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

High Peak Borough Council

10 -11 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 food premises 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/](http://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/](http://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 at High Peak Borough Council with regard to food hygiene enforcement, under relevant headings of the Food Standards Agency Food Law Enforcement Standard. The audit focused on the Authority's arrangements for the management of the food premises database, food premises inspections and internal monitoring. The report has been made available on the Agency's website at: [www.food.gov.uk/enforcement/audits/](http://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 High Peak Borough 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 High Peak Borough 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 at the Town Hall, Buxton, on 10-11 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/role/framework](http://www.food.gov.uk/enforcement/role/framework).

## Background

- 1.7 High Peak Borough Council is located in the Peak District National Park, in North Derbyshire, covering an area of approximately 53,915 hectares, with a population of approximately 92,000. The area is predominantly rural in nature, the main centres of population being concentrated around the towns of Glossop, Buxton, New Mills, Whaley Bridge and Chapel-en-le-Frith.
- 1.8 Food hygiene law enforcement was the responsibility of the Food and Safety Team of the Environmental Health Department, within the Community Services Directorate.
- 1.9 The Food and Safety team was not responsible for the enforcement of food standards and feeding stuffs law enforcement, which was carried out by Derbyshire 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 Safety Team was responsible for enforcing food hygiene legislation in 961 premises. These food businesses were predominantly within the catering (77%) and retail sectors (19%). The returns also indicated that the Authority had carried out:

<b>Enforcement Activity</b>	<b>Number</b>
Food hygiene inspections	408
Other visits	32
Revisits	12
Advisory and sampling visits	31
Establishments subject to Hygiene Improvement Notices	7
Seizures, detentions and surrenders	0
Informal samples	0
Official samples	0

## 2. Executive Summary

- 2.1 The food law enforcement service had undergone a recent period of change, due to a number of experienced staff leaving the Authority. The recruitment of experienced staff remained a problem for the Service, and the Authority was exploring the possibility of liaising with a neighbouring authority to help meet its statutory duties with regard to food safety.
- 2.2 The Authority had drafted 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, although there was no evidence that it had been submitted for Member approval.
- 2.3 The Authority's officer authorisation procedure required further development to provide a clear basis upon which officers can be appropriately authorised in relation to their individual qualifications, experience and responsibilities. Officers' schedules of authorisation were generic in nature and did not always reflect the individual assessments of competence carried out on each officer.
- 2.4 The Service's food premises database was well maintained and a network of information sources had been developed to ensure that its accuracy was maintained. The Service was able to provide detailed reports on its recent food safety activities.
- 2.5 The Authority had concentrated its resources on achieving compliance with an inspection target of 100% of all food premises due a food safety inspection. This target had been reported as achieved in 2007/2008 through the use of contractors, although this was at the expense of routine sampling activity.
- 2.6 General premises inspections were mostly conducted at the appropriate frequency, but approved establishments had not been inspected when due. There was insufficient detail provided on the report of inspections forms and inspection records to demonstrate that officers had fully assessed food premises against relevant legislation and centrally issued guidance. Approved establishments files contained extremely limited information and there was no evidence that these premises had been re-assessed against legislation in force since January 2006.
- 2.7 The quality of inspections and follow-up actions on unsatisfactory food businesses was a concern for the Authority. Records showed that a number of significant inspection and follow-up actions had been undertaken without due reference to the Authority's Enforcement Policy and the Food Law Code of Practice.

2.8 There was evidence of substantial quantitative monitoring to ensure that inspection targets were met, however there was no evidence of any qualitative monitoring across all service activities. The Authority had produced a new internal monitoring procedure covering most aspects of the Service, but this had not been fully implemented at the time of the audit.

