

# **Report on the Audit of Food Law Service Delivery and Food Business Compliance**

Kettering Borough Council  
19-21 April 2016



## Foreword

Audits of local authorities' feed and food law enforcement services are part of the Food Standards Agency's 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 feeding stuffs 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 Service. The assessment includes the local arrangements in place for database management, inspections of food businesses and internal monitoring. It should be acknowledged that there will be considerable diversity in the way and manner in which local authorities may provide their food enforcement services reflecting local needs and priorities.

Agency audits assess local authorities' conformance against the 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 and is available on the Agency's website at:  
[www.food.gov.uk/enforcement/auditandmonitoring](http://www.food.gov.uk/enforcement/auditandmonitoring).

The main aim of the audit scheme is to maintain and improve consumer protection and confidence by ensuring that local authorities are providing an effective food law enforcement service. The scheme also provides the opportunity to identify and disseminate good practice and provide information to inform Agency policy on food safety, standards and feeding stuffs. Parallel local authority audit schemes are implemented by the Agency's offices in Wales and Northern Ireland.

The report contains some statistical data, for example on the number of food premises inspections carried out annually. The Agency's website contains enforcement activity data for all UK local authorities and can be found at:  
[www.food.gov.uk/enforcement/auditandmonitoring](http://www.food.gov.uk/enforcement/auditandmonitoring).

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

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## 1.0 Introduction

- 1.1 This report records the results of an audit at Kettering Borough Council with regard to food hygiene enforcement, under relevant headings of the Food Standards Agency Food Law Enforcement Standard. The audit focused on the Authority's arrangements for the management of the food premises database, food premises interventions, and internal monitoring. The report has been made publicly available on the Agency's website at [www.food.gov.uk/enforcement/auditandmonitoring/auditreports](http://www.food.gov.uk/enforcement/auditandmonitoring/auditreports).

Hard copies are available from the FSA's Local Delivery Division by email [LAAudit@foodstandards.gsi.gov.uk](mailto:LAAudit@foodstandards.gsi.gov.uk) or phone 01904 232116.

### Reason for the Audit

- 1.2 The power to set standards, monitor and audit local authority food law enforcement services was conferred on the Food Standards Agency by the Food Standards Act 1999 and the Official Feed and Food Controls (England) Regulations 2009. This audit of Kettering Borough Council was undertaken under section 12(4) of the Act as part of the Food Standards Agency's annual audit programme.
- 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 Food Standards Agency, 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.<sup>1</sup>
- 1.4 The Authority was included in the Food Standards Agency's programme of audits of local authority food law enforcement services, because it had not been audited in the past five years by the Agency.

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<sup>1</sup> 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)

## **Scope of the Audit**

- 1.5 The audit examined Kettering Borough Council's arrangements for food premises database management, food premises interventions and internal monitoring, with regard to food hygiene law enforcement. This included a reality check at a food business to assess the effectiveness of official controls implemented by the Authority at the food business premises 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 the internal monitoring of other related food hygiene law enforcement activities.
- 1.6 Assurance was sought that key authority food hygiene law enforcement systems and arrangements were effective in supporting business compliance, and that local enforcement was managed and delivered effectively. The on-site element of the audit took place at the Authority's office at 10 London Road, Kettering, Northamptonshire, NN15 7QU on 19<sup>th</sup>-21<sup>st</sup> April 2016

## **Background**

- 1.7 Kettering Borough Council incorporates the small, satellite towns of Barton Seagrave, Burton Latimer, Desborough and Rothwell. The area has an industrial manufacturing heritage although production sectors, whilst still important, make up a smaller proportion of its workforce today. Major employers include Weetabix, Alpro, Morrisons, and the former Shoe and Allied Trades Association, Satra. Kettering town has the largest town centre in North Northamptonshire. In the 2011 census it had a reported population of 93,000 (approximately).
- 1.8 As well as acting as Home Authority for Weetabix, Kettering BC is home to a varied range of food businesses including one premises subject to (EC) 853/2004 approvals legislation for handling meat products.
- 1.9 Food safety enforcement was delivered by the Health Protection Team which formed part of the wider Environmental Health Department. Officers that delivered official food controls were also responsible for the following:
- Health and safety interventions, advice and guidance
  - Infections disease investigation and surveillance
  - Licensing
  - Food promotional activities including training
- 1.10 Food standards enforcement in the LA area was provided by the Trading Standards Team at Northamptonshire County Council.

