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

Tandridge District Council

6 – 7 August 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 inspections of food businesses, database management 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.

# CONTENTS

	Page
<b>1.0 Introduction</b>	4
<i>Reason for the Audit</i>	4
<i>Scope of the Audit</i>	4
<i>Background</i>	5
<b>2.0 Executive Summary</b>	7
<b>3.0 Audit Findings</b>	8
3.1 Organisation and Management	8
- <i>Strategic Framework, Policy and Service Planning</i>	8
- <i>Documented Policies and Procedures</i>	10
- <i>Officer Authorisations</i>	11
3.2 Food Premises Database	13
3.3 Food Premises Inspections	14
3.4 Internal Monitoring, Third Party or Peer Review	17
- <i>Internal Monitoring</i>	17
- <i>Third Party or Peer Review</i>	18
<b>Action Plan for Tandridge District Council</b>	19
<b>Annex: Glossary</b>	23

## **1. Introduction**

- 1.1 This report records the results of an audit at Tandridge District Council with regard to food hygiene enforcement under relevant headings of the Food Standards Agency Food Law Enforcement Standard. The audit focused on the Authority's arrangements for the management of the food premises database, food premises 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 Audit & 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 Tandridge 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 included in 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 8 authorities selected across England.

### **Scope of the Audit**

- 1.4 The audit examined Tandridge 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 and management, and the internal monitoring of other food hygiene law enforcement activities.
- 1.5 Assurance was sought that key authority food hygiene law enforcement systems and arrangements were effective in supporting business compliance, and that local enforcement was managed and delivered effectively. The on-site element of the audit took place at the Authority's office at Council Offices, Station Road East, Oxted, Surrey on 6-7 August 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 Tandridge is a large, mainly rural district covering 24,819 hectares in East Surrey. It has a population of approximately 79,600, around 70% of whom live in the main northern residential areas of Caterham, Oxted, Warlingham and Whyteleafe, which together cover about 9% of the Council's geographical area. The remainder live in smaller settlements and villages.
- 1.8 The District benefits from good rail and road networks, which includes the A22 and A25, the M23 and M25 motorways and also benefits from proximity to Gatwick Airport.
- 1.9 Food hygiene law enforcement was the responsibility of the Food Safety and Licensing Team, who were also responsible for a wide range of environmental health functions, including health and safety enforcement, infectious disease control, licensing (street trading and skin piercing), water safety, animal welfare (zoos and pet shops), smoke-free legislation and Environmental Protection Act enforcement relating to commercial premises.
- 1.10 The Food Safety and Licensing Team was not responsible for the enforcement of food standards and feeding stuffs law enforcement, which was carried out by Surrey County Council Trading Standards Service.
- 1.11 The Authority's food hygiene Service Plan for 2008/2009, as reported to their Members in July 2008, indicated they would carry out all preventative food hygiene inspections due during the forthcoming year, although it did not provide actual details of the numbers due. In total the Food Safety and Licensing Team was responsible for enforcing food hygiene legislation in 687 premises. These food businesses were predominantly within the catering (75%) and retail (20%) sectors.

1.12 The outcomes of the 2007/2008 Service Plan confirmed the Authority's food hygiene law enforcement activities in the year as follows:

<b>Enforcement Activity</b>	<b>Number</b>
Food hygiene inspections	350
Food samples	86
Food complaints	78
Other visits to food premises	193
New business registrations	84
Notification of food poisoning	164
Food safety incidents	63
Responded to allergy alerts	78
New premises registered	84
Visited to premises to check on trading	89
Revisits carried out to check on compliance	79
Served HIN's	22
Issued written warnings	278
Undertaken training to Food Business Operators	10

