



**Report on the Food Law Enforcement Service's
Arrangements for Food Premises Database
Management, Food Premises Inspections
and Internal Monitoring**

Bromsgrove District Council

4 -5 June 2008

Foreword

Audits of local authorities' food law enforcement services are part of the Food Standards Agency's arrangements to improve consumer protection and confidence in relation to food. These arrangements recognise that the enforcement of UK food 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 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 Local Authority Food Law Enforcement and is available on the Agency's website at:
www.food.gov.uk/enforcement/.

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.

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/.

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

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1. Introduction

- 1.1 This report records the results of an audit under the headings of the Food Standard Agency Food Law Enforcement Standard focusing on the Authority's arrangements with regard to food hygiene enforcement for food premises database management, food premises inspections and internal monitoring at Bromsgrove District Council, and has been made available on the Agency's website at: www.food.gov.uk/enforcement/audits/. Hard copies are available from the Food Standards Agency's Local Authority Liaison 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 Regulation 7 of the Official Feed and Food Controls (England) Regulations 2007. This audit of Bromsgrove District Council was undertaken under section 12(4) of the Act as part of the Food Standards Agency's annual audit programme.
- 1.3 The Authority was selected for audit as part of the Food Standards Agency's programme of audits of local authority food law enforcement services, as it was a District Council, had not been audited in the past by the Agency and was representative of a geographical mix of 10 Authorities selected across England.

Scope of the Audit

- 1.4 The audit examined Bromsgrove District Council's arrangements for food premises database management, food premises inspections, and internal monitoring with regard to food hygiene law enforcement. The scope of the audit also included an assessment of the Authority's overall organisation, management and internal monitoring of other food hygiene law enforcement activities.
- 1.5 Assurance was sought that key authority food hygiene law enforcement service 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 in Burcot Lane, Bromsgrove on 4-5 June 2008.
- 1.6 The audit assessed the Authority's conformance against the requirements of the Standard which was adopted by the Food Standards Agency Board on 21 September 2000, (amended July 2004), and forms part of the Agency's Framework Agreement with local authorities. The Framework Agreement can be found on the Agency's website at www.food.gov.uk/enforcement/.

Background

- 1.7 Bromsgrove District Council is in north Worcestershire, covering an area of approximately 84 square miles with a population of approximately 90,000. Ninety per cent of the District is greenbelt. Despite its predominantly rural nature, the District enjoys good road and rail transport networks and many residents commute out to work, particularly to Birmingham. The closure of the MG Rover factory at Longbridge in April 2005 has resulted in major redevelopment plans for the site in addition to those for Bromsgrove town centre.
- 1.8 Food hygiene law enforcement was the responsibility of the Commercial Regulation Team within Planning and Environmental Services. The Team was also responsible for enforcing health and safety and smoke free legislation and infectious disease control.
- 1.9 The Commercial Team was not responsible for the enforcement of food standards and feeding stuffs law enforcement, which was carried out by Worcestershire County Council Trading Standards Service.
- 1.10 The Authority's food hygiene inspection plan for 2007/2008, as reported in its monitoring returns made to the Agency for the financial year 2006/2007, indicated that the Food and Safety Team was responsible for enforcing food hygiene legislation in 616 premises. These food businesses were predominantly within the catering (73%) and retail sectors (21%). The returns also indicated that the Authority had carried out:

Enforcement Activity	Number
Food hygiene inspections	272
Other visits	105
Revisits	98
Advisory and sampling visits	21
Establishments subject to Hygiene Improvement Notices	0
Seizures, detentions and surrenders	0
Informal samples	0
Official Samples	9

