

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

Calderdale Metropolitan
Borough Council
30 September – 2 October 2014



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1.0 Introduction

- 1.1 This report records the results of an audit at Calderdale Metropolitan Borough Council with regard to food hygiene enforcement, under relevant headings of the Food Standards Agency Food Law Enforcement Standard. The audit focused on the Authority's arrangements for the management of the food premises database, food premises interventions, and internal monitoring. The report has been made publicly available on the Agency's website at www.food.gov.uk/enforcement/auditandmonitoring/auditreports. Hard copies are available from the Food Standards Agency's Operations Assurance Division at Aviation House, 125 Kingsway, London WC2B 6NH, Tel: 020 7276 8428.

Reason for the Audit

- 1.2 The power to set standards, monitor and audit local authority food law enforcement services was conferred on the Food Standards Agency by the Food Standards Act 1999 and the Official Feed and Food Controls (England) Regulations 2009. This audit of Calderdale Metropolitan Borough Council was undertaken under section 12(4) of the Act as part of the Food Standards Agency's annual audit programme.
- 1.3 Regulation (EC) No. 882/2004 on official controls performed to ensure the verification of compliance with feed and food law includes a requirement for competent authorities to carry out internal audits or to have external audits carried out. The purpose of these audits is to verify whether official controls relating to feed and food law are effectively implemented. To fulfil this requirement, the Food Standards Agency, as the central competent authority for feed and food law in the UK has established external audit arrangements. In developing these, the Agency has taken account of the European Commission guidance on how such audits should be conducted.¹
- 1.4 The Authority was selected for inclusion in the Food Standards Agency's programme of audits of local authority food law enforcement as the Local Authority Enforcement Monitoring Scheme (LAEMS) data submitted to the Agency for 2012/13 indicated that the Authority had a relatively low full time equivalent (FTE) staffing ratio per food establishment and a relatively high number of unrated premises.

¹ Commission Decision of 29 September 2006 setting out the guidelines laying down criteria for the conduct of audits under Regulation (EC) No. 882/2004 of the European Parliament and of the Council on official controls to verify compliance with feed and food law, animal health and animal welfare rules (2006/677/EC)

Scope of the Audit

- 1.5 The audit examined Calderdale Metropolitan Borough Council's arrangements for food premises database management, food premises interventions and internal monitoring, with regard to food hygiene law enforcement. The scope of the audit also included an assessment of the Authority's overall organisation and management, and the internal monitoring of other related food hygiene law enforcement activities.
- 1.6 Assurance was sought that key authority food hygiene law enforcement systems and arrangements were effective in supporting business compliance, and that local enforcement was managed and delivered effectively. The on-site element of the audit took place at the Authority's offices at Halifax on 30 September - 2 October 2014.

Background

- 1.7 Calderdale Metropolitan Borough Council is located within the southern Pennines of West Yorkshire and sits between Manchester to the west and Leeds to the east. The Borough has a population of approximately 205,300 and covers an area of over 36,000 hectares. The main towns within the Borough are Brighouse, Elland, Halifax, Hebden Bridge, Sowerby Bridge and Todmorden.
- 1.8 The economic base of the area was traditionally founded on textiles, engineering and manufacturing industries but more recently service industries have overtaken manufacturing in terms of number of employees. The area is predominantly ribbon development down steep sided valleys with a large number of small businesses.
- 1.9 The overall structure of the Authority comprised of the Chief Executive's Office and five directorates. Food hygiene law enforcement was the responsibility of the Commercial Team led by the Principal Officer reporting to the Environmental Health Manager and in turn to the Head of Housing Environment and Renewal and the Director of Economy and Environment.
- 1.10 The Authority had joint service arrangements for the delivery of food standards and feeding stuffs law enforcement, which was carried out by West Yorkshire Joint Services, Trading Standards Service.

- 1.11 The Authority reported the profile of food businesses at 31 March 2014 as follows:

Type of Food Premises	Number
Primary Producers	13
Manufacturers/Packers	54
Importers/Exporters	2
Distributors/Transporters	36
Retailers	490
Restaurant/Caterers	1,649
Total Number of Food Premises	2,244