## 2. Executive Summary

- 2.1 Staff vacancies in the early part of 2006 had severely limited the Food Safety and Licensing Team's capacity to deliver an effective food service. However, from June 2006 the appointment of two members of staff had brought the staff resource back to the establishment level and had resulted in improvements to the levels of food law enforcement work achieved. At the time of the audit, the Service was anticipating a further period of decreased staff resource and had begun to consider measures to address this.
- 2.2 The Authority had produced a Food Law Enforcement Service Plan for 2008/2009, which had been approved by Members. Future Service Plans would benefit from the inclusion of additional information as set out in the Service Planning Guidance in the Framework Agreement and should include comprehensive details of the scope and demands on the Service, and both the financial and staff resources available to deliver the Service.
- 2.3 The Service had a procedure to ensure that the food premises database was up-to-date and that information relating to inspections and other food law enforcement activities were accurate.
- 2.4 File checks indicated that historically inspections had not always been carried out at the correct frequency, which may be attributable to the staffing difficulties previously encountered by the Service. Inspections of the Authority's approved establishment had been carried out at the correct frequency, however, the Authority had yet to re-approve the establishment under EC hygiene Regulations introduced in 2006.
- 2.5 The Authority had a procedure for the authorisation of officers, which required some development to ensure that the level of authorisation was clearly linked to individual officer's qualifications, training and experience.
- 2.6 There was some evidence of quantitative internal monitoring of food premises inspections against the annual programme. Some recent changes had been introduced, including the production of a revised internal monitoring procedure. The auditors were advised that some quantitative monitoring checks were also undertaken but a means of recording these activities had not been implemented.

### 3. Audit Findings

#### 3.1 Organisation and Management

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

- 3.1.1 A Food Safety Service Plan for 2008/2009 had been produced, which had been approved by Members. The auditors were advised that the format of the Authority's Service Plans had evolved since 2001 when the Authority had produced a detailed plan covering all aspects of the Service Planning Guidance. The Planning and Environment Committee then determined that annual committee reports should be solely concerned with reporting the previous year's outcomes and the proposed objectives for the next year, stating that this would satisfy Food Standards Agency requirements. The 2008/2009 Service Plan set out broad service objectives for the year, however these did not sufficiently quantify the demands in order to provide a basis for the Service to accurately compare the planned and actual performance for the year and consequently identify any variance or areas for improvement.
- 3.1.2 In addition, the Service Plan would benefit from additional information in accordance with the Service Planning Guidance in the Framework Agreement, to include:
- full details of the scope of the Service and any other services delivered alongside, such as non food work and environmental protection activity at commercial premises.
  - details of the demands on the Service, to include details of the premises profile and inspection programme, and include the estimated number of revisits to be made, and an estimation of the resources required to deliver the Service, including staffing.
  - a detailed breakdown of the financial allocation for the provision of the Service.
- 3.1.3 The Authority's key overall objective for 2008/2009 was to *'provide quality services at a reasonable price, while concentrating Council Tax expenditure on providing front-line services'*. There were also two underlying objectives, to:
- *continue to maximise resources available to the District through partnership opportunities, government grants and other funding streams; and*
  - *ensure that Tandridge is a focused, well-managed and responsive Council with high performance attainment against locally agreed Key Performance Indicators and effective communication and consultation with residents and businesses.*

3.1.4 The Authority listed the means of achievement of their key objectives, including to ‘*work with the Local Strategic Partnership to achieve outcomes and targets in the 2006 Community Strategy and encourage and help our partners and other agencies to achieve their targets*’.

3.1.5 The staffing allocation to deliver the Food Service was set out in information supplied to the Agency prior to the audit as follows:

<b>Staffing allocation</b>	<b>Full time equivalent (FTE)</b>
Deputy Director of Community Services	0.04
Principal EHO	0.42
Two EHO's	1.20
Environmental Health Technical Officer	0.60
<b>Total</b>	<b>2.26</b>

3.1.6 The auditors were made aware of an anticipated period of decreased staff resource in the forthcoming months, which had been brought to the attention of relevant Members. In addition, the auditors were advised that the Service had begun to explore measures to ensure continuity of the Service by the appointment of suitably qualified and experienced officers from external sources to address the impending shortfall of officers.

