

Updated Action Plan for Medway Council

Audit date: 16-17 October 2012

Action plan updated: 11 October 2013 and 3 October 2014

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	PROGRESS	ACTION TAKEN TO DATE
3.1.8(i) Ensure that future Food Service Plans are in full accordance with the Service Planning Guidance in the Framework Agreement to include an accurate estimate of the staffing and financial resources required to deliver the food law enforcement service. [The Standard – 3.1]	30/04/13	The Food Service Plan will be updated in April 2013 to reflect the recommendations. The April date will allow us to consider the settlement for the year and how this relates to the delivery of the food service.	Completed	Resources have been maintained for 2013/14. A breakdown of financial allocations has been included in the Food Service Plan 2013/14. The revised Food Service Plan for 2013-15 has been revised and reissued in August 2013. Future Service Plans will include an annual review and be formally approved.
3.1.8(ii) Ensure that the Service has a sufficient number of suitably qualified, experienced and competent officers to carry out the work set out in the Food Service Plan. [The Standard – 5.3]	01/04/13	Recruit suitably qualified, experienced and competent officers who are able to undertake interventions in high-risk establishments.	Completed	The team was slightly restructured in September 2013 to provide a single Team Leader. Two new officers have been successfully recruited to increase the strength of the team. Full team in place from March 2014.

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<p>3.1.11(i) Review, expand and revise the food law enforcement procedures to ensure the documents accurately reflect the Food Law Code of Practice and centrally issued guidance, and contain sufficient detail to provide adequate operational guidance for staff in relation to all interventions and enforcement activities carried out. [The Standard – 7.4 and 15.2]</p>	<p>30/09/13</p>	<p>Officers in the Food and Safety Team to review and develop documented procedures to reflect the Food Law Code of Practice and provide operational guidance for staff.</p>	<p>Completed</p>	<p>A list of procedures is contained in appendix A of Food Service Plan. Development of other policies and procedures will be further developed in the period up to end March 2014. An annual review is planned in April 2014. A number of procedures have been reviewed and revised and/or re-written by the Food Team. These are currently in the pipeline to be ratified by the Legal Development Officer.</p> <p>Copies of the procedures listed in the Food Service Plan were made available to the FSA (06/09/13). Procedures for database control, internal monitoring and some enforcement procedures are now in place.</p>

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<p>3.1.11(ii) Set up and implement a control system for all documentation relating to food law enforcement activities. Ensure that documented policies and procedures across all enforcement activities are reviewed at regular intervals, and whenever there are changes to legislation or centrally issued guidance. [The Standard – 4.1 and 4.2]</p>	30/09/13	See 3.1.11(i)	Completed	<p>See 3.1.11(i) The Legal Development Officer identifies any changes to legislation and provides update to the Food and Safety Team. A mechanism for updating, maintaining and reviewing policies and procedures is under discussion with the new Commercial Services Manager. A tabulated plan for the review of documents has been developed. At present this is being managed via the shared drive. Review of procedures is now a Performance Indicator in the wider Safer Communities service plan, under which Commercial Services sits. This is now incorporated in performance development reviews for Team Leaders and Managers. It is reported on quarterly in the council electronic system,</p> <p>All food policies and procedures will be reviewed at least annually (next review April 2015)</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	PROGRESS	ACTION TAKEN TO DATE
<p>3.2.9(i) Develop, maintain and implement procedures to ensure that the food premises database is complete, accurate, reliable and up to date, and that accurate and comprehensive information on food law enforcement activity is reported in official returns to the Agency. [The Standard - 6.3 and 11.2]</p>	<p>01/04/13 and ongoing</p>	<p>As part of Medway's 'Better for Less' review, we have managed to secure a support post that will have responsibility for administering the database. The post holder following this will review and implement database procedures.</p>	<p>Completed</p>	<p>Database administrator in post June 2013. This officer is working closely with the team to improve reporting functions as well as cleansing the database. Officers and the Community Wardens have started collecting information on new business and closed premises. Officers will prioritise new business registrations and initial inspections and risk rate them for inclusion on the database. A significant number of unrated establishments eg duplicate businesses, and non food premises, are being cleansed from the database. As of 07/11/13 the percentage of unrated premises has been reduced to 8.9% (from 22% in Aug13) A further update to the FSA on reducing this number is due on 29th November. Percentage of risk-rated food businesses is now a key performance indicator for Safer Communities and features in the Council plan. Target is 95% risk rated. Local target in the Food</p>