- 1.11 The profile of Kettering Borough Council's food businesses as at 31<sup>st</sup> March 2016 was as follows:

<b>Risk category</b>	<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>	<b>Total</b>
Number of businesses	0	27	140	279	442	888

## 2.0 Executive Summary

- 2.1 The Authority was found to be delivering a range of food law enforcement activities in accordance with the statutory obligations placed on the Authority as a competent food authority. These were generally delivered according to prescribed timescales by experienced professional staff. However, some improvements were identified to enable the Service to attain the required level of protection to consumers and in order to meet the statutory requirements of the Framework Agreement and the Food Law Code of Practice (FLCoP). A summary of the main findings and key improvements necessary is set out below.

### 2.2 Strengths:

**Inspection targets:** The Authority demonstrated consistent high performance with regard to meeting planned inspection targets of high and medium risk food businesses that were due an intervention.

**New registrations:** Evidence also showed that newly registered food businesses were inspected promptly.

**Enforcement:** Records for enforcement action showed a willingness to carry out a wide range of enforcement sanctions when appropriate.

### 2.3 Key areas for improvement:

**Service Planning:** The LA should put in place a plan for the delivery of official controls based on the service planning guidance in the Framework Agreement. The plan should include a clear comparison of the resources required to deliver the food law enforcement service fully in accordance with the Food Law Code of Practice (FLCoP) against the resources available.

**Internal Monitoring:** Whilst some qualitative monitoring checks were being carried out, it was recognised that these were not structured or

following a consistent methodology. There is a need to further develop these procedures across the full range of food related activities undertaken. In addition complete records of internal monitoring activities should be maintained.

**Policies and Procedures:** Policies and procedures were in need of review. Within the documents seen there were many references found to defunct bodies and furthermore some policies were no longer consistent with current statutory guidance such as the FLCoP.

**Training:**

The LA needed to put in place a policy to ensure that all officers delivering official controls were assessed against the current requirements of the competency framework contained within the FLCoP and training needs identified as a result. The training should include specialist processes, HACCP, Imported food and risk rating consistency.

**Intervention Strategy:** The LA should devise and implement an alternative enforcement strategy as part of its intervention procedure. The majority of overdue inspections were at low risk premises that could be subject to alternative interventions.

## **3.0 Audit Findings**

### **3.1 Organisation and Management**

#### Strategic Framework, Policy and Service Planning

- 3.1.1 The LA did not have a specific plan for the Food Safety Service. Auditors discussed the use of the service planning guidance in the Framework Agreement to act as the basis for the format of future plans, including a clear comparison of the resources required to deliver the food law enforcement service fully in accordance with the Food Law Code of Practice (FLCoP) against the resources available. The absence of such information makes it difficult to quantify any resource shortfalls to senior managers and to Members. Auditors would also recommend that the service plan is brought to the attention of elected members.
- 3.1.2 When determining the resources needed to provide the service it is important to set out in the plan all the activities of the food service including monitoring and review of procedures and policies.
- 3.1.3 In addition it is essential that the Service Plan clearly sets out the number of food premises interventions programmed for the year, including any inspection shortfalls from the previous year's programme. Auditors also discussed the need to include information on the previous year's performance against the Service Plan and to identify any variances and where appropriate the reasons for that variance.
- 3.1.4 Authorised officers delivered a range of regulatory functions in addition to official food controls. At the time of the audit the number of full time equivalent staff (FTE's) engaged in the delivery of official food controls was confirmed as 1.6. Data submitted to LAEMS from 2012 – 2015 showed that since the reporting year 2012-2013 FTE numbers had decreased from 2.6. This represented a 38% reduction in FTE numbers over the period. Although there had not been a wide ranging service restructure over this time officer work streams had been realigned during the period.

**Recommendation 1 - Service planning**

[The Standard 3.1]

[See also paragraphs 3.1.1 - 3.1.4]

Draw up, document and implement the 2016/17 service delivery plan in accordance with the Service Planning Guidance of the Framework Agreement on Official Feed and Food Controls by Local Authorities. Include an estimate of the demands on the Service and the resources required together with a comparison of the resources available. Include the profile of the Authority, the financial and staffing allocation for the food service.

