



Evaluation of the Enterprise Level Regulation (ELR) Proof of Concept (PoC): Final report

21 June 2024

Submitted to:

Food Standards Agency (FSA)

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A report submitted by ICF Consulting Services Limited

Date: 18 July 2024

Job number: 30303115

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Acronyms and abbreviations

ABC programme	Achieving Business Compliance programme
AM	Account Manager
AU	Analytics Unit
CMM	Capability Maturity Model
EHO	Environmental Health Officer
ELR	Enterprise Level Regulation
FHRS	Food Hygiene Rating Scheme
LA	Local Authority
LR	Large retailer
LR audit	An internal audit (carried out by a third party contracted by the LR or by an LR's internal audit team)
NFCU	National Food Crime Unit
PA	Primary Authority
PoC	Proof of Concept
RM	Relationship Manager
routine inspection	Routine food hygiene inspection carried out by a LA
OPSS	Office for Product Safety and Standards

Executive summary

The FSA has investigated the potential for an Enterprise Level Regulation (ELR), whereby large food businesses would be regulated at enterprise level (i.e. as a whole business), as opposed to the current premises-based approach. To test the feasibility of an ELR, the FSA undertook a Proof of Concept (PoC) exercise with large retailers (LRs) and their corresponding Primary Authorities (PAs) in a 'sandbox' setting: the current regulatory system remained unchanged and in operation while the PoC was taking place. This setting mitigated any risks that could emerge from the PoC, to FSA and participating LRs, as well as wider stakeholders such as consumers. The 10 LRs occupying the largest share of the grocery market were invited to take part in the PoC, and five chose to participate.

In this context, ICF were commissioned by the FSA to evaluate the ELR PoC. This report presents the final findings from the evaluation.

The evaluation took place in three stages: "baseline" (the beginning of the PoC), "interim" (during the PoC) and "final" (the end of the PoC). The findings in this report are based on data collected and analysed during all three phases. ICF conducted a total of 55 interviews with stakeholders (namely: large retailers (LRs), Primary Authorities (PAs), and FSA staff), reviewed data and documentation from the PoC compiled by the FSA and attended workshops and meetings with PoC participants and FSA staff.

The findings, structured around the evaluation questions, are summarised below.

How was the PoC exercise run?

The PoC was designed and implemented well. Feedback from across the FSA, LRs and PAs was consistently positive from the beginning of the PoC through to the end.

The PoC was run by the FSA through four 'pillars': (1) the **assurance framework**, which set out the criteria LRs needed to fulfil to take part in the PoC, and the data each LR would need to provide to enable the FSA to assess their food safety and hygiene; (2) monthly access and review of **compliance data outputs** provided by each participating LR and PA to the FSA, followed by quarterly meetings between the FSA, PAs and LRs; (3) a dedicated FSA **relationship manager** to broker the relationships between the FSA and participating LRs and PAs, build trust and

facilitate regular collaboration and discussion with respect to the PoC; and (4) a **validation exercise** of the LRs' data to ensure data accuracy and check that corrective action was taken when non-compliances were identified. The FSA also developed success measures which could be used to inform an assessment about the PoC's effectiveness.

There were some factors that enabled the FSA's successful implementation of the PoC: the FSA engaged LRs and PAs early in the process, and held a solution-driven and collaborative attitude; the FSA invested enough resources to enable the PoC set-up to proceed smoothly and efficiently; the FSA team were enthusiastic, willing to learn, and had the right level of knowledge and experience to engage LRs and PAs on these topics.

The main challenges that occurred were building trust between stakeholders; managing stakeholder expectations about their role and a potential future ELR, as stakeholders were interested in how the FSA could move from the PoC concept to a potential future ELR, or what the immediate next steps after the PoC would be; and capacity constraints during key implementation times of the ELR. The PoC was well staffed, however, some roles were new, as such it was difficult for the FSA to anticipate resource needs. Further, initially, stakeholders were not clear on FSA data needs either, so they were not sure of the resource needs. These challenges were addressed during the implementation period.

The PoC had an impact on the relationship between the FSA, LRs, and the PAs which were the stakeholders involved in the implementation.

By the end of the implementation period, the evaluation found that FSA and LRs built strong relationships. The closer relationship with the FSA provided some benefits for LRs, including improved understanding of regulatory information and proactive thinking about possible improvements to the LRs internal compliance systems. The FSA benefitted from increased understanding of LRs internal compliance mechanisms, as LRs were willing to share sensitive information about their business with them, enabling the FSA to gather insight into how LRs managed their compliance. The trusting relationship also meant that the FSA could contact the LRs in relation to other FSA work – including on topics other than regulation.

PAs were less involved in the PoC than expected initially, though they were generally positive about the FSA and the PoC's implementation. LAs were ultimately not directly involved in the PoC so they were not interviewed as part of the evaluation.

To what extent has the PoC enabled the FSA to assess the feasibility of the ELR approach for assuring compliance of Large Retailers?

To answer this question, the evaluation explored the extent to which the PoC enabled the FSA to assess the **reliability and accuracy of LR data**, and the extent to which LR data analysis allowed the FSA to carry out an **assessment of LR compliance**.

In terms of **data reliability**, the evaluation assessed the ways FSA accessed data from LRs, the format it was received on, the content of the data and the level of data standardisation across the LRs. The FSA had routine access to LR data for the duration of the PoC. The format, level of detail and volume of data was not consistent across LRs, since they use different in-house systems. Despite this, data collected was high quality across all LRs. Working with LRs, the FSA were able to understand the data, and gather insights into LR food safety processes. By the end of the PoC, the FSA found that there was a high level of alignment between the type of data received from the LRs and FSA's assurance framework produced as part of the PoC.

In terms of **data accuracy** provided by the LRs (whether data received was correct and valid), the evaluation assessed the process followed by the FSA. The FSA followed a robust and thorough process to assess the accuracy of LRs data and that LR data received as part of the PoC accurately represented the situation in LR premises. FSA's process included unannounced physical visits by independent EHOs and comparisons between the results of LR audits and routine inspections performed by LAs. This process was supported and reviewed by the FSA audit team (who were not directly involved in the PoC, facilitating impartiality in the approach taken).

There was a high level of alignment between the LR data and EHOs' findings. EHOs also gathered insights that went beyond what was available to the FSA through a typical LA inspection. This enabled the FSA to assess whether information provided by LRs about their food safety processes and systems aligned with what was happening 'on the ground' in their premises. Such an additional layer of validation

served to reassure the FSA that LRs were providing accurate information about their processes and systems outside of the monthly data outputs.

The PoC was also effective in showing the FSA that LR data can deliver the same (or better) **insight into LR compliance** as what could be accessed through routine inspections by LAs. The FSA gathered evidence suggesting that LRs were driving compliance internally and provided data that went beyond what FSA can access from current routine inspections. The data reviewed showed that LRs were proactively identifying compliance issues between routine inspections and addressing them without LA input, and they were interested in how they could further improve their food safety systems and processes. As the PoC progressed, the FSA were able to identify patterns in LR data, such as compliance issues occurring more or less frequently. The FSA was able to also monitor whether LR efforts to address an issue were having an effect.

The level of data and type of analysis completed was more than what LAs or the FSA can complete following routine inspections. Over the course of the PoC, internal LR audits were carried out significantly more frequently than routine inspections by LAs following the regulation. Over the period of the PoC, 10,287 audits took place, compared to 1,561 routine inspections. The FSA found LRs willing to share additional insights to explain their level of compliance. The FSA attended audits at LR premises, gathered information about LRs' food safety systems, and queried points of interest in the data in each quarter.

There were some limitations to the findings presented above, further explained in the main report, that do not have an impact on the findings presented.

To what extent has the PoC enabled the FSA to draw conclusions for a future ELR?

Overall, the PoC was successful in enabling the FSA to draw conclusions for a future ELR: all the PoC success measures defined at the beginning of the PoC were met or partially met.

A summary table for each success measure is provided below:

Success measure (Source: FSA, 2022f)	Assessment
FSA has routine access to LR food safety data	Met
A consistent data format & standard is agreed	Partially met
Data quality & quantity is sufficient for meaningful analysis	Met
An agreed validation process is embedded within the PoC	Met
FSA & LR relationships deliver engagement & outcomes beyond the PoC	Met
PA/LA engagement successfully maintained through PoC exercise	Partially met

Conclusions

Overall, the ELR PoC was run well and achieved its objectives. The PoC demonstrated that there is potential viability for ELR, given that FSA was able to access LR food safety data routinely, in a consistent manner; the data quantity and quality were sufficient for meaningful analysis, and the agreed validation process showed the data was accurate and it allowed FSA to carry out an assessment of compliance. The PoC happened in a sandbox environment, as such, some of these findings may be different should the ELR progress forward.

1 Introduction and methodology

The Food Standards Agency (FSA) monitor the compliance of food businesses in England, Wales and Northern Ireland through in-person inspections of the premises of food businesses by local authorities (LAs). Large food businesses often have multiple premises in different LA areas.

The Achieving Business Compliance (ABC) programme aims to modernise the way food businesses are regulated in England, Wales and Northern Ireland by the FSA and LAs. As part of the ABC programme, the FSA are investigating the potential for an Enterprise Level Regulation (ELR), whereby large food businesses would be regulated at an enterprise level (i.e. as a whole business, as opposed to their individual premises).

To test the feasibility of an ELR, the FSA have undertaken a Proof of Concept (PoC) exercise with large retailers (LRs) in a 'sandbox' setting. This means the current regulatory system remained in place while the PoC was happening.

ICF were commissioned by the FSA to evaluate the ELR PoC. This report presents the final findings from the evaluation.

1.1 Research objectives

The evaluation of the ELR PoC seeks to respond to the following research questions:¹

1. How was the PoC exercise run?
 - a. How was the PoC designed?
 - b. How did the PoC exercise operate? What worked well and less well (including any unintended consequences)?
 - c. Did the relationship between the FSA and stakeholders (LRs, PAs, LAs) change as a result of the PoC?
 - d. Did the PoC affect the relationship between PAs and LRs?

¹ These research questions were refined during the interim stage of the evaluation, and therefore differ from those foreseen during the baseline stage.

2. To what extent has the PoC enabled the FSA to assess the feasibility of the ELR approach for assuring compliance of LRs?
 - a. To what extent did the PoC enable the FSA to assess the reliability of LR data?
 - b. To what extent did the PoC enable the FSA to assess the accuracy of LR data?
 - c. To what extent has the analysis of LR data enabled the FSA to carry out an assessment of LR compliance?
3. To what extent has the PoC enabled the FSA to draw conclusions for a future ELR?

The findings in this report are set out according to these research questions.

1.2 Methodology

The evaluation took place in three stages: baseline (the beginning of the PoC), interim (during the PoC) and final (the end of the PoC). The findings in this report are based on data collected across the three phases which are detailed below.

All three phases incorporated interviews with key stakeholders and a review of available data and documentation. Key stakeholders included FSA staff in the ELR PoC delivery team and other relevant teams (such as the quantitative data team or the audits team), and participating LRs and PAs. LAs were not interviewed as part of the evaluation as they were not directly involved or affected by the PoC activities (due to taking place in a sandbox). All reviewed data and documentation is listed in Annex 1, and additional information about the data and documentation is provided in Annex 2.

1.2.1 Baseline

The baseline stage took place between March and June 2023. It included:

- **Attendance at an in-person PoC kick-off event** which was arranged by the FSA for participating LRs and PAs. This provided an opportunity to introduce the evaluation and to observe the discussions taking place about commencement of the PoC.