2.0 Executive Summary

- 2.1 Calderdale Metropolitan Borough Council was selected for audit as the Local Authority Enforcement Monitoring Scheme (LAEMS) data submitted by the Authority for 2012/13 indicated the Authority had a relatively low full time equivalent (FTE) staffing ratio per food establishment and a relatively high number of unrated premises.
- 2.2 The audit found that the Authority was delivering many food law enforcement activities in accordance with the statutory obligations placed on the Authority as a competent food authority. However the Authority required improvement to fully meet its responsibility to provide the required level of protection to consumers and business by meeting the statutory requirements of the Framework Agreement and the Food Law Code of Practice (FLCoP). A summary of the main findings and key improvements required is set out below.
- 2.3 **Strength:**
- High profile enforcement activity:** The Authority had undertaken a considerable amount of high profile and appropriate enforcement activity to protect consumers. It had played a proactive role in the success of the Tour De France by rescheduling inspections of food premises close to the route to protect consumers and assist business.
- 2.4 **Key areas for improvement:**
- Organisation and management:**
- The Authority needed to ensure that it had appointed sufficient officers to deliver the full range of food law enforcement activities statutorily required of competent food authorities.
- Food premises database:** The limited IT support for the food team's management of its computerised database compromised its ability on a day to day basis to ensure that food law enforcement activity was delivered in accordance with the FLCoP and restricted its ability to carry out data accuracy monitoring.
- Food premises interventions:** Interventions/inspections needed to be carried out at frequencies not less than that specified in the FLCoP and recorded in sufficient and consistent detail to demonstrate establishments have been fully assessed to the legally prescribed standards.
- Non-compliances should be followed up by appropriate and timely action which must be properly recorded.

3.0 Audit Findings

3.1 Organisation and Management

Strategic Framework, Policy and Service Planning

- 3.1.1 The Authority had developed a Food Service Plan for 2014/15 which was broadly in accordance with the Service Planning Guidance in the Framework Agreement. The Plan did however contain a large amount of historic data and commentary including detailed tables of demands from 2001 to 2014. Auditors discussed the potential benefits of reducing historic data to achieve a better focus on current issues.
- 3.1.2 Auditors noted that the staffing allocation for authorised officers in the Food Service Plan totaled 4.9 FTE which did not reflect the figure of 3.7 FTE recorded in the LAEMS return for 2013/14. Officers agreed the figure in the LAEMS return was inaccurate and that the Authority would ensure this was corrected.
- 3.1.3 The Service Plan highlighted that educational and promotional activities were severely limited due to financial constraints and that a further staffing reduction of 0.5 FTE would over time impinge on the ability of the Authority to deliver the proactive food inspection programme to the level expected by the Food Standards Agency. In addition the Authority had in 2014 written to the Agency via the West Yorkshire Principal Food Officers Group (WYPFOG) stating it was unable to deliver a full range of interventions at category D and E rated premises in accordance with the FLCoP.
- 3.1.4 The Authority needed to ensure it had sufficient officers to deliver a full range of food law enforcement activities. The Service Plan required a clear comparison of the staffing resources required to carry out the full range of statutory food law enforcement activities against the resources available to the Authority. Any shortfall in resources should be identified in the plan.
- 3.1.5 The review section of the plan related to 2005 to 2009 and did not review the previous year's performance against the Service Plan. The review section needed to specifically relate to the previous year's planned activities.
- 3.1.6 The Plan had been approved by the relevant Portfolio Member.

Recommendations

3.1.7 The Authority should:

- (i) Ensure the Service has a sufficient number of suitably qualified, experienced and competent officers to carry out the work set out in the Service Plan. [The Standard - 5.3]
- (ii) Include in the Service Plan a clear comparison of the resources required to carry out the full range of food law enforcement activities against the resources available to the Service. [The Standard - 3.1]
- (iii) Specifically consider the previous year's performance in the review section of the Service Plan and detail any improvement identified necessary. [The Standard - 3.2]

Documented Policies and Procedures

3.1.8 The Authority had developed a wide range of documented procedures for food law enforcement and an overarching procedure for their review. Although some procedures had been recently reviewed a number had longstanding review dates. Officers advised that these had in fact been reviewed but where no changes were required review dates had been omitted. Auditors advised that where reviews had been undertaken all review dates should be recorded.

3.1.9 It was noted that a number of procedures had a very wide scope and were very lengthy. Auditors discussed the potential benefits of an overall review of the scope of these procedures to achieve more focused procedures to assist in the overall management of the system and for general ease of use of officers. Whilst procedures were readily available to officers they were in paper format and contained in four files. A shared electronic drive of 'read only' procedures would have improved accessibility, especially for remote workers.

