

Report on the Audit of Local Authority Food Law Service Delivery and Food Business Compliance

South Cambridgeshire District Council
1-3 July 2014



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.

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 all devolved countries comprising the UK.

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.

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 South Cambridgeshire District 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. Hard copies are available from the Food Standards Agency's Operations Assurance Division at Aviation House, 125 Kingsway, London WC2B 6NH, Tel: 020 7276 8428.

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 South Cambridgeshire District 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.¹
- 1.4 The Authority was selected for inclusion in the Food Standards Agency's programme of audits of local authority food law enforcement services because it had not been audited before by the Agency and Local Authority Enforcement Monitoring System (LAEMS) returns indicated overdue high risk inspections and low levels of enforcement. The Authority was also representative of a geographical mix of local authorities selected across England.

¹ 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 South Cambridgeshire District 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 offices at South Cambridgeshire Hall, Cambourne Business Park, Cambourne on 1-3 July 2014.

Background

- 1.7 The area served by South Cambridgeshire District Council is approximately 350 square miles and consists of farmland and villages, ranging from small rural settlements to suburban new settlements such as Cambourne. There were increasing opportunities in the district from economic development, particularly in research and high technology industries and new build projects. The population of 149,000 was predicted to rapidly expand and it was anticipated this would lead to an increase in the number of food businesses in the district.
- 1.8 The Authority had carried out a restructuring and reorganisation of the Service in 2012/13 and had created separate Business and Communities teams which formed part of the Environmental Health and Licensing Service. There was a split in operational responsibility for food activities and the Business Team dealt with advice and food law enforcement in high risk premises and the Communities Team with the investigation of infectious diseases, food sampling and low risk interventions. Following the restructure food officers were now undertaking a range of non-food related disciplines in both teams, which included health and safety, licensing, drainage, commercial nuisance, housing and environmental crime issues.
- 1.9 The Service was based in the Council offices in Cambourne and operated a district system, with officers enabled to work remotely. The Service maintained flexibility for officers to move across districts when allocating work.

1.10 The profile of South Cambridgeshire District Council's food businesses as at 31 March 2014 was as follows:

Type of Food Premises	Number
Primary Producers	41
Manufacturers/Packers	45
Importers/Exporters	0
Distributors/Transporters	28
Retailers	194
Restaurant/Caterers	1,084
Total Number of Food Premises	1,392

2.0 Executive Summary

2.1 South Cambridgeshire District Council was selected for audit as the Authority had not previously been audited by the Agency and Local Authority Enforcement Monitoring System (LAEMS) returns indicated overdue high risk inspections and low levels of enforcement.

2.2 The Authority had carried out a recent restructuring and reorganisation of the Service which had resulted in food officers being involved in non- food related disciplines. Audit checks raised concerns that these changes had impacted on the Authority's ability to comply with a number of areas of the Standard in the Framework Agreement and the statutory obligations placed upon a competent food authority. The following is a summary of the main issues identified which require further measures to be taken for the Authority to comply with the Standard and relevant legislation.

2.3 Key areas for improvement:

Service planning and delivery: The audit identified shortfalls in the way the food service was being delivered across a number of areas. Following the restructuring exercise there had been an increased emphasis on officers undertaking non-food related work and the Service had not suitably assessed the necessary financial and staffing resources required to deliver the food law enforcement work as required by the Food Law Code of Practice (FLCoP). The recommendations made in this report should be taken into account in the planning and implementation of future effective and comprehensive service delivery arrangements.

Authorisation and training: The Authority had not developed an effective method of identifying and assessing officer qualifications, competencies and associated training requirements, commensurate with their individual level of authorisation with evidence of an officer undertaking duties outside the limits of their authorisation. It was not clear if all officers were receiving the training needed to be competent to deliver the technical and administrative aspects of the work in which they were involved e.g. Hazard Analysis and Critical Control Points (HACCP), approvals and enforcement. Auditors discussed the need to appoint a suitably qualified and experienced lead Environmental Health Officer to take lead operational and management responsibility for food hygiene and safety due to the resignation of the designated lead officer.

Documented policies and procedures: The absence of up to date documented policies and procedures across all food law enforcement activities did not provide adequate guidance to inform the approach to enforcement to be taken or provide the basis for effective internal monitoring.

Interventions and inspections: There were a number of overdue high and lower risk premises and unrated businesses requiring an intervention in accordance with the FLCoP. Examination of general premises files contained a variable level of detail recorded by officers. Auditors raised concerns that the Authority's approved establishment had not been approved in accordance with the FLCoP and guidance issued by the Agency.

Food inspection and sampling: There had been no food sampling activity in 2013. A risk based sampling programme should be implemented, taking into account local priorities and national sampling programmes.

