that complaints are investigated in accordance with the Food Law Code of Practice, centrally issued guidance and the Authority's own policy on investigation of food and food premise complaints. [The Standard – 8.1 and 8.2]	30/09/10	To develop procedure for food and food premises complaints to ensure complaints are investigated in accordance with Food Law COP and centrally issued guidance. Procedure to include appropriate enforcement action. To review Policy document.	Completed Completed	Food and Food Premises Complaint Policy and procedure developed. Effective from December 2010. Enforcement action in respect of food complaints incorporated into the Food Safety Enforcement Policy. Policy reviewed 31/12/11. Implementation - Bedding in of procedures required and on-going monitoring.

