

# Report on the Food Law Enforcement Service

**Bridgend County Borough Council** 

20 -25 March 2013

# **Foreword**

Audits of local authority food and feed law enforcement services are part of the Food Standards Agency's (FSA) arrangements to improve consumer protection and confidence in relation to food and feed. These arrangements recognise that the enforcement of UK food and feed law relating to food safety, hygiene, composition, labelling, imported food and feedingstuffs is largely the responsibility of local authorities. These local authority regulatory functions are principally delivered through their Environmental Health and Trading Standards Services.

The attached audit report examines the local authority's Food Law Enforcement Service. The assessment includes consideration of the systems and procedures in place for inspections of food businesses, food sampling, internal management, control and investigation of outbreaks and food related infectious disease, advice to business, enforcement and food safety promotion. It should be acknowledged that there may be considerable diversity in the way and manner in which authorities provide their food enforcement services reflecting local needs and priorities.

Agency audits assess local authorities' conformance against the Feed and Food Law Enforcement Standard. "The Standard", which was published by the Agency as part of the Framework Agreement on Official Feed and Food Controls by Local Authorities (amended April 2010) is available on the Agency's website at: <a href="https://www.food.gov.uk/enforcement/enforcework/frameagree">www.food.gov.uk/enforcement/enforcework/frameagree</a>

The main aim of the audit scheme is to maintain and improve consumer protection and confidence by ensuring that authorities are providing effective food and feed law enforcement services. The scheme also provides the opportunity to identify and disseminate good practice and provide information to inform Agency policy on food safety, standards and feedingstuffs and can be found at:

www.food.gov.uk/enforcement/auditandmonitoring

The report contains some statistical data, for example on the number of food premises inspections carried out. The Agency's website contains enforcement activity data for all UK local authorities and can be found at: www.food.gov.uk/enforcement/auditandmonitoring

The report also contains an action plan, prepared by the authority, to address the audit findings.

For assistance, a glossary of technical terms used within the audit report can be found at Annex C.

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#### 1 Introduction

1.1 This report records the results of an audit of food hygiene and food standards at Bridgend County Borough Council under the headings of the Food Standards Agency (FSA) Food Law Enforcement Standard. It has been made publicly available on the Agency's website at <a href="https://www.food.gov.uk/enforcement/auditandmonitoring/auditreports">www.food.gov.uk/enforcement/auditandmonitoring/auditreports</a>

#### Reason for the Audit

- The power to set standards, monitor and audit local authority food and feed law enforcement services was conferred on the Food Standards Agency by the Food Standards Act 1999 and the Official Feed and Food Controls (Wales) Regulations 2009. The audit of the food service at Bridgend County Borough Council was undertaken under section 12(4) of the Act and Regulation 7 of the Regulations.
- 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 FSA, 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.<sup>1</sup>
- 1.4 The authority was audited as part of a three year programme (2013 2016) of full audits of the 22 local authorities in Wales.

#### Scope of the Audit

1.5 The audit covered Bridgend's arrangements for the delivery of food hygiene and food standards law enforcement services. The on-site element of the audit took place at the authority's offices in Bridgend on

<sup>&</sup>lt;sup>1</sup> 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).

20 – 25 March 2013, and included verification visits at food businesses to assess the effectiveness of official controls implemented by the authority at food business premises and more specifically, the checks carried out by the authority's officers, to verify food business operator (FBO) compliance with legislative requirements.

- 1.6 The audit also afforded the opportunity for discussion with officers involved in food law enforcement with the aim of exploring key issues and gaining opinions to inform Agency policy.
- 1.7 The audit assessed the authority's conformance against "The Standard". The Standard was adopted by the FSA Board on 21<sup>st</sup> September 2000 (and was subject to its fifth amendment in April 2010), and forms part of the Agency's Framework Agreement with local authorities. The Framework Agreement can be found on the Agency's website at <a href="https://www.food.gov.uk/enforcement/enforcework/frameagree">www.food.gov.uk/enforcement/enforcework/frameagree</a>
- 1.8 The authority was one of two in Wales which had volunteered to pilot the development of a local authority audit rating scheme following completion of the audit.
- 1.9 It should be noted that the authority's animal feed law enforcement service was not included within the scope of the audit. The potential for delivering this service collaboratively in Wales was being considered at the time of the audit. Consequently, in relation to the two Authorities which had volunteered to pilot the local authority audit rating scheme, it had been agreed that feedingstuffs would be audited later in the audit cycle.

#### Background

- 1.10 Bridgend County Borough Council is a Welsh Unitary Authority, centred on the town of Bridgend in South Wales. It covers an area of 285 square kilometres stretching 20 kilometres from east to west and has a population of approximately 139,000.
- 1.11 The area to the north of the M4 consists mainly of former coal mining valley communities with Maesteg as its main population centre.

- 1.12 Several wards in the authority's area score highly on the Welsh Index of Deprivation. Bridgend has 11% of its local areas in the 10% most deprived in Wales.
- 1.13 To the south of the motorway lie Bridgend itself and the coastal town of Porthcawl, a traditional seaside resort with a higher proportion of elderly residents. The town sees a major influx of visitors during the summer months, and also hosts the largest caravan park in Europe.
- 1.14 Bridgend is the largest town in the authority's area and the hub of the local economy. Significant centres of employment include the Ford Engineering Plant, an extensive industrial estate, and a Designer Village Retail Outlet.
- 1.15 The authority's Public Protection Department which sits within the Legal and Regulatory Services Directorate, located at Civic Offices, Angel Street, Bridgend, had responsibility for food and feed law enforcement, and for the investigation and control of food related infectious disease.
- 1.16 Within the Public Protection Department, food hygiene law enforcement and the investigation and control of communicable diseases was the responsibility of the Environmental Health Service whilst food standards and feedingstuffs enforcement was the responsibility of the Trading Standards Service.
- 1.17 The authority's Offices were open to the public from 08.30 to 17.00 Monday to Thursday and 08.30 to 16.30 on Friday.
- 1.18 The authority had formal arrangements in place to deal with Public Protection emergencies out of office hours, which included responding to food incidents and communicable disease notifications. These arrangements were not tested as part of the audit.
- 1.19 The authority reported the profile of Bridgend Council's food businesses in the Food Law Enforcement Service Plan 2012/13 as follows:

| Type of food premises          | Number |
|--------------------------------|--------|
| Primary Producers              | 8      |
| Manufacturers/Packers          | 26     |
| Importers/Exporters            | 1      |
| Distributors/Transporters      | 15     |
| Supermarket/Hypermarket        | 44     |
| Small Retailers                | 227    |
| Retailer/Other                 | 25     |
| Restaurant/Café/Canteen        | 180    |
| Hotel Guest House              | 32     |
| Pub/Club                       | 228    |
| Takeaway                       | 117    |
| Caring Premises                | 160    |
| School/College                 | 66     |
| Mobile Food Unit               | 44     |
| Restaurants and Caterers Other | 88     |
| Not yet ascertained            | 2      |
| Unspecified                    | 2      |
| Total number of food premises  | 1,265  |

- 1.20 At the time of the audit, six premises were approved under product-specific food hygiene regulations for the production of meat, dairy or egg products.
- 1.21 The food hygiene risk ratings of Bridgend Council's food businesses were detailed in the authority's 2012/13 Food Law Enforcement Service Plan:

# Food hygiene risk ratings:

| Premises risk category | Number of premises |
|------------------------|--------------------|
| A                      | 29                 |
| В                      | 153                |
| С                      | 579                |
| D                      | 150                |
| E                      | 235                |
| Unrated                | 35                 |
| Outside Programme      | 84                 |
| Total                  | 1,265              |

1.22 The food standards risk ratings of Bridgend's food businesses were reported in the Food Law Enforcement Service Plan:

# Food standards risk ratings:

| Premises risk category | Number of premises |
|------------------------|--------------------|
| High (A)               | 29                 |
| Medium (B)             | 153                |
| Low (C)                | 579                |
| Total                  | 761                |

- 1.23 The Food Law Enforcement Service Plan 2012/13 stated that the authority had 9.5 full time equivalent officers involved in food safety and 1.7 full time equivalent officers involved in food standards.
- 1.24 In 2012/13 the food safety service budget was reported in the Food Law Enforcement Service Plan to be just under £606,000.
- 1.25 The authority had been participating in the National Food Hygiene Rating Scheme which was launched by all local authorities in Wales in October 2010.