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3.2.9(i) Continued				and Safety Team is keeping the unrated figure below 50 at the end of each month (roughly 2.5%), which is a realistic target to include the new registrations every month. This has been met throughout 2014 to date.
3.2.9(ii) Ensure that key officers receive appropriate training needed to maintain the competencies necessary to deliver the technical aspects of the work in which they are involved, having particular regard to the database. [The Standard - 5.4]	01/04/13 and ongoing	Key officers will undertake appropriate training to aid them in undertaking their role. Any training needs for key officers will be identified when the support post is filled.	Completed	Although a new IT support officer has been appointed, some systems and training still need to be embedded for this new officer and the enforcement officers. The software provider delivered training in January 2014 to all food team officers and the Team Leader is working in partnership with the data officer at Medway to tackle any coding issues as they arise. There is ongoing attention to maintaining an accurate and up to date database.

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3.3.15(i) Ensure that the Authority's proposed interventions strategy and management oversight is clarified and provided to the Agency for consideration. [The Standard -7.1]	31/05/13	An alternative intervention proposal was presented to the Agency in February 12. It is proposed to report back to the Agency in May 13.	Completed	<p>Through staff changes and recruitment, appropriately trained, qualified and competent officers undertake interventions in food establishments risk rating categories A to D in accordance with the Food Law Code of Practice. Community Wardens have been trained and inducted to undertake compliance visits and report on lowest risk establishments and escalate intelligence to food team officers. Medway's 'Better for Less' review has aided this approach. High risk establishments (A, B and non-broadly compliant Cs) are prioritised for intervention by grade 5 EHO/Food Safety officers, with the lower risk premises interventions (Cs and Ds prioritised over Es) undertaken by grade 4 Technical Officers.</p> <p>Unrated establishments have been maintained below 50 (approx 2.5%) since 2014. The Team Leader reports monthly to the Commercial Services Manager on progress to reduce the unrated premises. Broad compliance has exceeded KPIs each reporting quarter to date (Oct 2014).</p>

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<p>3.3.15(ii) Ensure that product-specific establishments subject to approval under Regulation (EC) No. 853/2004 are inspected and approved in accordance with relevant legislation, the Food Law Code of Practice and centrally issued guidance. [The Standard - 7.2]</p>	31/03/13	<p>The Environmental Health Team Leader to take responsibility for these premises. Inspections will be undertaken in early 2013.</p>	Completed	<p>Allocation of the premises to the Environmental Health Team Leader has already taken place and inspections carried out. Another officer has completed the training in preparation for inspections due in 2014/15.</p> <p>Training for other Food Officers is in discussion to include in the Team Training Matrix, which plans training to meet the Council's, and individual needs.</p>
<p>3.3.15(iii) Set up, maintain and implement documented procedures for the range of interventions and inspections carried out. [The Standard - 7.4]</p>	30/09/13	See 3.1.11(i)	Completed	<p>See 3.1.11(i) The documented procedure for food hygiene inspections has been developed which includes reference to approved establishments.</p>
<p>3.4.12(i) Set up, maintain and implement a documented enforcement policy for food enforcement activities in accordance with the Food Law Code of Practice and other official guidance. [The Standard 15.1]</p>	30/09/13	<p>Medway undertakes a wide variety of enforcement activities. To ensure that there is a consistent approach, Medway has a Corporate Enforcement Policy. Through the Legal Development Officer we will seek a review of the corporate policy to include enhanced references to food enforcement.</p>	Completed	<p>The Council's generic Enforcement Policy is under review. The Food Enforcement Policy has been developed and is already in use by Food Team. This will be finalised following the review of the revised Council Policy.</p>