Recommendation

3.1.10 The Authority should:

Ensure that all documented policies and procedures for each area of enforcement activities are reviewed at regular intervals and when there are changes to legislation or centrally issued guidance. [The Standard - 4.1]

Officer Authorisations

- 3.1.11 The Service had developed a documented procedure for the authorisation of officers which had been recently reviewed.
- 3.1.12 Checks on authorisation documents confirmed that officers were generically authorised however food law enforcement activities were appropriately limited through a documented competency system which included an 'Authorisation Schedule'.
- 3.1.13 Qualification and training records of five officers were examined. Training records were comprehensive, well maintained and easily retrievable and confirmed officers were appropriately qualified, and receiving a wide range of training. This included a minimum of 10 hours relevant training per annum based on the principle of continuing professional development (CPD) as required by the Food Law Code of Practice (FLCoP). Auditors discussed the need for the Authority to prioritise formal enforcement and approved establishment training for officers.
- 3.1.14 The Authority had appointed a Lead Officer for food who demonstrated that they had the necessary experience and qualifications for that role. However during discussions it was apparent that the Lead Officer had taken on additional responsibilities and that the Senior EHO would take over the role of Lead Officer. Auditors were satisfied that the Senior EHO had the necessary experience and qualifications for the role.

Recommendation

3.1.15 The Authority should:

Ensure that all authorised officers receive the training required to be competent to deliver the technical and administrative aspects of the work in which they are involved, including training in the inspection of approved establishments and enforcement training.

[The Standard - 5.4]

3.2 Food Premises Database

- 3.2.1 The Authority was operating a database capable of providing monitoring returns to the Agency and had developed a documented procedure to ensure the premises database was up to date. The procedure provided for periodic business directory checks, arrangements for the receipt of information from business rates, and controls on the creation of new business premises on the database.
- 3.2.2 Auditors discussed checks carried out in regard to the accuracy of LAEMS data and suggested additional monitoring as detailed in the Agency publication 'Making Every Inspection Count' would be beneficial. Whilst this was welcomed by the Authority it would require additional IT expertise or training.
- 3.2.3 The Authority had provided a copy of its food establishments and interventions database on a spreadsheet prior to the audit from which a number of anomalies were identified. During the on-site audit checks, it was apparent that the data provided prior to the audit was inaccurate and unreliable. The Authority was unable to produce or correct the data during the visit. The Authority also struggled to produce further database reports requested.
- 3.2.4 Auditors had also identified potential anomalies and inaccuracies in Food Hygiene Ratings Scheme (FHRS) data and the Authority advised it would carry out further investigation and correction of data as required.
- 3.2.5 Discussions about the service's data accuracy, raised auditors' concerns that the level of IT support and expertise within the service was insufficient for the service to be effectively managed and delivered in accordance with the FLCoP. This could present a potential health risk to consumers and economic risk to local food businesses.
- 3.2.6 Checks on food premises in the area identified by internet searches confirmed all six were present on the database and included within the interventions programme.

Recommendation

3.2.7 The Authority should:

- (i) Review and implement a documented procedure to ensure that the premises database is accurate, reliable and up to date. [The Standard – 11.2]
- (ii) Ensure that the database is operated in such a way as to provide accurate LAEMS returns to the Agency. [The Standard – 6.3]

3.3 Food Premises Interventions

3.3.1 The LAEMS data for 31 March 2014 provided the risk ratings rating profile of food businesses as follows:

Premises Risk Category	Number of Premises
A	14
B	113
C	898
D	351
E	823
Unrated	45
Outside Programme	0
Total	2,244

The profile provided within the Food Service Plan 2014/15 at 1 April 2014 is set out below.

Premises Risk Category	Number of Premises
A	17
B	119
C	922
D	363
E	826
Unrated/Vacant	134
Total	2,451

The variations in the figures required investigation by the Authority to ensure both the reported programme and LAEMS returns are accurate.

3.3.2 The Plan also set out the programme of inspections for 2014/15 and expected revisits which are summarised as follows:

Premises Risk Category	Inspections due 2014-15	Estimated number of revisits
A	17	23
B	119	47
C	574	123
D	126	4
E	228	1
New Business NIR	38	
Total	1,168	

3.3.3 The Service Plan also highlighted that due to required savings the Authority intended to write to the Agency via the WYPFOG group stating that lower risk band premises would no longer receive inspections as the frequency required by the FLCoP.

3.3.4 Officers outlined the Authority's current position in regard to interventions which comprised of inspections at risk rating categories A, B and C premises with some inspection of category D and E premises. The majority of D and E risk rated premises were subject to alternative enforcement strategies with the exception that certain premises with a FHRS rating would remain in the inspection programme. The Authority advised it anticipated that all premises including D and E categories would be subject to some type of intervention or alternative enforcement strategies.