**3.1.5 Reviewing and Updating of Documented Policies and Procedures**

3.1.6 The Authority had developed a range of documented procedures and work instructions for its food law enforcement service. These were reviewed by the Lead Food Officer with the exception of the authorisation procedure implementation was the responsibility of the Health Protection Team Leader.

3.1.7 There was some evidence of a document version control process although there was no overarching policy document that detailed when, how and who was responsible for reviewing current policies and procedures. Documented policies and procedures were stored on a shared drive that could be accessed by all staff. When checked it was found that some out of date procedures were still accessible and moreover procedures were not write protected.

**Recommendation 2 - Policies and Procedures Review**

[The Standard – 4.2]

[See also paragraph 3.1.8]

Set up, maintain and implement a control system for all documentation relating to its enforcement activities.

## Officer Authorisations and Training

- 3.1.8 The Authority had developed a documented procedure for the authorisation of officers although there were some areas that required further detail and review. The procedure should be reviewed against the latest version of the FLCoP issued on the 7th April 2015, with particular attention being paid to meet the Qualification and Competency section of the FLCoP which came into force on the 1st April 2016.
- 3.1.9 The procedure required that the Health Services Manager be responsible for checking officer qualification and competency. It did not detail any ongoing arrangements for monitoring officers training or CPD requirements.
- 3.1.10 Authorisation records for five officers engaged in delivering official controls were checked including the Lead Food Officer. Whilst authorisation documents had intended to restrict the delivery of the full range of official controls for some officers, auditors found that most were contradictory in that they gave conflicting detail with regard to the level of the officer's authorisation.
- 3.1.11 Authorisations should be reviewed to ensure all officers are authorised to an appropriate level and furthermore reference all relevant legislation and delegated powers where appropriate (e.g. Food and Environment Protection Act 1985).
- 3.1.12 Auditors were advised that officer competence and CPD requirements were assessed and monitored through the appraisal system, regular one to ones and occasional work shadowing or peer reviews by the team. There were some records kept of the one to ones but these did not detail specific training or competence requirements identified.
- 3.1.13 Qualification and training records for five officers were examined and these demonstrated that officers were in general receiving the minimum 10 hours relevant training per annum based on the principles of continuing professional development. However, it was apparent that officers had not received recent training in specialist processes such as sous vide or vacuum packing, consistency training or training in imported food or HACCP apart from one officer. Some evidence was provided of formal enforcement training.

### **Recommendation 3 - Authorisations and Training**

[The Standard – 5.1, 5.4 & 5.5]

Review the authorisation procedure to ensure it takes account of the defined competencies contained within the FLCoP 2015. [See paragraph 3.1.9]

Ensure all officers are authorised to the appropriate level and authorisation documents accurately reflect the powers of the authorised officer. [See paragraph 3.1.11&3.1.12]

Devise and implement a documented procedure to assess the ongoing CPD requirements of authorised officers. [See paragraphs 3.1.10 & 3.1.14]

## **3.2 Food Premises Database**

- 3.2.1 The Authority was operating a database capable of providing monitoring returns to the agency. Information submitted to the Agency in advance of the audit however showed a 27% discrepancy between the amount of premises reported to LAEMS and those on the database extract the LA had provided. The LA gave assurance that this would be investigated and the cause identified.
- 3.2.2 The Authority database was managed by the Lead Food Officer. Access rights to update premises records in terms of opening and closure of business premises were not limited although deletion of a premises record was. Individual officer access was password controlled and auditors were informed that the database was backed up daily.
- 3.2.3 Auditors were advised that accurate recording of current food businesses on the database was maintained and updated regularly through information received during the licensing and planning process and through searches of local and internet advertising media as well as social media.
- 3.2.4 Auditors carried out a basic internet search in advance of the audit. Out of six checked, two businesses were identified by auditors that were not contained within the authority's database. The authority acted upon this information at the time of the audit.
- 3.2.5 Whilst quantitative monitoring of inspections was carried out the LA did not have a qualitative procedure in place to ensure that the data recorded was accurate.