- **Six exploratory interviews** with members of the FSA ELR PoC delivery team to understand how the PoC had been designed and implemented.
- **A review of documentation provided by the FSA** to provide more information about the PoC.
- **A total of 17 interviews** with stakeholders to understand their views on the PoC and experiences of being involved (where applicable). They took between 30 minutes and one hour. These stakeholders included participating LRs, an non-participating LR, Primary Authorities (PAs), the Office for Product Safety and Standards (OPSS) and an FSA staff member with insight into LA engagement.

Additionally, a follow-up discussion with a member of the FSA delivery team took place regarding the LR data that had been submitted at that stage.

1.2.2 Interim

The interim stage took place between October and December 2023. It comprised:

- **An evaluation framework workshop** with key FSA stakeholders to discuss the evaluation research questions and the approach to responding to them. This led to refinements to the research questions.
- **A review of data and documentation provided by the FSA** to inform progress on the PoC
- **A series of discussions with the FSA team** about approaches to assessing LR data. The approach to assessing the accuracy of LR data was in progress at the time of reporting, so ICF did not review it during the interim stage.
- **A total of 15 interviews** with the FSA ELR PoC delivery team and stakeholders (participating LRs and their PAs) to get an update on their experiences of the PoC to date.

1.2.3 Final

The final stage of the evaluation took place between February and May 2024. It comprised:

- **Workshops and written correspondence** with the FSA team to understand their approach to analysis of LR data.
- **A review of the final set of data and documentation** compiled by the FSA from the PoC to understand the FSA's outputs from the PoC.
- **A total of 17 interviews with stakeholders** to gather reflections on the PoC and gain insight into the data collected. This included the FSA ELR PoC delivery team and wider FSA staff members, and participating LRs and their PAs.

1.2.4 Data analysis

The evaluation team carried out a thematic analysis of the qualitative data, a review and analysis of the data and documentation received, a search and review of specific literature related to the ELR, and the triangulation of the different types of data sources analysed for the report.

At each stage of the evaluation, the evaluation team analysed the qualitative data collected through interviews, workshops, and events. For the analysis, the evaluation team anonymised the data and extracted it into a data collection template created for the report. The data collection template set out each research question, sub-question and corresponding indicators established in the evaluation framework (see Annex 6). The evaluation team undertook a thematic analysis of the data using the data collection template to identify the emerging evidence informing each indicator and answers for each evaluation question.

The evaluation team first reviewed the data and documentation provided by the FSA to establish (a) its purpose and content (including relevance to each research question), (b) its validity and (c) the key messages. Where further clarification was needed to facilitate interpretation, this was sought from the FSA (for example, more methodological details). The team then used the same data collection template to categorise and analyse this type of data.

The team complemented these findings with relevant wider literature. This helped contextualise or validate some of the findings, fill some evidence gaps

and support the validity of the implications of the evaluation as discussed in Section 6.

The evaluation team triangulated the findings from the qualitative data analysis, the data and documentation review and the wider literature reviewed to establish consistency in the findings. Evidence was considered strongest where emerging themes were present in multiple data sources (for example, seen in multiple interviews, and/or data or documentary evidence to corroborate themes seen in qualitative data).

2 Context

This section provides an overview of food safety and hygiene regulation, the approach taken by LRs to managing food safety and hygiene and the rationale for the ELR.

2.1 Regulation of food safety and hygiene in England

The FSA has responsibility for regulating food safety and food hygiene in England, Wales and Northern Ireland. Food businesses must comply with food safety and food hygiene regulations, and this is enforced by LAs. The FSA provide LAs with guidance on enforcement through:

- the [Framework Agreement on Official Feed and Food Controls](#) which sets out how official controls should be delivered by LAs; and,
- the [Food Law Code of Practice](#) which outlines how LAs can ensure 'quality, consistency, effectiveness and appropriateness' of controls, and the approach to effective coordination between LAs and other government agencies (including the FSA).

As enforcement agencies, LAs are required to undertake a variety of tasks including ([FSA, 2009](#)):

- undertaking food standards and food hygiene inspections, including Food Hygiene Rating Scheme (FHRS)² inspections;
- maintaining a register of food business operators (FBOs) in their area;
- responding to food incidents and alerts;
- investigating food complaints;
- taking enforcement action in the event of food business non-compliance;
- food sampling activities; and,
- providing advice to businesses.

While the FSA carry out consistency exercises to facilitate LAs to deliver these tasks consistently, the perception of LRs is that the approach taken by

² The FHRS provides consumers with an assessment of a food businesses food hygiene standards through a rating system, which ranges from 0 (urgent improvement required) to 5 (hygiene standards are very good).

individual LAs can differ. Large food businesses, including LR, often have multiple premises located in different LAs. This can result in premises following the same business level food hygiene and safety inspections having different FHSR scores, depending on the approach each LA take.

Large businesses can partner with Primary Authorities (PAs), to, amongst other objectives, minimise the challenges associated with premises located in different LA areas. PAs are LAs that provide a paid service to businesses of assured and tailored advice on meeting regulations such as environmental health, trading standards or fire safety through a single point of contact. As such, PAs provide guidance on compliance with regulations that enforcement authorities (i.e. LAs) should adhere to when administering controls, including those relating to food safety and hygiene. LR have a commercial relationship with PAs and pay for their time. The PA function is overseen by the Office for Product Safety and Standards (OPSS) and partnerships between businesses and PAs are listed on the [PA Register](#).

2.2 How LR manage their food safety and hygiene

Over 95% of the grocery market share in the UK is shared by 10 LR ([Kantar, 2023](#)). FSA analysis indicated that these LR tended to have a track record of high compliance with food safety and hygiene regulations. Between 90-95% of the premises of LR participating in the PoC had FHSR ratings of 4.9 (FSA, 2022f). During their interviews, LR emphasised the role that their internal food safety and hygiene monitoring systems and processes had to ensure high levels of compliance.

Following these interviews, ICF identified the common features of the LR internal systems and processes. These included:

- Internal policies and standards, including requirements for individual stores to adhere to as well as criteria for business-wide commitments and approaches to ensuring compliance.
- Dedicated food safety and/or regulatory compliance teams with responsibility for overseeing compliance with food safety & hygiene law, as well as compliance with internal policies.

- Store reporting and monitoring, including checklists that store managers/staff must complete, automated monitoring (e.g. fridge/freezer temperatures), routine store visits by business leaders/senior staff members, reviewing outcomes from LA inspections and regular analysis of store data (e.g. through reporting and dashboards).
- Food safety & hygiene audits carried out in stores, either by an internal audit team or third-party auditors (or a combination of both), typically unannounced. Audits can include FHRS-style inspection, microbiological surveys (e.g. on counters where food is prepared), and visits focused on particular areas (e.g. pest control, allergen control, business KPIs) in response to customer complaints or business concerns/interest.
- Monitoring feedback and complaints, including customer complaints made directly to the business and feedback (including complaints) passed from LAs to the LR's PA.
- Staff training on ensuring compliance with both regulatory requirements and internal approaches to food safety & hygiene.
- Electronic management of most of their compliance processes, though some combined this with paper-based monitoring (e.g. having paper-based checklists in stores).

All the LRs had PAs that supported their compliance. The support provided by PAs to LRs is discussed in more detail in section 3.4.

2.3 Rationale for the Enterprise Level Regulation (ELR) and the Proof of Concept (PoC)

The FSA began to develop the ELR concept in 2021, as one of the ABC programme workstreams. The ABC programme intended to develop a set of regulatory approaches set out in a 2023 board paper (FSA, 2023e) that:

- targeted available regulatory resources at the areas which posed the greatest risk;
- improved compliance across the whole system by working with and through others; and,

- made it easier for businesses to provide safe and trusted food to consumers.

LAs in England, Wales and Northern Ireland are required to inspect their local LR premises to assess compliance. However, LRs have historically high levels of compliance (see section 2.2) and systems to centrally collect and monitor their compliance data.

The rationale behind the ELR was to design a system that monitors and inspects the data collected by LRs so the FSA could use it to make an assessment about compliance of the LR at an enterprise-level. This was expected to respond to the ABC programme objectives by:

- negating the need for LAs to visit LRs' individual premises, allowing LAs to target resources on less compliant businesses;
- providing the FSA with continuous, '24/7' insight into LR compliance; and,
- minimising the regulatory burden for businesses associated with in-person inspection of their premises.

To test the ELR concept, the FSA carried out a Proof of Concept (PoC) exercise. The PoC involved LRs providing data access to the FSA, to enable the FSA to make an assessment about their compliance. It was run within a 'sandbox', which meant the existing regulatory system continued in parallel. The design and operation of the PoC is discussed in detail in the next section 3.1.

The PoC ran for one year between April 2023 and April 2024. Five LRs took part alongside their respective PAs.

The evaluation team, together with the FSA, created a Theory of Change (the ToC) for the PoC. This is provided in Annex 3.

3 How was the PoC exercise run?

To answer this question, the evaluation looked at the design and operation of the PoC, and its influence on stakeholder relationships.

Overall, the PoC was designed and implemented well, with feedback from across the FSA, LRs and PAs being consistently positive from the beginning of the PoC through to the end.

This section provides context and additional insight relevant to all of the PoC success measures (FSA, 2023f). Analysis against each success measure is provided in section 5.

3.1 How was the PoC exercise designed?

The objective of the PoC was to respond to the following question (FSA, 2023c):

‘Does Enterprise Level Regulation give us an accurate picture and assurance of the effectiveness of the retailers food safety management systems and processes?’

The FSA used the five-point Capability Maturity Model (CMM) to inform the PoC. The PoC was expected to progress the ELR concept from Level 1 to Level 3 on the CMM (FSA, 2022f). The CMM provides a structure for development of new processes, based on the following levels ([Paulk et al., 1993](#)):

- Level 1 – Initial (reactive, unpredictable);
- Level 2 – Repeatable (more stability, replicable processes);
- Level 3 – Defined (defined / standardised processes);
- Level 4 – Managed (measured and controlled); and,
- Level 5 – Optimizing (continuous improvement).

Accordingly, the PoC’s design was based on a dynamic learning process, whereby the ways of working between stakeholders would be refined and improved as it progressed. The FSA defined six measures against which to test the PoC’s success. These related to (a) the potential viability of the ELR

and (b) the impact of any changes in relationships between LRs, PAs, LAs and the FSA, as set out in Table 3.1.

Table 3.1 PoC Success Measures

Potential viability of ELR	Impact of any changes in relationships between LRs, PAs, LAs and the FSA
<ul style="list-style-type: none"> ■ FSA has routine access to LR food safety data ■ A consistent data format & standard is agreed ■ Data quality & quantity is sufficient for meaningful analysis ■ An agreed validation process is embedded within the PoC 	<ul style="list-style-type: none"> ■ FSA & LR relationships deliver engagement & outcomes beyond the PoC ■ PA/LA engagement successfully maintained through PoC exercise

Source: FSA (2022f)

3.1.2 Scope

The PoC was designed to take place following these characteristics (FSA, 2023e):

- In a **sandbox**, to establish whether ELR could provide the same or better levels of regulatory assurance about LR compliance compared to the existing regulatory system without removing it. The sandbox approach represented a lower risk for the FSA.
- In **England only**, due to differences in the systems and priorities across nations. However, it was intended for the learnings from the PoC to be shared across all three countries.
- With a **minimum of three participating LRs** (out of the 10 LRs invited to take part, who occupied the largest share of the UK grocery market), deemed the minimum number to enable LR data to be compared by FSA.
- With a **low cost and low risk solution to accessing data** of participating LRs. LRs had concerns about sharing commercially sensitive data with government. The finalised approach entailed LRs providing access to

their system to a single FSA staff member, who would process and analyse the data into an anonymous proforma assessing their compliance.