### **3. Audit Findings**

#### **3.1 Organisation and Management**

##### *Strategic Framework, Policy and Service Planning*

- 3.1.1 A draft Food Service Plan for 2008/2009 had been produced but it had not received Member approval at the time of the audit. Previously, broad service aims, objectives and performance targets had been detailed in a long term Environmental Health Business Team Plan, the most recent of which covered the period 2008-2011. This Business Plan was annually reviewed by elected members.
- 3.1.2 The Business Plan set out the structure and organisation of the Food Safety Team, and a list of wider corporate aims based on protecting the community and environment. It did not however, contain any details regarding the full range of statutory duties or food safety activities undertaken by the Service.
- 3.1.3 The Business Plan contained 2 main quantitative performance indicators (PIs) regarding food safety, including a PI consistent with the new national indicator NI 184 on business compliance:
- The number of food establishments compliant (local target 80%);
  - The number of food premises inspections that should have been carried out that were carried out (local target 100%).
- 3.1.4 The performance target of 100% of planned inspections was derived from one of the overall corporate aims stated in the plan:
- “To improve the efficiency of the inspection programmes to achieve 100% of planned inspections and contacts within set timescales and enable reduced regulatory burdens on business”.*
- 3.1.5 Performance against the planned inspection target was reviewed on a monthly basis, the team manager making any adjustments to the inspection programme as necessary. This monthly monitoring was made available to Members in a monthly and annual report.
- 3.1.6 The draft Food Service Plan for 2008/2009 contained most of the information set out in the Service Planning Guidance in the Framework Agreement, however future Service Plans would benefit from a more detailed breakdown of the risk profiles of the food businesses in the area, and details of performance review against all relevant national indicators, for example the numbers of food businesses in the District that are broadly compliant with food hygiene legislation.

- 3.1.7 The draft Food Safety Service Plan 2008/2009 stated that there would be an annual review, which would include information on the previous year's performance, however there was no indication as to how any such variances would be addressed.
- 3.1.8 The staffing allocation to deliver the Food Safety Service was detailed in the draft Service Plan 2008/2009:

<b>Staffing allocation</b>	<b>Full time equivalent</b>
Team Manager	0.3
Environmental Health Officers	1.0
Environmental Health Technicians	1.0
Administrative Support	0.1
Contractors	As necessary
<b>Total</b>	<b>2.4</b>

- 3.1.9 The auditors were advised that a number of staff had left the food safety team in recent months, leaving one vacant FTE position. Auditors were further informed that difficulties in recruiting suitably qualified staff had led to the use of contractors to undertake lower risk inspections, in order to ensure that performance targets were met. The Service expressed concerns about the quality of inspections undertaken by contractors in its end of year Business Plan Report 2007/2008, and identified risks to the Council arising from the continued reliance on contractors to meet inspection targets. The lack of qualified staff had also meant that the Authority had not taken part in any routine sampling programmes in 2007/2008. The Authority had recently formed a formal Strategic Alliance with a neighbouring Authority, Staffordshire Moorlands District Council, aimed at introducing greater inspection efficiencies in both Authorities.

*Recommendation*

- 3.1.10 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*

- 3.1.11 The Authority had recently developed a new procedure for updating policies and procedures, although it had not been fully implemented at the time of the audit. Historically, the Service did not have a system for the regular review of documented policies and procedures, although they had been updated on an ad hoc basis in line with any changes to legislation and centrally issued guidance.
- 3.1.12 The Authority had developed a range of detailed policies and procedures available to officers via the Council's intranet, most of which were up to date. The exceptions to this were the quality monitoring procedure and the procedure for prosecutions and formal cautions, both of which contained out of date legislative references.
- 3.1.13 Policies and procedures relating to reactive work and formal enforcement 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 remedial action and detention notices at approved establishments. Procedures on the approval and inspection of approved establishments were also required.
- 3.1.14 The Service had developed a food sampling procedure, but did not have a sampling policy at the time of the audit. However, the draft Service Plan 2008/2009 stated that this was being drafted.
- 3.1.15 The Authority had an Enforcement Policy which had been reviewed and updated in January 2008. The draft Service Plan 2008/2009 stated that the Enforcement Policy was being re-reviewed to take account of the Regulators' Compliance Code introduced in April 2008.

### *Recommendations*

3.1.16 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) Fully implement the document control system to ensure that internal food hygiene policies and procedures are up to date. The process needs to ensure that policies and procedures are reviewed at regular intervals and whenever there are changes to legislation and official guidance. [The Standard – 4.2]
- (iii) Set up, maintain and implement a documented sampling policy and programme that accords with any centrally issued or relevant guidance, and which includes reference to the local approach to any relevant national sampling programme centrally co-ordinated by the Food Standards Agency. [The Standard-12.4]

### *Officer Authorisations*

- 3.1.17 The Authority's procedure for the authorisation of officers confirmed that the Council had delegated the power to authorise staff to the Chief Executive and the Strategic Director for Community Services. Authorisation of officers was dependent upon the officer being able to demonstrate through qualification, training or experience that they were able to enforce the relevant legislation satisfactorily and competently. The procedure did not set out the means of assessment nor the specific criteria against which the officer would be assessed, other than a general reference to the Food Law Code of Practice.
- 3.1.18 Officers were issued with a generic schedule of authorisation. In most cases, the Service could not clearly demonstrate that officers had sufficient training and experience to justify the level of authorisation of its officers under the generic powers conferred.
- 3.1.19 Officers' individual learning and development needs were routinely assessed and recorded as part of the Authority's performance and development review process. Individual training requirements and any identified team training needs were drawn together into an annual training programme for the Service.