Enforcement: Hygiene improvement notices and voluntary closure actions had not been carried out in accordance with the FLCoP and had not been monitored in accordance with the Authority's enforcement policy.

Records: The lack of detailed and cohesive records made it difficult to ascertain the extent of the officers' interventions at businesses. There was a need to ensure that comprehensive, retrievable records were maintained of all food law enforcement activities, both on paper files and on the food premises database. Reliable records are essential to inform future officer interventions, enable a graduated approach to enforcement, and to facilitate effective internal monitoring.

Internal monitoring: There was no evidence of qualitative internal monitoring across all areas of food law enforcement. Auditors discussed the need to develop and implement an internal monitoring procedure, to include thorough risk-based monitoring of all the food enforcement activities carried out.

3.0 Audit Findings

3.1 Organisation and Management

Strategic Framework, Policy and Service Planning

- 3.1.1 The Service had developed a draft Food Service Delivery Plan for 2014/15. This was still under review and therefore had not been formally approved by Members.
- 3.1.2 The Plan stated “It is the aim of the Service to ensure that food produced, prepared or sold in South Cambridgeshire is safe and without risks to health and meets appropriate quality standards.”
- 3.1.3 Examples of key tasks highlighted to deliver these objectives were:
- Maintain a register of all food businesses.
 - Following an inspection take appropriate action to ensure safe food which includes advice and formal enforcement.
 - Educate food business operators in food safety matters and their legal responsibilities.
- 3.1.4 Whilst the structure of the Plan was generally in line with the Service Planning Guidance in the Framework Agreement, it did not include a sufficiently detailed comparison of the staff and financial resources needed to deliver the food law enforcement service against the staff and financial resources available to the Authority. The absence of such information makes it difficult to quantify any resource shortfalls to senior managers and to Members.
- 3.1.5 Future plans would also benefit from some further clarification of the proposed interventions programme for the year, to reflect the actual number of interventions due at each risk category, including those overdue an inspection and unrated food businesses.

Recommendation

3.1.6 The Authority should:

Further develop the Food Service Plan in accordance with the Service Planning Guidance in the Framework Agreement, to include details of the proposed food premises interventions and sampling programme for the year and a clear comparison of the resources required to carry out the full range of statutory food law enforcement activities against the resources available to the Service.
[The Standard – 3.1]

Documented Policies and Procedures

- 3.1.7 Auditors were advised the Authority was in the process of setting up, reviewing and updating existing procedures to provide guidance for officers across all areas of food law enforcement and to facilitate effective monitoring.
- 3.1.8 Auditors discussed the need to develop an overarching document control system and to ensure that all documented policies and procedures were reviewed at regular intervals, and whenever there are changes to legislation or centrally issued guidance.

Recommendation

3.1.9 The Authority should:

Set up, maintain and implement a control system for all documentation relating to its enforcement activities.
[The Standard - 4.2]

Officer Authorisations

- 3.1.10 Auditors were provided with an extract from the Council's Constitution which detailed the general delegated powers. The authority to exercise the powers and function of the Council had been delegated to Chief Officers and they had the authority to delegate further to Directors or other senior staff reporting to them.
- 3.1.11 The Service did not have a documented procedure for authorisations based on officer competence. Such a procedure should include guidance on the means by which the Service ensures that the competence and qualifications of officers have been assessed before authorisation, including contractors and officers returning to food law enforcement duties. Auditors discussed the need to ensure all officers are appropriately authorised in accordance with their individual levels of qualifications, experience and competence. The interventions undertaken by one officer required review as they had carried out food law enforcement activities when not appropriately qualified.
- 3.1.12 Officers' individual authorisations had a number of legislative references that required updating, as authorisations omitted some specific legislative references as required by the Food Law Code of Practice (FLCoP) and centrally issued guidance. These included the Trade in Animals and Related Product Regulations 2011, other regulations made under the European Communities Act 1972 and current relevant Emergency Control Regulations.
- 3.1.13 Auditors discussed the need to clearly define the risk rating categories of food businesses each officer is authorised to inspect and suggested the use of an authorisation matrix to set out the limits of officer's individual authorisations. The current schedule of officers authorised under the Food and Environment Protection Act 1985 also needed to be reviewed and notified to the Agency.
- 3.1.14 Auditors were advised the designated lead officer was leaving the Authority and discussed the need to appoint a suitably qualified and experienced Environmental Health Officer to take lead operational and management responsibility for food hygiene and safety in accordance with the FLCoP.
- 3.1.15 There were insufficient training records available at the time of the audit to establish whether all officers had maintained the required minimum 10 hours of food training based on the principles of continuing professional development. It was not clear if all officers were receiving the training needed to be competent to deliver the technical and administrative aspects of the work of which they were involved e.g. HACCP, approvals and enforcement. Although officers' training needs were discussed at routine staff appraisals, no formal method of assessing current officer competencies and associated training needs had been developed.