- 3.2.6 Prior to the on-site audit, auditors had been advised by the Food Hygiene Ratings Team that there were some potential anomalies and inaccuracies in data that the authority had uploaded to the FHRs portal. A report on the areas for attention had been provided to the Authority for further investigation.

**Recommendation 4 - Food Premises Database**

[The Standard – 6.3]

Ensure that returns submitted to the Agency accurately reflect the food premises profile of the LA area. [See paragraph 3.2.1]

**3.3 Food Premises Interventions**

- 3.3.1 The LA had a reviewed intervention and inspection procedure. This gave instruction on how inspections should be conducted but did not cover in sufficient detail the risk based approach to the allocation of inspections, in particular the strategy for alternative enforcement in low risk premises.
- 3.3.2 The LA had adopted a comprehensive inspection aide memoire which officers were required to complete during each inspection. The aide memoire could be further enhanced with more reference to E. coli guidance, imported food and traceability requirements.
- 3.3.3 Interrogation of the food premises database during the audit showed that 26% of premises were overdue an intervention. Of the 239 overdue 209 were in the E risk rating category and therefore could have been inspected via an alternative enforcement strategy.
- 3.3.4 One approved meat product premises file was assessed in detail. The premises had been given full approval. Auditors could not find records for the original inspection upon which approval was granted. Records also did not contain enough detail to determine whether or not the business would have met the requirements for a retail exemption under the relevant criteria specified in the FLCoP.
- 3.3.5 The approval file was not structured in accordance with guidance contained within the FLCoP, and some key elements were missing. As a result, the file would benefit from a thorough review.
- 3.3.6 Five food premises files were assessed. File checks demonstrated that inspections were generally carried out at appropriate intervals. The level of detail recorded varied in the five files that were looked at. In general there was enough information to support the risk scores and ratings

given. In some cases auditors noted that officers had not informed the FBO of timescales for the completion of works to comply with legal requirements contrary to guidance in the FLCoP. In one inspection it was also found that a Food Business Operator was given a score for minor non-compliance which did not correspond with the type of non-compliance found (lack of hot water to a wash hand basin).

- 3.3.7 In most instances correspondence was provided to the FBO at the time of inspection and contained detailed advice for food businesses, clearly differentiating between contraventions and recommendations of good practice. There was evidence of appropriate revisits being carried out in most cases to check business compliance and follow up with enforcement action where necessary.

#### **Recommendation 5 - Interventions**

[The Standard – 7.1, 7.2, 7.4 & 7.5]

Review the intervention procedure to ensure that it includes the rationale for the risk based allocation of inspections. It should also include an alternative enforcement strategy detailing when and for what type of premises the approach may be used. [See paragraphs 3.3.1 & 3.3.3]

Carry out inspections at prescribed frequencies. Where low risk premises are not subject to surveillance (an alternative enforcement strategy), there is a risk that a change in activities to high risk processes will not be detected. [See paragraph 3.3.3]

Ensure that records of completed inspections are retrievable. In particular approved premises records should be maintained according to standards sets out in in the FLCoP. [See paragraph 3.3.4 & 3.3.5]

Ensure that in all communication with FBO's on matters of non-compliance appropriate time scales are given for compliance. [See paragraph 3.3.6]

## Verification visit to a Food Premises

- 3.3.8 During the audit, a verification visit was undertaken to a nursery with an officer from the Authority who had carried out the last food hygiene inspection of the premises. The main objective of the visit was to assess the effectiveness of the Authority's assessment of food business compliance with food law requirements.
- 3.3.9 The officer had a good working relationship with the FBO and was able to demonstrate a detailed knowledge of food safety legislation and food safety management systems at the establishment. It was also clear that the business had acted on previous advice provided by the officer.