*Recommendations*

3.1.7 The Authority should:

- (i) Ensure that future Food Service Plans include all the details required by the Service Planning Guidance in the Framework Agreement. [The Standard – 3.1]
- (ii) Ensure that the annual review of performance against the Food Service Plan includes a comparison of planned and actual performance for the year. Any variance in meeting the service delivery plan should be addressed in the subsequent year's service arrangements. [The Standard – 3.2 & 3.3]
- (iii) Ensure that the Service Plan includes a review of the staffing resources to ensure that there are sufficient competent officers to carry out the work detailed in the Service Plan. [The Standard – 5.3]

### *Documented Policies and Procedures*

- 3.1.8 The Authority had developed policies and procedures covering a range of food law enforcement activities and had recently updated a number of them.
- 3.1.9 Whilst it was evident that a number of documents had been recently produced, reviewed and updated, further work was required in order to continue to update these documents. The audit also highlighted the need to further develop a system for reviews of documented policies and procedures at regular intervals and whenever there are changes to legislation and official guidance. It was evident that this process had begun prior to the audit.
- 3.1.10 The audit highlighted in particular two procedures that had not been documented, a procedure to guide officers on the inspection and approval of approved premises and a prosecution procedure.
- 3.1.11 The Authority had a corporate enforcement policy that had been in place since it received approval in 2003. This required review to include the requirements of the Regulators' Compliance Code.

### *Recommendations*

- 3.1.12 The Authority should:
- (i) Further develop the document control system to ensure that internal food hygiene policies and procedures are up to date and cover the full range of food law enforcement activities. The review process also needs to ensure that policies and procedures are reviewed at regular intervals and whenever there are changes to legislation and official guidance.  
[The Standard – 4.1 & 4.2]
  - (ii) Review the documented enforcement policy to ensure it is up to date and reflects current official guidance.  
[The Standard – 15.1]

### *Officer Authorisations*

- 3.1.13 The Chief Executive had delegated powers to authorise individual officers under relevant legislation, based upon advice from the Principal Environmental Health Officer (PEHO) and subsequently supported by the Deputy Director. It was the policy of the Authority to undertake reviews of their authorisations every two years or in response to changes in legislation and official guidance.
- 3.1.14 The Service had a documented procedure on the authorisation of officers, however this needed further development to ensure that all officers were appropriately authorised in accordance with their individual qualifications, training and experience.
- 3.1.15 The authorisations were in general tailored to individual officers, however, some were generic in nature and this had allowed all officers to receive authorisations under the Food and Environmental Protection Act 1985.
- 3.1.16 Officers' individual learning and development needs were assessed on a one to one basis during an annual and subsequent interim review when personal objectives and training were set and agreed. It was the policy of the Authority to hold training records electronically with the officers holding their own Continuous Professional Development certificates. Due to budgetary constraints the Authority allowed officers to attend specific low cost training courses as the need required, but other training requests required approval by the Management Team alongside competing requests from other service areas. There was a policy that the content of training courses would be subsequently cascaded to other team members.
- 3.1.17 The audit highlighted a need for more specific training linked to the areas of specialist work that officers were required to undertake e.g. relating to approved establishments, HACCP and in particular imported food, due to the presence of the headquarters of a large food importer in the District for which they acted as Home Authority.

*Recommendations*

3.1.18 The Authority should:

- (i) Review and revise the Service's documented procedure on 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 and limitations of individual officer authorisations. [The Standard – 5.1]
- (ii) Maintain and implement 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 Authority had a procedure for the management of the food premises database which was due for review in 2009, or whenever the system was updated. The database had been produced 'in-house' and was a joint collaboration between the Food Safety and Licensing Team Principal Officer and the internal Information Technology Department. The procedure detailed the means of protection of the integrity of the database and the access restrictions that were in place.
- 3.2.2 The Authority had a number of means of ensuring that all premises were included within the database including input from planning applications, comparison against the food register and officers' local knowledge.
- 3.2.3 The database contained all 8 food premises randomly chosen from a local business directory; and all of those premises were included in the Authority's food hygiene inspection programme.
- 3.2.4 The database and related policies and procedures were managed by the PEHO, who also had responsibility for ensuring that any software changes were highlighted, tested and effectively implemented. At the time of the audit, the database was regularly backed-up and maintained to ensure the accuracy, completeness and integrity of data.
- 3.2.5 There were a number of security measures in place to control access to the database, access being limited by password and by instruction. Officers were able to input data, such as inspection information, but the responsibility for functions that impacted on the accuracy and integrity of the database, such as the addition, amendment and deletion of premises details was the responsibility of the PEHO.