Recommendations

3.1.16 The Authority should:

- (i) Set up, maintain and implement a documented procedure for the authorisation of officers based on their competence and in accordance with the Food Law Code of Practice and any centrally issued guidance. [The Standard - 5.1]
- (ii) Ensure that the officer appointed to have lead responsibility for the enforcement of food hygiene legislation has the relevant qualifications and specialist knowledge. [The Standard - 5.2]
- (iii) Ensure that the level of authorisation and duties of officers is consistent with their qualifications, training, and experience in accordance with the Food Law Code of Practice. [The Standard - 5.3]
- (iv) Ensure that all officers involved in food hygiene law enforcement activities receive sufficient relevant training in accordance with the Food Law Code of Practice. [The Standard - 5.4]
- (v) Maintain records of relevant qualifications, training and experience of each authorised officer in accordance with the Food Law Code of Practice. [The Standard – 5.5]

3.2 Food Premises Database

- 3.2.1 Auditors were advised the Service had carried out some data cleansing following the launch of the Food Hygiene Rating Scheme (FHRS) but acknowledged further review was required to resolve issues with multiple entries of food premises, incorrect coding, for example relating to the nature of complaints and types of business, and the need to revise the risk rating of Category C premises in accordance with the latest FLCoP.
- 3.2.2 A documented procedure for maintaining the accuracy of the database was required to be developed and implemented. Officers had responsibility for entering records of enforcement activity which included inspection details, and examples were provided of work instructions for officers to ensure accuracy and consistency of data input. Responsibility for closing premises on the database was restricted to technical support and key officers with administration rights.
- 3.2.3 Auditors discussed the need to ensure the database system is capable of providing accurate and comprehensive LAEMS returns to the Agency and to accurately code and report the number of written warnings declared in the LAEMS return. Record checks showed that these had been under reported recently due to coding and data entry issues following inspections.
- 3.2.4 The Service provided examples of steps taken to ensure the accuracy of the database. These included monthly meetings with the Authority's contact centre which dealt with enquiries, to discuss any issues with data transfer and the production of monitoring reports before uploading data onto the FHRS system to identify any coding errors. The possibility of using the database provider to carry out an audit of the system was discussed.
- 3.2.5 Auditors carried out a database search against an internet based directory and whilst the majority of the premises were found to be on the database and inspection programme, auditors requested that further investigation is made of one of the businesses identified which the Authority was not previously aware of.

Recommendation

3.2.6 The Authority should:

Develop, maintain and implement a documented procedure to ensure that the food premises database is accurate, reliable and up to date. [The Standard – 11.2]

3.2 Food Premises Interventions

- 3.3.1 The Authority's draft Food Service Plan 2014/15 provided details of the risk categories of food premises, but did not include details of the actual number of interventions due. The risk rating profile of the Authority's food businesses provided to the Agency through the LAEMS returns as of 31 March 2014 was as follows:

Premises Risk Category	Number of Premises
A	7
B	30
C	315
D	231
E	643
Unrated	166
Outside Programme	0
Total	1,392

- 3.3.2 The Service Plan set out the priorities for its intervention programme as part of a risk based approach in accordance with the FLCoP, and aimed to inspect all due high risk premises. The lead food officer allocated the high risk inspections due to the officers. The Plan also stated the Service intended to use the flexibilities allowed in the FLCoP with alternative interventions and enforcement strategies for Category C and lower risk rated premises. Auditors discussed the need to ensure Category C risk rated premises continued to receive an intervention which consisted of an inspection, partial inspection or audit until such time as judged to be broadly compliant before alternating with other official controls. The Service advised questionnaires were sent out to Category E risk rated premises as part of its alternative enforcement strategy which the resource team followed up if there was no response to try and ascertain if the business was still operating.
- 3.3.3 The Service aimed to support businesses with advice to achieve compliance and had previously participated in an FSA funded project providing coaching to poorer performing businesses to try and improve compliance with food law requirements.
- 3.3.4 Checks on the database premises records showed it had not been possible to undertake all inspections due in accordance with the 28 days FLCoP requirements and confirmed that there were 2 Category A, 7 Category B, 69 Category C rated premises and a large number of lower risk interventions overdue. Auditors discussed the need for the Service to undertake interventions at the intervals prescribed in the FLCoP and for the Service to ensure that high risk Category A, B and C risk rated premises were prioritised for an intervention. Auditors

were advised that a strategy was being developed to use the Resource Team to send out questionnaires to businesses overdue an intervention to determine if they were still trading.