# 2 Executive Summary

- 2.1 The authority was providing a food law enforcement service that worked closely with businesses to assist them in achieving compliance with food law. Advice was provided during inspections, in correspondence and on the telephone. Mail drops were also provided from time to time on important issues.
- 2.2 The importance of regular training had been recognised and officers were able to demonstrate that they had achieved the continuing professional development required by the Food Law Code of Practice.
- 2.3 It was evident that the authority was committed to delivering a food hygiene interventions programme that concentrated on the highest risk premises. Generally, the authority was providing a comprehensive and effective food hygiene service with some areas for improvement identified.
- 2.4 Whilst auditors were satisfied that staff were competent to carry out food standards interventions, there was concern that the authority was not carrying out its food standards interventions at the required frequencies. Further, there was insufficient evidence being maintained to demonstrate that effective food standards inspections were being carried out.
- 2.5 Follow up work carried out by officers in response to borderline microbiological sampling results was highlighted as an area of good practice.

# 2.6 The Authority's Strengths

#### Advice to Business

The authority had been proactive in providing assistance to businesses to help them comply with food hygiene and food standards legislation.

#### Sampling

All food sampling was being carried out in accordance with the sampling policy and procedures. Records were well maintained and appropriate follow up action had been taken where unsatisfactory samples had been

identified. here sampling results were borderline, officers provided businesses with appropriate advice which was documented.

# Performance Management and Scrutiny

The Head of Public Protection provided regular performance reports on food law enforcement to the relevant Scrutiny Committee. There was evidence that elected members were proactive in scrutinising performance, particularly in relation to food hygiene.

# 2.7 The Authority's Key Areas for Improvement

# Food Standards Intervention Frequency

The authority was not carrying out its food standards interventions at the minimum frequency. Interventions carried out at the minimum frequency ensures that the risks associated with food businesses are identified in a timely manner.

#### Food Standards Interventions

The risk rating scheme in use was not consistent with or equivalent to the risk rating scheme in the Food Law Code of Practice.

# Food Standards Inspection Records

Records of food standards inspections were not sufficiently detailed to establish that effective inspections had been carried out. Detailed records are necessary to inform a graduated and consistent approach to enforcement and enable effective internal monitoring.

#### Food Standards Internal Monitoring

Whilst quantitative monitoring of food standards work was being carried out, there was no evidence of qualitative internal monitoring. A new procedure had been developed which the authority plans to implement.

# **Audit Findings**

# **3** Organisation and Management

Strategic Framework, Policy and Service Planning

- 3.1. The authority had set out its vision "to deliver the best local services in Wales" in its Corporate Plan 2010-13. The Corporate Plan provided the strategic direction to achieve this vision and set out the authority's key improvement objectives.
- 3.2 The authority had adopted six strategic themes in its Corporate Plan which included Healthy Living. Under this theme, a commitment "to strengthen food hygiene enforcement and education" was provided.
- 3.3 The Legal and Regulatory Services Directorate Plan 2012/13 outlined its contribution in achieving the improvement objectives set out in the Corporate Plan. The Plan reported achievements in 2011/12 together with risks and challenges for 2012/13. A Directorate priority for 2012/13 was "to strengthen inspection of food and licensed premises and continue to strengthen good food hygiene enforcement and education".
- 3.4 Performance was reported quarterly to the authority's Community Safety and Governance Overview and Scrutiny Committee in respect of the following performance indicators:
  - The % of high risk businesses that were liable to a programmed inspection or alternative inspection activity that were inspected/subject to alternative enforcement activity for i) trading standards and ii) food hygiene
  - The % of new businesses identified during the year which were subject to an inspection or submitted a self-assessment questionnaire for food hygiene
  - The percentage of food establishments which are broadly compliant with food hygiene standards

- 3.5 At Annual General Meetings of the Legal and Regulatory Services Directorate management team, performance was considered including achievement against performance indicator targets, other achievements, staff absence, training planned, training achieved, staff appraisals, business continuity, business risks, customer complaints, budgets, joint working projects and staff health and safety.
- 3.6 The authority had developed a Food Law Enforcement Service Plan for 2012/13 which was generally in line with the Service Planning Guidance contained in the Framework Agreement. Additional information relating to food standards was provided in the Trading Standards and Licensing Service Delivery Plan 2012/13. The Plans had been approved by the authority's Cabinet in June 2012 and were published on the authority's website.
- 3.7 The Food Law Enforcement Service Plan set out Public Protection's aims and objectives as being to "provide a fair, safe and equitable trading environment in the County Borough to the benefit of both the consumer and business community and to protect public health by ensuring that food supplied for human consumption which is produced, stored, distributed, handled or consumed within the County Borough is without risk to the health and safety of the consumer, and is labelled and described accurately." The Plan stated that the latter objective would be met by a programme of work consisting of:
  - Risk based inspections
  - Food and animal feed sampling and analysis
  - Advice and education of both businesses and consumers
  - Investigation of foodborne infectious diseases
  - Investigation of complaints regarding food and animal feeds
  - Training and development of staff
- There were clear links between the Food Law Enforcement Service Plan and the authority's strategic aims set out in the Community Strategy "Bright Futures."
- 3.9 Whilst the Food Law Enforcement Service Plan provided details of the types of food businesses within the authority, together with the risk profile for food hygiene, it did not provide details of the number of interventions that were due to be delivered in 2012/13. Auditors

acknowledged that this information was available from other sources within the authority and that robust performance management arrangements were in place to monitor the delivery of the food hygiene interventions programme. In respect of food standards, the risk profile of food businesses was reported to correspond exactly with the risk profile for food hygiene i.e. the number of category A, B and C rated premises was the same. Further, the number of premises reported as due for inspection was not consistent with the number provided in the Trading Standards and Licensing Service Delivery Plan.

- The authority's food hygiene intervention programme included premises in risk categories A-D however, it was noted that the policy was to adopt a risk based approach concentrating on higher risk premises in categories A, B and C. In addition, the authority had more recently developed a policy and programme relating to the use of alternative enforcement strategies for category E premises. In relation to food standards, the authority's policy was to inspect high and medium risk premises. The authority did not set out its approach to food businesses rated as low risk for food standards although it was noted in practice that the authority was using alternative enforcement strategies.
- 3.11 The Food Law Enforcement Service Plan made reference to an annual, documented microbiological sampling programme which encompassed various national and local initiatives, and a programme of food standards sampling.
- 3.12 Arrangements for internal monitoring were set out in the Food Law Enforcement Service Plan for food hygiene. Internal monitoring arrangements for food standards were not specified.
- 3.13 The Food Law Enforcement Service Plan confirmed that the resources available to deliver the food hygiene enforcement service were consistent with those required (9.5 FTE officers). Whilst the resources available to deliver food standards enforcement were reported to be 1.7 FTE, no calculation had been made of the resources required to carry out the full range of statutory food standards enforcement activities.
- 3.14 The budget for food law enforcement was closely monitored by the Head of Service who provided regular reports to the relevant Scrutiny Committee. The cost of providing the food safety service for 2012/13

was reported to be just under £606,000 however it was not stated whether this was a net increase or decrease on 2011/12 costs.

3.15 The Food Law Enforcement Service Plan 2012/13 stated that a Public Protection annual review document reports on all aspects of work carried out during the year, including food safety and food standards. Whilst this document was not available for 2011/12, some aspects of the authority's performance in relation to food hygiene and food standards had been reviewed and reported corporately. Auditors discussed the potential benefits of carrying out a documented review against all parts of the service delivery plan and including it in subsequent Food Law Enforcement Service Plans.

# Recommendation

- 3.16 The authority should:
- (i) Ensure that future Food Law Enforcement Service Plans are developed in full accordance with the Service Planning Guidance in the Framework Agreement. [The Standard 3.1]

# 4 Review and Updating of Documented Policies and Procedures

- 4.1 The authority had developed a Document Control Procedure which ensured documented policies and procedures for enforcement activities covered by The Standard were regularly reviewed and updated as necessary. The procedure, together with documents developed in accordance with the procedure, was held electronically
- 4.2 Documented policies and procedures had been produced for food hygiene, food standards and the investigation and control of infectious diseases. Service managers and principal officers were responsible for identifying the need for new policies and procedures.
- 4.3 Service managers were responsible for approving all new and revised procedures, whilst the Group Manager Public Protection approved all new and revised Policies, ensuring appropriate elected member approval where necessary.
- 4.4 Up to date, controlled copies of documents and centrally issued guidance were available to officers electronically. Officers also had access to legislation, Codes of Practice and other appropriate documentation on the internet.
- 4.5 An audit check revealed that superseded documents were clearly marked, had been removed from use and retained for reference in a separate folder.