### **3.3 Food Premises Inspections**

- 3.3.1 The Authority's Service Plan for 2008/2009 did not show the premises profile for the food hygiene establishments that were in their inspection programme nor was any breakdown given in the outcome report from the previous year. The Authority had one approved premises within their area.
- 3.3.2 The inspection programme was administered by the PEHO by collating a list of those establishments that would need to be inspected within the following year. Officers were allocated work, according to their authorisation and competency and the premises details were colour coded on the database system to indicate those also requiring other visits such as a health and safety inspection. Officers managed their own workload which was overseen by the PEHO. Inspections were carried out in date order as far as resources would allow.
- 3.3.3 File and database record checks of 5 high risk inspections confirmed that only one had been inspected at the required frequency within the last 3 inspections. This may have reflected the staffing resource difficulties the Authority had experienced in the recent past.
- 3.3.4 The file for the 1 product-specific establishment requiring approval under Regulation (EC) No. 853/2004 was also examined. File records indicated that the Authority's officers had carried out the inspections at the required frequency, but had not re-approved this establishment under new EU food hygiene Regulations and approval documents had not been re-issued under Regulation (EC) No. 853/2004 to confirm that the establishment complied with the new hygiene requirements. The file did not contain any approval documents or all the information on the establishment as recommended in annex 12 of the Food Law Practice Guidance.
- 3.3.5 The Authority had an inspection form for general food hygiene inspections. The same form was used by officers when undertaking the inspection of the approved establishment. The form prompted officers to record an assessment of the business' HACCP system but this was only completed in 3 out of 5 general inspection forms checked. Discussions at the time of the audit suggested that the form could be improved to prompt officers to record other important details such as the size and scale of the business and more detailed information on food handlers' hygiene training.
- 3.3.6 File checks confirmed that officers were leaving a written record of the inspection with business operators after inspections and sending follow-up letters where necessary.

- 3.3.7 There was evidence to show that officers were proactive in providing advice and support to assist food businesses in complying with current legislation and relevant guidance.
- 3.3.8 The circumstances where revisit inspections were carried out by officers to ensure compliance were discussed and the need to incorporate their policy on revisits into the revised enforcement policy document and future Service Plans. There was evidence to show that officers had carried out some revisits, and where serious contraventions had been identified, the Authority had taken further enforcement action including the service of hygiene improvement notices.
- 3.3.9 Checks were made on the records for 3 hygiene improvement notices served following inspections. All the notices were signed by a correctly authorised officer who had witnessed the contravention and contained details of the regulation contravened. There were some issues noted with the notices relating to the addition of extra items in the notice beyond the main contravention, evidence of service and the absence of a letter confirming compliance with or withdrawal of, the notice.
- 3.3.10 In order for the Service to collate information to assess achievement against the new national indicator NI182 (which measures the satisfaction of business with local regulatory services), a customer feedback postcard had been devised which could be returned by the Food Business Operator (FBO) either by post or electronically.
- 3.3.11 In addition, the database system had been configured to provide relevant information to measure and report on the Service's achievement against national indicator NI184 on the percentage of food establishments in the area which are broadly compliant with food hygiene law. The Authority had set the local target at 80% for 2008/2009.
- 3.3.12 The Authority had also been innovative in the use of digital images which were being incorporated into letters sent to FBO's following inspections. These graphically illustrated areas of contravention and provided a basis to demonstrate the extent of improvements made. The auditors were advised that this initiative had also assisted FBO's in more clearly identifying the works required.