- 3.3.5 Database checks highlighted some inconsistency with the FLCoP risk rating scheme in that an additional weighting for significant risk had been applied although there was a low score for Confidence in Management (CIM). The additional score must be consistent with the baseline assessment for CIM and whilst the auditors were advised of the reason why this had occurred they discussed the need to review each case and adjust the weighting accordingly to provide a more accurate risk rating.
- 3.3.6 New food business registration forms were initially handled by the Resource Team, who entered the details onto the database as a new business and then allocated them to a district officer. The officer was to then contact the food business operator (FBO) to determine the nature of the business and provide advice prior to opening. It was then left to the officer to judge when to inspect the business but the Service aimed to inspect within six months of opening. Audit checks confirmed that a number of potentially higher risk businesses allocated to officers exceeded the 28 days required by the FLCoP for an initial inspection after registering with the Authority. Auditors discussed the need for routine monitoring to ensure these businesses were prioritised by officers for an intervention. The Service advised they intended to review the list of unrated premises to determine if they were operating.
- 3.3.7 The Service had no procedures for general and approved establishment inspections but advised that this was to be addressed as part of the review of food law enforcement procedures. The Service had in place an aide-memoire for higher risk premises to prompt officers to record inspection findings and self-assessment questionnaires for lower risk establishments for use as part of the alternative enforcement strategy.
- 3.3.8 However, examination of seven general premises files and reports found the information recorded was not in accordance with the FLCoP with a variable level of detail being noted. Examples included insufficient detail with regard to type of food business activities, the officer's assessment of business compliance with HACCP and E. coli Guidance requirements, and failure to clearly distinguish statutory requirements and recommendations. Auditors discussed the need to review the compliance of a butchers' food business against the E. coli Guidance requirements as the registration form indicated the use of a vacuum packer but it was not clear from the officer's annotation of notes from a previous inspection whether a vacuum packer was in use and if so, whether this business had been assessed against the Guidance.

- 3.3.9 Auditors checked a file relating to the Authority's approved dairy establishment and were concerned that the premises records indicated that the establishment had been granted conditional approval despite there being an inadequate HACCP system in place and with insufficient detail provided by the FBO to demonstrate all the hazards and appropriate controls had been identified. This was not in accordance with Regulation (EC) No. 853/2004, the FLCoP and guidance issued by the Agency. The subsequent issuing of full approval was then in excess of the maximum six months legal timescales allowed when conditional approval had been granted. There was no evidence of either a further assessment of progress being made towards full compliance within the first three month time period allowed or of an agreed extension to the conditional period for a further three months.
- 3.3.10 Whilst an appropriate form relevant to the operation had been used to record the officer's findings on inspection of the establishment there was insufficient detail recorded against all the criteria being assessed. The same form had been used for the conditional and full approval inspections with no clear distinction between the officer's assessment and findings on each occasion. No letters were available to confirm the FBO had been advised of the outcome of the inspections in accordance with the FLCoP and insufficient detail had been recorded on the database to confirm the business had been appropriately risk rated after each intervention. The file examined did not contain all the information required by the Food Law Practice Guidance (FLPG) in a chronological order and vital information such as latest HACCP plans, emergency contact details, traceability and product recall procedures were not available.
- 3.3.11 Auditors discussed the need to review the approved establishment in accordance with the FLCoP, FLPG, relevant legislation, approval guidance and recent enforcement letters issued by the Agency in respect of dairy establishments.
- 3.3.12 The Authority had launched FHRS in October 2013. Discrepancies in the data presented on the consumer facing website had been identified by the FHRS team and notified to the LA prior to the audit. The Service had taken action to resolve the anomalies to ensure it was in accordance with the Agency's FHRS 'Brand Standard' guidance. Auditors discussed the need to avoid any potential confusion for the consumer by considering removing any references to earlier schemes and associated terminology from the website and consumer guidance in accordance with the 'FHRS Top Tips' guidance for local authorities.

Verification visit to a Food Premises

- 3.3.13 A reality visit was made to a delicatessen with an officer from the Business Team. Whilst the officer had not carried out the last inspection at the premises they were familiar with the operations carried out and able to demonstrate a good knowledge of the premises and the FSMS in place. Auditors advised that the level of detail recorded on the aide-memoire for the most recent inspection did not provide sufficient detail to confirm that the officer had adequately assessed business compliance.