3.3.5 The Authority had developed a documented procedure for food hygiene interventions. The procedure set out the purpose, of interventions and the process of inspections including planning for an inspection, the actual inspection, post inspection discussions with the FBO, and also post inspection administration.

3.3.6 Documented procedures had also been developed for the inspection and approval of establishments under product specific regulations which had been reviewed in 2014. These provided general guidance for officers and specific guidance in regard to dairy and meat products establishments.

3.3.7 Auditors requested a database report to check the numbers of overdue interventions, however this was not readily available in a suitable format and auditors were unable to satisfactorily verify the status of the inspection programme. Officers assured auditors that overdue interventions were relatively low and generally comprised of low risk premises.

- 3.3.8 Records of six inspections carried out by a range of officers at food businesses were checked during the audit. All inspections had been carried out at the appropriate frequency by a suitably qualified officer and recorded on an appropriate aide-memoire. However it was noted that there was variation in the level of detail recorded by officers on the inspection aide-memoire and in some cases records were insufficient to clearly demonstrate the officer had carried out a full assessment of food business compliance.
- 3.3.9 Inspection file checks also found instances of a lack of appropriate and timely follow-up action. In one case records indicated a non-compliance in regard to E.coli O157 guidance and while the Authority had stated follow-up action would be taken this was not taken for several months. The recording of follow-up action also needed to be improved.
- 3.3.10 Checks were carried out on three approved establishment files. The files were found to generally contain the information required to assess whether the establishments required approval under Regulation (EC) No 853/2004. Inspections had been carried out at the correct frequencies by a suitably qualified and experienced officer. Appropriate inspection procedures and checklists had been followed. However the conditional approval of a meat products establishment in 2011 had not been carried out in accordance with EU hygiene regulations or the Authority's procedure for the approval of meat establishments. Conditional approval had been granted despite formal notices being served requiring the food business operator to address numerous structural and equipment deficiencies at the establishment. The establishment had subsequently deemed compliant by the authority and granted full approval status.

Recommendations

3.3.11 The Authority should:

- (i) Carry out interventions/inspections at a frequency which is not less than that specified by the Food Law Code of Practice and centrally issued guidance. [The Standard - 7.1]
- (ii) Ensure that inspections/interventions are recorded in sufficient detail to demonstrate establishments have been fully assessed to the legally prescribed standards, the Food Law Code of Practice and centrally issued guidance. [The Standard - 7.2 and 7.3]
- (iii) Ensure that appropriate and timely follow-up action is taken where non-compliance is found in accordance with the Authority's enforcement policy. [The Standard - 7.3]
- (iv) Carry out interventions and inspections and approve relevant establishments in accordance with relevant legislation, Food Law Codes of Practice and centrally issued guidance.

Verification Visit to a Food Premises

3.3.12 During the audit, a verification visit was undertaken to a bakery with an officer from the Authority who had carried out a previous food hygiene inspection of the premises. The main objective of the visit was to assess the effectiveness of the Authority's assessment of food business compliance with food law requirements.

3.3.13 On the visit the officer demonstrated good familiarity with the premises and the operations carried out, an effective working relationship with the FBO and good knowledge of the history of the business. The officer had appropriately assessed the business for compliance with legal requirements.

3.4 Enforcement

- 3.4.1 The Authority had a documented Environmental Health Enforcement Policy which had been recently reviewed and reissued in July 2014. The policy reflected the principles of enforcement including proportionality, consistency, transparency, and accountability. The policy had been developed in accordance with centrally issued guidance, the Regulators' Compliance Code and the Regulatory Enforcement and Sanctions Act 2008.
- 3.4.2 The Authority had also developed a full range of documented enforcement procedures for enforcement and statutory action and presentation of files for legal proceedings.
- 3.4.3 The Authority had undertaken considerable and at times high profile food law enforcement across the full spectrum of enforcement actions including prosecutions, simple cautions, and the issue of a range of statutory notices.
- 3.4.4 Audit checks were carried out on records of one prosecution and two simple cautions. In all cases the enforcement action was found to be appropriate, in accordance with the Enforcement Policy and authorised by an officer with appropriate delegated powers.
- 3.4.5 Records of four food hygiene improvement notices were examined. The notices were found to be appropriate, correctly worded, authorised, signed and served on the food business operator.
- 3.4.6 Three files relating to detentions and voluntary surrender of food were checked. Receipts for voluntary surrender of food needed to state the food had been voluntarily surrendered for destruction and records of destruction needed to be improved.
- 3.4.7 Two voluntary closure of premises files and one emergency prohibition notice files were checked and found to be appropriate courses of action in accordance with the Enforcement Policy.
- 3.4.8 The Authority generally needed to ensure that follow-up action, the issue of receipts and disposal of food were better recorded.