#### 5 Authorised Officers

- 5.1 The authority had a Register of Delegations setting out the functions delegated to officers.
- The authority had set up, implemented and maintained a comprehensive documented procedure for the authorisation of officers based on their qualifications, experience and competence.
- The scope of officer authorisations was clearly documented. Authorisation documents were duly signed by the Group Manager Public Protection following confirmation of the officer's qualifications, experience and competency by the Principal Officers and Service Managers.
- Details of the practical process for assessing officer competence were outlined in the procedure. The procedure also made reference to the Internal Monitoring Procedure for assessing competencies and the Training and Development Procedure.
- The Authorisation Procedure for food hygiene incorporated a useful Induction List of Policies, Procedures and other key documents. Officers were required to specify on the list the date that each of the documents had been read before it was countersigned by the Principal Officer.
- Whilst generally officers were appropriately authorised, authorisations to enforce legislation relating to imported food were found not to be adequate. Officers had not been specifically authorised to enforce the Official Feed and Food Controls (Wales) Regulations 2009 or the Trade in Animals and Related Products (Wales) Regulations 2011. Further, the Register of Delegations did not include the Trade in Animals and Related Products (Wales) Regulations 2011.
- 5.7 Verification checks confirmed that officers with lead responsibility for food hygiene and food standards had the specialist knowledge, competencies and training to perform their roles. Officers responsible for approving establishments under specific legislation were also found to have the necessary specialist knowledge, competencies and training.

- 5.8 An assessment of authorisations confirmed that permanent officers had been authorised in accordance with their qualifications, training and competencies and had acted in accordance with their authorisations. This this was not the case for contractors and temporary staff where records for two individuals confirmed that they did not hold any authorisation from the authority. Further, it was noted that no staff had been authorised to deliver alternative enforcement strategies.
- 5.9 The authority had a system of annual performance reviews in place supported by biannual reviews. The process included a discussion and assessment of officers' training needs. The outcome of these assessments contributed to the Public Protection Annual Training Plan.
- 5.10 The Business Support Team ensured training records were generally well maintained. Officers also maintained copies of training certificates in their personal portfolios.
- A review of officer qualifications and training found that all officers had received at least 10 hours of food related training as required by the Code of Practice and, with the exception of one officer, evidence of qualifications was being maintained on file.
- 5.12 It was noted that qualification and training records of contractors were not available during the audit. However, these were subsequently provided to auditors.

#### Recommendations

- 5.13 The authority should:
- (i) Review the Scheme of Delegation and officer authorisations to include the appropriate provisions of the Trade in Animals and Related Products (Wales) Regulations 2011 and the Official Feed and Food Control (Wales) Regulations 2009. [The Standard 5.1]
- (ii) Ensure contractors and temporary staff are appropriately authorised under current legislation in accordance with their qualifications, training and competencies. [The Standard 5.3]
- (iii) Ensure that relevant qualification and training records of staff (including contractors) are maintained on file. [The Standard 5.5]

# 6 Facilities and Equipment

- 6.1 The authority had made available most of the necessary facilities and equipment to support the effective delivery of the service. It was noted that there was no facility to monitor the temperature of food samples during transport.
- A procedure for the Calibration and Maintenance of Equipment had been developed to ensure equipment was properly maintained and calibrated, and removed from service when found to be defective. Tolerances were specified together with the action to be taken if tolerances were exceeded.
- 6.3 All temperature monitoring equipment used for enforcement purposes had valid calibration certificates and appropriate records had been kept.
- The authority had a computer system that was used to maintain a food premises database and record information required by the Food Standards Agency. The system was providing the information required by the FSA.
- The authority had adequate security controls in place to prevent access to the system by unauthorised persons.
- 6.6 A business support officer provided regular management and performance reports from the database and vital support in the provision of data for the Agency's Local Authority Enforcement Monitoring System (LAEMS) return.
- 6.7 Backup systems were in place to minimise the risk of loss of information from the database and electronic files used for the storage of key information.

# 7 Food Establishments Interventions and Inspections

# Food Hygiene

- 7.1 In 2011/12 the authority had reported through LAEMS that 100% of high risk (category A-C) food businesses due to be inspected had been inspected together with 80% of other (category D and E) premises. 77.35% of food businesses were reported as being 'broadly compliant' with food hygiene law (excluding unrated businesses and those outside the scope of the Food Law Code of Practice Risk Rating scheme). This represented an improvement from 70.51% 'broadly compliant' reported in the previous year.
- 7.2 The authority had a comprehensive documented Food Intervention and Revisit Procedure which established a uniform approach to food hygiene inspections. The procedure stated that all establishments rated A, B, C or D would be subject to full inspections. The authority also had a programme of Alternative Intervention Strategies for category E establishments.
- 7.3 The authority had a separate procedure for the implementation of the Food Hygiene Rating Scheme which ensured the Scheme was delivered in accordance with the Agency's brand standard.
- 7.4 The Food Hygiene Intervention and Revisit Procedure included a food hygiene inspection form for officers to record information during inspections and a food premises inspection summary report which was left at food business establishments following inspections. The Local Government Regulation 'Guidance on Food Hygiene Inspections' was also available to officers.
- 7.5 An examination of six food premises files was carried out. The inspection histories confirmed that five out of six had been inspected at the frequencies required by the Code of Practice. The premises which had not been inspected at the required frequency was a new business. It had opened in August 2010 but had not been subject to an inspection until January 2011, at which point it was assigned a category D rating.
- 7.6 Other inspection data that had been recorded by officers at the time of inspection was comprehensive, legible and easily retrievable and

correspondence following inspections had been issued in a timely manner.

- 7.7 Generally, the risk ratings applied to premises were consistent with the inspection findings and records of interventions indicated that officers were evaluating food businesses against almost all aspects of centrally issued guidance.
- 7.8 The authority had developed a separate documented procedure for the approval and inspection of establishments subject to product-specific food hygiene regulations, which incorporated aides-memoire to assist officers in conducting comprehensive inspections. Product specific inspection forms were also available.
- 7.9 On six approved establishments files examined, auditors were able to verify that all necessary documentation was being maintained, including application forms, approval documentation, layout plans, HACCP documentation, staff training certificates, process charts and product labels. A synopsis was available at the front of each file and correspondence was filed in chronological order, which facilitated easy reference.
- 7.10 Approved establishment files examined provided evidence that comprehensive inspections had been carried out at the frequencies required by the Food Law Code of Practice.
- 7.11 Whilst approvals had generally been granted in a timely manner, auditors noted that an establishment that had initially been granted conditional approval had been advised in writing after six months that the standards for full approval had not been achieved. The business had been provided with additional time to comply. Whilst the establishment was monitored closely, this is contrary to the Food Law Code of Practice and centrally issued guidance. The establishment was subsequently granted full approval following a further inspection.
- 7.12 The authority had issued derogations relating to the microbiological sampling of raw meat by writing to food business operators, retrospectively.

- 7.13 The Intervention and Revisit Procedure stated that revisits would be carried out to food establishments if a statutory notice had been served or if the establishment was not broadly compliant. Auditors were able to verify from the premises database that revisits had been carried out in accordance with the procedure.
- 7.14 The authority had recently developed a formal programme of alternative enforcement strategies for category E food businesses. Records relating to ten premises which had been subject to alternative enforcement strategies were examined. Scanned images of the questionnaires used as part of the alternative enforcement strategy were available on the premises files in eight cases making them easily retrievable. In seven cases, the officer delivering the intervention had not been appropriately authorised and there was no evidence that the information obtained had been reviewed by an appropriately qualified and authorised officer. Nine of the premises had been risk rated on the basis of the alternative enforcement strategy contrary to the Food Law Code of Practice. Interventions had not been carried out at the required frequency at eight premises. Periods of between 42 months and 13 years had elapsed since the previous intervention. The Code of Practice requires that low risk, category E premises are subject to an intervention every 3 years.
- 7.15 A report produced during the audit confirmed that the authority had adopted a risk based approach to its intervention programme. There were 64 overdue food hygiene interventions as follows:

#### Food hygiene overdue interventions:

| Premises risk category | Number of premises |
|------------------------|--------------------|
| A                      | 0                  |
| В                      | 1                  |
| С                      | 13                 |
| D                      | 32                 |
| E                      | 10                 |
| Unrated                | 8                  |
| Total                  | 64                 |

#### Recommendations

- 7.16 The authority should:
- (i) Ensure that food premises interventions are carried out at a frequency specified by the Food Law Code of Practice. [The Standard -7.1]
- (ii) Carry out interventions, and approve establishments in accordance with the relevant legislation, the Food Law Code of Practice and centrally issued guidance. [The Standard -7.2]

#### Verification Visits to Food Premises

- 7.17 During the audit a verification visit was made to a food business with an authorised officer of the authority, who had carried out the last 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.
- 7.18 The officer was clearly knowledgeable about the premises and demonstrated an understanding of the food safety risks associated with the activities at the premises. Generally, the officer had carried out a thorough inspection and had assessed compliance with legal requirements.