## 3.4 Enforcement

- 3.4.1 The Authority had developed an enforcement policy which outlined the commitment to taking appropriate formal action in cases of repeated non-compliance. It contained broad guidance for officers on the different types of enforcement actions possible and the situations when they might be appropriate; however, some references were out of date and not in keeping with the current FLCoP. The policy also needed to detail circumstances when a Remedial Action Notice should be considered. This was particularly relevant as the LA had approved premises within its area.
- 3.4.2 The policy was not signed off at director or member level, it was not publicised or made readily available to food business operators and members of the public.
- 3.4.3 File record checks were carried out to assess hygiene improvement notices (HIN), one hygiene emergency prohibition notice (HEPN) a voluntary closure, detention of food and a prosecution.
- 3.4.4 The reason for service of notice was generally documented. In the case of one HIN auditors found that a notice had been drafted, signed and posted but ultimately was not received by the FBO. Subsequent corrective action had not been taken to ensure correct service. In another case the evidence on file did not appear to fully justify the enforcement action taken, the evidence only indicated minor short term non-compliance when several HINS's were served.
- 3.4.5 In all cases the enforcement policy appeared to have been considered. Whilst the LA had a template enforcement decision record sheet it could not be located for the prosecution file examined. There was however evidence on the database of management discussion and sign off for the action taken.

### **Recommendation 6 - Enforcement Policy**

[The Standard 15.1, 15.2 & 15.3]

Review the enforcement policy to ensure it reflects current statutory guidance, covers all relevant enforcement options and out of date references are removed. [See paragraphs 3.4.1]

Ensure that enforcement action is carried out (service of notices) in accordance with legislation and the FLCoP. [See paragraphs 3.4.4]

Publicise the policy once reviewed and make it readily available e.g. on the LA website. [See paragraphs 3.4.2]

## **3.5 Internal Monitoring, Third Party or Peer Review**

### Internal Monitoring

- 3.5.1 The monitoring procedure submitted was implemented by the Health Protection Team Leader. This policy did not require the documentation of any monitoring that was completed however the Team Leader did keep a record of discussions during one to one meetings with authorised officers. Auditors were informed that accompanied inspections with officers and peer reviews had been carried out; however records were not always maintained.
- 3.5.2 The Authority needed to develop and implement a documented internal monitoring procedure that covered all areas of the service in particular enforcement decisions relating to poor performing businesses, the allocation of risk scores and associated food hygiene ratings. This documentation process should also include details of corrective actions taken as a result of monitoring. Auditors were informed that inspection paperwork that had been signed by a line manager was subject to a verification process to ensure scoring was justified. Auditors were informed that managers countersigned every inspection carried out. This approach could be more effective if it were targeted on a risk based strategy, for example verification when a business has gone from a low to high risk rating.
- 3.5.3 Quantitative monitoring was carried out in relation to response times and inspection targets and reported at director level every six weeks.

**Recommendation 7 - Internal monitoring**

[The Standard 19.1&19.3]

Develop and implement a documented internal monitoring procedure that covers all areas of the service. Records of monitoring should be retained for a minimum of 2 years. [See paragraph 3.5.2]

Food and Food Premises Complaints

- 3.5.4 The LA had developed a documented food complaints policy and procedure, although it was in need of review to ensure that officers were clear when it was appropriate to liaise with a Primary Authority.
- 3.5.5 Audit checks of five food and food premises complaint investigations found that generally appropriate and timely investigations and action had been carried out. In one instance however auditors could not determine why an inspection had not been prompted by the complaint based upon the level of detail recorded.

**Recommendation 8 - Complaints Policy**

[The Standard 8.2 & 8.3]

Review the complaints policy to ensure officers are advised as to when it is appropriate to liaise with a Primary Authority. [See paragraph 3.5.4]

Ensure that records of complaint investigations are recorded in sufficient detail. [See paragraph 3.5.5]

Food Inspection and Sampling

- 3.5.6 The authority participated in FSA and Public Health England (PHE) sampling programmes and also used sampling as a tool to inform and support enforcement and/or interventions.
- 3.5.7 Records relating to five samples were checked. On one occasion the laboratory report could not be located and in one instance records could not confirm that the FBO had been informed in writing of an unsatisfactory result for the presence of E.coli in a swab sample. For the remainder FBOs were informed of sampling results and corrective action was taken as appropriate.

**Recommendation 9 - Sampling**

[The Standard 12.3]

Documented records should be kept of sampling results and analysis and interventions carried out as a result. [See paragraph 3.5.7]

Records

- 3.5.8 Records were maintained in electronic format. Generally records were retrievable.