3.1.20 An examination of the records of officer training and qualifications indicated a need for the Authority to ensure that all officers had received appropriate training in hazard analysis and critical control points (HACCP), approved establishments inspection, imported food, and where appropriate, training in specialist or complex processes.

*Recommendations*

3.1.21 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 individual officer authorisations. [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]

## **3.2 Food Premises Database**

- 3.2.1 The Service had fully documented procedures covering database management, food premises registration and premises detail amendments. The database was maintained by a Systems Administrator based in the Change Team. Premises information was received from a number of sources, including the business rates service, waste services and other Environmental Health functions. Business managers were also informed by the Change Team of any changes to premises that may affect the Service.
- 3.2.2 The database contained all 6 food premises randomly chosen from a local telephone directory and these premises were also included in the Authority's inspection programme. However, the relevant procedure did not contain details of any methods routinely used for validating the accuracy and completeness of the database.
- 3.2.3 There were access control measures in place to restrict an individual's ability to add or remove premises from the database system. These arrangements were detailed in the premises amendment procedure. Officers were able to make minor amendments to records, such as contact details, however only the Change Team were able to add or remove premises details from the system.
- 3.2.4 The system was capable of producing all reports for the purposes of the audit in the format requested.

### *Recommendation*

- 3.2.5 The Authority should:

Ensure that the documented procedure for database management includes routine checks to validate the accuracy of the database, 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 provided auditors with a profile for food hygiene premises:

Risk category	No.	% *
A	4	0.5%
B	44	5%
C	413	46.5%
D	106	12%
E	323	36%
TOTAL	890	

\* Figures to the nearest 0.5%

In addition there were 3 establishments subject to approval.

3.3.2 The Authority had a general food hygiene inspection procedure, produced in 2006, containing a set of basic work instructions. There was no separate procedure for the inspection of premises subject to approval, although the procedure did make reference to specific legislation regarding approved establishments, and required officers to be aware of all elements of the Food Law Code of Practice.

3.3.3 The files for 5 higher risk food hygiene inspections were examined during the audit. File checks covering the last 3 inspections of the selected premises revealed that although officers were required to leave a signed inspection report outlining the findings of the inspection with the food business operator (FBO), and keep a signed copy on the premises file, 9 out of 15 inspection reports were missing from the files. In most cases, only limited information was transferred to the computer database, making it difficult to obtain a full premises inspection and enforcement history to justify the risk rating scores, or to confirm that inspections had actually taken place. There was however evidence to suggest that this issue was being addressed, as file checks showed that only 1 out of 5 reports was missing from the most recent inspections.

3.3.4 In most cases follow-up letters had been provided to food business operators where appropriate. Whilst letters distinguished between legal requirements and recommendations, 4 out of 5 letters did not give the FBO any indication of the timescale required for achieving compliance. Officers also carried out secondary inspections as necessary to ensure that required works had been satisfactorily completed. However, in one case, the premises had received a new risk rating following a secondary inspection, altering the date of the next primary inspection, contrary to the Food Law Code of Practice. 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.