2. Executive Summary

- 2.1 The food law enforcement service had undergone an unsettled period of management since the end of 2006 as there was no team leader effectively in post until the beginning of 2008 when a new manager was appointed. The auditors were advised that this had impacted on the Service's general performance in the intervening period.
- 2.2 The Authority had a Food Service Plan for 2008/2009 which was broadly in line with the Service Planning Guidance in the Framework Agreement on Food Law Enforcement. Future service planning could benefit from the inclusion of all aspects of the Service Planning Guidance, including the requirement to review the previous year's planned performance. In addition there was no evidence that the Service Plan had been submitted for Member approval.
- 2.3 The Authority acknowledged that there were problems with the food premises database and the ability of the Service to produce reliable management reports. These problems prevented the collation of reliable information for internal operational and management purposes, and required significant and time consuming manual data checks before the submission of statistical monitoring data to the Agency to ensure the information was accurate and complete. The operation of the database also impeded the ability of the Commercial Team Leader to carry out effective qualitative and quantitative monitoring of officers' activities. The Authority was in the process of transition to a new database system as part of a wider corporate initiative. It was recognised that there was a need to ensure the accuracy of information transferred over to the new database so as not to perpetuate problems identified with the existing system.
- 2.4 Due to the difficulties in producing verifiable information on inspection activity from the database, it was not possible to confirm that inspection frequencies were being met by the Authority, although checks on file and database records indicated that inspections of higher risk premises were generally being carried out at the correct frequency required by the Food Law Code of Practice. Records confirmed that officers were carrying out comprehensive inspections and providing detailed records of findings. Inspection procedures and the aide-memoire used to record the details of inspections required updating to reflect current legislation, centrally issued guidance and internal Authority policy.
- 2.5 The Authority had a procedure for the authorisation of officers based on a competency assessment. This required further development to provide more detail on the basis upon which individual officers are appropriately authorised in relation to their ability, qualifications, experience and responsibilities. Furthermore, the officers' schedules

of authorisation were generic in nature and did not reflect the assessment of competence carried out on each individual officer.

- 2.6 An internal monitoring procedure had been produced, although this required review to reflect current and intended procedures for both qualitative and quantitative monitoring. There had been limited monitoring activity in place during the time that the team leader post was vacant, and although internal monitoring had begun to be implemented by the new manager, this needed to be expanded to cover all areas of food law enforcement activity.

3. Audit Findings

3.1 Organisation and Management

Strategic Framework, Policy and Service Planning

- 3.1.1 A Food Service Plan for 2008/2009 had been drafted. This supported the Planning and Environment Service Business Plan 2008/2009 which set out the overall objectives for the service. The auditors were advised that the appropriate portfolio holder would be made aware of the plan and performance against it through a monthly performance report from the Head of Planning and Environment Services, however there was no evidence that the Food Service Plan had been approved by Members.
- 3.1.2 The Food Service Plan contained most of the information set out in the Service Planning Guidance in the Framework Agreement. Future Service Plans would benefit from details of the financial allocation for the Service and confirmation of its policy in relation to the implementation of alternative enforcement strategies.
- 3.1.3 The Plan stated that there would be an annual review, which would include information on the previous year's performance. There was however no information in the latest plan of a review of the 2007/2008 plan, nor how any variances from it would be addressed.
- 3.1.4 The Planning and Environment Service Business Plan 2008/2009 contained a number of 'key deliverables' for the year, which included the objective to 'improve compliance with Environmental Health enforced legislation throughout the district through targeted proactive inspection programmes and enforcement interventions'. The Food Service Plan for 2008/2009 contained 3 specific strategic objectives for the food safety service:
- To enforce relevant statutory provisions in accordance with current principles of enforcement practice;
 - To respond in accordance with our corporate customer standards, with requests for service from members of the public, elected members, businesses and others; and
 - To ensure the safety of foodstuffs that are manufactured, processed, stored or sold in Bromsgrove and through fair and consistent enforcement to provide a level playing field for business so as to support and sustain a strong and expanding economy.

3.1.5 The staffing allocation to deliver the Food Safety Service was detailed in the draft Service Plan:

Staffing allocation	Full time equivalent
Team Leader (Commercial Regulation)	1.0
Environmental Health Officers	4.0

3.1.6 The auditors were advised that the Team Leader (Commercial Regulation) had been appointed in January 2008, although previous to this there had been no manager effectively in post since November 2006. In response to this situation a rationalisation of the inspection programme had taken place, so that category D premises were not routinely inspected and category C premises could be inspected at any point during the financial year that they were due, a policy contrary to the Food Law Code of Practice. The Food Service Plan for 2008/2009 stated that in addition to the inspection of all category A and B premises, all category D premises would be inspected and that resource would be directed towards making all category C food businesses broadly compliant with food safety legislation.