#### Food Standards

- 7.19 In 2011/12 the authority had reported through LAEMS that interventions at 78.95% high risk, 76.8% medium risk and 93.67% low risk food businesses that were due during the year had been carried out. This was not consistent with the information reported in the Food Law Enforcement Service Plan.
- 7.20 The authority's Food Law Enforcement Service Plan for 2012/13 stated that there were a total of 761 food businesses in its area subject to food

standards interventions and 549 were due for inspection in 2012/13. The authority had reported through LAEMS that there were 996 premises subject to food standards interventions as of 31 March 2012.

7.21 The food standards interventions programme for high and medium risk food businesses was set out in the Trading Standards and Licensing Service Delivery Plan 2012/13:

# Food standards interventions programme 2012/13:

| Premises risk category | Number of premises |
|------------------------|--------------------|
| High (A)               | 16                 |
| Medium (B)             | 202                |
| Total                  | 218                |

- 7.22 The inconsistencies in food standards data reported in the Food Law Enforcement Service Plan, the Trading Standards and Licensing Service Plan and LAEMS should be reviewed in order to ensure that consistent data is provided in the future.
- 7.23 The authority had recently developed a procedure for food standards inspections but did not have a policy or procedures on the use of alternative enforcement strategies.
- 7.24 File checks on five premises which had been subject to inspection were carried out. It was not possible to confirm or assess the scope of interventions or that appropriate inspections and interventions were being carried out in all cases due to lack of sufficiently detailed records maintained by officers in their notebooks and/or on the database. Further, the authority was unable to demonstrate from the records available that all aspects of official controls had been considered during inspections or that appropriate action had been taken following inspections. The information recorded was not sufficiently detailed to assist in informing:
  - Subsequent inspections
  - A graduated and consistent approach to enforcement
  - Effective internal monitoring

- 7.25 The absence of information and variation in the content of records made it difficult to determine the basis for the allocation of premises risk ratings. It was further noted that the risk rating scheme in use was not comparable with that in the Food Law Code of Practice in respect of the individual factors considered to inform the rating.
- 7.26 Food business operators had been provided with hand written carbon copy reports of visit forms following inspections. These generally listed contraventions and the measures needed to secure compliance but did not indicate the scope of the inspection or make a clear distinction between legal requirements and recommendations of good practice. Further, food businesses were not provided with an indication of timescales for achieving compliance.
- 7.27 The authority did not have a policy on food standards revisits.
- 7.28 At the time of the audit the authority reported that there were 125 overdue food standards interventions, of which two were high risk, 100 medium risk and 23 low risk.

#### Recommendations

- 7.29 The authority should:
- (i) Ensure that food premises interventions are carried out at a frequency specified by the Food Law Code of Practice. Priority should be given to high risk establishments that have not been inspected in accordance with the Food Law Code of Practice. [The Standard -7.1]
- (ii) Carry out interventions at food establishments in accordance with relevant legislation, the Food Law Code of Practice and Practice Guidance, including the use of appropriate inspection forms. [The Standard -7.2]
- (iii) Assess the compliance of food businesses to the legally prescribed standards and in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard -7.3]

(iv) Set up, maintain and implement documented procedures for the range of interventions it carries out. [The Standard -7.4]

#### Verification Visits to Food Premises

- 7.30 During the audit, a verification visit was made to a food business with an authorised officer of the authority, who had carried out the last food standards 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.
- 7.31 The officer was knowledgeable about the premises and the operations carried out. Whilst it was clear the officer was competent to carry out a thorough food standards inspection, the records of the inspection were insufficiently detailed to ascertain the scope of the inspection or that a thorough inspection had been carried out. This was consistent with the findings of the file checks.

# **8** Food and Food Establishments Complaints

- 8.1 The Food Law Enforcement Service Plan 2012/13 stated that it was the policy of the authority to investigate every complaint relating to food premises and food brought to its attention and to determine the most appropriate course of action to be taken.
- 8.2 The authority had developed a Food Safety Complaints Procedure and a Food Standards and Feedingstuffs Complaints Procedure. The procedures were detailed but did not include reference to food originating from countries outside the EU or to the authority's procedure for investigating foodborne illness. The Framework Agreement on Official Feed and Food Controls requires Local Authorities to set up, maintain and implement a documented policy and procedure in relation to complaints about food that originate within the UK, and those foods originating from other EU member states, or from third countries.
- 8.3 Officers were responsible for ensuring complaints were responded to within three working days.
- The records of five food hygiene/premises complaints and six food standards complaints were examined.
- 8.5 All 11 complaints examined had been responded to within the target timescale of three working days, comprehensive investigations had been carried out and action taken on the findings. There was evidence that Primary/Home Authority matters had been considered and complainants had been informed of the outcome of investigations.
- 8.6 Comprehensive, easily retrievable records of complaints were being maintained on the food premises database.
- 8.7 There was evidence that complaints had been the subject of both qualitative and quantitative internal monitoring.

# Recommendation

- 8.8 The authority should:
  - (i) Review its complaints procedures to include guidance to officers on dealing with food originating from outside the EU. The procedure should also make reference to the authority's procedure for investigating cases of foodborne illness {The Standard 8.1]

# 9 Primary Authority Scheme and Home Authority Principle

- 9.1 The Food Law Enforcement Service Plan 2012/13 stated that the authority's Public Protection Department had, "signed up to the LACORS Home Authority Principle" and acted as Home Authority for nine businesses. This had been approved by the Council.
- 9.2 The authority did not have any formal Home Authority agreements. However, records examined at audit demonstrated that the authority implemented the Home Authority Principle effectively in relation to food standards matters, and responded appropriately to requests for information from businesses and other authorities.
- 9.3 The authority did not have any Primary Authority partnerships with businesses, although auditors were advised that it had recently been approached by a company which had expressed an interest in developing a partnership. The authority was exploring the implications and likely impact of this.
- 9.4 Officers had access to the Primary Authority website and LACORS Home Authority database and could therefore identify Primary and Home Authorities and local authority contacts.
- 9.5 Several of the authority's work procedures made reference to Primary and Home Authority matters. File checks confirmed that officers had regard to Primary and Home Authority guidance in their dealings with food businesses.

#### 10 Advice to Business

- 10.1 The authority had been proactive in providing advice and assistance to food businesses.
- The authority had submitted bids for funding which had been granted by the FSA in support of the delivery of shared objectives.
- The authority demonstrated its commitment to assisting local businesses to comply with the law in delivering a number of initiatives including:
  - Advice and coaching on HACCP;
  - Providing information and advice on the authority's website;
  - Direct mailshots to relevant businesses on the Food Standards Agency's E. coli O157 Control of Cross Contamination Guidance and Preventing Listeriosis in Hospitals and Nursing/Care Homes;
  - Advice to newly registered businesses on the Food Hygiene Rating Scheme;
  - 'Safer Food Better Business' workshops;
  - Technical advice to businesses in respect of which the authority acts as Home Authority

#### 11 Food Establishments Database

- 11.1 The authority operated a computer database system that was capable of providing the returns required for LAEMS. The returns were made by the Principal Officers with support from the Business Support Officer. Prior to submission to the Agency, various checks were carried out on the data for the LAEMS return.
- 11.2 The System Administrator had responsibility for creating database user accounts, passwords and setting security levels.
- 11.3 Documented procedures had been developed and implemented with the aim of maintaining the accuracy and completeness of the database and included requirements for input, amendment and deletion of data. In practice officers updated records following interventions and observations. Records were also updated following the receipt of intelligence, such as complaints.
- 11.4 Auditors randomly selected 10 food businesses located in the authority's area from the Internet. All 10 businesses had been recorded on the database and included in the authority's planned food hygiene and food standards interventions programmes.

# 12 Food Inspection and Sampling

- 12.1 The Food Law Enforcement Service 2012/13 Plan stated that its sampling programmes for food hygiene and food standards encompassed local and national initiatives and that samples would be obtained from local food manufacturing businesses and in response to complaints.
- 12.2 The annual food hygiene sampling programme included participation in the Welsh Food Microbiological Forum Shopping Basket Survey. The food standards sampling programme had been developed in liaison with the Glamorgan Group.
- The authority had recently started to submit results to the UK Food Surveillance System (UKFSS) database for samples.
- 12.4 The authority had signed an Agreement for the Provision of Microbiological Services with Public Health Wales and formally appointed its Public Analysts.
- The laboratories used by the authority for the examination of food samples had been properly accredited and were on the list of Official Laboratories that the UK Government had notified to the European Commission.
- The authority had developed documented sampling policies, procedures and annual sampling programmes.
- 12.7 The Food Law Enforcement Plan 2012/13 stated that 148 microbiological samples had been taken for analysis in 2011/12 and this was an indicator of the number of samples that would be taken in 2012/13. The Trading Standards and Licensing Service Plan stated that 49 food standards samples would be taken in 2012/13.

