

Updated Action Plan for Maidstone Borough Council

Audit dates: 2-3 March 2010

Action Plan updated: 16 June 2011

TO ADDRESS RECOMMENDATION (INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	PROGRESS	ACTION TAKEN TO DATE
3.1.8 Fully implement and maintain a document control system for all documentation relating to its food service enforcement activities. [The Standard – 4.2]	Completed	Agree document control framework and ensure all food service procedures are brought in line with new arrangements.	Completed	Total Quality Management framework established. Document Control procedure produced. Food procedures included in framework and document control procedure. Updated Evidence File supplied.
3.1.13 Ensure the training of all authorised officers in the technical and administrative aspects of the work in which they will be involved and when training is provided that sufficient details are maintained on file. [The Standard – 5.4]	Completed	No outstanding corrective action.	Completed	Training files maintained and updated. Update Evidence file provided with information.
3.2.5 Ensure that the food premises database is operated in such a way so as to be able to provide required information to the Agency. [The Standard – 6.4]	29/4/2011	Ensure that there is a dedicated systems administrator to undertake general housekeeping and maintenance of the database. Key improvements around preventing duplicate property records, ensuring that revisit dates to not mask scheduled inspections dates and ensuring that the FSA information requirements are met.	Completed	(Database Working Party) M3 User Group established. System Administrator appointed in IT department. Meetings recorded. 5,000 “closed premises” now removed from LLPG and no longer seen as open by EH database. 300 properties without UPRN now matched 217 properties with duplicate PI’s now matched and merged. 1,138 out of area properties now checked matched and merged. Food premises database included in

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3.2.8 Ensure that food hygiene inspections of premises in their area are undertaken at a frequency which is not less than that determined under the inspection risk rating system set out in the Food Law Code of Practice or other centrally issued guidance. [The Standard – 7.1]	Completed	While it is an aim to ensure that food hygiene inspections are undertaken at a frequency which is not less than that determined by the Code of Practice, it is not always possible to achieve. Resourcing decisions across a range of EH services are made on the basis of risk and on occasions this means that the minimum inspection frequencies will not be achieved. High risk inspections will however always be given priority over lower risk inspections.	Completed	Database report generator created to identify Inspections outside specification. Each case examined and reasons identified. Copy of report in Evidence File.
3.2.14 Ensure that records, observations and data obtained during the course of inspections, particularly in relation to the verification of HACCP based food safety management systems, include sufficient detail to demonstrate whether the compliance of premises and systems has been comprehensively assessed to legally prescribed standards. [The Standard – 16.1]	Completed		Completed	Updated inspection form includes more detailed information of the officers verification of the Food Safety Management System (FSMS). Copy of updated form in Updated Evidence File.
3.2.16 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		Completed	Officers contemporaneous record scanned onto corporate document imaging system and cross referenced by unique EH database reference number. Examples in Updated Evidence File.
3.4.3 Fully implement its internal monitoring procedure to include the qualitative monitoring of all areas of food law enforcement activity to reflect the quantitative internal monitoring activity that is being undertaken in practice and ensure that appropriate records are retained. [The Standard – 19.1 and 19.2]	Completed		Completed	Updated inspection form implemented to include qualitative monitoring. Copies of old and new forms with qualitative monitoring included supplied in Update Evidence File.