Recommendation

3.1.7 The Authority should:

Ensure that the Food Service Plan is drawn up in full accordance with the Service Planning Guidance in the Framework Agreement, and is submitted for appropriate Member approval. The plan should include a review of the previous year's performance and details of how any variances will be addressed in the subsequent year's service planning arrangements. [The Standard – 3.1, 3.2 & 3.3]

Documented Policies and Procedures

3.1.8 The Authority did not have a system for the regular review of documented policies and procedures. With the exception of the procedure on the investigation of notifiable diseases, all the policies and procedures were several years out of date and contained references to superseded legislation and statutory guidance. In addition the procedures did not reflect current practice within the Service.

3.1.9 Policies and procedures relating to reactive work and formal enforcement were examined as part of the audit and it was found that they did not cover all aspects of the food law enforcement service and further procedures needed to be developed on a range of enforcement actions such as the service of hygiene improvement

notices, remedial action and detention notices at approved establishments, voluntary surrender and seizure, voluntary closure and hygiene emergency prohibition. Procedures on the investigation of food and food premises complaints and the approval and inspection of approved establishments were also required.

- 3.1.10 The Service had an enforcement policy which had been produced in 2002. The policy contained a number of out of date references to legislative procedures and it was acknowledged by the Authority that the policy required updating. The auditors were advised that the Herefordshire and Worcestershire Chief Environmental Health Officer's Group had requested a common generic enforcement policy, with specific policies covering individual subject areas, including food enforcement. The Herefordshire and Worcestershire Food Liaison Group was in response reviewing and updating its existing policy which would be adapted and adopted locally by the Authority.
- 3.1.11 The officers had access to up to date versions of legislation and statutory guidance via an on-line technical information service.

Recommendations

3.1.12 The Authority should:

- (i) Ensure that documented procedures for inspections, follow-up and enforcement actions are developed and implemented to cover the full range of food law enforcement activities, in accordance with the Food Law Code of Practice and official guidance. [The Standard – 15.2]
- (ii) Review the documented enforcement policy to ensure it is up to date and reflects current official guidance. [The Standard – 15.1]
- (iii) Develop a document control system to ensure that internal food hygiene policies and procedures are up to date by their review at regular intervals and whenever there are changes to legislation and official guidance. [The Standard – 4.2]

Officer Authorisations

- 3.1.13 The Authority's procedure for the authorisation of officers was set out in a flowchart within the enforcement policy. This stated that the Head of Service was delegated to authorise individual officers having due regard to the officer being able to demonstrate through qualification, training or experience that they were able to satisfactorily and competently enforce the legislation. The procedure did not set out the means of assessment or the criteria against which the officer would be assessed.

- 3.1.14 Each officer was issued with a generic schedule of authorisation, which did not reflect the scope and limits of the individual officer's assessed competency, as newly qualified and experienced officers' schedules were identical in content.
- 3.1.15 Officers' individual learning and development needs were routinely assessed and recorded as part of the Authority's performance review process. Individual training requirements and any identified team training needs had not however been drawn together into a training programme for the service.
- 3.1.16 An examination of the records of officer training indicated a need for the Authority to ensure that all officers had received appropriate training in formal enforcement procedures, hazard analysis and critical control points (HACCP) and where appropriate, the inspection of specialist or complex processes. In addition, the records for 1 officer indicated that they had not received any update training in food safety matters since 2006, and had therefore not received the minimum 10 hours of training in food safety matters as required by the Food Law Code of Practice.

Recommendations

- 3.1.17 The Authority should:
- (i) Review and revise the Service's documented procedure for the authorisation of officers to detail the competency assessment process by which authorisations are conferred, based on an officer's individual qualifications, training and experience and ensure that officers' schedules of authorisation reflect the extent of each individual officer's authorisation. [The Standard – 5.1]
 - (ii) Ensure that all staff authorised to carry out food law enforcement work undergo sufficient training consistent with their duties and in accordance with the Food Law Code of Practice. [The Standard – 5.3]
 - (iii) Implement and maintain a documented training programme to ensure that officer and team training needs in respect of food law enforcement are met. [The Standard – 5.4]

