## **Updated Action Plan for Bournemouth Borough Council**

Audit date: 27-28 April 2010

Action Plan Updated: 5 October 2011, 13 September 2012 and 23 July 2013

TO ADDRESS RECOMMENDATION (INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	PROGRESS	ACTION TAKEN TO DATE
3.1.3 Undertake a performance review at least once a year based on the food service delivery plan, documented and submitted for approval to the relevant Member forum or designated senior officer and ensure that any variances in meeting the service delivery plan are addressed in the subsequent year's service planning arrangements.  [The Standard – 3.2 and 3.3]	30/04/11	Performance Review against the Service Plan to be carried out, and documented, at the end of the financial year.	Completed	A procedure for quarterly management reviews has been put in place to help address any shortfalls in performance/delivery, including the number of inspections achieved against the programme. Scorecards developed for performance management.
3.1.8 Fully implement the internal audit and review system for all its documented food service policies, procedures and working practices to ensure that all documents are reviewed at regular intervals and whenever there are changes to legislation and centrally issued guidance. [The Standard – 4.1]	31/10/10	Review all documented food service policies, procedures and working practices, and then review yearly.	Completed	Document review completed.

TO ADDRESS RECOMMENDATION (INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	PROGRESS	ACTION TAKEN TO DATE
3.1.11 Expand and fully implement the Service's documented procedure on the authorisation of officers to detail the competency assessment process by which authorisations are conferred, based on an officer's individual qualifications, training and experience, to ensure that all officers are appropriately individually authorised in accordance with the Food Law Code of Practice and any centrally issued guidance. [The Standard – 5.1]	31/10/10	Detail the competency assessment process by which authorisations are conferred, including officer authorisation procedure.	Completed	Revised documented procedure for the authorisation of food officers written and being implemented. Officer training form produced to identify shortfalls in training and competence.
3.1.13 Undertake a review of officer authorisations to ensure that every officer is appropriately authorised for all relevant and up to date legislative provisions and that the level of authorisation and duties of officers are consistent with their qualifications, training and experience and in accordance with the Food Law Code of Practice. [The Standard – 5.3]	Completed	Review officer authorisations to ensure that every officer is appropriately authorised.	Completed	Review completed and new warrant cards ordered.
3.1.16 Ensure that all officers receive regular relevant update training in accordance with the Food Law Code of Practice. [The Standard – 5.4]	30/04/11	All food officers to receive 10 hours food relevant CPD per year.	Completed	Training needs considered and included in performance and development reviews.

TO ADDRESS RECOMMENDATION (INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	PROGRESS	ACTION TAKEN TO DATE
3.2.4 Carry out food hygiene interventions/inspections in accordance with relevant legislation, the Food Law Code of Practice, centrally issued guidance and the Authority's policies and procedures. [The Standard – 7.2]	Completed	All unrated premises to be inspected by suitably qualified/experienced officers.	Completed	All premises now being inspected by suitably qualified and experienced officers. Premises that were previously inspected and risk rated by officers without the appropriate competence were reviewed and re-rated as required.
3.2.7 Ensure that food hygiene interventions/inspections at premises in their area are carried out at a frequency which is not less than that determined under the intervention rating scheme set out in the relevant legislation, the Food Law Code of Practice or other centrally issued guidance. [The Standard – 7.1]	30/04/11	All low risk food businesses (rated D and E) to be included in the inspection programme.	Completed and ongoing	Risk based inspection programme developed and implemented. This has taken into account the premises overdue for intervention, which are being prioritised based on their risk rating as well as local knowledge and intelligence. Level of overdue higher risk inspections greatly reduced. All remaining overdue inspections included in current annual programme and contractor employed to address remaining backlog.

TO ADDRESS RECOMMENDATION (INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	PROGRESS	ACTION TAKEN TO DATE
3.2.9 Review, expand and fully implement the documented procedure for approved establishments to provide appropriate operational guidance to officers in accordance with the relevant legislation, Food Law Code of Practice or other centrally issued guidance.  [The Standard – 7.4]	31/12/10	Review, expand and fully implement the documented procedure for approved establishments.	Completed	Documented procedure produced and implemented in respect of approved establishments.
3.2.11 Fully implement appropriate aidesmemoire for both general and approved establishments in its area, to enable officers to consistently record inspection findings in relation to their assessment of business compliance with legal requirements. Ensure that records of inspections and key details of business operations provide complete records of business compliance histories.  [The Standard – 7.5 and 16.1]	31/10/10	Implement appropriate aides-memoire for both general and approved establishments to ensure that an appropriate amount of detail is recorded in relation to inspections, business operations and business compliance histories.	Completed and ongoing	Appropriate aidesmemoire in use for approved establishments. Comprehensive inspection aide-memoire for high risk businesses was implemented in September 2011, amended in March 2012. Improvement to record keeping noted and ongoing internal monitoring in place to improve the level of detail recorded.

TO ADDRESS RECOMMENDATION (INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	PROGRESS	ACTION TAKEN TO DATE
3.2.14 Assess the compliance of general food premises and approved establishments to legally prescribed standards, including as appropriate a detailed assessment of business compliance with HACCP based food safety management system requirements, and take appropriate action on any non-compliance found in accordance with the Authority's enforcement policy.  [The Standard – 7.3]	Completed	Appropriate action to be taken on any non-compliance found in accordance with our enforcement policy.	Completed and ongoing	Qualitative internal monitoring introduced and is ongoing to ensure that an appropriate graduated approach to enforcement is taken by officers in relation to contraventions identified during interventions. Some improvement noted and ongoing internal monitoring to target any inconsistencies between officers and to ensure improvements are maintained.
3.2.16 Maintain up to date, accurate and comprehensive records for all approved establishments in accordance with Annexe 12 of the Food Law Practice Guidance. [The Standard –16.1]	31/12/10	Maintain up to date, accurate and comprehensive records for all approved establishments.	Completed	Record keeping arrangements for approved establishments reviewed and appropriate detailed records now maintained for all three establishments.

TO ADDRESS RECOMMENDATION (INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	PROGRESS	ACTION TAKEN TO DATE
3.4.2 Set up, maintain and implement documented qualitative and quantitative documented internal monitoring procedures for all areas of the food law enforcement service in accordance with relevant legislation, the Food Law Code of Practice and centrally issued guidance. [The Standard –19.1]	31/10/10	Set up, maintain and implement documented qualitative and quantitative internal monitoring procedures.	Completed	Detailed audit checklist developed and implemented for food premises files. Scorecard developed to facilitate ongoing quantitative performance management.
3.4.5 Verify its conformance with the Standard, relevant legislation, the Food Law Code of Practice, relevant centrally issued guidance and the Authority's own policies and procedures and maintain records of all internal monitoring undertaken. [The Standard –19.2 and 19.3]	31/10/10	Verify conformance with the standard, relevant legislation, the Food Law of Practice etc.	Completed	Processes have been implemented to help address any shortfalls in performance/delivery including the verification of conformance with standards in relation to qualitative internal monitoring.  Regular performance reviews and one to one meetings in place.
3.4.10 Set up, maintain and implement a documented sampling programme and carry out food sampling in accordance with its documented sampling policy, procedures and the Food Law Code of Practice and centrally issued guidance. [The Standard –12.4 and 12.6]	Completed	Set up, maintain and implement a documented sampling programme.	Completed	A documented risk based sampling programme has been developed and implemented.