Third Party or Peer Review

- 3.5.9 The Authority had participated in an inter authority in 2015 that focused on the delivery of the Food Hygiene Rating Scheme. The action plan that was produced as a result was yet to be implemented at the time of the audit.
- 3.5.10 The LA was regularly represented at the regional food liaison group and contributed to the consistent development of policy at regional level.

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Sarah Green - Auditor

Food Standards Agency  
Regulatory Delivery Division

## ANNEX A - Action Plan for Kettering Borough Council

Audit date: 19-21 April 2016

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p><b>Recommendation 1 - Service planning</b> [The Standard 3.1]</p> <p>Draw up, document and implement the 2016/17 service delivery plan in accordance with the Service Planning Guidance of the Framework Agreement on Official Feed and Food Controls by Local Authorities. Include an estimate of the demands on the Service and the resources required together with a comparison of the resources available. Include the profile of the Authority, the financial and staffing allocation for the food service.</p>	<p>31 August 2016</p>	<p>Where possible, relevant parts of the Framework Agreement will be included within the Service Plan where we can and this will include some reference to staffing resources.</p>	<p>Head of Service already meets with the Strategic Management Team (CE/DCEs) on a monthly basis for Performance Clinic. The number of high risk inspections carried out against programme PI is reported together with any staffing issues as a result of sickness, vacancy, etc. and any potential for these to impact on service provision, performance against targets and ultimately risk to the LA and consumers as a result. In such circumstances SMT will be asked to agree to cover for such vacancies. Any cover must be within existing budgets.</p> <p>Staffing resources are provided against available finances. However a statement of FTE does not reflect the flexible resource available from within the team when required to deal with any major issue.</p> <p>SMT are aware of the resources available to us normally and as you saw during your visit the staff resources we have perform well in the key areas of risk management using the full range of enforcement powers, inspecting all high risk food businesses and dealing with major incidents, as they were with the norovirus outbreak at the time of your audit. We all know there are no additional resources – we use what we have to the best of our ability to manage risk to consumers.</p>

<p><b>Recommendation 2 - Policies and Procedures Review</b> [The Standard – 4.2]</p> <p>Set up, maintain and implement a control system for all documentation relating to its enforcement activities.</p>	<p>31 August 2016</p>	<p>Written documentation control system to be introduced.</p>	<p>Outcome of Audit has been discussed with Head of Service and Health Protection Team and team engaged with required improvements.</p> <p>Health Services Manager to set up control system for documentation relating to enforcement activities.</p>
<p><b>Recommendation 3 - Authorisations and Training</b> [The Standard – 5.1, 5.4 &amp; 5.5]</p> <p>Review the authorisation procedure to ensure it takes account of the defined competencies contained within the FLCoP 2015.</p> <p>Ensure all officers are authorised to the appropriate level and authorisation documents accurately reflect the powers of the authorised officer.</p> <p>Devise and implement a documented procedure to assess the ongoing CPD requirements of authorised officers.</p>	<p>31 August 2016</p>	<p>All Food Policies and Procedures to be reviewed and updated as necessary.</p> <p>Work commenced on documented procedure for authorising and assessing ongoing needs of officers based on RDNA.</p>	<p>Outcome of Audit has been discussed with Head of Service and Health Protection Team and team engaged with required improvements.</p> <p>Policy and Procedure Improvements included in Health Protection Team Plan.with identified officers reviewing specific procedures.</p>
<p><b>Recommendation 4 - Food Premises Database</b> [The Standard – 6.3]</p> <p>Ensure that returns submitted to the Agency accurately reflect the food premises profile of the LA area.</p>	<p>Completed</p>	<p>Error in recording resolved</p>	<p>Following the audit, an error in coding was identified in the Service's database resulting in premises not being identified for the LAEMS return.</p>