3.2 Food Premises Database

- 3.2.1 The Service, as part of a wider corporate initiative, was in the process of changing the food premises database system which was due to become operational in August 2008. The Team Leader also had a role as the database systems manager and was undergoing specific training in the new database to be able to configure the system and run management reports. Currently the Service relied upon the knowledge of an officer in another team to run management reports on the existing system on behalf of the Commercial Team. This arrangement provided limited systems support and restricted the Service's ability to make full use of the reporting capabilities available on the system.
- 3.2.2 The Authority had a documented procedure on the registration of food premises, which included the need to enter details onto the database, although there was no documented procedure or practical measures in place for checking the accuracy of the database. The auditors were advised that such a procedure would be drafted and implemented as part of the introduction of the new database system.
- 3.2.3 The database was updated as new registration forms from food businesses were received, or in response to information gained from officers' observations on the district or from planning applications which had been submitted to the Council. The database contained 5 out of 6 food premises that were randomly chosen from an on-line directory accessed through an internet search engine. The 5 premises were also included in the Authority's inspection programme, although one of the premises did appear to have closed.
- 3.2.4 It was possible that the method adopted by the Authority for closing premises on the database may have been adversely affecting the data submitted for the monitoring returns to the Agency. Due to apparent difficulties in closing premises on the database, a system of assigning such premises a category E risk rating had been adopted, so they would fall under those premises subject to alternative enforcement and would not be routinely inspected. As a result these premises appeared on database management reports produced for the audit as being part of the inspection programme and with a future inspection date.
- 3.2.5 Checks on the database also revealed that following secondary inspections of at least 2 premises a new risk rating had been assigned. This was not in accordance with the requirements of the Food Law Code of Practice and had resulted in the date of the next primary inspection for these premises being extended.
- 3.2.6 There were measures in place to restrict access for individuals to add or remove premises from the database system and there were some mandatory fields that needed to be completed when entering

inspection details or records of other enforcement activities. It was intended that all officers would receive training in the new system prior to its introduction, including data inputting.

- 3.2.7 For the purposes of the audit, the Authority was asked to provide a range of database management reports, however a number of difficulties were encountered in producing the requested reports during the time the auditors were on site and 3 reports were subsequently forwarded on to the auditors. One of the premises on a list of unrated premises produced for the purposes of the audit was in fact a category A premises, however because the details of the latest inspection had been wrongly entered onto the system, it was logged as being unrated and excluded from the list of inspections due. It was also not possible for the Authority to produce a reliable report of premises that were overdue an inspection at the time of the audit.
- 3.2.8 The difficulties encountered in producing meaningful database management reports cast doubt on the ability of the Authority to provide accurate monitoring returns to the Agency. The auditors were advised that significant manual checks were also required to verify the data produced for the Agency's returns. Whilst there will be an opportunity to start afresh with the planned transition to a new database system, there will need to be careful management of the data that is transferred over to the new database to ensure that the problems that are currently being encountered are not perpetuated in the new system.

Recommendations

- 3.2.9 The Authority should:
- (i) Ensure that the electronic record administration system is configured, managed and operated in such a way that the Authority is able to provide accurate statistical data in the official monitoring returns to the Agency. [The Standard – 6.4]
 - (ii) Set up, maintain and implement a documented procedure to ensure that the food premises database is accurate and kept up to date. [The Standard – 11.2]

3.3 Food Premises Inspections

3.3.1 The Authority's Service Plan for 2008/2009 provided a profile for food hygiene premises, which included the 5 premises that had been approved by the Authority under product specific regulations:

Risk category	No.	% *
A	8	1.5
B	81	13.5
C	296	50.0
D	52	9.0
E-F	133	22.0
Outside programme	25	4.0
TOTAL	595	

* Figures to the nearest 0.5%

3.3.2 The most recent monitoring return to the Agency for April-December 2007/2008 indicated that there were 681 food premises in the District, however the form was submitted with a comment that the Council was changing its database system and the return relied heavily upon the accuracy of the data in the current system.

3.3.3 The Authority had a food hygiene inspection procedure, however this had been produced in 2001 and did not reflect current practice or centrally issued guidance.