- 3.3.5 At the time of the audit, the inspection procedure did not require officers to use an aide-memoire to record the details of food premises inspections. As the inspection form contained only limited information about the business premises and activities, files contained very little up to date information about the scale and nature of food businesses and food safety training issues. They also lacked consistent or systematic assessments of business compliance with HACCP requirements, as required by Article 5(1) of Regulation No. 852/2004.
- 3.3.6 The Service had recently developed an aide-memoire for inspections of medium and low risk premises, requiring general business details to be recorded and with appropriate references to food safety management systems, training and traceability. The Service intended to adapt this document to also cover higher risk premises, however, the new form made no reference to imported food legislation.
- 3.3.7 A report produced on the day of the audit showed that there were 39 overdue inspections at that time. These consisted of 1 higher risk premises and 38 medium and low risk inspections. Auditors were informed that the inspection plan would be modified to ensure that these outstanding inspections were completed as a priority.
- 3.3.8 File checks assessing the last 3 inspections of 5 higher risk premises showed that 2 out of 15 inspections were overdue, and 2 out of 15 inspections had taken place considerably earlier than programmed. No reasons were recorded for the inspections being brought forward, although the auditors were informed that this was due to an administrative error. One such premises had recently received 2 full inspections by different officers within 5 weeks, each officer awarding the premises a different risk category following the inspection. This would appear to be contrary to the corporate aim of reducing regulatory burdens on local businesses and possibly highlights an inconsistency in inspection approach.
- 3.3.9 The file and database records for 3 product-specific premises requiring approval under Regulation (EC) No. 853/2004 were examined. There was insufficient evidence in 1 of the premises files to determine whether this business had required meat products approval and the auditors were informed that further investigations would be carried out to confirm the need for approval. Records confirmed that the Authority's officers had not assessed any of the establishments against the 2006 Regulations and approval documents had not been reissued to confirm that the establishments complied with these Regulations.
- 3.3.10 The file records for all the approved establishments were extremely limited in both scope and content. 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 was not used. The use of an appropriate inspection form would assist the Authority in covering all relevant areas and in clearly demonstrating that establishments have been assessed against all the requirements of Regulation (EC) No. 853/2004.

*Recommendations*

3.3.11 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]
- (iii) The Authority should inspect and approve premises in accordance with relevant legislation and centrally issued guidance.[The Standard- 7.2]

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

#### *Internal Monitoring*

- 3.4.1 The Authority had a procedure for monitoring the quality of hygiene inspections. There was no evidence from file checks that the procedure had been implemented. Auditors were informed that a new internal monitoring procedure had been developed but had yet to be fully adopted and implemented.
- 3.4.2 There had been regular quantitative monitoring activity within the Service, primarily aimed at ensuring that the Service met its inspection target of 100%. The Food Safety Manager was able to demonstrate that the rates of inspection had increased year on year for the last 3-4 years, reaching a figure of 100% of planned inspections in 2007/2008. This was achieved through monthly performance reviews against the planned inspection programme, and via one to one meetings with staff to discuss inspection targets. However there had been little or no qualitative monitoring across the whole range of food safety activities, including inspections and enforcement actions.
- 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. This lack of qualitative monitoring of inspections and follow-up actions may have contributed to a number of enforcement activities taking place contrary to the Food Law Code of Practice. Records suggest that in one case a business was allowed to continue trading despite evidence of an active rodent infestation and history of temperature abuse of high risk foods on display. Officer records made no reference to the Authority's Enforcement Policy for guidance on the appropriate level of enforcement action, instead attempts had been made to deal with these problems through a number of largely unsuccessful revisits and letters to the FBO. Records did not indicate whether the situation had been resolved, although auditors were informed verbally during the audit that the case had been brought to a 'successful conclusion'.
- 3.4.4 Four hygiene improvement notices served following inspections generally complied with the Food Law Code of Practice, although there was no evidence of any internal monitoring checks. However, 1 notice stated a date for compliance within the mandatory 14 day appeal period and another appeared to have been drafted without reference to official guidance. None of the notices examined contained details of where the local court was sited.
- 3.4.5 Checks were made on a range of other food law enforcement activities undertaken by the Service, but there was no evidence of any qualitative internal monitoring checks in place. File checks of 2

voluntary closures and 2 simple cautions issued were generally in accordance with the Food Law Code of Practice. However, in the case of 1 simple caution relating to a breach of the Food Labelling Regulations, the Authority was unable to confirm that officers had been properly authorised to enforce this legislation.

- 3.4.6 File checks of one prosecution file confirmed that this action was appropriate in the circumstances; that the Enforcement Policy had been considered and the action taken was in line with the Authority's policy. The relevant file contained detailed records of the action taken and the outcome of the prosecution case.
- 3.4.7 Although there was no evidence of internal monitoring checks, records 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 had withdrawn from taking part in routine sampling programmes in 2006/2007 and 2007/2008 due to staffing difficulties. However, reference to routine sampling was contained within the draft Service Plan 2008/2009, and the Service aimed to commence sampling again in 2008/2009, providing the vacant positions could be filled and staffing levels maintained.
- 3.4.8 The Service had a documented procedure for food alerts. Records of recent food alerts issued by the Food Standards Agency were examined. Although none of the Alerts required local action there was evidence that they had been circulated to the team for information.