<p><b>Recommendation 5 - Interventions</b> [The Standard – 7.1, 7.2, 7.4 &amp; 7.5]</p> <p>Review the intervention procedure to ensure that it includes the rationale for the risk based allocation of inspections. It should also include an alternative enforcement strategy detailing when and for what type of premises the approach may be used.</p> <p>Carry out inspections at prescribed frequencies. Where low risk premises are not subject to surveillance (an alternative enforcement strategy), there is a risk that a change in activities to high risk processes will not be detected.</p> <p>Ensure that records of completed inspections are retrievable. In particular approved premises records should be maintained according to standards sets out in in the FLCoP.</p> <p>Ensure that in all communication with FBO's on matters of non-compliance appropriate time scales are given for compliance.</p>	<p>31 August 2016</p>	<p>All Food Policies and Procedures to be reviewed and updated as necessary.</p> <p>All activities to be in accordance with procedures.</p>	<p>Outcome of Audit has been discussed with Head of Service and Health Protection Team and team engaged with required improvements.</p> <p>Policy and Procedure Improvements included in Health Protection Team Plan.with identified officers reviewing specific procedures.</p> <p>All high risk inspections are carried out at prescribed frequencies. Due to historical staffing shortages not all low risk inspections have been in accordance with prescribed frequencies but Cat D premises which may be at risk of change e.g. caterers, are identified and subject to intervention.</p>
<p><b>Recommendation 6 - Enforcement Policy</b> [The Standard 15.1, 15.2 &amp; 15.3]</p> <p>Review the enforcement policy to ensure it reflects current statutory guidance, covers all relevant enforcement options and out of date references are removed. [See paragraphs 3.4.1]</p> <p>Ensure that enforcement action is carried out (service of notices) in accordance with legislation and the FLCoP. [See paragraphs 3.4.4]</p> <p>Publicise the policy once reviewed and make it readily available e.g. on the LA website.</p>	<p>31 August 2016</p>	<p>All Food Policies and Procedures to be reviewed and updated as necessary.</p> <p>All actions to be in accordance with procedures and policies.</p> <p>Revised enforcement policy to be on website</p>	<p>Outcome of Audit has been discussed with Head of Service and Health Protection Team and team engaged with required improvements.</p> <p>Policy and Procedure Improvements included in Health Protection Team Plan. Health Services Manager to review enforcement policy.</p>

<p><b>Recommendation 7 - Internal monitoring</b> [The Standard 19.1&amp;19.3]</p> <p>Develop and implement a documented internal monitoring procedure that covers all areas of the service. Records of monitoring should be retained for a minimum of 2 years.</p>	<p>31 August 2016</p>	<p>All Food Policies and Procedures to be reviewed and updated as necessary.</p>	<p>Outcome of Audit has been discussed with Head of Service and Health Protection Team and team engaged with required improvements.</p> <p>Policy and Procedure Improvements included in Health Protection Team Plan. Health Services Manager to develop internal monitoring procedure.</p>
<p><b>Recommendation 8 - Complaints Policy</b> [The Standard 8.2 &amp; 8.3]</p> <p>Review the complaints policy to ensure officers are advised as to when it is appropriate to liaise with a Primary Authority.</p> <p>Ensure that records of complaint investigations are recorded in sufficient detail.</p>	<p>31 August 2016</p>	<p>All Food Policies and Procedures to be reviewed and updated as necessary.</p>	<p>Outcome of Audit has been discussed with Head of Service and Health Protection Team and team engaged with required improvements.</p> <p>Policy and Procedure Improvements included in Health Protection Team Plan.with identified officers reviewing specific procedures.</p>
<p><b>Recommendation 9 - Sampling</b> [The Standard 12.3]</p> <p>Documented records should be kept of sampling results and analysis and interventions carried out as a result.</p>	<p>31 August 2016</p>	<p>All Food Policies and Procedures to be reviewed and updated as necessary</p>	<p>Outcome of Audit has been discussed with Head of Service and Health Protection Team and team engaged with required improvements.</p> <p>All food officers reminded by email of the requirement to ensure that copies of results, any correspondence and any actions, including details of any phone calls, are recorded on Flare pending policy review.</p>

## **ANNEX B - Audit Approach/Methodology**

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

(1) Examination of LA policies and procedures.

The following relevant LA policies, procedures and linked documents were examined before and during the audit:

(2) File reviews – the following LA file records were reviewed during the audit:

(3) Review of Database records:

- To review and assess the completeness of database records of food hygiene inspections, food and food premises complaint investigations, samples taken by the authority, formal enforcement and other activities and to verify consistency with file records
- To assess the completeness and accuracy of the food premises database

(4) Officer interviews – the following officers were interviewed:

Eleni Middleton

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

(5) On-site verification check:

A verification visit was made with the Authority's officers to a local food business. The purpose of the visit was to verify the outcome of the last inspection carried out by the Local Authority and to assess the extent to which enforcement activities and decisions met the requirements of relevant legislation, the Food Law Code of Practice and official guidance.