*Recommendations*

3.3.15 The Authority should:

- (i) Implement and maintain a documented inspection procedure for the full range of premises it carries out, including approved establishments. [The Standard – 7.4]
- (ii) Ensure that records of inspections contain sufficient detail to demonstrate an adequate assessment by the officer of compliance of premises and systems to the legally prescribed standards. [The Standard - 7.3 &16.1]
- (iii) Approve establishments as necessary 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 produced a procedure entitled 'Performance Monitoring' which was due to be reviewed in January 2009. This document gave indications of the level of monitoring that was due to be instigated including for example accompanied inspections, file reviews and monthly reports of inspections.
- 3.4.2 In practice the Service monitored and reported on 2 main service areas:
- quantitative monitoring of progress against the inspection programme, reports of which were raised at team meetings and forwarded to the management team;
  - food complaints, which had a nominal 1 day response time. These were also monitored to ensure timely closure of the complaint.
- 3.4.3 The Authority had recently undertaken an internal consistency exercise on the risk scoring of establishments and this had proved successful. Due to the successful outcome of this exercise the regional liaison group were also looking to undertake a similar project.
- 3.4.4 The auditors were advised that checks were made by the PEHO on all non standard correspondence drafted by officers and a percentage of standard letters. These checks were not recorded however, and the introduction of a simple database recording system for such checks was discussed.
- 3.4.5 File and database records of 5 food and food premises complaints indicated that these had been properly investigated by officers and that effective and appropriate follow-up action had been taken.
- 3.4.6 Checks were made on 5 microbiological samples that had returned unsatisfactory examination results. Three of these originated as a result of complaints being made about food premises and the other 2 had been taken as part of the Authority's food sampling programme. In each case there was evidence that appropriate follow-up action had been taken.
- 3.4.7 The auditors were advised that all enforcement actions were checked, and there was evidence on recent hygiene improvement notice records that a comprehensive notice checklist had been completed prior to service and signed by the PEHO.

*Recommendation*

3.4.8 The Authority should:

Ensure that the documented internal monitoring procedure fully reflects all the internal monitoring that takes place of the food law enforcement service's activities, including details of the frequency, responsibilities and approach to internal monitoring.  
[The Standard – 19.1]

*Third Party or Peer Review*

3.4.9 The auditors were advised that there had been no inter-authority audit activity or other relevant peer review initiatives within the liaison group in the last two years.

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## Action Plan for Tandridge District Council

Audit date: 6 - 7 August 2008

<b>IMPROVEMENTS</b>	<b>BY (DATE)</b>	<b>TO ADDRESS RECOMMENDATION (INCLUDING STANDARD PARAGRAPH)</b>	<b>ACTION TAKEN</b>
Future Food Service Plans to include all the details required by the Service Planning Guidance in the Framework Agreement.	31/07/09	3.1.7(i) Ensure that future Food Service Plans include all the details required by the Service Planning Guidance in the Framework Agreement. [The Standard – 3.1]	The Committee cycle for the annual food safety Service Plan means that it is next reported to Members of the food authority in July 2009. Members have decided that a bullet point Service Plan is appropriate for Member and committee requirements, to reduce bureaucracy and paperwork, so future committee reports to be supported by detailed background paper containing all of information required by Service Planning Guidance.
Future Service Plan to include annual review of performance against the Food Service Plan includes a comparison of planned and actual performance for the year. Any variance in meeting the service delivery plan would be addressed in the subsequent year's service arrangements.	31/07/09	3.1.7(ii) Ensure that the annual review of performance against the Food Service Plan includes a comparison of planned and actual performance for the year. Any variance in meeting the service delivery plan should be addressed in the subsequent year's service arrangements. [The Standard – 3.2 & 3.3]	The existing Services Plans do indicate any programmed work which was outstanding and that this will be undertaken during future years for other food work.  The Committee cycle for the food Service Plan means it is next reported in July 2009.  Current specific action to deal with maternity leave situation is on progress.
Future Service Plans to include a review of the staffing resources to ensure that there are sufficient competent officers to carry out the work detailed in the Service Plan taking account of 28 day from due date requirements.	31/07/09	3.1.7(iii) Ensure that the Service Plan includes a review of the staffing resources to ensure that there are sufficient competent officers to carry out the work detailed in the Service Plan. [The Standard – 5.3]	The Committee cycle for the food service plan means it is next reported in July 2009.  In the meantime additional external resources have been engaged to clear likely backlog of inspections during maternity leave period into 2009/10. This will be reviewed as part of plans for 2009/10/11.