Recommendations

3.3.14 The Authority should:

- (i) Carry out interventions/inspections at all food hygiene establishments at a frequency specified by the Food Law Code of Practice, and continue to prioritise the highest risk premises for interventions.
[The Standard - 7.1]
- (ii) Carry out interventions and inspections and approve relevant establishments in accordance with relevant legislation, the Food Law Code of Practice and Practice Guidance, and centrally issued guidance.
[The Standard - 7.2]
- (iii) Ensure that inspections of food establishments adequately assess the compliance of establishments and systems to legally prescribed standards.
[The Standard – 7.3]
- (iv) Set up, maintain and implement documented procedures for the range of intervention and inspections carried out. [The Standard - 7.4]
- (v) Ensure that observations made and data obtained during interventions are recorded in a timely manner and maintain up to date and accurate records in retrievable form on all food law enforcement activity in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard - 7.5 and 16.1]

3.4 Enforcement

- 3.4.1 The Health and Environmental Services Enforcement Policy had been approved by the Council in 2008 and took account of the Enforcement Concordat and the Regulators Compliance Code. Auditors were informed the Authority is currently consulting on an updated corporate enforcement policy. No procedures were available at the time of the audit for the range of food law enforcement action an Authority may undertake.
- 3.4.2 The Authority reported that there had been no food seizures or detentions, hygiene emergency prohibition notices, simple cautions or prosecutions in the two years preceding the audit.
- 3.4.3 Audit checks on file records for formal enforcement activities undertaken were carried out which included five food hygiene improvement notices (HIN's) and four voluntary closures.
- 3.4.4 In respect of the HIN's examined it was evident none were drafted, served and followed up in accordance with the FLPG, with examples of:
- lack of clarity for the recipient as to the schedule of works to be carried out;
 - inappropriate legal references in relation to the contraventions observed;
 - examples of incomplete detail confirming if the food business operator had requested to extend the time limit of the HIN and if this had been agreed by the Authority;
 - failure to withdraw and reissue notices when time limits were extended;
 - Incomplete details concerning the record of service of some notices.
- 3.4.5 Auditors discussed the need for officers to receive further training on the drafting and service of notices and the need for management to carry out checks as part of their internal monitoring procedures and in accordance with the Authority's enforcement policy.
- 3.4.6 Records relating to voluntary closures did not confirm that appropriate procedures had been followed, in particular with regard to the food business operator signing a voluntary closure agreement and checks to ensure the premises remained closed.

Recommendations

3.4.7 The Authority should:

- (i) Set up, maintain and implement documented procedures for the full range of follow up and enforcement actions in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard - 15.2]
- (ii) Ensure that food law enforcement is carried out in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 15.3]

3.5 Internal Monitoring, Third Party or Peer Review

Internal Monitoring

- 3.5.1 The Authority had no documented internal monitoring procedure to detail how the Service monitored the food law enforcement activities carried out. There was evidence of quantitative monitoring being undertaken by the Service which included monthly one to ones with officers to discuss progress with work allocated. Monthly performance management reports were also produced which included trends in food related activities, in addition to qualitative quarterly reports to the Portfolio holder on business satisfaction with regulatory services surveys. There was no evidence however of any qualitative checks on records of food law enforcement activities undertaken.
- 3.5.2 Auditors discussed the need to develop and implement an internal monitoring procedure, to include thorough risk based monitoring of all the food enforcement activities carried out and to ensure complete records of internal monitoring activities were maintained.

Recommendations

3.5.3 The Authority should:

- (i) Set up, maintain and implement documented internal monitoring procedures in accordance with Article 8 of Regulation (EC) No. 882/2004, the Food Law Code of Practice and centrally issued guidance.
[The Standard -19.1]
- (ii) Verify the conformance of the Service with the Standard in the Framework Agreement, the Food Law Code of Practice, relevant centrally issued guidance and the Authority's own documented policies and procedures.
[The Standard -19.2]
- (iii) Ensure records of internal monitoring activities are maintained. [The Standard - 19.3]

Food and Food Premises Complaints

- 3.5.4 The Authority had no policy and documented procedure for the investigation of food premises and food hygiene complaints. Auditors were advised reactive work was allocated by the Resource Team who

were provided with a complaint prioritisation matrix to ensure officers were only allocated complaints they were authorised to investigate.

- 3.5.5 It was not clear from five records checked that all complaints had been appropriately investigated and relevant parties informed of progress of the complaint. Two complaints related to suspected food poisoning associated with food premises. In one complaint there was no evidence of follow-up to investigate at the premises following reporting of a potential outbreak and in the second complaint the due inspection was not brought forward, and when inspected no reference was made to the complaint or of contact with the complainant.
- 3.5.6 There was evidence of effective follow-up on one complaint however it was not clear if the complainant had been advised of the outcome of the investigation. It was also not evident that all the complaints had been linked to the appropriate premises database record, which would inform a graduated approach to enforcement.
- 3.5.7 There was no record of internal monitoring on the files examined.