Recommendation

3.4.9 The Authority should:

Carry out food law enforcement actions in accordance with the FLCoP and centrally issued guidance [The Standard – 15.3]

3.5 Internal Monitoring, Third Party or Peer Review

Internal Monitoring

- 3.5.1 The Authority had documented its approach to internal monitoring in its procedure Quality Monitoring of Inspections and Framework for Assessing Officer Competencies which had been reviewed in 2014.
- 3.5.2 Quantitative monitoring of planned inspections, service requests and sampling was carried out on a monthly basis and reported to managers.
- 3.5.3 Qualitative internal monitoring was carried out by the Lead Officer/SEHO through accompanied visits, monitoring of documentary outputs, and checking notices.
- 3.5.4 Internal monitoring was linked to the corporate Performance Appraisal System which included an annual and six monthly review. Team meetings also provided a forum for general discussion of the results of internal qualitative monitoring.

Food and Food Premises Complaints

- 3.5.5 The Service Plan documented that it was the policy of the Authority to investigate all food complaints and this was further supported by a documented food complaints procedure which had been reviewed in 2014. The procedure set out the aims and objectives of the Authority in dealing with complaints and detailed the actions, timescales and process of investigation including appropriate enforcement actions.
- 3.5.6 Audit checks on five records of food and food premises complaint investigations found that appropriate investigations and action had been carried out, however in one case liaison with the appropriate Originating/Home Authority would have been appropriate. There was no evidence of internal monitoring recorded on files.

Recommendation

3.5.7 The Authority should:

Ensure that appropriately liaison is maintained with the Home/Organising Authority during the investigation of complaints. [The Standard – 9.5]

Food Inspection and Sampling

- 3.5.8 The Service Plan set out the sampling policy and programme for the Authority. The Authority expected to take approximately 127 samples within the year and participated in national and regional sampling projects through the regional group. A documented sampling procedure had also been developed which had been reviewed in 2014.
- 3.5.9 File checks were carried out on five samples which had been found to be unsatisfactory. All samples had been taken by an appropriately trained authorised officer and in accordance with the Authority's sampling policy. In all cases the food business had been informed of the results and appropriate follow-up actions had been undertaken.

Records

- 3.5.10 Most records were maintained electronically and these were generally easily retrievable. However records relating to followup actions and full details of officers' determination of food business compliance were not always available.

Recommendation

3.5.11 The Authority should:

Ensure that up to date accurate records of all interventions, including follow up actions, and full detail of officer determination of food business compliance and history are recorded and maintained.
[The Standard – 16.1]

Third Party or Peer Review

- 3.5.12 The Authority had not recently participated in any inter-authority audit (IAA) or peer review initiative. However the quality monitoring procedure for inspections stated that 'Peer Auditing' of management systems and operations would occur through the West Yorkshire Principal Food Officers Group Review on a five year basis. As part of this approach the group were planning to review approved establishments aides-memoire.