3.1.3 Running the PoC

The PoC was run by the FSA through four 'pillars' (FSA, 2023b):

- The **assurance framework**, which set out the criteria LRs needed to fulfil to take part in the PoC, and the corresponding data an LR would need to provide to enable the FSA to assess their compliance. It was based on the criteria that LAs would review during food hygiene inspections.
- Access and review of monthly LR **compliance data** by the FSA, with consideration of the extent to which the data reflects the assurance framework.
- **Relationship management** of the FSA relationships with LRs and their PAs to build trust and facilitate regular collaboration and discussion in respect of the PoC.
- **Validation** of the LR data to (a) ensure data accuracy and (b) check that corrective action is taken when non-compliances are identified.

A draft assurance framework was developed in collaboration with LRs, PAs, an external expert consultant and an FSA working group. The framework was presented to the 10 LRs occupying the largest share of the UK grocery market ([Kantar, 2023](#)) at an in-person event held in March 2022. Six of the 10 LRs subsequently agreed to participate in the PoC. One LR dropped out when the PoC started for internal reasons, so the PoC was run with five LRs. Once commitment from the LRs was obtained, the FSA proceeded with the design and set up of the PoC. The FSA delivery team completed the following activities:

- Scaling up the FSA PoC delivery team to meet emerging needs of the project, including:
 - Bringing in additional project management capacity to the PoC team.

- The Relationship Manager (RM) profile and function. The RM role was designed to support relationship building and gaining trust from LRs.
- The Account Manager (AM) profile and function. The AM role was designed to sit beneath the RM, working together to liaise with LRs to gather and understand their data. The AM had responsibility for processing and analysis of LR data.
- Continued relationship building activities with LRs and PAs. This included developing a Statement of Intent (FSA, 2022d) with each LR and their PA to set out the PoC aims and objectives, roles and responsibilities of each partner, and activities that would be undertaken as part of the PoC.
- Working on a suitable solution for each LR to provide the FSA with access to their data. LRs wanted assurance that data the FSA accessed to would be secure, and not leaked, or used for benchmarking LRs against one another.
- Understanding the compliance data LRs collected and establishing what LRs would need to extract from their system for the FSA to fulfil the needs of the assurance framework.
- Developing the assurance framework into tailored versions for each LR, which better reflected the LR's compliance systems and data without compromising the framework's ethos.
- Developing processes for assessing the data received, including the proformas that would be used by the FSA to process and analyse LR compliance data, and the assurance action log to record arising non-compliance issues. These were developed using prototype data provided by some of the LRs.
- Agreeing a structure for LR data access and discussion with LRs and PAs, which comprised LRs providing data (and PAs providing supplementary data where appropriate) on a monthly basis and quarterly meetings between LRs, PAs and the FSA.
- Developing processes for validating & verifying the compliance data received from LRs.

The core FSA PoC delivery team ultimately comprised a Project Lead, a Project Manager, the RM and the AM (a qualified Environmental Health Officer (EHO)), and a Project Support Officer. In addition, strategic leadership was provided by an FSA Deputy Director. Another FSA staff member with prior experience as an EHO within an LA led on the initial design of the assurance framework. Their experience was seen as important for the framework's design, as they had working knowledge of food safety and hygiene compliance and enforcement.

3.1.3.1 Work undertaken by LRs and PAs

Before the PoC began, LRs and PAs had to commit time towards activities that would enable them to participate in the PoC. These were:

- Gaining internal approval and working with colleagues to get their consent and assistance with granting the FSA access to data.
- Developing processes to give the FSA access to LR data, including making decisions about the format and content of data to provide in order to meet the assurance framework requirements, and how to grant the FSA access to it.
- Collaboration activities, including meetings (in-person and online) and email correspondence with the FSA.

3.1.4 What worked well and less well

3.1.4.1 Success factors

The following key features were identified as facilitating the design and set up of the PoC:

- Engaging with LRs and PAs at an early stage - LRs were appreciative of the FSA's efforts to involve them in the development of the PoC. The RM & AM roles were key to enabling this engagement.
- Resourcing – LAs and PA recognised that the FSA had invested in staffing. This enabled the PoC set-up to proceed smoothly and efficiently,

as there was more time for the FSA to engage with stakeholders (e.g. accommodating additional meetings, answering questions quickly etc).

- Experience and attitude of the FSA team – FSA staff engaging with PoC participants were praised for being knowledgeable, approachable, and willing to answer questions.

3.1.4.2 Challenges

There was consensus among stakeholders that the design and set-up of the PoC went well. However, the key challenges identified were:

- Building trust between the FSA and LRs – LRs were naturally apprehensive about engaging with a regulator and providing them with access to their data. Trust was ultimately achieved, with both LRs and the FSA reporting strong relationships by the end of the PoC (see section 3.3.1).
- The FSA's understanding of the business context – Some LRs suggested the FSA had unrealistic expectations about how quickly LRs could respond to queries. However, by Q2 of the PoC, the mutual understanding between LRs and the FSA had already improved, and this was retained throughout the remainder of the PoC.
- Communications with LRs not being recorded – A couple of LRs believed there were instances where discussions with the FSA had been forgotten. For example, the FSA requesting data that the LR had already said they did not have. This may have been due to early personnel changes within the FSA delivery team.

The evolution of the FSA and LR relationship is discussed further in section 3.3.

3.2 How did the PoC exercise operate? What worked well and less well?

This section looks at how the PoC was implemented. Overall, evidence suggested that implementation of the PoC went well, with positive feedback provided across the FSA, LRs and their PAs.

3.2.1 Implementation of the PoC

The PoC was delivered as follows:

- Each month, participating LR and PAs compiled compliance data and uploaded it to a portal on their system to which they granted the FSA access.
- The FSA processed and analysed the data of each LR, feeding into quarterly proformas assessing LR compliance.
- Where relevant data was missing or unclear, the FSA worked with the LR and their PA to find a solution (e.g. by requesting additional data or more information from the LR). The issue, the FSA request and the outcome of the request was recorded in an assurance action log (FSA, 2024f) maintained by the FSA.
- Where compliance issues or notable trends in food safety or food hygiene were identified (positive or negative), the FSA sought explanations from the LR and their PA. This information was also recorded in the assurance action log (FAA, 2024f).
- Quarterly review meetings between the FSA, LR and their PAs took place to discuss any FSA data queries – missing or unclear data, compliance issues or notable trends.
- There were also monthly meetings and email correspondence between the FSA, LR and their PAs to check in, discuss progress on actions agreed at previous quarterly review meetings, and to respond to any immediate FSA queries or requests regarding data for the given month where necessary.

In addition, the FSA carried out work internally to enable an assessment of ELR feasibility from the findings generated through the PoC. This included:

- Producing a data dashboard into which anonymised LR data into a standardised format that enabled compliance of each LR to be tracked over each quarter of the PoC.

- Analysing LR against data held by the FSA to assess the extent to which LR data could provide the same level of insight into compliance as the existing regulatory controls undertaken by LAs.
- Developing and implementing an approach to assessing the accuracy of LR data. This included a comparison of LA routine inspection data with LR data, and physical visits to LR premises carried out by independent EHOs.
- Exploring potential data management solutions which could handle the processing of LR data if ELR was taken forward.

For the FSA, the workload associated with implementation of the PoC was broadly in line with expectations for most the team. The exception to this was the workload of the RM and AM (new roles created for the PoC), whose capacity was more stretched. This is discussed further in section 3.2.2.

From the perspective of LRs, the workload associated with the PoC was generally in line with what they expected too. As the PoC progressed, alignment between the data LRs and PAs were providing and the FSA's expectations increased. Processes therefore became more systematic, resulting in a fairly consistent resource commitment for LRs each month. For PAs, the time spent on the PoC was below their expectations. This appeared to be due to most data being provided by the LR themselves.

3.2.2 What worked well & less well

3.2.2.1 Success factors

Several success factors were identified in the PoC's delivery.

For the FSA, LRs and PAs, a key success of the PoC was the collaboration and relationship-building efforts undertaken by the FSA. LRs valued the RM and AM role and were pleased that they had a clear and stable point of contact with the FSA whereby they could ask questions without judgement or retaliation, and get signposted to relevant FSA colleagues if necessary. The culture of the PoC was one where *“everybody's views were listened to”*, which was considered important in making the PoC a success.

The FSA similarly noted the willingness of LRs and PAs to contribute to the PoC. In particular, the FSA found LRs were happy to provide access data that ended up being *“a lot richer than we thought it could be”*. This was testament to the trust built through the collaboration work. The relationship between the FSA and stakeholders is discussed further in section 3.3.

Other success factors identified were:

For the FSA

- Enthusiasm and willingness to learn – The FSA PoC delivery team noted a shared eagerness to maximise their learning from the PoC. This enabled the FSA to gain new insight into how LRs operated. This was seen as a significant benefit for the FSA and their ability to learn from the PoC (discussed further in section 4.1).
- Collaboration between the PoC delivery team – There was consensus among the FSA delivery team staff members that the team worked well together. They communicated regularly and staff members were praised for being innovative and committed to ensuring the PoC met its objectives.
- Working with the Analytics Unit (AU) – The AU’s quantitative expertise facilitated the development of the data dashboard which in turn allowed trends in compliance for each LR to be more easily identified. The AU also carried out the data analysis exercise and one of the accuracy tests (described in more detail in sections 4.2 and 4.3).

For LRs and PAs

- Commitment to the PoC – LRs praised the continued interest and support for the PoC from the FSA, which demonstrated the FSA’s commitment to making the PoC a success, providing reassurance to LRs about their involvement.
- Points of contact at the FSA – LRs felt the AM and RM built a good understanding of their business and systems over the course of the PoC. This helped to ensure the FSA’s interpretation of the data was accurate and increased LR confidence in being open with the FSA as the PoC.

- The FSA's flexibility in the approach to accessing data – This meant LRs could provide data in a way which suited their internal systems. A PA praised the FSA for recognising that *“one size doesn't fit all”*.

3.2.2.2 Challenges

There were some challenges that arose during the PoC's implementation:

For the FSA

- Capacity – At some points during the PoC, the RM and AM's time was stretched. As their roles were new, it was difficult to anticipate their resource needs. However, additional administrative capacity was introduced in the second half of the PoC to assist with this challenge.
- Managing stakeholder expectations – Some LRs and PAs were expecting the PoC to lead to an imminent roll-out of the ELR. The FSA therefore had to carefully manage expectations about what a future ELR could look like (which was still unknown), while maintaining stakeholder engagement and buy-in to the PoC.
- Developing the assurance framework – The FSA staff member that led on the initial design of the framework was not subsequently involved in PoC delivery. This meant the process of developing the framework was more complicated than anticipated, particularly given the differences across LRs in the data points used for compliance monitoring (discussed in section 4.1.4).