### *Recommendations*

- 3.4.9 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]
  - (iii) The Authority shall assess the compliance of premises and systems in their area to the legally prescribed standards. The Authority shall take appropriate action on any non-compliance found, in accordance with the Authority's enforcement policy. [The Standard-7.3]

### *Third Party or Peer Review*

- 3.4.10 The Service had been subject to a number of inter-authority and internal audits in recent years, the most recent being an inter-authority audit conducted in December 2007 which had focused on the training and authorisation of officers. These audits had previously identified several of the issues also identified in this report. Action plans had been prepared, but a number of actions remained outstanding, some dating back to 2003. The Service had, however, produced a document collating all the outstanding recommendations from previous audits, and many of the issues had been completed, or were due to be completed later this year.
- 3.4.11 The Service forms part of the Derbyshire Chief Environmental Health Officers Food Liaison Group, and the Sheffield and District Food Sampling Group.
- 3.4.12 The Authority had been accredited for Investors in People status and the Charter Mark for its customer services.

**Auditors: Andrew Gangakhedkar**  
Alan Noonan

Food Standards Agency

Local Authority Liaison Division

## Action Plan for High Peak Borough Council

Audit date: 10 - 11 June 2008

IMPROVEMENTS	BY (DATE)	TO ADDRESS RECOMMENDATION (INCLUDING STANDARD PARAGRAPH)	ACTION TAKEN
<p>Review draft Service Plan in line with Service Planning Guidance in the Framework Agreement and submit to Member forum for approval.</p> <p>Obtain member approval.</p>	<p>Completed</p> <p>01/10/08</p>	<p>3.1.10 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 &amp; 3.3]</p>	<p>17/07/08 - Reviewed and updated in line with recommendation. 21/07/08 – Plan submitted to Joint Senior Managers Group through Strategic Director. Item has been referred to the Environment Select Committee on the 02/09/08 and once approved will be referred for an individual Executive Member decision 2 weeks later.</p>
<p>General inspections procedures are already in place but there is a need to write more detailed work instructions for: Approved premises inspection Follow-up and enforcement action.</p>	<p>Completed</p>	<p>3.1.16(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]</p>	<p>15/08/08 – Approved Premises inspection and follow-up enforcement action procedures written and communicated to staff.</p>
<p>Review and update work instruction for Food Safety document control system and implement a new review file with planned auditing against the work instruction.</p> <p>Diarised dates of planned policy and procedure reviews.</p>	<p>01/12/08</p>	<p>3.1.16(ii) Fully implement the document control system to ensure that internal food hygiene policies and procedures are up to date. The process needs to ensure that policies and procedures are reviewed at regular intervals and whenever there are changes to legislation and official guidance. [The Standard – 4.2]</p>	

<p>Include sampling policy in annual Food Service Plan.</p> <p>Re-join regional food sampling programme</p>	<p>Completed</p> <p>Completed</p>	<p>3.1.16(iii) Set up, maintain and implement a documented sampling policy and programme that accords with any centrally issued or relevant guidance, and which includes reference to the local approach to any relevant national sampling programme centrally co-ordinated by the Food Standards Agency. [The Standard-12.4]</p>	<p>17/07/08 – Completed Food Service Plan. Sampling policy and programme included in draft Service Plan.</p> <p>21/07/08 - submitted for Joint Senior Managers Group to consider.</p> <p>17/07/08. E-mail sent to Sheffield and District Sampling Group indicating our re-joining sampling programme.</p>
<p>Authorisation work instruction to be amended to reflect the already updated officer authorisation cards and schedules.</p> <p>Roll out updated authorisation cards to all officers.</p>	<p>Completed</p> <p>01/10/08</p>	<p>3.1.21(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 individual officer authorisations. [The Standard – 5.1]</p>	<p>30/05/08 – Authorisation procedure was updated prior to Audit and was subsequently implemented.</p>
<p>Additional Training for:</p> <p>1 officer - On-farm pasteurisation</p> <p>2 officers- Approval of premises</p>	<p>31/12/08</p>	<p>3.1.21(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>10/06/08 - 1 officer booked on on-farm pasteurisation course in Sept 08. (no evidence available as no Agency response yet to application)</p>
<p>Write database management work instruction to include routine checks to validate the accuracy of the database, to ensure that the food premises database is accurate and kept up to date.</p>	<p>01/11/08</p>	<p>3.2.5 Ensure that the documented procedure for database management includes routine checks to validate the accuracy of the database, to ensure that the food premises database is accurate and kept up to date. [The Standard – 11.2]</p>	
<p>No further action necessary. The issue raised was due to staff shortages, which have been addressed. Also there are monitoring arrangements in place already for inspection programmes on a monthly basis.</p>	<p>Completed</p>	<p>3.3.11(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>01/08/08 - Additional contractor staff brought in to replace lost permanent employees.</p> <p>01/08/08 – Report on outstanding food hygiene inspections from computer system, annotated with reasons for any inspections still outstanding.</p>