Develop the document control system to ensure that internal food hygiene policies and procedures are up to date and cover the full range of food law enforcement activities, including annual review.	01/04/09	3.1.12(i) Further develop the document control system to ensure that internal food hygiene policies and procedures are up to date and cover the full range of food law enforcement activities. The review process also needs to ensure that policies and procedures are reviewed at regular intervals and whenever there are changes to legislation and official guidance. [The Standard – 4.1 & 4.2]	The existing documents were due to be reviewed and updated by January 2009 to reflect the June 2008 CoP changes but as two officers are on maternity leave therein the last six months of 2008/09, priority will be given to maintaining the food service and inspection regime as a priority ahead of revision of procedures. The date for initial compliance therefore is April 2009.
Generic enforcement plan to be reviewed to reflect current guidance.	31/07/09	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]	The Council has a corporate enforcement policy which is updated from time to time to reflect all service changes not just those for food safety service. Corporate review due 2009/10.
Service's documented procedure on 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 and limitations of individual officer authorisations.	01/01/09	3.1.18(i) Review and revise the Service's documented procedure on 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 and limitations of individual officer authorisations. [The Standard – 5.1]	Current authorisations expire December 2008 and new authorisations procedure will reflect the stated required improvements.
Seek funding to implement a documented training programme to ensure that officer and team training needs during 2009 in respect of food law enforcement meets code requirements.	01/04/09	3.1.18(ii) Maintain and implement a documented training programme to ensure that officer and team training needs in respect of food law enforcement, are met. [The Standard – 5.4]	Objective and training reviews are to be undertaken in February 2009 to clarify officer and team food training needs.
Develop, implement and maintain a documented inspection procedure for the full range of premises it carries out, including approved establishments.	01/04/09	3.3.15(i) Implement and maintain a documented inspection procedure for the full range of premises it carries out, including approved establishments. [The Standard – 7.4]	Existing inspection procedure to be revised to include approved premises.

Review inspection documents on a sample basis to ensure they contain sufficient detail to demonstrate an adequate assessment by the officer of compliance of premises and systems to the legally prescribed standards.	01/04/09	3.3.15(ii) Ensure that records of inspections contain sufficient detail to demonstrate an adequate assessment by the officer of compliance of premises and systems to the legally prescribed standards. [The Standard - 7.3 &16.1]	Already started review process now needs to be documented and include monitoring of contractors.
Reapprove single dairy processing establishment.	01/01/09	3.3.15(iii) Approve establishments as necessary in accordance with relevant legislation and centrally issued guidance. [The Standard - 7.2]	Key staff who will undertake this will receive refresher training in approval process in September 2008. Lacors forms not appropriate for current cheese processing establishment so in house form to be improved.
Produce and implement documented internal monitoring procedure fully reflects all the internal monitoring that takes place of the food law enforcement service's activities, including details of the frequency, responsibilities and approach to internal monitoring.	01/01/09	3.4.8 Ensure that the documented internal monitoring procedure fully reflects all the internal monitoring that takes place of the food law enforcement service's activities, including details of the frequency, responsibilities and approach to internal monitoring. [The Standard – 19.1]	Already started process to be documented and will need to include monitoring of contractors.

## 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 establishments according to risk and determines how frequently those establishments should be inspected. For example, high risk establishments 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/District Councils, and London Districts. A Unitary Authority's responsibilities will include food hygiene, food standards and feeding stuffs enforcement.