For LRs and PAs

- Lack of clarity on data requirements – During the design phase, the FSA worked with LRs to understand their data and tailored the assurance framework accordingly, but the first months of the PoC still entailed *“a lot of back and forth”* between the FSA, LRs and PAs. Some felt these issues could have been avoided if there was a single set of requirements applicable to all the LRs, or if the FSA had been clear at an earlier stage about the data they wanted to see. Nevertheless, there was recognition among stakeholders that LRs had different systems which may have necessitated this approach.

- Uncertainty about how the FSA were assessing ELR feasibility – A few LRs and PAs perceived the FSA to have placed emphasis on monthly LR data as an indicator of compliance. They suggested the FSA may benefit from understanding the processes in place to maintain compliance and assessing the adequacy of these processes. LRs felt they would have benefitted from more feedback from the FSA on their data and how comparable it was across all the LRs.
- Lack of PA utilisation – There was recognition that PAs did not play a significant role in the PoC. Some felt PAs could have been better utilised, while others questioned the necessity of their involvement in the PoC. Several PAs were unclear about the purpose of their involvement in the PoC.

3.3 Did the relationship between the FSA and stakeholders (LRs, PAs, LAs) change as a result of the PoC?

This section investigates how the PoC affected relationships between the FSA and key stakeholders. It found strong relationships built between LRs and the FSA. PAs were less involved in the PoC than expected, though they were generally positive about the FSA and the PoC's implementation. As mentioned in the method (section 1.2), LAs were ultimately not directly involved in the PoC, and they were not interviewed as part of the evaluation.

The relationship between the FSA and stakeholders was directly linked to two PoC success measures (FSA, 2023f):

1. FSA & LR relationships deliver engagement & outcomes beyond the PoC.
2. PA/LA engagement successfully maintained through PoC exercise.

Analysis against each success measure is provided in section 5.

3.3.1 LRs

3.3.1.1 Participation in the PoC

Participation in the PoC by LRs was greater than initially expected by the FSA. Interviewed stakeholders noted that, historically, LR interactions with the FSA tended to be irregular and ad-hoc. Where LRs did interact with the

FSA, it tended to be with different FSA teams. For example, in relation to product withdrawals or recalls, or with the National Food Crime Unit (NFCU). Some LRs had also participated in a previous FSA pilot testing a regulatory model driven by PAs.

This prior relationship that LRs had with the FSA was not seen as particularly problematic for LRs – primarily because they were confident in their PA to deal with most of their queries. However, LRs acknowledged that there were some inefficiencies (e.g. requests or meeting invites sent by the FSA to the wrong individual, or the LR having difficulties identifying the right person at the FSA to speak with). LRs were therefore open to working more closely with the FSA and looked upon the PoC positively.

Among the LRs agreeing to participate in the PoC, the main reasons for choosing to do so were:

- a desire to support the FSA and an effective regulatory system;
- knowledge that competitors were taking part;
- wanting the ability to stay informed and influence future regulation;
- recognition that the regulatory system needed improvement; and,
- belief in the benefits of ELR as a concept.

One of the LRs not participating in the PoC still viewed it positively, and wanted to continue to build a relationship with the FSA.

3.3.1.2 Working relationship between the FSA and LRs

The relationship development between the FSA and LRs over the course of the PoC was positive. There was agreement that the frequency of contact worked well, and that meetings were productive.

Initially, LRs were suspicious about engaging with a regulator. They were concerned that data provided in good faith could be used against them or leaked, with corresponding ramifications for their reputation and business. As mentioned in section 3.1.4, during the early stages of the PoC LRs felt the FSA did not always understand their concerns or their business context.

However, as the PoC progressed, the FSA's understanding of the LR business context grew and this was widely acknowledged by LRs. They

praised the FSA for listening to them and being accommodating in relation to data submission timeframes and responding to queries. LRs trust in the FSA steadily increased, giving them the confidence to be open with the FSA. In particular, LRs praised the RM and AM for their thorough understanding of their businesses and the reassurance this provided to LRs when it came to sharing their data.

The closer relationship with the FSA did provide some benefits for LRs. It gave them improved access to regulatory information, and prompted ideas about possible improvements to their systems. For example, one LR described how the RM put them in touch with another FSA team, who could respond to a query they had relating to compliance. In the past, the LR would have been apprehensive about raising such queries out of concern that they could be negatively judged by the FSA. The new relationship reassured them that the FSA would understand the logic behind their query and put them in touch with someone who could assist.

Another LR described queries being raised by the FSA which led to internal actions to improve their food safety and hygiene systems and processes, including setting up a working group to look pest control information. A PA suggested LRs were looking more in-depth at premises when things went wrong as a result of their involvement in the PoC, enhancing their compliance.

The evolution of the relationship with LRs also offered benefits to the FSA. The FSA saw LRs became more trusting and willing to share sensitive information about their business at the PoC progressed. This meant the FSA's were able to gather insight into how LRs managed their compliance (discussed in section 5). These learnings were expected to help to shape future regulatory decisions, both for an ELR and beyond.

Additionally, the closer relationship with LRs provided benefits for the FSA outside of the PoC. Having points of contact within each LR meant the FSA could contact them in relation to other FSA work – including on topics other than regulation.

The FSA reflected this positive relationship with LRs in their overall assessment about each LR's engagement: from Q2 onwards, engagement from four LRs consistently exceeded expectation, going 'above and beyond' the trial (FSA, 2024c).

However, a future challenge for the FSA-LR relationship will be managing LR expectations about a future ELR, including communicating the learnings from the PoC and next steps. The FSA would need to continue relationship managing and building during the years it takes to design and implement the ELR.

3.3.2 PAs

3.3.2.1 Participation in the PoC

The PAs were supportive of LRs participating in the PoC overall. While a few were initially apprehensive about what it would mean for their workload, ultimately the PoC required less input from them than they expected (as noted in section 3.2.1).

Prior to the PoC, PAs did not have a particularly close relationship with the FSA. PAs generally did not express strong opinions about their own involvement in the PoC, as it was the decision of their LR to take part and their time contributing to the PoC was paid for by their LR. The stance of PAs towards the PoC was largely neutral, with most preferring to reserve judgment until it was further progressed and learnings were communicated.

3.3.2.2 Working relationship between the FSA and PAs

The relationship between the FSA and the PAs of participating LRs grew closer during the PoC. However, for most PAs, this was primarily due to the frequency with which they met in relation to the PoC – PAs acknowledged good relationships with the RM and AM at the FSA but did not feel their relationship to the FSA as an organisation was strengthened. This was likely due to the PAs being less involved in the PoC than expected: LRs were providing the FSA with all or the majority of data and information about their business as opposed to their PAs (see section 3.4). Nevertheless, PAs attitude towards the FSA's implementation of the PoC was generally positive.

A few PAs highlighted aspects of the FSA's approach to the PoC which they felt could have been improved. They did not feel they were sufficiently involved in the shaping the PoC, and were uncertain about how the relationship between the FSA and LRs was feeding into ELR development. These PAs perceived the FSA's approach to LR data within the PoC as too flexible. However, this may be reflective of their involvement in the PoC being more limited than initially expected (see section 3.2), and disconnect in PA and the FSA's expectations about how the PoC would work.

However, one PA did note that they felt their relationship with the FSA had developed positively. They felt confident talking to them, and felt the FSA had a renewed interest in the PA role as a result of the PoC.

Where LRs did not have a particularly strong working relationship with their PA, there was recognition that the role of the PA in the PoC was very limited. This led to questions for the FSA about what the role of the PA may be if the ELR was to be taken forward (see section 1).

3.3.3 LAs

As mentioned in the method (section 1.2), LAs were not interviewed as part of the evaluation. This was because they were not directly involved or affected by the PoC activities as it took place in a sandbox. Accordingly, the FSA's engagement with LAs was limited during the PoC: a decision about a future ELR had not been made, and there were other more imminent regulatory changes and challenges which the FSA were working on with LAs.

There were nevertheless some updates from the FSA to LAs on the PoC, including emails and a webinar. These efforts were informative, rather than opportunities for LAs to contribute.

There was a belief that LAs were likely sceptical of a potential ELR. LRs and PAs suggested the FSA would need to take steps to convince them of the benefits of the ELR if it was taken forward, as it would be difficult to proceed without LA buy-in. Sharing findings from the PoC with LAs and outlining what this meant for ELR was expected to build LA engagement in the idea, as they could review the evidence for themselves.

3.4 Did the PoC affect the relationship between PAs and LRs?

This section looked at the extent to which the PoC affected the relationship between PAs and LRs. Overall, it found the relationship between PAs and LRs was not significantly influenced by the PoC.

3.4.1 Support provided by PAs to LRs

Interviewed LRs and PAs were asked about the support provided by PAs to LRs outside of the PoC. Typically, PAs carried out the following tasks on behalf of their partner LR:

- Issuing assured advice which LRs follow to ensure their compliance, and which LAs must observe (providing LRs follow this advice, an LA would not be able to take enforcement action against them on the issue).
- Issuing inspection plans which LAs must follow when inspecting the premises of the LR. These plans include areas not to be inspected locally (i.e. due to PAs taking responsibility for the checks at national-level, or having issued advice in relation to specific policies/procedures), as well as target areas that should be the focus of local inspection activity.
- Scrutinising business processes to ensure they remain compliant – e.g. looking at new equipment, systems or concepts, and providing guidance on controls and record-keeping requirements.
- Managing feedback and complaints received from LAs (i.e. in relation to LR stores in the LA area), including flagging high-risk issues for LRs to address and carry out trend analysis.
- Providing an intermediary role between their LR and LAs – e.g. responding to LAs wishing to take enforcement action, dealing with queries from LAs, general liaison with LR (providing regulatory/compliance updates; regular meetings etc). PAs can act as intermediaries for LRs and government agencies too, including the FSA (e.g. on product recalls, food incidents).

The strength of the relationships of participating LRs and their PAs at the outset of the PoC varied. Some were very close to their PA and wanted to maintain this under an ELR. Others did not see a role for PAs under ELR.

3.4.2 Influence of the PoC on the relationship between LRs and PAs

Participation in the PoC did not have any significant influence on the working relationships between LRs and PAs. Rather, the strength of the existing partnership continued into the working relationships for the PoC, with data sharing arrangements between LRs and PAs being variable:

- Some PAs were directly supporting LRs with pulling data together for the FSA, with both LR and PA sending their data jointly.
- Other PAs simply sent over the data they were responsible for to the FSA, while the LR compiled their data without PA input.

As PA time was paid for by LRs, the PoC had impacted these costs. In some cases, PAs were pushing other work back when they needed to spend time on the PoC, so the cost to the LR did not increase. In other cases, LRs had additional PA costs to cover their work on the PoC.

Both LRs and PAs were unsure what the role of PAs would be if the ELR was taken forward. This is discussed in section 1.

4 To what extent has the PoC enabled the FSA to assess the feasibility of the ELR approach for assuring compliance of Large Retailers?

4.1 To what extent did the PoC enable the FSA to assess the reliability of LR data?

For the purposes of this study, data reliability referred to:

- Data access – The adequacy of the process of generating and sharing the data, including timeliness of receiving data and ease of sharing data between stakeholders.
- Data format and standard – Ease of processing and analysing the LR data, with consideration for how LRs present their data, volume of data, and level of detail.
- Data content – The categories of data and data points used, and the extent to which these are aligned with the assurance framework.

A summary of the assessment for each area of data reliability is provided in Table 4.1.