## **ANNEX C - Glossary**

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.
Broadly Compliant	An outcome measure which the Food Standard Agency has developed with local authorities to monitor the effectiveness of the regulatory service relating to food law. It is based on the risk rating scheme in the Food Law Code of Practice which is currently used by food law enforcement officers to assess premises which pose the greatest risk to consumers failing to comply with food law.
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.
County Council	A local authority whose geographical area corresponds to the county and whose responsibilities include food standards and feeding stuffs enforcement.
District Council	A local authority of a smaller geographical area and situated within a County Council whose responsibilities include food hygiene enforcement.
E. coli O157	E.coli O157 belongs to the group of verotoxigenic E. coli (VTEC) bacteria which are a toxin-producing strain of Escherichia coli that occur naturally in the gastrointestinal tract of animals such as cattle and sheep, and are pathogenic to humans. E.coli O157 is the VTEC strain that has been most commonly implicated in human infection in the UK.
External Temporary Storage Facility (ETSF)	A warehouse (formerly known as an enhanced remote transit shed or ERTS) designated by HM Revenue and Customs (HMRC), where goods are temporarily stored pending clearance by HMRC, and prior to release into free circulation.
Environmental Health Officer (EHO)	Officer employed by the local authority to enforce food safety legislation.

Feeding stuffs	Term used in legislation on feed mixes for farm animals and pet food.
Food hygiene	The legal requirements covering the safety and wholesomeness of food.
Food Hygiene Rating Scheme (FHRS)	The Food Hygiene Rating Scheme provides information to the public about hygiene standards in catering and retail food establishments. It is run by local authorities in partnership with the Food Standards Agency. Businesses that fall within the scope of the scheme are given a 'hygiene rating' which shows how closely the business was meeting the requirements of food hygiene law at the time of inspection. The scheme also encourages businesses to improve hygiene standards.
Food Safety Management System	A written permanent procedure, or procedures, based on HACCP principles. It is structured so that this requirement can be applied flexibly and proportionately according to the size and nature of the food business.
Food standards	The legal requirements covering the quality, composition, labelling, presentation and advertising of food, and materials in contact with food.
Framework Agreement	<p>The Framework Agreement consists of:</p> <ul style="list-style-type: none"> <li>• Food and Feed Law Enforcement Standard</li> <li>• Service Planning Guidance</li> <li>• Monitoring Scheme</li> <li>• Audit Scheme</li> </ul> <p>The <b>Standard</b> and the <b>Service Planning Guidance</b> set out the Agency's expectations on the planning and delivery of food and feed law enforcement.</p> <p>The <b>Monitoring Scheme</b> requires local authorities to submit yearly returns via LAEMS to the Agency on their food enforcement activities i.e. numbers of inspections, samples and prosecutions.</p> <p>Under the <b>Audit Scheme</b> the Food Standards Agency will be conducting audits of the food and</p>

	feed law enforcement services of local authorities against the criteria set out in the Standard.
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 and feed enforcement.
HACCP	Hazard Analysis and 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.
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.
Metropolitan Authority	A local authority normally associated with a large urban conurbation in which the County and District Council functions are combined.
Risk rating	A system that rates food premises according to risk and determines how frequently those premises should be inspected. For example, high risk premises should be inspected at least every 6 months.
Safer food, better business (SFBB)	A food safety management system, developed by the Food Standards Agency to help small catering and retail businesses put in place food safety management procedures and comply with food hygiene regulations.
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 Department within a local authority which

carries out, amongst other responsibilities, the enforcement of food standards and feeding stuffs legislation.

Trading Standards  
Officer (TSO)

Officer employed by the local authority who, amongst other responsibilities, may enforce food standards and feeding stuffs legislation.

Unitary Authority

A local authority in which the County and District Council functions are combined, examples being Metropolitan District/Borough Councils, and London Boroughs. A Unitary Authority's responsibilities will include food hygiene, food standards and feeding stuffs enforcement.