Auditors: John Ashcroft
Jane Tait
John Cragg

Food Standards Agency
Local Delivery Audit Team
Operations Assurance Division

ANNEX A Action Plan for Calderdale Metropolitan Borough Council

Audit date: 30 September - 2 October 2014

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.1.7(i) Ensure the Service has a sufficient number of suitably qualified, experienced and competent officers to carry out the work set out in the Service Plan. [The Standard - 5.3]	Complete	The Service will again assess the staffing situation and take account of the qualification/experience of officers, and determine the competency of its food staff, taking account of local topography/needs and the risk presented by its food premises profile.	<p>The Service has completed training of 3 additional officers from other specialist areas in the Service to conduct lower risk food inspections. This provides resilience and increases the Service's ability to cope with inspection of some of the lower risk band premises.</p> <p>These premises are deemed locally to require inspection due to their inclusion in the National Food Hygiene Rating Scheme. Also the training of 3 EHO's in the team has commenced to enhance their competency to be able to inspect approved premises and in particular meat products establishment. The numbers and mix of skills once this training has been completed is suggested to be sufficient in terms of the standard.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.1.7(ii) Include in the Service Plan a clear comparison of the resources required to carry out the full range of food law enforcement activities against the resources available to the Service. [The Standard - 3.1]	April 15	The Service will include in its Food Service Plan for 2015-16 a table of resources as required by the standard.	The Service has calculated that its current level of resources to carry out the full range of enforcement in the standard is slightly below what ideally would be required (< 1 FTE). It is suggested that the action taken above and the identified small short fall is manageable within the Service overall. The Lead Officer will raise any safety critical issues with Senior Management should any aspect of work develop that requires the redeployment of staff from elsewhere in the Service to cope with slippage of targets or emergency activities. The level of shortfall will also be brought to the Portfolio Holders attention during the approval of the Food Service Plan and it will be made clear what risks are associated with the level of Service provision. If the level of risk is determined to be escalating or unacceptable the EH Protection Manager will inform the Directorate Management Team and the Portfolio holder without delay.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.1.7(iii) Specifically consider the previous year's performance in the review section of the Service Plan and detail any improvement identified necessary. [The Standard - 3.2]	April 15	Previous year's performance will be reviewed within the appropriate section of the plan, rather than the review taking place within individual sections.	The Service Plan for 2014-15 is under review and will include this feature in 2015-16.
3.1.10 Ensure that all documented policies and procedures for each area of enforcement activities are reviewed at regular intervals and when there are changes to legislation or centrally issued guidance. [The Standard - 4.1]	Complete Jan 15	Currently documents and policies that have had legislative changes or new centrally issued guidance are reviewed each year. All documents will be reviewed each year regardless of change and dated as such. Staff have been consulted and indicate the current format of documents is fit for purpose and is in a readable and accessible format.	All documents have been reviewed and are currently up to date. Documented procedures will be placed in a read only format and digitised within the team drive to facilitate the transition towards smarter working practices.
3.1.15 Ensure that all authorised officers receive the training required to be competent to deliver the technical and administrative aspects of the work in which they are involved, including training in the inspection of approved establishments and enforcement training. [The Standard - 5.4]	Jan 15 Ongoing	All officers will be appropriately trained or receive refresher training bearing in mind the availability of centrally provided courses to the Food Group and the Authority.	3 EHO's will be trained by the Senior Food Officer to inspect approved meat products premises in the absence of a locally available centrally provided training course. Refresher training has been sought for those officers who may have had specialist training in the past. However, this was more than 3 year ago and availability on present courses was not forthcoming, thus further courses will be sourced when advertised.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.3.11(i) Carry out interventions/inspections at a frequency which is not less than that specified by the Food Law Code of Practice and centrally issued guidance. [The Standard - 7.1]</p>	<p>Complete</p> <p>Dec 14</p>	<p>The Service strives to achieve this standard and will implement the inspection regime outlined to the agency in relation to lower risk premise (Letter from the West Yorkshire Chief Officers).</p> <p>(Note - Subject to further discussions with FSA).</p>	<p>At a local level all premises within FHRS will be inspected as per the assurance given to auditors. Other low risk premises will be dealt with by alternative strategies.</p> <p>The Senior Officer is implementing a scheme whereby any premises that is close to falling outside the 28 day window allowed for inspection will be referred to the officer for action. The latter will form part of the supervision process for individual staff.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.3.11(ii) Ensure that inspections/interventions are recorded in sufficient detail to demonstrate establishments have been fully assessed to the legally prescribed standards, the Food Law Code of Practice and centrally issued guidance. [The Standard - 7.2 and 7.3]</p>	April 15	<p>The Service will ensure that IT data supplied via Lames will be consistent with that provided in the Food Service Plan.</p>	<p>IT support review to address this issue.</p>
	Complete /ongoing	<p>The Service will record more detail on its records of inspections in order to meet the prescribed standard.</p>	<p>All Food team members have met and discussed this aspect and agreement has been reached on the amount of detail that should be available on inspection forms, and report of inspection left after each visit to a premise. The latter will be monitored by the Senior EHO.</p>
	Complete /ongoing	<p>Where officers from the resilience section of the team are employed to inspect lower risk premises that may have had high risk food preparation activities being undertaken in the past; which were then well controlled, and are currently still undertaking these activities the Senior Officer of the team will review these files. The purpose of the latter is to determine that appropriate action relating to national guidance has been alluded to by the inspecting officer, and appropriate advice/enforcement action has been given /instigated and taken on board by the business. The latter will ensure that any action suggested to the business is implemented in a timely manner having regard to any identified risk.</p>	<p>The Senior officer now reviews all inspections/files where previously identified high risk food preparation activities have been noted, and the premise is inspected by one of the resilience officers.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.3.11(iii) Ensure that appropriate and timely follow-up action is taken where non-compliance is found in accordance with the Authority's enforcement policy. [The Standard - 7.3]	Complete /ongoing	The Service will record in a more transparent manner, that timely follow up action has been taken in order to achieve compliance with food law legislation.	All Food team members have met and discussed this aspect and agreement has been reached on the mechanism for recording and the amount of detail required that will consistently be available to meet the standard.
3.3.11(iv) Carry out interventions and inspections and approve relevant establishments in accordance with relevant legislation, Food Law Codes of Practice and centrally issued guidance.	Complete /ongoing Dec 14	The policy for the approval of establishments has been reviewed. The checks and balances contained have been reinforced to team member's in order to ensure they will be adhered to in the future. The Service finds that the lack of consideration in centrally issued guidance to existing businesses, especially those which have expanded and have gone through transitional business development who we then find require approval does not support a culture of business growth and promotion. The Agencies attention will be brought to these issues to see if a practical solution to these anomalies can be found that supports business rather than inhibiting it by the approval process.	Approved establishments files will in all cases be submitted to the Principal Officer for vetting/discussion prior to the issue of conditional or full approval. The Service will write to the agency in relation to these issues.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.4.9 Carry out food law enforcement actions in accordance with the FLCoP and centrally issued guidance. [The Standard – 15.3]	Feb 2015 for reprint of docs	The Service will ensure the recording of voluntary surrender of food is improved. Documentation will be reprinted to reflect advice at 3.4.6. Details will be made available in APP that including the note and that the food is surrendered for appropriate destruction. Additionally the method of disposal/destruction/where, and when will be made available in APP.	All Food team members have met and discussed this aspect and agreement has been reached on the mechanism for recording and the amount of detail required that will consistently be available to meet the standard.
3.5.7 Ensure that appropriately liaison is maintained with the Home/Originating Authority during the investigation of complaints. [The Standard – 9.5]	Complete /ongoing	The Home and Originating Authority will be contacted at all appropriate circumstances.	All Food team members have met and discussed this aspect. The advice set out in the Services procedural document has been reinforced and will be followed. Random internal qualitative monitoring of files is now implemented by the SEHO to check compliance with the standard.
3.5.11 Ensure that up to date accurate records of all interventions, including follow up actions, and full detail of officer determination of food business compliance and history are recorded and maintained. [The Standard – 16.1]	N/A as above	The Service has addressed this above at “3.3.11(iii) Ensure that appropriate and timely follow-up action is taken”.	