Table 4.1 Assessment for each area of data reliability

Area	Assessment
Data access	The FSA had routine access to LR data for the duration of the PoC. LRs found the process of sharing data with the FSA to be straightforward.
Data format and standard	The format, level of detail and volume of data was not consistent across LRs due to their differing food safety systems. Nevertheless, the data was high quality overall and, by working with LRs, the FSA were able to overcome these challenges to understand the data and gather insight into LR food safety processes.
Data content	LRs provided the same categories of data, but data points used varied due to LRs differing food safety systems. Nevertheless, there was a high level of alignment between LR data and their unique assurance framework.

Data reliability was linked to three PoC success measures (FSA, 2023f):

1. FSA has routine access to LR food safety data.
2. A consistent data format & standard is agreed.
3. Data quality & quantity is sufficient for meaningful analysis.

Analysis against each success measure is provided in section 5.

4.1.2 Data access

Data access was assessed by reviewing the timeliness of the LR data provided, the process by which LRs generated the data and the process by which LRs granted the FSA access to that data. Overall, access to LR data by the FSA throughout the PoC was straightforward.

At the outset of the PoC, the FSA agreed with LRs that direct access to their data would be limited to one member of the FSA team (the AM) to limit the number of people accessing commercially sensitive data. The AM had responsibility for processing and analysing the data into the anonymised

proformas. This meant other FSA staff members could not use LRs' data until the AM had completed their processing and analysis. As all of the AM's analysis needed to be completed at the same time (to be ready for the quarterly assurance meetings with LRs), there were considerable workload pressures for the AM to process and analyse it all effectively.

However, the FSA took steps to address this issue during the PoC. They extended the time period between receiving the final month's data of each quarter and the quarterly meeting, to allow more time for processing and analysis. The FSA also recruited a temporary assistant to the AM to undertake administrative tasks. These actions were effective in alleviating the workload challenges encountered by the AM during the PoC, which meant there was no material effect on PoC delivery. It also strengthened delivery by providing additional capacity for recording and actioning items raised by LRs and PAs during meetings (a challenge seen during the set-up of the PoC – see section 3.1).

LRs were provided with timeframes for sharing their data at the outset of the trial. Throughout the PoC, LRs provided data to the FSA in a timely manner. This was illustrated through the FSA's monitoring data: in 70% of cases of data sharing across each quarter and across all five LRs, data was provided to the FSA either on or around the date given ahead of the PoC, or within a few days, without prompting from the FSA AM.³ There were only two instances of significant delays in the FSA being able to access the data.

LRs reported the process of generating data for sharing with the FSA as largely straightforward. They did not need to generate anything new and compiled existing data from their internal compliance monitoring systems. None of the LRs expressed concern about the time they had spent compiling data.

³ FSA monitoring data provided a score of between 1 (significant delay in sharing data) and 5 (data shared earlier or on around the date given ahead of the trial) for each of the five LRs in each quarter. Of the 20 scores given, 14 were a '4 - data shared a few days after date given ahead of trial' or a '5 - data shared earlier or on around the data given ahead of the trial' (70%).

PAs reported sharing the same outputs with the FSA that they produced for their LRs, so the PoC did not place any additional burden on them.

Should an ELR be introduced, LRs would know the data they needed to grant the FSA access to in advance. This suggests the process would be straightforward to them in the long term.

4.1.3 Data format and standard

The ease of processing and analysing the LR data by the FSA was evaluated by reviewing the formats in which the data was provided by LRs, the volume of data accessed, and how detailed it was. These elements have a role to play in helping the FSA process and analyse the data.

Data was shared by LRs in different formats, including in PowerPoint, Excel and Word. For the FSA, PowerPoint and Word formats were more restrictive when it came to processing and analysis, as they did not have the quantitative analytical functions that are available in Excel (such as filtering). The diversity of formats meant that the FSA could not take a consistent approach to processing and analysing data across the LRs.

The level of detail and volume of data provided by LRs also varied between LRs. This led to some preliminary challenges for the FSA, such as:

- data not linked to the assurance framework, making it more time consuming to analyse;
- definitions not provided for the terminology used in the data;
- absence of explanatory information (e.g. why a standard had not been met);
- gaps in the data;
- presenting large volumes of raw data which were more time consuming to process and analyse (though it was also recognised that receiving large volumes of data was beneficial insofar as it enabled FSA to draw their own conclusions, rather than rely on an LR's own interpretation of their data).

However, LRs were amenable and responsive to the FSA's requests for additional information and data when required. This led to improvements in

the data provided. It also allowed the FSA to gather information on their internal processes and procedures. This gave the FSA a deeper understanding about how LRs operate, and enabled them to more easily interpret the data provided.

Ultimately, the format, level of detail and volume of data provided by different LRs in the PoC was not consistent. This was driven by the different food safety systems and processes they had in place. However, the FSA were able to overcome this by working closely with each LR to understand their data and gather additional information. Insight into the investments made by LRs into their food safety and hygiene systems helped the FSA to understand the reasons for their high levels of compliance. This suggests an ELR could provide the FSA with a greater insight than is available through the current regulatory regime, though work may be needed to achieve consistent outputs from LRs.

4.1.4 Data content

Another area of assessment was the data points used by LRs and the extent to which these were consistent across LRs. One of the PoC's success measures was that 'data of comparable depth and breadth is provided by all LRs involved' (FSA, 2022f), as set out in section 3. The FSA developed an assurance framework as basis for working with LRs to obtain comparable data.

The framework was based on the Food Law Code of Practice (FSA, 2023a) and data gathered by LAs during official food controls (as noted in section 2.2). It set out requirements for the following LR data (FSA, 2023f):

- FHRs ratings across the estate - This was generated by the FSA AM from the FSA FHRs database, and any ratings below 3 were raised and discussed with LRs.
- Assured advice – PAs provided updates to the FSA on changes to assured advice or upcoming reviews of LR's food safety management systems.

- Serious incidents – Number of food safety summons and discussion of action taken (where applicable).
- Audit and monitoring data (from external audits carried out by third parties, and from internal audits) – The specifics of this varied for each LR, but generally it encompassed areas of food hygiene, cleaning, pest control, maintenance checks and results of internal check lists / audits.
- Complaints data (received by LAs / LR's PA) – Number of complaints received and action taken.
- LA engagement – Number of notices⁴ served and subsequent outcomes; Number of LAs contacting PAs following an inspection; Outcome of LA inspection against the inspection plan.

While these overriding data categories were the same for all the LRs, each LR had different food safety systems and processes in place. This meant the specific data points used by each LR to report on data for each category was not consistent, so developing a standardised format for inputting data was challenging. As such, the FSA developed tailored versions of the framework for each LR in the PoC to better reflect their individual data.

The FSA monitored the extent to which each LR's data matched their unique assurance framework in each quarter of the PoC. By Q2 of the PoC, most LRs (4 of 5) were providing all the information listed in the framework, alongside at least some additional information. This continued through to Q4. The remaining LR provided data that matched the framework, but they did not provide anything additional (FSA, 2024c). This was thought to be due to capacity issues at the LR, as the FSA still found them willing to share insights into their systems and processes.

Some LRs and PAs felt it was important that the FSA reviewed their systems and processes, as opposed to focusing solely on the data they were providing each month. They suggested the FSA could have benefitted from

⁴ Referring to enforcement notices on premises by LAs, including Hygiene Improvement Notices (HINs), Emergency Prohibition Notices (EPNs) and Emergency Prohibition Orders (EPOs).

including indicators on the compliance systems and processes that LRs have in place as part of the assurance framework. However, this would not have been consistent with the [Food Law Code of Practice](#).

4.2 To what extent did the PoC enable the FSA to assess the accuracy of LR data?

Data accuracy refers to the extent to which data is correct and reliable. In this instance, it refers to the extent to which LR data reflected what was happening on the ground in LR premises.

To answer this question, the evaluation looked at the process taken by the FSA to assess data accuracy and the effectiveness of this process. The assessment showed that data received by the LRs was accurate based on the validation process embedded in the PoC.

In addition, data accuracy was linked to two PoC success measures (FSA, 2023f) set out during the inception of the PoC.

1. Data quality & quantity is sufficient for meaningful analysis.
2. An agreed validation process is embedded within the PoC.

Analysis against each success measure is provided in section 5.

4.2.1 Approach taken by FSA to assessing data accuracy

One of the four pillars of the PoC was the validation of LR data (see section 3). An aim of the validation process was for the FSA to establish the accuracy of LR data.

The FSA's approach was built in collaboration with, and endorsed by, the FSA's audit function. It revolved around the following principles (FSA, 2024b):

- Physical visits comprising both (a) data led visits (choosing premises based on LR data) and (b) visits to premises chosen randomly.
- Taking a multifaceted approach to corroborate LR data – for example, reviewing premises-level paperwork and third-party data (e.g. pest control providers), and having discussions with premises managers / staff members.

- Ensuring an equal number of physical visits to check for conformities as there are to check non-conformity.
- Using independent, contracted EHOs to undertake the physical visits, to provide impartiality and objectivity.
- Using physical visits to provide 'dual level assurance' by (a) looking back, and (b) looking forward.

To assess data accuracy, the FSA took a two-pronged approach:

- carrying out independent physical (in-person) visits to LR premises, to compare the results of these visits with LR data; and,
- comparing the results of LR audits with the results of routine inspections carried out by LAs as part of a data analysis exercise.

Physical visits

Two independent EHOs were contracted to undertake the physical visits. Premises of all five LRs were visited. Some premises were selected because a specific issue or item of interest was present in the data, while others were selected at random. In total, 40 visits were carried out of different LR premises across two regions of England. Visits were carried out between February and March 2024 and lasted 1-2 hours (FSA, 2024b).

LRs were informed that these visits would be taking place to negate the risk of EHOs being turned away on arrival, though they were not informed about the premises the FSA chose to visit. EHOs were not informed about the reasons a premises was selected for a visit and were simply asked to report back on what they observed.

During the visits, EHOs covered the three inspection areas that are typically investigated during LA food hygiene inspections: food hygiene, structural (physical condition of the business premises), and confidence in management. These focus areas reflected the design of the proformas used for processing LR data (discussed in section 4.3.1). The FSA produced a specifically designed template for EHOs to complete for each visit which was aligned to the assurance framework of each LR. EHOs were also provided

with the LR's PA inspection plan, where there was one in place⁵ (for more information on the PA role and inspection plans, see section 3.4.1).

The FSA carried out a combined qualitative and quantitative assessment of the EHO findings from each premises against LR data. Firstly, the templates completed by EHOs were compiled into a single Excel file against the premises they referred to. The FSA then cross-referenced this information against the available LR data for each premises. For example, where a premises was chosen for a visit because LR data indicated a pest activity, the FSA looked to see whether the EHO also recorded this issue. Where there was alignment between the EHO's findings and the data, this would be marked as 'true' (i.e. determining that LR data was an accurate reflection of what was happening on the ground).

Comparing the results of LR audits and routine inspections

The FSA investigated the consistency of the findings from LR audits (provided by LRs as part of the data sharing arrangements - see section 4.1.4) and routine inspections by:

- Comparing the outcomes from LR audits with routine inspection outcomes in LR premises which did *not* receive FHRS ratings of 4 or 5 during the PoC, to establish whether the LR audits picked up on the issue(s) identified by the LA during the routine inspection.
- Comparing the outcomes from LR audits with routine inspection outcomes in premises which received FHRS ratings of 4 or 5 ('good' or 'very good') during the PoC, focusing on premises where some issues are identified during the routine inspection which did not result in failings (inspection scores of 5 to 10 – see Annex 5 for FHRS scoring) to assess the extent to which these issues were still being picked up by LRs.