<p>To improve, a set of improved records are to be kept for the full range of types of premises based on risk. These types are: Approved premises under 853/2004; Medium to low risk (c-e rated) premises; High risk premises (a-b rated). In addition the Approved premises files need updating to contain the information required in the Code of Practice.</p> <p>All approved premises to be fully reviewed and documentation on file updated.</p> <p>New inspection form for Med-Low Risk premises in use.</p> <p>New inspection form for High Risk premises to be developed and in use.</p> <p>Approved premises specific inspection forms to be developed and in use.</p>	<p>31/10/08</p> <p>Completed</p> <p>Completed</p> <p>31/10/08</p>	<p>3.3.11(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>01/06/08 – New Med-Low risk inspection forms in use and stored electronically.</p> <p>01/09/08 – New High Risk inspection forms in use.</p>
<p>All approved premises to be fully reviewed and documentation on file updated.</p>	<p>31/10/08</p>	<p>3.3.11(iii) The Authority should inspect and approve premises in accordance with relevant legislation and centrally issued guidance.[The Standard- 7.2]</p>	

Review and re-issue work instruction to include quantitative and qualitative monitoring of the full range of food law enforcement activities, including details of the frequency, responsibilities and approach to internal monitoring.	Completed	3.4.9(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]	30/06/08 – review completed. Re-issued and in use.
Implement the internal monitoring procedure by: Begin monitoring inspections quality	Completed	3.4.9(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]	30/06/08 – The internal monitoring procedures have been implemented. 30/06//08 - Quality monitoring of inspections has commenced the first reviews were completed a week after the Audit. 01/06/08 - The inspection monitoring form was in use before the Audit began.
Begin monitoring of Notices quality	Completed		30/06/08 – Procedures in place for monitoring notices.
Begin annual review of quality of enforcement activity	Completed		30/06/08 - As above the work instructions for quality and quantity monitoring were revised and updated and this has put in place an annual review process.

<p>Enforcement policy requirements to be re-communicated to staff working in food enforcement.</p>	<p>Completed</p>	<p>3.4.9(iii) The Authority shall assess the compliance of premises and systems in their area to the legally prescribed standards. The Authority shall take appropriate action on any non-compliance found, in accordance with the Authority's enforcement policy. [The Standard-7.3]</p>	<p>18/06/08 - Team briefing meeting to discuss outcomes of audit and to re-iterate issues raise in respect of this matter. Requirement of enforcement policy and work instructions re-communicated. Team informed of additional monitoring.</p>
<p>Begin ongoing monitoring of quality of inspections and interventions to ensure appropriate interventions.</p>	<p>Completed</p>		<p>30/06/08 – Quality monitoring of inspections began in June before audit. Signing off changes in risk ratings.</p>
<p>Update the monitoring procedure to add a requirement for officers to notify the team manager when a lesser enforcement action is being taken, than the Enforcement Policy recommends to obtain approval.</p>	<p>Completed</p>		<p>15/08/08 – Enforcement options procedure updated.</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"> <li>• Food Law Enforcement Standard</li> <li>• Service Planning Guidance</li> <li>• Monitoring Scheme</li> <li>• Audit Scheme</li> </ul> <p>The <b>Standard</b> and the <b>Service Planning Guidance</b> set out the Agency's expectations on the planning and delivery of food law enforcement.</p> <p>The <b>Monitoring Scheme</b> 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 <b>Audit Scheme</b> 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.