3.3.4 The files for 5 higher risk general hygiene inspections were examined during the audit. Inspection reports and/or follow-up letters were provided to food business operators in all cases where inspections had been carried out. Officers also carried out secondary inspections as appropriate to ensure that required works had been satisfactorily completed. It was evident from the files that officers were proactive in providing support and guidance to assist food businesses in complying with current legislation and relevant guidance, although it was not always clear from the report of inspection form left with the food business operator (FBO) at the end of the inspection whether items drawn to their attention were legal requirements or recommendations of good practice. These were always clearly distinguished in any follow-up letters sent to the FBO.

3.3.5 An inspection aide-memoire was used to record the details of food premises inspections, however this needed to be updated as it required the officer to assess the adequacy of businesses' hazard analysis systems, a requirement which was superseded by the new hygiene Regulations implemented in 2006. This resulted in the records not always recording the officer's assessment of the progress of the business in complying with procedures based on HACCP as required under the new hygiene Regulations. In general, adequate

information had been recorded in relation to the nature and scale of the businesses' activities, their history of compliance and information on the extent of food hygiene training of food handlers.

- 3.3.6 It was not possible during the audit to fully confirm that inspections were being carried out to at least the minimum frequency required by the Food Law Code of Practice, as reliable database management reports could not be produced. The reports that were provided indicated that generally inspections did appear to be at the correct frequency and within 28 days of the due date of inspection, however there appeared to be a category A premises that was 4 ½ months overdue an inspection, and a category C premises 4 ½ years overdue. Audit checks on the last 3 inspections of 5 premises indicated that 3 had been inspected at the correct frequency, however in 2 premises, although the most recent inspections were carried out when due, historically the premises had not been inspected at the correct frequency. This may partly be attributed to a previous policy adopted by the Authority that category C premises could be inspected at any point within the financial year that they were due, which was not in accordance with the requirements of the Code of Practice.
- 3.3.7 In response to the absence of a substantive team manager in post since November 2006, the Authority had adopted a policy of not inspecting category D premises. The Authority recognised that this policy may have resulted in some premises which had not been inspected for some time potentially becoming higher risk due to changes in the extent or type of food preparation or due to changes in ownership or management of the food business. This decision had been reversed in the 2008/2009 Food Service Plan and there was a statement that all category D premises would be visited in the year to receive either an official control or other intervention as appropriate.
- 3.3.8 The file and database records for 3 product-specific premises requiring approval under Regulation (EC) No. 853/2004 were examined. Records confirmed that the Authority's officers had assessed compliance of relevant establishments under the new Regulations and approval documents had been reissued to confirm that the establishments complied with the new Regulations.
- 3.3.9 The file records for the approved establishments were somewhat disorganised, and records were not easily retrievable. In addition the files did not contain all the information on the premises as recommended in Annex 12 of the Food Law Practice Guidance. File records did not readily distinguish between primary and secondary inspections including their scope, and a product specific inspection form had not always been used. The use of an appropriate inspection aide-memoire would assist the Authority in covering all relevant areas and in clearly demonstrating that establishments have been assessed against all the requirements of European Regulation 853/2004.

Recommendations

3.3.10 The Authority should:

- (i) Ensure that food hygiene inspections are carried out at a frequency which is not less than that required by the Food Law Code of Practice. [The Standard – 7.1]
- (ii) Maintain up to date and comprehensive records for all food premises including approved establishments information, and determination of compliance with legal requirements and details of action to be taken where non compliance was identified. [The Standard – 16.1]