⁵ One LR-PA partnership was new, and therefore they did not have an inspection plan in place at the time the PoC was carried out.

Where inconsistencies were identified, LRs and their PAs were asked to provide the completed inspection plan⁶ for the premises in question, alongside the LR audit report for the audit taking place closest to the inspection. This enabled the FSA to investigate an identified discrepancy in more detail.

4.2.2 Effectiveness of the PoC in enabling an assessment of data accuracy

The PoC was effective in providing the FSA with assurance that data provided by LRs during the PoC was accurate. The approach taken to assessing data accuracy was thorough, demonstrated in the features underpinning the physical visits to ensure robustness and the added insight provided through the comparison of the results of LR audits and routine inspections. Additionally, the FSA's findings indicated that data provided by LRs was accurate.

4.2.2.1 Physical visits

Following the assessment of the data, the FSA found that the results of the physical visits accurately reflected data previously provided by the LR (FSA, 2024b).

The FSA reported that, where they chose premises due to a compliance issue shown in the data (e.g. pest activity), this was reflected in the EHO's findings for the premises. Additionally, EHOs provided details about corrective action that was being taken, also enabling the FSA to verify that information provided by LRs about their policies and processes was also correct. Where the FSA chose stores at random (those with no compliance issues showing in the data), EHOs did not identify compliance issues either.

The process that the visits followed was robust. This is because it had the following features:

⁶ Inspection plans must be followed by LAs when inspecting the premises of LRs. LAs use these plans during routine food hygiene inspections to the premises of LRs. LAs are required to send the completed inspection plan outlining their findings to the LR's PA (though this did not always happen in practice – in some cases, they were missing because the PAs were yet to receive the completed plans from LAs).

- Visits were unannounced, limiting any ability for LRs to prime their premises for the visit, had the data they provided to the FSA been inaccurate. Literature on audit systems found unannounced inspections help reduce the risk of records being falsified in advance ([Powell et al., 2013](#)).
- LRs were not informed about what would be investigated during the visits, limiting the ability for premises to prepare for them.
- Independent, contracted EHOs carried out the visits and were given no information about the data for premises visits, minimising the risk of their reports being influenced by preconceived ideas or biases.
- The FSA's audit team provided expertise on a robust approach for testing the accuracy of LR data with impartiality (as they were not directly involved in the PoC delivery).
- Findings from the visits were corroborated with both retrospective LR data (received prior to the visit) and data received after the visit. Comparing multiple LR data sources, provided at different points in time, suggested the high level of accuracy found was not down to chance.
- Additional insight was gathered by EHOs on the premises' food safety processes and record keeping. This enabled the FSA to assess whether information provided by LRs about their food safety processes and systems aligned with what was happening 'on the ground' in their premises.

4.2.2.2 Comparing the results of LR audits and routine inspections

The FSA's AU carried out data analysis to compare the results of LR audits (provided in the LR data) to those from routine inspections. This analysis showed data provided by LRs was likely accurate given the degree of congruence between the results of LR audits and those of routine inspections by LAs.

Most LR premises (9 of 13) that did *not* receive FHRs ratings of 4 or 5⁷ following a routine inspection taking place during the PoC, also failed their LR food safety audit. This indicated LR audits were likely picking up on the same issues identified by LAs during routine inspections. Among the four premises that passed the LR audit (i.e. where it appeared LR audits did not pick up on the issues identified during routine inspections) (FSA, 2024a):

- Compliance issues (relating to cleaning and pests) were identified in LR data for two of the premises, suggesting LRs were still aware of issues despite the premises passing the audit.
- A review of the completed inspection plan alongside the LR audit report suggested it was unlikely the issue in one of the premises was present at the time of the LR internal audit. As it showed up in between audits, it was unlikely to be due to data inaccuracy.
- The FSA were unable to investigate the last premises as the LA did not provide the completed inspection plan to the PA or the LR.

This is demonstrated in Figure 4.1

Figure 4.1 Flow chart showing consistency between LR audits and LA inspections



Source: FSA, 2024a.

Likewise, most LR premises (29 of 59⁸) receiving a high FHRs rating with minor issues (a rating of 4 or 5, and inspection scores of 5 or 10), also passed the LR audit. Of the 21 premises that still failed the LR audit, the FSA

⁷ Premises given an FHRs rating of 3 are still legally compliant, but this nevertheless represents a low FHRs score for an LR.

⁸ In 9 of these premises, the FSA was unable to determine whether they passed or failed their LR audit as the LR did not provide the premises-level audit findings.

found that this was likely due to higher targets and the greater number of checks contained in the audit (i.e. a procedural issue for the LR, as opposed to a legal non-compliance).

This comparison of LR audits and routine inspection strengthened the overall approach taken by the FSA to assessing data accuracy in the PoC because:

- It could be applied to the majority of data collected in the PoC (Q1, Q2 and Q3⁹), while the physical visits were constrained to the time period in which they were carried out.
- The analysis was undertaken by the FSA's AU, rather than by members of the PoC delivery team, adding a degree of impartiality.

4.2.2.3 Limitations

The limitation of the physical visits was that a relatively small number were carried out. Between them, the five participating LRs have thousands of stores in England, so the 40 premises visited represent only a fraction of those. Similarly, these visits were limited to two regions (driven by the locations of the contracted EHOs).

The FSA noted that 40 visits was a good balance between costs per visit and the scale and aims of the PoC. The visits took place in conjunction with other checks for accuracy and the PoC was in a sandbox (the visits were not in place of usual regulatory checks – see section 3.1), so the team agreed that those 40 visits would be sufficient to assess data accuracy.

There were two limitations associated with the comparison of the results of LR audits with the results of routine inspections:

- LR audits and routine inspections could not be compared in a 'like-for-like' manner. While they investigated similar items (see section 4.3), they were not identical. As such, even where FHRS scores and LR audit findings aligned (e.g. premises with FHRS ratings of 3 also failing the LR audit), it

⁹ The data analysis did not incorporate Q4 data due as there was not sufficient time available to request the completed inspection and audit plans while producing the analysis for use in this evaluation.

was not a guarantee that they were identifying the same issues. Likewise, inspections and audits took place on different dates which meant things could have changed in the period between (FSA, 2024a).

- The comparison could only be undertaken for three of the five LRs. This is because one of the LRs did not provide premises-level audit data to the FSA as part of the PoC, while the other's audit system did not record audit outcomes for food safety separately from other areas covered in their audit which were not relevant to the PoC. However, the PoC originally set out with a goal of a minimum of three LRs participating, and this was still met for the data accuracy test.

4.3 To what extent has the analysis of LR data enabled the FSA to carry out an assessment of LR compliance?

This section looked at the ability of the FSA to assess LR compliance with food safety and food hygiene requirements using LR data. Through the PoC, the FSA sought to understand whether LR data could deliver the same (or better) insight into compliance as what could be accessed through the existing system.

To answer this question, the evaluation looked at the approach taken by the FSA to assessing compliance and the effectiveness of this process. Overall, the PoC was effective in demonstrating that LR data can be used to assess LR compliance. The FSA were able to obtain insights from the LR data which could be used to inform assessments of compliance which went beyond what the FSA could access from routine inspection as per the current regulatory approach. The FSA also gathered evidence to suggest LRs were driving compliance internally.

Assessing LR compliance was linked to the following PoC success measure (FSA, 2023f): Data quality & quantity is sufficient for meaningful analysis.

Analysis against each success measure is provided in section 5.

4.3.1 Approach taken by FSA to assessing LR compliance

The FSA explored LR compliance in two ways:

- undertaking quarterly data reviews; and,
- completing a data analysis exercise at the end of the PoC.

Undertaking quarterly data reviews

As noted in section 3.2, LR data was processed and compiled into quarterly proformas by the AM, who had direct access to each LR's data. The proformas were shaped around the three areas investigated during LA food hygiene inspections – food hygiene, structural (physical condition of the business premises), and confidence in management. They also contained qualitative assessments about the quality of the data and the LR's level of engagement with the PoC over the quarter. The purpose of the proformas were to:

- provide a consistent format for assessing each LR's data in line with what is captured during food hygiene inspections; and,
- draw out any compliance issues and data trends, and provide additional context about the LR's data.

In total, 20 proformas were produced during the PoC - four (one in each quarter) for each of the five LRs. The proformas were used to guide the discussions held in the quarterly review meetings between the FSA and each LR and PA partnership (see section 3.2). In addition, towards the end of the PoC, a data dashboard was developed. The dashboard better enabled the FSA to compare each LR's data across each quarter, so compliance trends could be more easily identified.

An assurance action log was also maintained for each quarter and each LR. This set out requests for information the FSA had for the LR and a record of action subsequently taken. The log included identified compliance issues, notable data trends and clarifications on the data provided. Some of the actions recorded in the log fed into case studies and data stories setting out how a compliance issue was detected, the details of the issue and the action taken as a result.

Completing a data analysis exercise at the end of the PoC

As noted in section 3.2, the FSA's AU used the proformas to complete an analysis of LR data. The purpose of the analysis was to assess the suitability of LR data for monitoring compliance. It aimed to determine the extent to which LR audits compared with routine inspections in terms of:

- scope (areas of compliance covered);
- frequency;
data obtained; and,
- consistency (similarity of LR audit and routine inspection findings – discussed in section 4.2.2).

The analysis also assessed the extent to which LR food safety management systems had the capability to detect and mitigate non-compliance without LA involvement.

4.3.2 Effectiveness of the PoC in enabling an assessment of LR compliance

The evaluation team considered this in two ways:

- the extent to which the data generated and provided by LRs and their PAs was sufficient for assessing compliance; and,
- the extent to which LRs were driving compliance internally.

The PoC was effective in enabling an assessment of LR compliance. LR data could be used effectively to assess LR compliance: compliance issues could be identified, LR audits were more frequent than routine inspection, and additional information could be obtained from LRs, and the FSA could monitor trends in compliance. Overall, the LR data provided the FSA with a greater volume of information about compliance than what the FSA could access from routine inspection as per the current regulatory model.

LRs were also driving compliance internally. They were proactively identifying compliance issues between routine inspections and addressing these issues without LA input. LRs were also interested in how they could improve, demonstrating their commitment to food safety.

4.3.2.1 Use of data for assessing compliance

The FSA reviewed each LR's compliance by looking for compliance issues and trends occurring in the data received, and by comparing LR data with data available from routine inspections to determine whether LR data could offer equivalent assurance.

Compliance issues could be identified from the data across all five LRs

Data provided enabled the FSA to populate each LR's proformas with assessments about their level of compliance across the three areas of focus (food hygiene, structural, and confidence in management). Among LRs where both audit plans and inspection plans were available, the audit plans had at least one item checking the same or a similar area of food safety and hygiene as the inspection plan (FSA, 2024a).

The FSA had a large volume of data available to use for assessing LR compliance

Over the course of the PoC, LR audits were carried out significantly more frequently than routine inspections (10,287 audits, compared to 1,561 routine inspections (FSA, 2024a)). The volume of LR data from audits therefore exceeded data available to the FSA from routine inspections. Further, LR data provided information about compliance issues identified in between routine inspections, and often included additional areas of food hygiene above strictly legal compliance (FSA, 2024a).

Data allowed identification of compliance trends

As the PoC progressed, the FSA were able to identify patterns in LR data, such as compliance issues occurring more or less frequently. The FSA could also monitor whether LR efforts to address an issue were having an effect.