- 12.8 Records of six food hygiene samples and six food standards samples were examined. In all cases it was clear who had taken the sample, the sampling results were stored on the file, food business operators had been informed of the results and appropriate action taken in response to unsatisfactory samples.
- 12.9 In addition, where microbiological sample results had been found to be borderline, the authority had undertaken follow up and highlighted the issues with food business operators in order to achieve improvements. Records demonstrated that appropriate advice had been given.
- 12.10 At the time of audit the number of samples that had been taken correlated with the planned food sampling programmes.

#### **Good Practice – Following up borderline sampling results**

The practice of providing food business operators with advice following the receipt of microbiological sampling results, which had been found to be borderline was identified as an area of good practice.

# 13 Control and Investigation of Outbreaks and Food Related Infectious Disease

- The authority had identified a lead officer for communicable disease who had attended events as part of the Wales Lead Officer Training programme.
- The authority had an Outbreak Control Plan that had been developed in consultation with relevant stakeholders. The Plan was based on a template that had been produced by a multi-agency group including Public Health Wales and Welsh Government.
- There had been no outbreaks of food related infection in the authority's area in the two years prior to the audit.
- The authority had developed a comprehensive Communicable Disease Notifications Procedure. The Procedure was supported by an extensive range of aide-memoire and guidance documents. The procedure did not make reference to the formal out of hours service provided by the authority to deal with emergencies.
- Notifications relating to six sporadic cases of food related infectious diseases were examined. Generally, records were comprehensive and easily retrievable. However, in one case the correct questionnaire had not been used to record information, although auditors noted that sufficient information had been recorded. Two cases had been responded to outside the Public Health Wales notification target response time. Incorrect advice on returning to work had been provided in one case. In a further case, an absence of key case information indicated that the investigation that had been carried out was inadequate, and in another, the non-return of a postal questionnaire had not been followed up.

# Recommendation

- 13.6 The authority should:
- (i) Ensure the procedure for dealing with sporadic cases of food-related infections out of office hours is referred to in the Communicable Disease Notification Procedure and the procedure is fully implemented by officers when conducting investigations. [The Standard 13.2]

## 14 Food Safety Incidents

- The authority had a documented Food Alerts and Incidents Procedure.

  The procedure detailed how the authority responded to food incidents, food alerts for action, product withdrawal information notices and product recall information notices, including those received outside normal office hours.
- 14.2 Principal Officers in Environmental Health and Trading Standards had primary responsibility for initiating and coordinating the authority's response. Arrangements had been put in place for them to receive notifications on their mobile phones out of office hours.
- 14.3 The procedure included the authority's arrangements for alerting the FSA where an actual or potential food hazard was identified locally.
- 14.4 The authority had a computer system that was capable of receiving notifications. The procedure included a requirement for notifications and action taken, to be recorded on the authority's food premises database for possible follow up and audit purposes.
- 14.5 Auditors examined records in respect of five food alerts issued during the last two years. All had been received and actioned promptly in accordance with FSA advice. Responses had been documented.
- 14.6 There had been no serious localised incidents in the two years prior to the audit.

### 15 Enforcement

- 15.1 The authority was able to demonstrate a graduated approach to food hygiene enforcement and had used a range of enforcement options to secure compliance with food safety law.
- An overarching Public Protection Compliance and Enforcement Policy had been developed, supplemented with a Food Safety Enforcement Policy which had been approved by the authority's Cabinet in April 2010. The Policies were based on the guiding principles of consistency, fairness, proportionality, transparency and objectivity. Auditors noted that there was no reference to the serving of Remedial Action Notices in the authority's Food Safety Enforcement Policy. The Policies were available to food businesses and the public on the Council's website.
- 15.3 At the time of the audit the authority was reviewing its Enforcement Policies to take account of more recent legislation and guidance e.g. Primary Authority considerations and the use of Remedial Action Notices. This was due to be considered by Cabinet.
- 15.4 Enforcement procedures had been developed but did not cover the whole range of enforcement options available to officers.
- An Infringement Processing Procedure had been produced to provide guidance to staff on compiling and processing infringement reports. The Procedure on the Investigation and Reporting of Offences, referred to in the Infringement Procedure was being developed.
- There was no reference in the authority's policies and procedures on the approach to be taken by officers where non-compliance had been identified in premises where Bridgend County Borough Council was the food business operator.
- 15.7 Records examined during the audit confirmed that officers in the food hygiene service used a wide range of formal and informal enforcement options to secure compliance. These included letters, Hygiene Improvement Notices, Remedial Action Notices, voluntary closures of food businesses, voluntary surrenders of food, simple cautions and prosecutions.

- 15.8 The authority had reported in pre-audit documentation that it had not taken any formal enforcement action in respect of food standards in the two years preceding the audit.
- 15.9 Records of five Hygiene Improvement Notices, two Remedial Action Notices, one seizure, two voluntary surrenders, eight voluntary closures, one simple caution and three prosecutions were examined. They were checked against official guidance, the authority's documented procedures and enforcement policy.
- 15.10 Hygiene Improvement Notices had been served by officers who were correctly authorised and had witnessed the contraventions. Notices were clear and easy to understand and time limits for compliance were identified. In one of the five notices there was no evidence that the right of appeal and name and address of the relevant court had been provided. Further, evidence of proper service was not available in two of the five cases. In all cases timely follow up visits to confirm that notices had been complied with had been carried out. However, in four out of five cases officers had not confirmed in writing that the works had been satisfactorily completed, contrary to the Food Law Code of Practice Guidance. It was noted this had not been included as a requirement in the authority's documented procedure.
- 15.11 The records of two Remedial Action Notices were examined. These had been served under appropriate circumstances and were clearly drafted. However, one of the notices had not been served on the correct food business operator. In addition, no court address had been provided with the notice for the purpose of appeal and there was no evidence of proper service.
- 15.12 Records were examined of two voluntary surrenders of food. In both cases this had been an appropriate course of action. In one case, the time, place and method of destruction had not been recorded and there was no record of destruction. In the second case, no information had been kept on file to indicate how the food had been treated to prevent it from re-entering the food chain. In both cases there was no evidence that a receipt had been issued for the voluntary surrender of the food.
- 15.13 The record of one formal seizure of food was examined. Seizure had been an appropriate course of action and had been confirmed in writing.

The owner of the food had been notified of the hearing and the matter brought before a magistrate within two days. The receipt for the food did not record the time, place and method of destruction and dates recorded on the authority's premises database were not consistent with the information on the hard copy notice.

- 15.14 Records of eight food premises that had agreed to close voluntarily were examined. In all cases, this had been an appropriate course of action that was agreed in writing with the food business operator. Appropriate follow up visits and action had been taken and there had been no breaches of voluntary closure agreements.
- 15.15 The Simple Caution had been authorised by an officer with the appropriate delegated powers and administered in accordance with Home Office guidance. Records were insufficient to demonstrate that the authority's Enforcement Policy had been properly considered after the initial decision was changed from prosecution.
- 15.16 Prosecutions had been authorised by the authority's Assistant Chief Executive Legal and Regulatory Services who had the necessary delegated powers. In all cases they had been progressed in a timely manner, case files had been prepared and detailed database records maintained relating to the progress of prosecutions. However, a comprehensive procedure covering all aspects of undertaking a prosecution had not been put in place. The Procedure on the Investigation and Reporting of Offences referred to in the Infringement Procedure was under development.
- 15.17 Records showed that the requirements of the Police and Criminal Evidence Act 1984 (PACE) had been considered and documented. However, records were insufficient to demonstrate that the authority's Enforcement Policy or the requirements of Criminal Procedures and Investigations Act 1996 (CPIA) had been considered.
- 15.18 Whilst internal monitoring of informal and formal enforcement action was being carried out and documented, it did not consider all relevant requirements of centrally issued guidance.