ANNEX B Audit Approach/Methodology

The audit was conducted using a variety of approaches and methodologies as follows:

(1) Examination of LA policies and procedures.

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

- Food Service Plan 2014/15
- Officer authorisation, training and qualification records
- Enforcement Policy
- Food Hygiene Interventions Procedure
- Official Food and Environmental Sampling Procedure
- Choice of Appropriate Actions from Options Available 1 to 7 Procedure
- Choice of Appropriate Actions 1 to 9 Presentation of Files for Legal Proceedings Procedure
- Dealing with Food Complaints Procedure
- Ensuring Food Database is Accurate Procedure
- Voluntary Surrender of Food, Detention and Seizure Procedure
- Approval of Meat Product Premises Procedure
- Approval and Inspection of Dairy Premises Procedure
- Minutes and notes of team meetings and West Yorkshire Principal Officer Group
- Minutes and agendas of the Health and Social Care Scrutiny Committee and Cabinet

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

- General food premises inspection records
- Training records
- Approved establishment files
- Food and food premises complaint records
- Food sample records
- Formal enforcement records.

(3) Review of Database records:

- To review and assess the completeness of database records of food hygiene inspections, food and food premises complaint investigations, samples taken by the authority, formal enforcement and other activities and to verify consistency with file records
- To assess the completeness and accuracy of the food premises database

(4) Officer interviews – the following officers were interviewed:

- Principal Officer Commercial Team
- Senior Environmental Health Officer
- Environmental Health Officer

Opinions and views raised during officer interviews remain confidential and are not referred to directly within the report.

(5) On-site verification check:

A verification visit was made with an officer to a local food business. The purpose of the visit was to verify the outcome of the last inspection carried out by the LA and to assess the extent to which enforcement activities and decisions met the requirements of relevant legislation, the FLCoP and official guidance, having particular regard to LA checks on FBO compliance with HACCP based food safety management systems.