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<p>3.4.12(ii) Ensure up to date documented procedures are developed and implemented for all follow-up and enforcement actions in accordance with the Food Law Code of Practice. [The Standard - 15.2]</p>	<p>30/09/13</p>	<p>See 3.1.11(i)</p>	<p>Completed</p>	<p>See 3.1.11(i) Further development and implementation of the enforcement procedures will be further strengthened by the umbrella enforcement policy (aligned to the new Regulator's Code), which covers all regulatory responsibilities under the wider Safer Communities department), which is currently in draft form (ratification by legal expected in March 2015) and being led by the Head of Service.</p>
<p>3.5.6(i) Set up, maintain and implement risk based and proportionate documented internal monitoring procedures in accordance with Article 8 of Regulation (EC) No. 882/2004, the Food Law Code of Practice and centrally issued guidance. [The Standard - 5.1]</p>	<p>30/09/13</p>	<p>Monitoring procedure to be developed. Team Leaders to undertake risk based and proportionate monitoring in accordance with the monitoring procedure to verify conformance of the service with the Standard in the Framework Agreement. Officers to undergo regular and planned peer reviews.</p>	<p>Completed</p>	<p>An internal peer audit process is in place and this has been further developed to be "circular" in nature, rather than in pairs to increase robustness of monitoring. The team has undertaken a SWOT analysis of themselves. An internal monitoring procedure has been developed and is now in place (Oct 2014). Built into PDRs and Safer Communities Service Plan PIs.</p> <p>Consistency training on risk rating and FHRS has taken place internally and the wider Kent Food group is taking this forward externally.</p>

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3.5.6(i) Continued				Consistency training on risk rating and FHRS has taken place internally and the wider Kent Food group is taking this forward externally.
3.5.6(ii) Verify the conformance of the Service with the Standard in the Framework Agreement, the Food Law Code of Practice, relevant centrally issued guidance and the Authority's own documented policies and procedures. [The Standard - 5.2]	01/04/13	See 3.5.6(i)	Completed – review is ongoing annually	See 3.5.6(i) Built into PDRs and Safer Communities Service Plan PIs.
3.5.6(iii) Ensure records of internal monitoring activities are maintained. [The Standard - 5.3]	01/04/13	See 3.5.6(i)	Completed - review is ongoing annually	See 3.5.6(i) Built into PDRs and Safer Communities Service Plan PIs.
3.5.9 Set up and maintain a documented policy and procedure in relation to complaints about food and food establishments including any referral arrangements. [The Standard - 8.1]	30/09/13	See 3.1.11(i)	Completed	See 3.1.11(i) Comprehensive Complaints Procedure PRO 11 has been developed. All complaints triaged and followed up including investigations undertaken by the Compliance Team.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	PROGRESS	ACTION TAKEN TO DATE
3.5.12(i) Set up, maintain and implement a documented sampling policy, procedure and programme in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard - 12.4]	01/04/13	A policy and procedure is to be drawn up and will include a sampling programme to commence in the financial year 13/14. Medway will continue to be part of the Kent Food Sampling Group; a sub-group of the Kent Food Technical Group.	Completed	Sampling procedures PRO 13a and PRO 13b have been developed Sampling programme for 2013 took place and 2014 is in place and underway.
3.5.12(ii) Appropriate action should be taken on any non-compliance found in accordance with the Authority's enforcement policy. [The Standard - 12.5]	01/04/13	See 3.5.6(ii)	Completed – sampling is now an ongoing part of the programmed work.	The Team has started food sampling in accordance with our policy and Service Plan and the Team will re-sample where necessary (anything other than “satisfactory” results, including borderline). The food sampling procedure (PRO13b, sections 6.1 – 6.4 inclusive) specifies when re-sampling should be carried out. Fortunately most of the sampling carried out so far has resulted in satisfactory results. Officers have been instructed to input sampling results in a timely fashion when we receive them from the lab (timeframes for actions on any problematic samples are defined in sections 6.3 and 6.4 of the procedure). Medway is participating in the national sampling programme in line with the Kent-wide group.