Food Inspection and Sampling

- 3.5.8 Auditors were advised that the Service was in the process of updating the sampling policy and procedures and that no sampling of foodstuffs had taken place due to insufficient resources and other priorities following the restructure. Auditors discussed the FLCoP requirement for effective routine food sampling to feature as part of a well-balanced food service and to develop a sampling policy and programme which detailed the intended sampling priorities based on an assessment of risk within the Authority's area.
- 3.5.9 Auditors were informed the Service intended to undertake sampling as part of this year's work programme and discussed the need to include detail of the planned programme in the Service Plan. Auditors were also advised the Service was not a current user of the United Kingdom Food Surveillance System (UKFSS) and discussed the support provided by the Agency for local authorities who used the system.

Records

- 3.5.10 Auditors were advised the Authority was moving away from paper files towards electronic records. Whilst records were in general easily retrievable, there were instances where documents requested for audit could not be found. Of the records examined, auditors found there was a variable level of detail recorded on food law enforcement activities, the absence of which makes it difficult to demonstrate graduated approach to enforcement and facilitate effective internal

monitoring. The overwriting of information on previous inspection reports was also not clearly distinguished to make clear what standards had been observed on each occasion.

Third Party or Peer Review

- 3.5.11 Auditors were advised that the Authority had not recently participated in any inter-authority audit or peer review initiative and none was planned for the forthcoming year.
- 3.5.12 The Authority was however, an active participant in the Cambridgeshire and Peterborough Food and Health and Safety Liaison Group.