Additional information and evidence could be obtained to facilitate assessments of compliance

As noted in section 4.1, LRs were willing to share additional insights to explain their level of compliance. Where compliance issues were identified, LRs provided the FSA with relevant documentation and photographic evidence to confirm the actions they were claiming to be making. In one

example, an LR proactively shared commercially sensitive information with the FSA as they expected it to impact their data (FSA, 2024e). This was considerably more detailed than the information available to the FSA through routine inspection, which was limited to the numeric scores for each food safety area at a premises and without any explanatory information.

4.3.2.2 Drivers of LR compliance

The FSA reviewed the extent to which compliance issues were being identified and addressed by LRs outside of routine inspections.

LRs were identifying compliance issues occurring between routine inspections

Notably, even in premises with FHRs ratings of 3 and above (i.e. premises that were legally compliant), compliance issues were being identified and addressed by LRs to ensure the score rating remained high. This suggests LRs were closely monitoring their premises even where they had been found legally compliant by LAs and regardless of when routine inspections are due (FSA, 2024a).

LRs were actively addressing compliance issues without LA or FSA input

There were no cases reported where the FSA identified non-compliances which LRs were not already aware of and in the process of addressing. In the compiled case studies (FSA, 2024d), examples were provided of issues identified by the LRs through routine inspection, LR audits and customer complaints. In all cases, LRs shared information about how they were responding to these issues with corresponding evidence. **LRs were interested in how they could further improve their food safety systems and processes**

This was observed by the FSA team and reflected in interviews with some LRs, who suggested the FSA's approach to assessing their data could have been strengthened by providing them with feedback about their level of compliance (e.g. where they were doing well and where things could be improved). This suggests they were interested in continuing to improve

compliance, despite their track record of high compliance (as discussed in section 2.2)

4.3.2.3 Limitations

While the PoC has shown LR data can be used to assess compliance, there were some limitations.

In some cases, information used to inform assessments of compliance was either not available or not provided by all LRs. This meant the comparison of inspection plans with audit plans applied to three LRs as opposed to five. Some data was difficult to compare across LRs as it was captured and recorded in different ways. For example, all LRs provided pest control data, but the number of pest control visits carried out across all premises was only available for two LRs. Despite this, the nature of the PoC (where LR participation was voluntary) meant LRs could not be obligated to change their systems to generate data in a standardised way, or to provide information that they preferred not to.

Other limitations identified are listed below:

- The PoC's assessments focused on LR data and the extent to which it could provide an indication of LR compliance. Some LRs and PAs suggested the PoC would have benefitted from exploring how LR systems and processes could be used to inform assessments of LR compliance too (though this would not be consistent with the Code of Practice - see section 4.1.4).
- While LRs were willing to provide evidence that they were addressing compliance issues, the evidence they provided was not independently verified as part of the PoC.
- To ensure data security, only one member of the FSA team (the AM) had direct access to LR data. However, this meant their interpretation of the data could not be verified or reviewed for errors.

5 To what extent has the PoC enabled the FSA to draw conclusions for a future ELR?

Overall, the PoC was successful in enabling the FSA to draw conclusions for a future ELR, with all the PoC success measures defined at the beginning of the PoC being met or partially met.

A summary table for each success measure is provided below:

Success measure (<i>Source: FSA, 2022f</i>)	Key sections of the report ¹⁰	Assessment
Potential viability of ELR		
FSA has routine access to LR food safety data	Section 4.1	Met
A consistent data format & standard is agreed	Section 4.1	Partially met
Data quality & quantity is sufficient for meaningful analysis	Section 4.1 Section 4.2 Section 4.3	Met
An agreed validation process is embedded within the PoC	Section 4.2	Met
Impact of any changes in relationships between LRs, PAs, LAs and the FSA		
FSA & LR relationships deliver engagement & outcomes beyond the PoC	Section 3.3	Met
PA/LA engagement successfully maintained through PoC exercise	Section 3.3	Partially met

5.1 Success measures

The PoC's success measures were set out in its initial design (see section 0). An assessment for each measure is provided below according to the originally foreseen gauges of success for each (provided in 0).

5.1.1 Success measures on the potential viability of ELR

FSA has routine access to LR food safety data

This success measure was met.

All five LRs participating in the PoC provided data for each month of the PoC. In most cases, this was done in accordance with the agreed milestones: as

¹⁰ In addition to these key sections, context and additional insight relevant to all of the PoC success measures was set out in section 3.

described in section 3, most data was shared with the FSA either on or around the date given ahead of the PoC, or within a few days, without prompting from the FSA AM. There were only two instances of significant delays in data sharing across all five LRs, and in both cases this occurred once (in Q1 for one LR and Q2 for another).

The depth and detail of data provided by LRs was strong throughout the PoC. For some LRs, this was maintained from the beginning to the end of the PoC, whereas for others there were improvements as time went on.

Data of most LRs was free from gaps and omissions by the end of the PoC, and comparable to at least some degree: from Q2 onwards, all LR data matched the assurance framework, with four LRs providing at least some additional data (see section 4.1.4). Differences in LR systems and processes meant the specific data points they used varied, and therefore data was not directly comparable. However, the LRs were meeting the categories of data set out in the assurance frameworks which were common to them all.

A consistent format & standard is agreed

This success measure was partially met.

The PoC gave LRs flexibility in their presentation of data, to facilitate their participation in the PoC and to maximise learnings about the data which LRs collected and its ability to inform an assessment of compliance. As such, it was unsurprising that there was variability in the format and standard of LR data – particularly during the first months of the PoC. Nevertheless, the FSA could query the data with LRs, who were typically responsive and willing to provide additional data and/or explanatory information. This meant the AM could more easily interpret the data, and often contributed to improved data outputs from LRs in subsequent months.

Additionally, with the data available, the FSA were able to process LR data into a more consistent format and standard through the production of the proformas and a specifically developed data dashboard. While this did not allow consistent comparison across LRs, it was sufficient to enable the FSA to demonstrate that LR data could be used to assess LR compliance (as discussed in section 4.3).

There were some capacity challenges for the AM and the RM. As mentioned in section 3.2.2, this was primarily due to bottlenecks in their workload ahead of quarterly meetings, as a result of the time needed to review the prior three months of data, and to identify and plan discussion points. Steps were taken to address these challenges during the PoC which were deemed effective.

The time required to review and analyse LR data largely remained consistent throughout the trial: on average, the AM spent four days on data processing per LR in each quarter (FSA, 2024c).

Data quality & quantity is sufficient for meaningful analysis

This success measure was met.

As set out in section 4.3, evidence gathered through the PoC suggested LR data could be used to inform assessments of LR compliance. It also indicated that LRs were driving compliance internally without input from LAs. There were no reported compliance issues which the FSA raised with LRs which they were not already in the process of addressing.

Across the five LRs, the FSA raised a total of 266 actions with LRs which were recorded in the assurance action log (FSA, 2024f). This was fairly evenly spread across LRs, ranging from 43 actions for one LR, to 66 for another. Some of these actions referred to queries relating to compliance, but also included were requests for additional information to facilitate the FSA's understanding of the data and possible explanations for trends the FSA had identified.

LRs were responsive and amendable to the FSA's requests for additional information, responding to FSA queries within 1 to 2 days by Q4 of the PoC (FSA, 2024c). Additionally, all LRs accommodated visits by the FSA to their premises, to allow the FSA to better understand how their internal audits were delivered.

An agreed validation process is embedded within the PoC

This success measure was met.

As set out in section 4.2, the FSA took a dual approach to validating LR data to ensure its accuracy: carrying out independent physical (in-person) visits to

LR premises, to compare the results of these visits with LR data, and comparing the results of LR audits with the results of routine inspections carried out by LAs as part of a data analysis exercise.

Both LRs and PAs participating in the PoC were supportive of the FSA's approach to validate the data. They understood it was an important component of the PoC. Some LRs were interested in hearing the FSA's findings after the visits were carried out, in case it could provide insight into possible improvements they could make. The main concern among stakeholders about the validation approach taken was the relatively small number of premises visited.

5.1.2 Impact of any changes in relationships between LRs, PAs, LAs and the FSA

FSA & LR relationships deliver engagement & outcomes beyond the PoC

This success measure was met.

It was clear that the relationship between the FSA and LRs was strengthened through the PoC. This is detailed in section 3.3.1.

All LRs attended quarterly review meetings with the FSA throughout the PoC. Between these meetings, the FSA remained in contact with LRs through monthly meetings and/or email correspondence. The focus throughout was on the PoC, but there were also examples of both LRs and the FSA utilising the relationships to discuss other work or topics.

Both the FSA and LRs were positive about their relationship throughout the PoC. Some LRs described how their trust in the FSA had increased as the PoC progressed. This put them at ease when it came to sharing additional information and data, contributing to the depth and detail of data the FSA could access during the PoC. LRs were willing to continue to work with the FSA once the PoC ended.

PA/LA engagement successfully maintained through PoC exercise

This success measure was partially met.

LAs were not ultimately involved in the PoC as it was implemented in a sandbox and did not directly impact them. The FSA issued some communications to LAs with reference to the PoC, but this was limited as no decisions on a future ELR had been made. There were also wider regulatory changes happening more imminently which the FSA were working with LAs on. This is discussed in section 3.3.3.

PA engagement was successfully maintained throughout the PoC and PAs reported good relationships with the AM and RM in particular. However, PA contributions to the PoC were less significant than initially expected. This is discussed in section 3.3.2.

6 Conclusions

The ELR PoC was run well and achieved its objectives. The PoC demonstrated that there is potential viability for ELR, given that FSA was able to access LR food safety data routinely, in a consistent manner; the data quantity and quality were sufficient for meaningful analysis, and the agreed validation process showed the data was accurate and it allowed FSA to carry out an assessment of compliance. The PoC happened in a sandbox environment, as such, some of these findings may be different should the ELR progress forward.

The PoC was well-resourced, and delivered by a knowledgeable, committed team. The FSA introduced two new roles that did not exist previously, the RM and the AM, to facilitate the PoC. These roles were well-considered and essential to the success of the PoC. In addition, FSA engaged early with LRs and PAs which helped gain the PoC participants' buy-in. The FSA continued to build on these relationships – particularly with LRs, whose trust in the FSA increased as the PoC progressed. This yielded benefits for the FSA, who gained considerable insight into LR food safety systems and processes as a result. Beyond the PoC, the FSA were able to utilise their relationships with LRs to engage them in relation to other FSA work. LRs also benefitted from access to regulatory information and ideas about possible improvements they could make to support food safety. While there were some challenges that occurred in the design and implementation of the PoC, these were largely overcome and did not hinder the PoC's delivery.

As mentioned, the PoC was successful in enabling the FSA to draw conclusions about the feasibility of a future ELR, with all the PoC success measures defined at the beginning of the PoC being met or partially met.

The FSA had routine access to LR food safety data of considerable depth and detail, and LR data provided insight into compliance of all five LRs which went beyond what the FSA could access from routine inspections.

The FSA were able to identify trends in LR compliance and gather additional information about the data directly from LRs. Further, evidence from the PoC suggested LRs were driving compliance internally – they were proactively

identifying compliance issues between routine inspections and addressing these issues without LA input.