ANNEX C Glossary

Authorised officer	A suitably qualified officer who is authorised by the local authority to act on its behalf in, for example, the enforcement of legislation.
Broadly Compliant	An outcome measure which the Food Standard Agency has developed with local authorities to monitor the effectiveness of the regulatory service relating to food law. It is based on the risk rating scheme in the Food Law Code of Practice which is currently used by food law enforcement officers to assess premises which pose the greatest risk to consumers failing to comply with food law.
Codes of Practice	Government Codes of Practice issued under Section 40 of the Food Safety Act 1990 as guidance to local authorities on the enforcement of food legislation.
County Council	A local authority whose geographical area corresponds to the county and whose responsibilities include food standards and feeding stuffs enforcement.
District Council	A local authority of a smaller geographical area and situated within a County Council whose responsibilities include food hygiene enforcement.
E.coli O157	E.coli O157 belongs to the group of verotoxigenic E.coli (VTEC) bacteria which are a toxin-producing strain of Escherichia coli that occur naturally in the gastrointestinal tract of animals such as cattle and sheep, and are pathogenic to humans. E.coli O157 is the VTEC strain that has been most commonly implicated in human infection in the UK.
External Temporary Storage Facility (ETSF)	A warehouse (formerly known as an enhanced remote transit shed or ERTS) designated by HM Revenue and Customs (HMRC), where goods are temporarily stored pending clearance by HMRC, and prior to release into free circulation.
Environmental Health Officer (EHO)	Officer employed by the local authority to enforce food safety legislation.
Feeding stuffs	Term used in legislation on feed mixes for farm animals and pet food.

Food hygiene	The legal requirements covering the safety and wholesomeness of food.
Food Hygiene Rating Scheme (FHRS)	The Food Hygiene Rating Scheme provides information to the public about hygiene standards in catering and retail food establishments. It is run by local authorities in partnership with the Food Standards Agency. Businesses that fall within the scope of the scheme are given a ‘hygiene rating’ which shows how closely the business was meeting the requirements of food hygiene law at the time of inspection. The scheme also encourages businesses to improve hygiene standards.
Food Safety Management System	A written permanent procedure, or procedures, based on HACCP principles. It is structured so that this requirement can be applied flexibly and proportionately according to the size and nature of the food business.
Food standards	The legal requirements covering the quality, composition, labelling, presentation and advertising of food, and materials in contact with food.
Framework Agreement	<p>The Framework Agreement consists of:</p> <ul style="list-style-type: none"> • Food and Feed Law Enforcement Standard • Service Planning Guidance • Monitoring Scheme • Audit Scheme <p>The Standard and the Service Planning Guidance set out the Agency’s expectations on the planning and delivery of food and feed law enforcement.</p> <p>The Monitoring Scheme requires local authorities to submit yearly returns via LAEMS to the Agency on their food enforcement activities i.e. numbers of inspections, samples and prosecutions.</p> <p>Under the Audit Scheme the Food Standards Agency will be conducting audits of the food and feed law enforcement services of local authorities against the criteria set out in the Standard.</p>
Full Time Equivalents (FTE)	A figure which represents that part of an individual officer’s time available to a particular role or set of duties. It reflects the fact that individuals may work part-time, or may have other responsibilities within the organisation not related to food and feed

enforcement.

HACCP	Hazard Analysis and Critical Control Point – a food safety management system used within food businesses to identify points in the production process where it is critical for food safety that the control measure is carried out correctly, thereby eliminating or reducing the hazard to a safe level.
LAEMS	Local Authority Enforcement Monitoring System is an electronic system used by local authorities to report their food law enforcement activities to the Food Standards Agency.
Member forum	A local authority forum at which Council Members discuss and make decisions on food law enforcement services.
Metropolitan Authority	A local authority normally associated with a large urban conurbation in which the County and District Council functions are combined.
Risk rating	A system that rates food premises according to risk and determines how frequently those premises should be inspected. For example, high risk premises should be inspected at least every 6 months.
Safer food, better business (SFBB)	A food safety management system, developed by the Food Standards Agency to help small catering and retail businesses put in place food safety management procedures and comply with food hygiene regulations.
Service Plan	A document produced by a local authority setting out their plans on providing and delivering a food service to the local community.
Trading Standards	The Department within a local authority which carries out, amongst other responsibilities, the enforcement of food standards and feeding stuffs legislation.
Trading Standards Officer (TSO)	Officer employed by the local authority who, amongst other responsibilities, may enforce food standards and feeding stuffs legislation.
Unitary Authority	A local authority in which the County and District Council functions are combined, examples being Metropolitan District/Borough Councils, and London

Boroughs. A Unitary Authority's responsibilities will include food hygiene, food standards and feeding stuffs enforcement.