3.4 Internal Monitoring, Third Party or Peer Review

Internal Monitoring

- 3.4.1 There had been limited regular quantitative and qualitative monitoring activity within the Service due to the vacant Team Leader post from November 2006. The new manager had been in post since January 2008 and had begun to implement both qualitative and quantitative monitoring measures on some aspects of food law enforcement activity. It was acknowledged that this needed to be expanded across all areas of the Service.
- 3.4.2 The Authority had a procedure on Monitoring Consistency in Food Inspection and Enforcement, but this had not been reviewed since 2001 and did not completely reflect current practice. The Team Leader advised that he intended to revise the procedure to more accurately set out his intended internal monitoring activities across all aspects of Service activity.
- 3.4.3 Of the records of the 5 general food hygiene inspections and 3 inspections of approved establishments examined during the audit, there was no evidence of any internal monitoring activity. There was however, evidence that the Team Leader had introduced a programme of accompanied inspections with officers, the outcomes from which were documented and discussed with officers during regular 1:1 meetings. In addition there was evidence from the minutes of monthly team meetings that issues of consistency were discussed.
- 3.4.4 The auditors were advised that there was no specific monitoring of achievement against the inspection plan for the year, although quantitative monitoring of the progress of officers against their individual monthly inspection targets was carried out and discussed during individual 1:1 meetings.
- 3.4.5 There were no internal monitoring checks carried out by the Service on the accuracy of the database, in part due to the difficulties in extracting reliable management reports from the system. There were a number of repeated issues highlighted during the audit (detailed previously in this report), in relation to the means by which information on inspections was recorded on the system, resulting in inappropriate or missing next inspection dates. Routine internal monitoring of the database system could have identified these errors.
- 3.4.6 Checks were made by the auditors on a range of food law enforcement activities that the Service had undertaken. There was no evidence of any qualitative or quantitative internal monitoring activity in place apart from on the files for 3 prosecutions that were examined during the audit. These demonstrated that the prosecutions were appropriate in the circumstances, there was evidence that the enforcement policy had been considered, and action taken in line with

the policy. All the files provided detailed and well ordered records of the action taken and progress of the prosecution case.

- 3.4.7 Checks were made by the auditors on the records of 3 hygiene improvement notices served following inspections. A lack of internal monitoring by the Service may have contributed to some errors on the notices. On the 2 notices served on the implementation of HACCP procedures, the measures to be taken to address the contraventions were in part continuous in nature and therefore did not have a finite date for compliance. None of the notices contained details of where the local court was sited, and in 1 there was no evidence of written communication with the FBO to confirm that the required works had been satisfactorily completed. The auditors were advised that internal monitoring of all notices would now take place as routine, however no notices had been served since the Team Leader had taken up post.
- 3.4.8 Although there was no evidence of internal monitoring checks by the Service, records examined demonstrated that thorough investigations had been carried out on food and food premises complaints and unsatisfactory sampling results, with appropriate follow-up action taken where necessary. The Authority did not have a documented food sampling programme, although the samples were either taken as a result of participation in the food liaison group yearly programme or as routine samples taken from approved establishments. The file for the voluntary closure of a premises was also examined and confirmed that appropriate action was taken.
- 3.4.9 Records of recent food alerts issued by the Food Standards Agency were examined. None of the alerts required action and there was evidence that they had been circulated to the team for information. There was no monitoring system in place at the time of the audit should action be required in response to food alerts.

Recommendations

3.4.10 The Authority should:

- (i) Review and expand the documented monitoring procedure to ensure it covers quantitative and qualitative monitoring of the full range of food law enforcement activities, including details of the frequency, responsibilities and approach to internal monitoring. [The Standard – 19.1]
- (ii) Ensure that the internal monitoring procedure is implemented to verify the conformance of the Authority with relevant legislation, the Food Standards Agency Code of Practice, relevant centrally issued guidance and the Authority's own documented policies and procedures. [The Standard – 19.2]

Third Party or Peer Review

3.4.11 There had been no inter-authority audit scheme in place in the 2 years preceding the audit. The Authority had participated in a risk rating consistency exercise in 2007 organised by the Herefordshire and Worcestershire Food Group as part of preparation for the launch of a 'Scores on the Doors' scheme. In addition the Authority had participated in a benchmarking exercise in 2006 on Best Value Performance Indicator 166, which included a food hygiene enforcement element.