### Recommendations

- 15.19 The authority should:
- (i) Complete the review of its Enforcement Policy ensuring it is in accordance with the Food Law Code of Practice and official guidance. [The Standard 15.1]
- (ii) Set up, maintain and implement documented procedures for follow up and enforcement actions in accordance with the Food Law Code of Practice and official guidance. [The Standard- 15.2]
- (iii) Ensure that food law enforcement is carried out in accordance with the Food Law Code of Practice, centrally issued guidance and the authority's own documented procedures and enforcement policy. [The Standard -15.3 and 15.4]

## 16 Records and Interventions/Inspections Reports

## Food Hygiene

- 16.1 Food business records and details of interventions associated with those businesses were maintained in the Public Protection Department's computerised data management and information system and, in some cases, in hard copy.
- 16.2 Records of food business interventions including those subject to product-specific food hygiene regulations were comprehensive, well maintained and easy to retrieve. Copies of inspection reports, sampling results, complaints about food businesses and approval documents were being satisfactorily maintained. Food business registration documents and questionnaires in connection with alternative enforcement strategies were not consistently available.
- 16.3 Records of inspections included a description of the business and the activities undertaken, inspection dates and outcomes, risk ratings, assessments of compliance with legal requirements and enforcement action. It was not always evident from interventions records that all aspects of centrally issued guidance had been considered by officers or that an assessment of the appropriateness of the businesses procedures had been considered. Further, the risk scores on the premises database were found, in some cases, not to correspond with the risk scores on hard copy records.
- 16.4 Letters were sent to the food business operator after each inspection and generally contained all the details required by the Food Law Code of Practice. Timescales for completion of remedial works were not consistently included in correspondence and there were examples of addressee details differing from those provided on the food registration form. Letters were not always copied to the food business head office.
- 16.5 Contraventions were clearly worded and the measures needed to secure compliance listed. There was a clear distinction between legal requirements and recommendations of good practice.

- 16.6 Post-inspection correspondence was being linked to the food businesses database or was held in hard copy.
- 16.7 Records of revisits to food businesses to check compliance were recorded on the premises files.
- 16.8 Records relating to food businesses, with the exception of registration forms had been kept for six years.

### Recommendation

- 16.9 The authority should:
- (i) Maintain up to date, accurate and comprehensive records for all establishments in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard 16.1]

### Food Standards

- 16.10 Food standards records relating to reactive work were in general, comprehensive, well maintained and easy to retrieve.
- 16.11 The records of five food businesses which the authority reported had been subject to inspection were examined. There were no inspection records for one of the premises. Further investigation revealed that the business had not been inspected, but it had been subject to a telephone call. The risk rating that had been applied to the business had been transferred from the premises it had previously occupied, which was not appropriate. Generally, inspection records showed variation in content, and were insufficiently detailed to confirm that an effective assessment of compliance with legislative requirements had been made, or to determine the basis for the allocation of premises risk ratings. Therefore, it would be difficult for an inspecting officer who was unfamiliar with the business to establish its full compliance history and inform a graduated approach to enforcement.

- 16.12 Comprehensive premises records for food standards were not always, easily retrievable and officers did not maintain a consistent approach to record keeping.
- 16.13 It was apparent that in five out of 10 cases food standards interventions had been incorrectly coded on the database e.g. interventions that were not inspections had been recorded as inspections.

### Recommendations

- 16.14 The authority should:
- (i) Maintain up to date, accurate records in a retrievable form on all food establishments in accordance with the Food Law Code of Practice and centrally issued guidance. These records should include reports of all interventions, the determination of compliance with legal requirements made by the officer and details of action taken. [The Standard 16.1]
- (ii) Ensure that records of food standards interventions and key details of business operations are stored in such a way that they are easily retrievable and available for 6 years [The Standard 16.2]

## 17 Complaints About the Service

- 17.1 The authority had set up, implemented and published a three stage Corporate Complaints Procedure consisting of informal, formal and review stages. It was available to the public and food businesses in its area on the authority's website.
- 17.2 The Public Protection Department did not routinely record all informal complaints. However, staff were empowered to investigate and where possible resolve them. Whilst this approach was in accordance with the Legal Services Department's Complaints Procedure, it is not consistent with the requirements of the Framework Agreement, which requires a record to be made of all complaints received and actions taken by the authority in response.
- 17.3 Auditors were provided with examples of written responses to four informal complaints which had required a written response. These demonstrated that they had been properly investigated and appropriate responses provided.
- 17.4 There had been no formal complaints against the authority's food service in the two years prior to the audit.

### Recommendation

- 17.5 The authority should:
  - (i) Record all complaints received together with the actions taken in response. [The Standard 17.3]

## 18 Liaison with Other Organisations

- 18.1 The authority had liaison arrangements in place with neighbouring authorities and other appropriate bodies aimed at facilitating consistent enforcement. They included active participation in the following:
  - Directors of Public Protection Wales;
  - Wales Heads of Environmental Health;
  - Wales Heads of Trading Standards;
  - South West Wales Food Safety Task Group;
  - The Glamorgan Group;
  - South West Wales Communicable Disease Task Group;
  - Welsh Food Microbiological Forum;
  - Wales Food Hygiene Rating Scheme Steering Group
- 18.2 Minutes of liaison group meetings were available and confirmed regular attendance by appropriate service representatives.
- 18.3 The authority also had active liaison arrangements with:
  - Food Standards Agency;
  - Public Health Wales:
  - Chartered Institute of Environmental Health;
  - Care Standards Inspectorate for Wales;
  - Other departments within the authority
- Auditors were advised that the authority had been working with Cardiff Council and the Vale of Glamorgan Council to explore opportunities for collaborative working. Food hygiene and food standards enforcement had been identified as potential areas for collaboration and were being considered as part of that process. The Head of Service was playing a key role in these negotiations.

## 19 Internal Monitoring

- 19.1 The authority had produced comprehensive internal monitoring procedures for food hygiene and food standards, covering quantitative and qualitative aspects of the service. These had been recently reviewed to cover all aspects of the Framework Agreement. At the time of the audit these had not been fully implemented.
- 19.2 Principal Officers had primary responsibility for internal monitoring assisted by the Senior Environmental Health Officer and the Fair Trading Officer with the technical lead for food standards.
- 19.3 Qualitative monitoring in respect of food hygiene carried out included:
  - Client satisfaction surveys;
  - Team meetings;
  - Staff appraisals;
  - One to one work reviews;
  - Consistency monitoring of interventions and risk ratings;
  - Quality monitoring of notices and prosecution reports;
  - Assessment of new and newly qualified officers
- 19.4 Auditors were able to verify that qualitative internal monitoring of food hygiene activities was generally being carried out in accordance with the procedure and records were being maintained.
- 19.5 Limited qualitative internal monitoring of food standards work had been carried out and little documented evidence was available. This had been identified by the authority as an area for improvement.
- 19.6 The business support team produced monthly performance reports for Environmental Health and Trading Standards managers, which included the number of food businesses interventions that had been carried out, the number of interventions that were overdue and details of complaints that had not been responded to within three working days.
- 19.7 The authority demonstrated a strong performance management culture with consideration of quarterly performance monitoring reports by senior managers and the relevant Scrutiny Committee.

- 19.8 Performance reviews had been undertaken, training needs had been identified and officers' personal portfolios were being maintained.
- 19.9 It was noted from the file checks that officers regularly carried out accompanied food hygiene inspections with colleagues to 'problem premises' to share knowledge and ensure consistency of approach to inspections and the application of risk ratings.
- 19.10 Regular team meetings ensured effective sharing of information and assisted officers in providing a consistent approach.

### Recommendation

- 19.11 The authority should:
- (i) Fully implement the internal monitoring procedures and ensure records are kept for at least 2 years [The Standard 19.1 and 19.3]

## 20 Third Party or Peer Review

- 20.1 The Food Law Enforcement Service had not participated in any peer reviews or been subject to any third party audits during the two years prior to the audit.
- 20.2 The authority had been audited by the Food Standards Agency in 2010. The audit focussed on Controls in Approved Establishments.

## 21 Food Safety and Standards Promotion

- 21.1 The authority demonstrated a commitment to food hygiene and standards promotion.
- 21.2 The Public Protection Department had initiated or participated in a range of promotional activities and had plans for further work in this area. Activities included:
  - National Food Safety Week;
  - Crucial Crew;
  - Promoting the National Food Hygiene Rating Scheme;
  - Bridgend Healthy Schools Scheme;
  - Providing food standards and food hygiene information on the authority's website
  - 21.3 Records of food safety and standards promotions were being maintained on file by service managers.