Auditors: **Christopher Green**
Yvonne Robinson

Food Standards Agency

Operations Assurance Division

ANNEX A Action Plan for South Cambridgeshire District Council

Audit date: 1 - 3 July 2014

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.1.6 Further develop the Food Service Plan in accordance with the Service Planning Guidance in the Framework Agreement, to include details of the proposed food premises interventions and sampling programme for the year and a clear comparison of the resources required to carry out the full range of statutory food law enforcement activities against the resources available to the Service. [The Standard – 3.1]</p>	<p>31/10/14 31/03/15</p>	<p>Service Plan reviewed in light of comments made. Comments incorporated into plan that will be put to Portfolio Holder by end of October 2014.</p>	<p>Service Plan amended. Officer tasked to identify sampling programme and decide most appropriate action for the Authority.</p>
<p>3.1.9 Set up, maintain and implement a control system for all documentation relating to its enforcement activities. [The Standard - 4.2]</p>	<p>31/03/15</p>	<p>A management document will be developed that will hold all relevant information as to current authorised officers and levels of authorisations, latest FLCoP, procedures for relevant inspections, enforcement, complaints etc. This will be in the form of an electronic folder stored in a central drive for all officers and managers to refer to and update and be kept up to date by the lead food officer.</p>	<p>Matter raised at team meeting.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.1.16(i) Set up, maintain and implement a documented procedure for the authorisation of officers based on their competence and in accordance with the Food Law Code of Practice and any centrally issued guidance. [The Standard - 5.1]</p>	<p>31/11/14</p>	<p>To develop a matrix identifying officers and competencies over a rolling year and to ensure competencies maintained through regular supervision meetings and recording of CPD. The process will be incorporated into the annual and half yearly appraisal and reviewed via 1:2:1 as part of a qualification and development plan. Work will be allocated according to authorisations. All authorisations to be kept up to date by lead food officer as part of management document see 3.19.</p> <p>Review current settings on software system to reduce risk of jobs being issued to officers incorrectly (linked to 3.1.9 above).</p> <p>Lead food officer/manager to implement a six monthly review and record as part of staff appraisal and management control document to record level of authorisations.</p>	<p>Officers asked for current certificates and details of relevant training over last 12 months and individual training matrix to be discussed as part of interim appraisals in October.</p> <p>Qualification and development plan produced.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.1.16(ii) Ensure that the officer appointed to have lead responsibility for the enforcement of food hygiene legislation has the relevant qualifications and specialist knowledge. [The Standard - 5.2]	30/03/15	Recruit an experienced officer to undertake the role of lead food officer.	Role advertised and recruitment selection taking place. No suitable candidates applied – due to re advertise in November 2014.
3.1.16(iii) Ensure that the level of authorisation and duties of officers is consistent with their qualifications, training, and experience in accordance with the Food Law Code of Practice. [The Standard - 5.3]	31/11/14	Regular use of qualifications and development plan via 1:2:1 and appraisal system. Current authorisations to be reviewed and updated/amended as appropriate.	Next appraisals due in October 2014, collation of current qualifications and authorisations taking place. Managers regularly (weekly) review of jobs to act as safety check to reduce risk until such time as system can be looked at in full.
3.1.16(iv) Ensure that all officers involved in food hygiene law enforcement activities receive sufficient relevant training in accordance with the Food Law Code of Practice. [The Standard - 5.4]	Completed	All staff currently undertaking activities will record CPD and training as part of the 1:2:1 and appraisals with line manager via use of the qualifications and development plan.	Review of all jobs allocated to officers has taken place to ensure compliance with the FLCoP. Managers review workloads and allocate jobs for accuracy and compliance.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.1.16(v) Maintain records of relevant qualifications, training and experience of each authorised officer in accordance with the Food Law Code of Practice. [The Standard – 5.5]</p>	<p>01/11/14</p>	<p>Qualifications and CPD matrix to be developed and maintained by resources team with input after approval by line manager (ie manager to approve training as relevant before resources team complete the matrix).</p> <p>Officer competencies to be cross referenced to FLCoP restrictions (ie ensure officers only inspect premises they are competent to do).</p> <p>Records to be kept centrally and reviewed via 1:2:1/half yearly appraisals.</p>	<p>Good practice sought from other authorities and areas of other professional expertise within the authority.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.2.6 Develop, maintain and implement a documented procedure to ensure that the food premises database is accurate, reliable and up to date. [The Standard – 11.2]</p>	<p>31/03/15</p>	<p>Further review software system and process for inputting data - possible new coding to identify vacant business premises.</p> <p>Clear written process for officers to follow when inputting data. Via the management control document to be developed as part of recommendation 3.19.</p> <p>Aim to undertake coding review on database system to ensure accurate recording of enforcement activities. Possible corporate wide review of software systems may take place which could affect this – current contract expires March 2016. Re training of resource team/officers to ensure correct coding.</p> <p>Liaise with Business rates, to provide a regular (monthly if possible) list of new businesses to be cross referred with food registrations recorded on the database.</p> <p>Further develop existing protocols with Trading Standards to assist in business identifications/new businesses etc.</p>	<p>Approach made to Business rates – awaiting response.</p> <p>Discussions taking place with Trading Standards regarding development of an intel role across the two services.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.3.14(i) Carry out interventions/inspections at all food hygiene establishments at a frequency specified by the Food Law Code of Practice, and continue to prioritise the highest risk premises for interventions. [The Standard - 7.1]</p>	<p>31/03/15</p>	<p>Provisions to be put in place with external agency if extra staff required.</p> <p>Review of software system to assist in clearly highlighting interventions approaching the required inspection date or any that have become overdue.</p> <p>Ensure that new businesses are inspected/contacted and initial risk assessment within 28 days, monitored via monthly 1:2:1's.</p> <p>Review software system to help officers clearly identify premises that may be close to the time limits for inspection/intervention.</p>	<p>Officers now instructed to carry out interventions as per FLCoP.</p> <p>Work being monitored via monthly 1:2:1.</p> <p>Provisions put in place to source inspections to external officers if concerns are raised over slippage.</p> <p>Overall review of software system to assist in monitoring and management.</p> <p>Investigation taking place to see if the software system can be amended to flag up premises that are close to target deadline ie 7 days before the 28 day period expires.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.3.14(ii) Carry out interventions and inspections and approve relevant establishments in accordance with relevant legislation, the Food Law Code of Practice and Practice Guidance, and centrally issued guidance. [The Standard - 7.2]</p>	<p>31/12/15</p>	<p>Review the inspection sheets and re-educate officers to ensure all relevant sections are completed. Monitor via 1:2:1's and peer review to ensure consistency.</p> <p>Move to electronic based inspections that would be able to prevent officers from completing work until all identified information is entered.</p> <p>Qualitative reviews will take place via team meetings to ensure consistency of approach to inspections. Where issues are raised accompanied inspections or shadowing will take place and be documented.</p> <p>Approved premises will be overseen by the lead food officer or in their absence the Operational Manager to ensure correct process followed as identified in the management control document to be developed.</p>	<p>Qualitative monitoring of inspections via both 1:2:1`s and team meetings to ensure consistent and correct information and approvals are recorded.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.3.14(iii) Ensure that inspections of food establishments adequately assess the compliance of establishments and systems to legally prescribed standards. [The Standard – 7.3]</p>	<p>31/12/14</p>	<p>Qualitative monitoring by manager of inspection sheets via 1:2:1 and team meetings/workshops where they will collectively benchmark each other's work.</p> <p>We will seek to engage other authorities or the food liaison group meetings to see if a benchmarking exercise has merit.</p>	<p>1:2:1 format changed to incorporate a qualitative and scrutiny aspect to work.</p>
<p>3.3.14(iv) Set up, maintain and implement documented procedures for the range of intervention and inspections carried out. [The Standard - 7.4]</p>	<p>31/01/14</p>	<p>Processes to be drawn up and made available through a central folder or cloud based host to ensure that officers are accessing current procedures and have a consistency of approach.</p>	<p>Preferred method is to use an existing (external information management system and update all procedures.</p> <p>In process of ensuring officers are able to access and are trained in the use of the existing information management system.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.3.14(v) Ensure that observations made and data obtained during interventions are recorded in a timely manner and maintain up to date and accurate records in retrievable form on all food law enforcement activity in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard - 7.5 and 16.1]</p>	<p>31/03/15</p>	<p>Officers have been instructed in the importance of ensuring information and data is recorded in a timely manner.</p> <p>Failure to input date within a reasonable time may be subject to disciplinary process subject to the Authority guidelines and procedures.</p> <p>Future monitoring will take place via:- 1:2:1`s, peer review meetings (part of team meetings) sample shadowing by lead food officer (when in post).</p>	<p>All outstanding work is now monitored via the manager/officer 1:2:1 system.</p> <p>Officers unable to comply without reasonable explanation may be subject to disciplinary process.</p>
<p>3.4.7 (i) Set up, maintain and implement documented procedures for the full range of follow up and enforcement actions in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard - 15.2]</p>	<p>31/01/14</p>	<p>Processes to be drawn up and made available through a central folder or cloud based host to ensure that officers are accessing current procedures and have a consistency of approach.</p>	<p>Preferred method is to use an existing host and update all procedures.</p> <p>In process of ensuring officers are able to access and are trained in the use of the existing information management system.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.4.7(ii) Ensure that food law enforcement is carried out in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 15.3]	31/01/14	<p>Managers to monitor through 1:2:1 meetings as part of qualitative approach.</p> <p>Lead food officer to become central point of contact for enforcement notices issued by FSA.</p> <p>Lead food officer to ensure monitoring of FSA website on a regular basis.</p> <p>Training issues are to be addressed with individual officers.</p>	<p>Duty resources team currently to act as point of contact to ensure that notices/urgent information sent by FSA is received and disseminated to appropriate officer/s promptly.</p> <p>Improvements in accordance with the FLCoP are being considered by team in respect of HINs/Voluntary Closures.</p>
3.5.3(i) Set up, maintain and implement documented internal monitoring procedures in accordance with Article 8 of Regulation (EC) No. 882/2004, the Food Law Code of Practice and centrally issued guidance. [The Standard -19.1]	31/12/14	<p>Use of 1:2:1</p> <p>Authorisation matrix.</p> <p>Qualification and development plan.</p> <p>Continued CPD.</p>	<p>Currently underway.</p> <p>Management control document being developed see recommendation 3.19.</p>
3.5.3(ii) Verify the conformance of the Service with the Standard in the Framework Agreement, the Food Law Code of Practice, relevant centrally issued guidance and the Authority's own documented policies and procedures. [The Standard -19.2]	01/11/14	<p>Seek authorities within food liaison group to benchmark with.</p> <p>Key role to audit and ensure conformity via lead food officer.</p>	<p>Interviews to appoint lead food officer underway.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.5.3(iii) Ensure records of internal monitoring activities are maintained. [The Standard -19.3]	31/03/15	Create method of recording to ensure that conformity checks have been carried out and discussed at managerial level	1:2:1 and team meetings are currently documented and any issues identified will be recorded for future reference/auditing.