3.4.12 The Authority had been reaccredited for Investors in People status in 2008 for a further 3 year period.

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Food Standards Agency
Local Authority Liaison Division

Action Plan for Bromsgrove District Council

Audit date: 4-5 June 2008

IMPROVEMENTS	BY (DATE)	TO ADDRESS RECOMMENDATION (INCLUDING STANDARD PARAGRAPH)	ACTION TAKEN
Food Service Plan for 2009/10 to be drawn up in accordance with the Service Planning Guidance in the Framework Agreement. This to include a review of performance during 2008/09 and measures to address any variances.	31/05/09	3.1.7 Ensure that the Food Service Plan is drawn up in full accordance with the Service Planning Guidance in the Framework Agreement, and is submitted for appropriate Member approval. The plan should include a review of the previous year's performance and details of how any variances will be addressed in the subsequent year's service planning arrangements. [The Standard – 3.1, 3.2 & 3.3]	Agreement of the Head of Service has been received for the plan to be presented to the Portfolio Holder for Housing and Environmental Health and Climate Change for agreement and the meeting to be documented.
Existing procedures to be revised and updated and new procedures to be written to ensure the full range of food law enforcement activities are covered.	30/06/09	3.1.12(i) Ensure that documented procedures for inspections, follow-up and enforcement actions are developed and implemented to cover the full range of food law enforcement activities, in accordance with the Food Law Code of Practice and official guidance. [The Standard – 15.2]	A review of documented procedures for inspections, follow-up and enforcement actions has been commenced and is being cross referenced with the newly issued Food Law Code of Practice to ensure the full range of food law enforcement activities are covered. Revised procedures to be placed on the intranet.
Current documented enforcement policy to be reviewed to ensure it is up to date and reflects current official guidance.	28/02/09	3.1.12(ii) Review the documented enforcement policy to ensure it is up to date and reflects current official guidance. [The Standard – 15.1]	A draft revised enforcement policy has been circulated amongst members of the Hereford and Worcester Food Liaison Group. This will be reviewed, adapted for local application and submitted to Members for approval and adoption.
A documented control system will be put in place to ensure policies and procedures are up to date and are reviewed at regular intervals and when there are changes to legislation and official guidance.	30/11/08	3.1.12(iii) Develop a document control system to ensure that internal food hygiene policies and procedures are up to date by their review at regular intervals and whenever there are changes to legislation and official guidance. [The Standard – 4.2]	All revised and newly drafted documents will be placed on the intranet to aid document control and will be reviewed in April each year or when there are changes to procedures, legislation and official guidance. Each review will be documented.

<p>The Service's documented procedure for the authorisation of officers to be reviewed and revised. This will include the introduction of a competency matrix for officers.</p>	<p>28/02/09</p>	<p>3.1.17(i) Review and revise the Service's documented procedure for the authorisation of officers to detail the competency assessment process by which authorisations are conferred, based on an officer's individual qualifications, training and experience and ensure that officers' schedules of authorisation reflect the extent of each individual officer's authorisation. [The Standard – 5.1]</p>	<p>A competency matrix for officers will be introduced which will be cross referenced with the newly issued Food Law Code of Practice to ensure it is comprehensive. Officers' individual schedules of authorisation will then be reviewed to ensure they are in accordance with the competency matrix having regard to the individual officers' qualifications, training and experience.</p>
<p>A procedure will be introduced to ensure that all staff authorised to carry out food law enforcement work have undergone sufficient training consistent with their duties and in accordance with the Food Law Code of Practice.</p>	<p>31/03/09</p>	<p>3.1.17(ii) Ensure that all staff authorised to carry out food law enforcement work undergo sufficient training consistent with their duties and in accordance with the Food Law Code of Practice. [The Standard – 5.3]</p>	<p>A competency matrix for officers will be drawn up which will be cross referenced with the newly issued Food Law Code of Practice to ensure it is comprehensive. A training needs analysis will be undertaken against the competency matrix to identify any additional training required. This will be reviewed and updated during annual Performance Development Review meetings, six monthly review and monthly one to one meetings.</p>
<p>Introduce a documented training programme to ensure that officer and team training needs in respect of food law enforcement are met.</p>	<p>31/03/09</p>	<p>3.1.17(iii) Implement and maintain a documented training programme to ensure that officer and team training needs in respect of food law enforcement are met. [The Standard – 5.4]</p>	<p>Following a training needs analysis a documented training plan will be produced which will cover team and individual officers' training needs. This will be updated annually following Performance and Development meetings and will be reviewed at six monthly review and monthly one to one meetings.</p>
<p>Introduce a new computer software package which will be used to maintain a food premises database and provide information required by the Food Standards Agency monitoring returns together with associated documented procedures.</p>	<p>31/10/08</p>	<p>3.2.9(i) Ensure that the electronic record administration system is configured, managed and operated in such a way that the Authority is able to provide accurate statistical data in the official monitoring returns to the Agency. [The Standard – 6.4]</p>	<p>A new computer software package is being introduced to the Council. This includes the Environmental Health modules which are currently being implemented. Training is being given to all operational staff in its use and documented protocols for the entry and management of data will be developed. Consultant time from the software supplier has been allocated to assist with this.</p>
<p>Produce and implement a documented procedure to ensure the food premises database is accurate and kept up to date.</p>	<p>30/11/08</p>	<p>3.2.9(ii) Set up, maintain and implement a documented procedure to ensure that the food premises database is accurate and kept up to date. [The Standard – 11.2]</p>	<p>The documented procedure will incorporate measures to ensure the database is up to date and also protocols relating to the entry of data relating to new premises to protect against the corruption of the database. Advice from consultants from the software supplier has been received in relation to this and comprehensive training of all staff in the use of the system is scheduled.</p>