### **Auditors:**

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# Annex A

# **Audit Action Plan for Bridgend County Borough Council**

Audit Date: 20-25 March 2013

| TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)  | BY (DATE) | PLANNED IMPROVEMENTS   | ACTION TAKEN TO DATE   |
|---|-----------|--|--|
| 3.16 (i) Ensure that future Food Law Enforcement Service Plans are developed in full accordance with the Service Planning Guidance in the Framework Agreement. [The Standard – 3.1] | 1/4/2014  | <ul> <li>The 2014/15 FLESP will include:-</li> <li>Details of the number and type of interventions to be completed in each of the food business risk bands for food hygiene and food standards</li> <li>The Authority's approach to businesses rated as low risk for food standards</li> <li>Arrangements for internal monitoring for Food Standards</li> <li>An estimate of the resources required to carry out the full range of statutory food standards enforcement activities against those available.</li> </ul> | Some of the details required have been included in Directorate Service Plans and were available, however, it is accepted that the information should be included in the FLESP. |

| TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)  | BY (DATE) | PLANNED IMPROVEMENTS   | ACTION TAKEN TO DATE  |
|---|-----------|--|---|
|   |           | <ul> <li>An indication of whether the cost<br/>of providing the service is a net<br/>increase or decrease on previous<br/>years' cost.</li> </ul>  |   |
| 5.13(i) Review the Scheme of<br>Delegation and officer authorisations to<br>include the appropriate provisions of<br>the Official Feed and Food Control<br>(Wales) Regulations 2009 and the<br>Trade in Animals and Related Products<br>(Wales) Regulations 2011. [The<br>Standard – 5.1] | Completed | The scheme of delegation and officer authorisations have already been updated to include the appropriate provisions of the Official Feed and Food Control (Wales) Regulations 2009 and the Trade in Animals and Related Products (Wales) Regulations 2011. |   |
| 5.13(ii) Ensure contractors and temporary staff are appropriately authorised under current legislation in accordance with their qualifications, training and competencies. [The Standard –5.3]  | Completed | Ensure any temporary or contract staff appointed are appropriately authorised – this requirement will be made explicit in the authorisation procedure.  Ensure relevant officers are authorised to carry out AES   |   |
| 5.13(iii) Ensure that relevant qualification and training records of staff (including contractors) are maintained on file. [The Standard – 5.5]   | Completed | Maintain officer training records, including records for temporary and contract staff on file.   |   |
| Food Hygiene 7.16(i) Ensure that food premises  | 21/6/2013 | Carry out food premises interventions at the frequencies specified in the  | The number of premises not subject to intervention within the |

| TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)   | BY (DATE)           | PLANNED IMPROVEMENTS   | ACTION TAKEN TO DATE   |
|--|---------------------|--|--|
| interventions are carried out at a frequency specified by the Food Law Code of Practice. [The Standard – 7.1].  7.16(ii) Carry out interventions and         | 01/04/2014          | Food Law Code of Practice.      Staff to be briefed on approvals   | required frequencies was very small compared to the number of premises in the inspection programme. These were generally lower risk food businesses. |
| approve establishments in accordance with the relevant legislation, the Food Law Code of Practice and centrally issued guidance. [The Standard – 7.2]        | Completed 1/04/2014 | <ul> <li>procedure and requirements of Code of Practice in respect of conditional approvals.</li> <li>Amend Alternative Enforcement Procedure and train staff to ensure no premises are risk rated on the basis of an alternative enforcement intervention</li> <li>Ensure information obtained from AES is reviewed by an appropriately qualified and authorised officer. AES procedure to be amended accordingly.</li> </ul> |  |
| Food Standards 7.29(i) Ensure that food premises interventions are carried out at a frequency specified by the Food Law Code of Practice. Priority should be | 1/4/2014            | Details of food standards interventions programme to be provided in 2014/15 FLESP. Progress against the plan to be subject to internal monitoring. Priority  |  |

| TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)  | BY (DATE)  | PLANNED IMPROVEMENTS  | ACTION TAKEN TO DATE |
|---|------------|---|----------------------|
| given to high risk establishments that have not been inspected in accordance with the Food Law Code of Practice.  [The Standard - 7.1]  |            | to be given to higher risk businesses.  |                      |
| 7.29(ii) Carry out interventions at food establishments in accordance with relevant legislation, the Food Law Code of Practice and Practice Guidance, including the use of appropriate inspection forms. [The Standard - 7.2] | 01/04/2014 | Develop and implement a revised Food Standards Inspection form and brief staff on its use.  |                      |
| 7.29(iii) Assess the compliance of food businesses to the legally prescribed standards and in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard -7.3]                                | 30/06/2014 | Amend risk rating scheme and train staff to implement changes.  |                      |
| 7.29(iv) Set up, maintain and implement documented procedures for the range of interventions it carries out. [The Standard - 7.4]   | 1/4/2014   | Procedures to be developed. Develop alternative enforcement policy and procedure and a revisit procedure.   |                      |
| 8.8(i) Review its complaints procedures to include guidance to officers on dealing with food originating from outside the EU. The procedure should also make reference to the authority's procedure for investigating         | Completed  | Amend food complaints procedure to include guidance on food originating from outside the EU and reference to the procedure for investigating notification of cases of foodborne illness |                      |

| TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)  | BY (DATE) | PLANNED IMPROVEMENTS  | ACTION TAKEN TO DATE |
|---|-----------|---|----------------------|
| cases of foodborne illness. [The Standards – 8.1]   |           |   |                      |
| 13.6(i) Ensure the procedure for dealing with sporadic cases of food-related infections out of office hours, is referred to in the Communicable Disease Notification Procedure and the procedure is fully implemented by officers when conducting investigations. [The Standard – 13.2] | Completed | Amend Communicable Disease Notification procedure to include reference to the arrangements out of office hours. Provide staff update training to ensure correct procedures followed.  |                      |
| 15.19(i) Complete the review of its Enforcement Policy ensuring it is in accordance with the Food Law Code of Practice and official guidance. [The Standard – 15.1]   |           | Finalise review of enforcement policy and implement staff training programme.   |                      |
| 15.19(ii) Set up, maintain and implement documented procedures for follow up and enforcement actions in accordance with the Food Law Code of Practice and official guidance. [The Standard - 15.2]  | 1/3/2014  | Revised enforcement policy to include Primary/Home Authority considerations and incorporate:  • A procedure for dealing with noncompliances where Bridgend C B Council is the fbo.  • A requirement for officers to notify in writing that works have been satisfactorily completed to comply with notices. |                      |

| TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)   | BY (DATE) | PLANNED IMPROVEMENTS  | ACTION TAKEN TO DATE |
|--|-----------|---|----------------------|
| 15.19(iii) Ensure that food law enforcement is carried out in accordance with the Food Law Code of Practice, centrally issued guidance and   | 30/6/2014 | A procedure for serving RANS     Requirement to ensure accurate records are kept of receipt and time, place and method of disposal of any food seized and/or detained.  Develop a procedure on the investigation and reporting of offences incorporating a requirement for a record to be made of public interest and evidential tests, enforcement policy and CPIA considered.  Develop and deliver enforcement procedures training for staff and strengthen internal monitoring of enforcement. |                      |
| the authority's own documented procedures and enforcement policy. [The Standard - 15.3 and 15.4]   |           |   |                      |
| Food Hygiene 16.9(i) Maintain up to date, accurate and comprehensive records for all establishments in accordance with the Food Law Code of Practice and centrally issued guidance. [The | Completed | <ul> <li>Officers to check food business<br/>registration details are up to date<br/>during interventions</li> <li>Copies of new registration forms to</li> </ul>   |                      |

| TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH) | BY (DATE)             | PLANNED IMPROVEMENTS  | ACTION TAKEN TO DATE |
|--|-----------------------|---|----------------------|
| Standard – 16.1  | 01/04/2014            | be electronically attached to the premises record on APP  |                      |
|  | Completed Completed   | Internal monitoring to check hard copy and database records are consistent.   |                      |
|  |                       | AES questionnaires to be<br>maintained on file or scanned to<br>premises record   |                      |
|  | 1/4/2014<br>Completed | Officers to be reminded of the requirement for timescales to be included on correspondence for completion of remedial works and copy correspondence to Head Office as appropriate |                      |
|  | 1/4/2014              | Complete revision to inspection<br>form to enable officers to better<br>demonstrate their assessment of<br>business compliance with centrally<br>issued guidance.                 |                      |
|  |                       | Brief officers on requirements<br>relating to recording of HACCP  |                      |

| TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)  | BY (DATE)  | PLANNED IMPROVEMENTS   | ACTION TAKEN TO DATE |
|---|------------|--|----------------------|
| Food Standards  | Completed  | <ul> <li>Strengthen internal monitoring to ensure all aspects of centrally issued guidance which require evaluation are reflected in officers intervention records.</li> <li>Deliver officer training to ensure</li> </ul>   |                      |
| 16.14(i) Maintain up to date, accurate records in a retrievable form on all food establishments in accordance with the Food Law Code of Practice and centrally issued guidance. These records should include reports of all interventions, the determination of compliance with legal requirements made by the officer and details of action taken. [The Standard – 16.1] | 01/04/2014 | <ul> <li>interventions are correctly coded on database.</li> <li>Review and revise inspection form to enable officers to better demonstrate scope of interventions, effective assessment of compliance, basis for risk ratings applied and improve consistency.</li> </ul> |                      |
| 16.14(ii) Ensure that records of food standards interventions and key details of business operations are stored in such a way that they are easily retrievable and available for 6 years [The Standard - 16.2]  | Completed  | Review and amend inspection<br>procedure to provide officers with<br>guidance on how and where<br>records should be  |                      |

| TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)   | BY (DATE) | PLANNED IMPROVEMENTS   | ACTION TAKEN TO DATE |
|--|-----------|--|----------------------|
|  |           | stored/maintained.   |                      |
| 17.5(i) Record all complaints received together with the actions taken in response. [The Standard – 17.3]                                    | 1/4/2014  | Put in place new complaint code and record all complaints on the Civica APP database. This will include detailed action diaries of all activities carried out in response. |                      |
| 19.11(i) Fully implement the internal monitoring procedures and ensure records are kept for at least 2 years. [The Standard – 19.1 and 19.3] | 1/4/2014  | Review and implement the revised internal monitoring procedure for Food Standards ensuring records of internal   |                      |
|  | Completed | <ul> <li>Strengthen internal monitoring of food hygiene enforcement actions to ensure requirements of Food Law Code of Practice are being met.</li> </ul>                  |                      |

## **Audit Approach/Methodology**

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

## (1) Examination of Local Authority policies and procedures

The following LA policies, procedures and linked documents were received in advance of the audit:

- Bridgend County Borough Council Food Law Enforcement Service
   Delivery Plans 2011/12 and 2012/13 and associated Cabinet minutes
- Bridgend County Borough Council Trading Standards and Licensing Service Delivery Plan 2012/13 and associated Cabinet minute
- Bridgend County Borough Council Legal and Regulatory Services Directorate Plan 2012-13
- Bridgend County Borough Council Corporate Plan 2010-13
- Community Safety and Governance Overview and Scrutiny Committee Performance Management Reports
- Document Control Procedure
- Procedure for Authorisation of Officers
- Calibration and Maintenance of Equipment Procedure
- Food Intervention and Revisit Procedures
- Food Hygiene Rating Scheme Procedure
- Alternative Inspection Strategy for Low Risk Food Businesses
- Food Safety Complaints Procedure
- Food Standards and Feedingstuffs Complaints Procedure
- Data and Database Software Management Procedure
- Food Sampling Policy
- Food Sampling Procedure
- Food Standards Sampling Procedure
- Microbiological Food Sampling Programme 2012/13
- The Communicable Disease Outbreak Plan for Wales
- Communicable Disease Notifications Procedure
- Procedure for Investigating Outbreaks of Communicable Disease
- Food Alerts and Incidents Procedure
- Public Protection Compliance and Enforcement Policy

- Food Safety Enforcement Policy
- Infringement Processing Procedure
- Public Protection Infringement assessment Checklist
- Legal Services department Complaints Procedure
- Internal Monitoring Procedure Environmental Health
- Food Standards Internal Monitoring Procedure

### (2) File reviews

A number of Local Authority file records were reviewed during the audit including:

- General food premises inspection records
- Approved establishment files
- Food and food premises complaint records
- Formal enforcement records.
- Officer authorisation and training records
- · Internal monitoring records
- Calibration records
- Food Incident records

## (3) Review of Database records:

A selection of database records were considered during the audit in order 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
- Assess the completeness and accuracy of the food premises database
- Assess the capability of the system to generate food law enforcement activity reports and the monitoring information required by the Food Standards Agency.

## (4) Officer interviews

Officer interviews were carried out with the purpose of gaining further insight into the practical implementation and operation of the authority's food/feed control arrangements. The following officers were interviewed:

Head of Public Protection
Environmental Health Manager
Trading Standards Manager
Environmental Health Practitioners, including lead officer for food hygiene
Technical Officer
Trading Standards Officers, including lead officer for food standards
Fair Trading Officer

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

## (5) On-site verification checks:

Verification visits were made with officers to two local food businesses. The purpose of the visits was to verify the outcome of the last inspections carried out by the LA and to assess the extent to which enforcement activities and decisions met the requirements of relevant legislation, the Food Law Code of Practice and official guidance.

# **Glossary**

Approved premises Food manufacturing premises that has been

approved by the local authority, within the context of specific legislation, and issued a unique identification code relevant in national and/or

international trade.

Authorised officer A suitably qualified officer who is authorised by the

local authority to act on its behalf in, for example,

the enforcement of legislation.

Codes of Practice Government Codes of Practice issued under

Section 40 of the Food Safety Act 1990 as guidance to local authorities on the enforcement of

food legislation.

CPIA The Criminal Procedures and Investigations Act

1996 – governs procedures for undertaking

criminal investigations and proceedings.

Environmental Health

Professional (EHP)

Officer employed by the local authority to enforce

food safety legislation.

Food Examiner A person holding the prescribed qualifications who

undertakes microbiological analysis on behalf of

the local authority.

Food Hazard Warnings/

Food Alerts

This is a system operated by the Food Standards

Agency to alert the public and local authorities to national or regional problems concerning the safety

of food.

Food hygiene The legal requirements covering the safety and

wholesomeness of food.

Food standards

The legal requirements covering the quality, composition, labelling, presentation and advertising of food, and materials in contact with food.

Framework Agreement

The Framework Agreement consists of:

- Food Law Enforcement Standard
- Service Planning Guidance
- Monitoring Scheme
- Audit Scheme

The **Standard** and the **Service Planning Guidance** set out the Agency's expectations on the planning and delivery of food law enforcement.

The **Monitoring Scheme** requires local authorities to submit quarterly returns to the Agency on their food enforcement activities i.e. numbers of inspections, samples and prosecutions.

Under the **Audit Scheme** the Food Standards Agency will be conducting audits of the food law enforcement services of local authorities against the criteria set out in the Standard.

Full Time Equivalents (FTE)

A figure which represents that part of an individual officer's time available to a particular role or set of duties. It reflects the fact that individuals may work part-time, or may have other responsibilities within the organisation not related to food enforcement.

**HACCP** 

Hazard Analysis Critical Control Point – a food safety management system used within food businesses to identify points in the production process where it is critical for food safety that the control measure is carried out correctly, thereby eliminating or reducing the hazard to a safe level.

Home Authority

An authority where the relevant decision making base of an enterprise is located and which has

taken on the responsibility of advising that business on food safety/food standards issues. Acts as the central contact point for other enforcing authorities' enquiries with regard to that company's food related policies and procedures.

Hygiene **Notice** 

Improvement A notice served by an Authorised Officer of the local authority under Section 10 of the Food Safety Act 1990, requiring the proprietor of a food business to carry out suitable works to ensure that the business complies with the requirements of food hygiene or food processing legislation.

Inter Authority Auditing

A system whereby local authorities might audit each others' food law enforcement services against an agreed quality standard.

LAFMS

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.

OCD returns

Returns on local food law enforcement activities required to be made to the European Union under the Official Control of Foodstuffs Directive.

**Originating Authority** 

An authority in whose area a business produces or packages goods or services and for which the authority acts as a central contact point for other enforcing authorities' enquiries in relation to those products.

**PACE** 

The Police and Criminal Evidence Act 1984 governs procedures for gathering evidence in criminal investigations.

Primary Authority

A local authority which has developed a partnership with a business which trades across local authority boundaries and provides advice to that business.

Public Analyst

An officer, holding the prescribed qualifications, who is formally appointed by the local authority to carry out chemical analysis of food samples.

Risk rating

A system that rates food premises according to risk and determines how frequently those premises should be inspected. For example, high risk hygiene premises should be inspected at least every 6 months.

Service Plan

A document produced by a local authority setting out their plans on providing and delivering a food service to the local community.

**Trading Standards** 

The service within a local authority which carries out, amongst other responsibilities, the enforcement of food standards and feedingstuffs legislation.

Trading
Standards
Officer (TSO)

Officer employed by the local authority who, amongst other responsibilities, may enforce food standards and feedingstuffs legislation.

**Unitary Authority** 

A local authority in which all the functions are combined, examples being Welsh Authorities and London Boroughs. A Unitary Authority's responsibilities will include food hygiene, food standards and feedingstuffs enforcement.