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

- South Cambridgeshire District Council draft Service Delivery Plan 2014/15
- Commercial Team Premises Hygiene Inspection Record
- Food Hygiene Self-Assessment Questionnaires
- Complaints Prioritisation Matrix
- Health and Environmental Services Enforcement Policy
- Food Sampling Policy and Procedure
- Minutes of Environmental Services Portfolio meetings July 2013
- Minutes of meetings of Cambridgeshire and Peterborough Food and Occupational Health and Safety Managers Group Meeting (various dates 2013/2014)
- Minutes of Business Team meetings May 2014
- Officer authorisation, training and qualification records.

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

- General food premises inspection records
- Approved establishment file
- Food and food premises complaint records
- Formal enforcement records.

(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:

- Business and Communities Managers
- Lead Food Officer
- 1 Environmental Health Technical Officer
- ICT Support Officer

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"> • Food and Feed Law Enforcement Standard • Service Planning Guidance • Monitoring Scheme • Audit Scheme <p>The Standard and the Service Planning Guidance set out the Agency's expectations on the planning and delivery of food and feed law enforcement.</p> <p>The Monitoring Scheme 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 Audit Scheme the Food Standards Agency will be conducting audits of the food and feed law enforcement services of local authorities against the criteria set out in the Standard.</p>
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.