<p>Introduce a new computer software package which will be used to manage the programme of interventions in food businesses to ensure food hygiene inspections are carried out at a frequency which is not less than that required by the Food Law Code of Practice.</p>	<p>30/09/08</p>	<p>3.3.10(i) Ensure that food hygiene inspections are carried out at a frequency which is not less than that required by the Food Law Code of Practice. [The Standard – 7.1]</p>	<p>The new computer software package will be used to generate the programme of interventions, record interventions undertaken and monitor performance against the agreed programme. Consultant time from the software supplier has been allocated to assist with this. A contingency budget has been identified to enable the employment of contractors to supplement the work of Bromsgrove District Council staff should this be necessary to complete the programme of interventions.</p>
<p>Existing records to be reviewed to ensure they are up to date and comprehensive including determination of compliance with legal requirements and action to be taken where non compliance is identified.</p>	<p>30/06/09</p>	<p>3.3.10(ii) Maintain up to date and comprehensive records for all food premises including approved establishments information, and determination of compliance with legal requirements and details of action to be taken where non compliance was identified. [The Standard – 16.1]</p>	<p>Existing electronic records are currently being reviewed as part of the migration to the new computer software package. Manual records will be reviewed as part of the introduction of an electronic document management system which is being implemented across the service in October 2008. Current recording practice is also being reviewed following the issue of the revised Food Law Code of Practice to ensure it remains in accordance with current requirements.</p>
<p>Existing procedures to be reviewed to ensure they cover quantitative and qualitative monitoring of the full range of food law activities undertaken.</p>	<p>30/06/09</p>	<p>3.4.10(i) Review and expand the documented monitoring procedure to ensure it covers quantitative and qualitative monitoring of the full range of food law enforcement activities, including details of the frequency, responsibilities and approach to internal monitoring. [The Standard – 19.1]</p>	<p>Existing internal monitoring of procedures to be reviewed as part of the implementation of the new computer software package and following the issue of the revised Food Law Code of Practice. New procedures will be introduced as necessary.</p>
<p>Implement an internal monitoring procedure to verify conformance with relevant legislation, the Food Standards Agency Code of Practice, relevant centrally issued guidance and internal documented policies and procedures.</p>	<p>30/06/09</p>	<p>3.4.10(ii) Ensure that the internal monitoring procedure is implemented to verify the conformance of the Authority with relevant legislation, the Food Standards Agency Code of Practice, relevant centrally issued guidance and the Authority's own documented policies and procedures. [The Standard – 19.2]</p>	<p>A comprehensive programme of both quantitative and qualitative internal monitoring will be introduced. This will include monitoring of electronic records (the advice of consultants from the software supplier has been sought on how to achieve this), monitoring of documentation, accompanied inspections and discussions with staff during one to one meetings.</p>

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.
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 geographic area and situated within a County Council whose responsibilities include food hygiene enforcement.
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 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 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 law enforcement.</p> <p>The Monitoring Scheme requires local authorities to submit quarterly returns 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 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 enforcement.

HACCP	Hazard Analysis 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.
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.
OCD returns	Returns on local food law enforcement activities required to be made to the European Union under the Official Control of Foodstuffs Directive.
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.
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.