The FSA took a robust approach to assessing the validity of LR data, which found the data provided by LRs was accurate. There were some obstacles in achieving consistency in the format and standard of data provided by LRs – primarily because LRs had different food safety systems, therefore data was not recorded in the same way. This contributed to some analytical limitations. Nevertheless, LRs were typically responsive and willing to provide access to more data or information to facilitate the FSA’s interpretation of their compliance.

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Annex 2: Data and documentation reviewed

This Annex outlines the data and documentation that was reviewed as part of the evaluation of the ELR PoC.

Programme board documentation

Programme board documentation included meeting minutes and supporting information. It was reviewed as part of the baseline phase of the PoC and primarily dealt with the components of designing and setting up the PoC.

Relevant sources: FSA, 2022a; FSA, 2022b; FSA, 2022c; FSA 2022d; FSA, 2022e

Assurance frameworks

The assurance frameworks set out the data expectations for each of the five participating LRs. Anonymised versions of these provided insight into the data the FSA were looking for from each LR. The framework was based on the Food Law Code of Practice and included requirements relating to FHRS ratings, assured advice, serious incidents, data from LR audits and monitoring, complaints data and LA engagement (e.g. notices served, outcomes of LA inspections against PA inspection plans). For each LR, the way these categories of data were met differed according to their internal processes (e.g. how they collected and stored data), so the frameworks were unique to each of them.

Relevant sources: FSA, 2023f

Data collection templates

The preliminary templates designed for collecting and monitoring data provided by LRs were reviewed as part of the baseline phase of the PoC. These were made up of:

- Proforma template – This was the Word document template used for processing each LRs' data into a consistent format. It included an assessment of compliance against the three categories encompassed by LA food hygiene inspections – food hygiene, structural (physical condition of the business premises), and confidence in management.
- Assurance Action Log template – This was the Excel template used for recording any actions for LRs arising from the data. For example, to provide more

information on a particular area, or to explain items or issues identified by the FSA in the data.

Relevant sources: FSA, 2023j & FSA, 2023k

Analytical outputs produced by the FSA

Various outputs were produced by the FSA and shared with ICF for the interim and/or final stages of the evaluation. These were:

- Proformas for each LR – The proforma template described above was populated anonymously for each LR every quarter. These demonstrated how the FSA were reviewing the LR data alongside other information (e.g. FHRS scores received by the LR's premises over the quarter, additional insights provided by the LR).
- Latest versions of the Assurance Action Log – This described the actions the FSA raised with each LR in each quarter, and whether these actions were complete. Examples of actions requested by the FSA were for the LR to share further insights or data, provide updates on business processes / procedures, provide explanations for issues arising in the data, and agree on visits for the FSA to shadow an LR audit.
- Case studies and data stories – These provided in-depth examples of interesting compliance stories that the FSA team identified during the PoC (issues detected, action taken as a result and how this was reflected in the data).
- Data Analysis report – This was produced by the Analytics Unit (AU) and focused on analysing the LR data to determine the extent to which it could be used to assess compliance, and its accuracy. It focused on a comparison of LR data to data held by the FSA, and a review of consistency between LR data and FHRS data.
- Validation visits report – This was produced by the FSA delivery team to summarise the process taken to carry out the in-person validation visits and the findings from these visits.
- PoC Participant Tracking Data which recorded information on each LR in each quarter for different data points of interest. This included level of LR engagement, timeliness of receiving data, data quality, and staff time spent on analysing LR data.

Relevant sources: FSA, 2023g; FSA, 2023h; FSA, 2024a; FSA, 2024b; FSA, 2024d;
FSA, 2024h; FSA, 2024c.

Annex 3: ELR PoC Theory of Change

			Short-medium term	Long term
INPUTS	ACTIVITIES	OUTPUTS	OUTCOMES	IMPACTS
<p>FSA resources:</p> <ul style="list-style-type: none"> Staffing (including relationship and account manager) Contracted evaluator Ad-hoc investment (e.g. delivery of in-person stakeholder events) <p>LR and PA resources:</p> <ul style="list-style-type: none"> Staff time 	<ul style="list-style-type: none"> Designing the PoC (inc. assurance framework; proforma; validation procedure etc.) Delivering the PoC: <ul style="list-style-type: none"> Engagement work with stakeholders (internal FSA staff; LRs; PAs; LAs etc) Analysing LR food safety & hygiene data (inc. inputting into proforma) Data validation & verification 	<ul style="list-style-type: none"> 5 LRs and their respective PAs participating Assurance framework in place for each LR Completed proformas for each LR in each quarter FSA provide guidance to LRs on their data Process established for data sharing and feedback gathering 	<ul style="list-style-type: none"> FSA has insight into LR food safety & hygiene monitoring processes FSA has assurance that data demonstrates LR's compliance Data provided by LRs is consistent with the assurance framework Best practice in food safety & hygiene monitoring shared, supporting ease of LR compliance 	<ul style="list-style-type: none"> Closer working relationship & ongoing collaboration between FSA, LRs & PAs Enabling design of a new and improved regulatory framework, using evidence from the PoC Shared learnings, leading to potential innovation in other regulatory areas

Annex 4: Success Measures for the PoC

The following success measures were set out in the design of the PoC (FSA, 2022f).

1. The potential viability of ELR

Success is ...	Measure	Evidence / Gauge of success
<p>FSA has routine access to LR food safety data.</p>	<p>Whether the FSA can get timely access to up-to-date LR hygiene/safety data, that the data is of an adequate quality and in a suitable format and level of depth to analyse and gauge the adequacy of LR's systems and processes at both a business and premises level</p>	<ul style="list-style-type: none"> • Over the PoC period, the type of data provided increases in depth / detail and reaches a point that the FSA is able to effectively assess compliance at an enterprise and premises level. This will also demonstrate that the relationship between the FSA and LRs has strengthened, trust developed, and the model matured. • Data supplied by LRs increased in depth, breath and level of detail over the life of the PoC. • Data supplied to agreed parameters relevant to each milestone. • Data free from gaps/omissions (in line with agreed parameters). • Data of comparable depth and breadth provided by all LR involved in PoC. • FSA is able to access independent data from suppliers that can validate LR data.¹¹

¹¹ This approach to data validation (use of supplier data) was not pursued – the approach taken to validation is described in section 4.2.

Success is ...	Measure	Evidence / Gauge of success
A consistent data format & standard agreed	Whether the data can be analysed effectively.	<ul style="list-style-type: none"> • Time taken to review data. • Time taken to analyse data. Whether AM & RM workloads are manageable and at the right levels.
Data quality & quantity is sufficient for meaningful analysis	Whether the data the LR supply allow the FSA to assess compliance, identify where/if targeted interventions/validation activities are necessary at an enterprise and premises level. LR identify issues or non-compliance and address/resolve these issues as part of their own assurance mechanisms.	<ul style="list-style-type: none"> • Whether agreed parameters enable identification and assessment of issues by the end of the PoC at a premises as well as enterprise level. • Number of issues identified. • Time to resolution.
An agreed validation process is embedded within P.O.C	ELR, including the use of validation visits, is perceived to be transparent, independent and robust by all stakeholders (including LAs ¹² and PAs).	Qualitative feedback from stakeholders

¹² LAs were not interviewed as part of the evaluation, as they were not involved in the PoC. More information is provided in section 3.3.3.

2. Impact of any changes in relationships between LR, PAs, LAs and the FSA

Success is ...	Measure	Evidence / Gauge of success
<p>FSA has routine access to LR food safety data.</p>	<p>Whether the FSA can get timely access to up-to-date LR hygiene/safety data, that the data is of an adequate quality and in a suitable format and level of depth to analyse and gauge the adequacy of LR's systems and processes at both a business and premises level</p>	<ul style="list-style-type: none"> • Number of meetings between LR and RM/FSA • Content of meetings: <ul style="list-style-type: none"> ○ Whether directly related to ELR ○ Whether broader FSA agenda covered ○ Whether info learnt related to LR future business plans / broader agendas ○ Whether additional meetings between stakeholders working on non-ELR areas are facilitated ○ Whether LR initiated meetings • Qualitative assessment of relationship by key points of contact at FSA and LR • Whether LR supply the required data to the FSA and a responsive to requests for additional data / clarification • Whether the depth, breath and level of detail of data the FSA has access to increases over the PoC • Outcome of meetings

Success is ...	Measure	Evidence / Gauge of success
		<ul style="list-style-type: none"> • How the data was used by the FSA/LR (assessed qualitatively) • Willingness of LR to continue to work with the FSA after the end of the PoC
PA/LA engagement successfully maintained through PoC exercise	Whether PAs/LAs perceive ELR as having a positive effect on their work/local areas	Interviews with PAs/LAs

Annex 5: Scoring of FHRS

The following sets out the underlying scores for FHRS ratings (FSA, 2024a).

Overall FHRS rating	Underlying Scores	Description
5	0-15 No individual score greater than 5	Very Good
4	20 No individual score greater than 10	Good
3	25-10 No individual score greater than 10	Generally Satisfactory
2	35-40 No individual score greater than 15	Improvement Necessary
1	45-50 No individual score greater than 20	Major Improvement Necessary
0	>50	Urgent Improvement Necessary

Annex 6: Evaluation framework

Research question	Sub-questions	Indicators
How was the PoC exercise run?	How was the PoC exercise designed?	<ul style="list-style-type: none"> ■ The PoC's objectives & scope ■ How the PoC was operationalised ■ Stakeholder views on what worked well / less well
	How did the PoC exercise operate? What worked well and less well?	<ul style="list-style-type: none"> ■ How the PoC was implemented, including activities undertaken & resourcing ■ What worked well / less well
	Did the relationship between the FSA and stakeholders (LRs, PAs, LAs) change as a result of the PoC?	<ul style="list-style-type: none"> ■ The impact of the PoC on relationships between the FSA and each LRs, PAs & LAs
	Did the PoC affect the relationship between PAs and LRs?	<ul style="list-style-type: none"> ■ Relationship between LRs and PAs prior to and during the PoC ■ How the PoC impacted the LR / PA relationship
To what extent has the PoC enabled FSA to assess the feasibility of the	To what extent did the PoC enable the FSA to assess the reliability of LR data?	<ul style="list-style-type: none"> ■ The process of accessing data & the effectiveness of this process ■ The format and standard of LR data provided during the PoC & the extent to which the data format & standard was adequate ■ The content of LR data provided during the PoC & the extent to which data content was adequate

Research question	Sub-questions	Indicators
ELR approach for assuring compliance of Large Retailers?		<ul style="list-style-type: none"> ■ The FSA's conclusions & monitoring data on areas of data reliability
	To what extent did the PoC enable the FSA to assess the accuracy of LR data?	<ul style="list-style-type: none"> ■ How the FSA assessed data accuracy ■ Findings from the FSA's assessment of data accuracy ■ Effectiveness of the PoC in enabling an assessment of data accuracy
	To what extent has the analysis of LR data enabled the FSA to carry out an assessment of LR compliance?	<ul style="list-style-type: none"> ■ How the FSA assessed LR compliance ■ Findings from the FSA's assessment of LR compliance ■ Effectiveness of the PoC in enabling the FSA to assess LR compliance
To what extent has the PoC enabled the FSA to draw conclusions for a future ELR?		<ul style="list-style-type: none"> ■ Expected benefits of a future ELR identified for different stakeholder groups
		<ul style="list-style-type: none"> ■ Expected limitations of a future ELR identified for different stakeholder groups
		<ul style="list-style-type: none"> ■ Extent to which the success measures of the PoC were met ■ Considerations for a future ELR

