

Audit of Local Authority Service Delivery Operation of the Food Hygiene Rating Scheme

Cheltenham Borough Council
10-11 February 2016



Table of Contents

1.0	Introduction	3
2.0	Scope of the Audit	3
3.0	Objectives	3
4.0	Executive Summary	4
5.0	Audit Findings and Recommendations	5
5.1	Organisation and Management	5
5.2	FHRS implementation history	7
5.3	Authorisation and Training	7
5.4	Inspection Procedures	8
5.5	Notification of ratings and follow up	11
5.6	Food Premises Database	12
5.7	Consistency Framework	14
5.8	Local Authority Website	15
5.9	FHRS Website	16
5.10	Issues Outside of Scope	16
ANNEX A	- Action Plan for Cheltenham Borough Council	17
ANNEX B	- Audit Approach/Methodology	24
ANNEX C	- Glossary	24

1.0 Introduction

- 1.1 This is a report on the outcomes of the Food Standards Agency's (FSA's) audit of Cheltenham Borough Council conducted between 10th and 11th February 2016 at The Council Offices, The Promenade, Cheltenham. The audit was carried out as part of a programme of audits on local authority (LA) operation of the Food Hygiene Rating Scheme (FHRS). The report has been made available on the Agency's website at:

www.food.gov.uk/enforcement/auditandmonitoring/auditreports

Hard copies are available from the FSA's Local Delivery Division at LAAudit@foodstandards.gsi.gov.uk / Tel: 01904 232116.

- 1.2 The audit was carried out under section 12(4) of the Food Standards Act 1999 and section 11 of the FHRS Brand Standard. The FSA is committed to fulfilling its role in monitoring and auditing the implementation and operation of the FHRS. Consistent implementation and operation of the FHRS is critical to ensuring that consumers are able to make meaningful comparisons of hygiene ratings for establishments both within a single local authority area and across different local authority areas, and to ensure businesses are treated fairly and equitably.
- 1.3 The Agency will produce a summary report covering outcomes from the audits of all local authorities assessed during this programme.

2.0 Scope of the Audit

- 2.1 The audit focused on the LA's operation of the FHRS with reference to the FHRS Brand Standard, the Framework Agreement and the Food Law Code of Practice (FLCoP). This included organisation and management, resources, development and implementation of appropriate control procedures, reporting of data, premises database, training of authorised officers and internal monitoring. Views on operation of the FHRS were sought to inform FSA policy development.

3.0 Objectives

- 3.1.1 The objectives of the audit were to gain assurance that:
- The LA had implemented the FHRS in accordance with the Brand Standard
 - There were procedures in place to ensure that the FHRS was operated consistently.

- Notifications of ratings, handling of appeals, requests for re inspection and rights to reply were dealt with efficiently.
- Scoring under Chapter 5.6 of the FLCoP was appropriately evidenced and justified.
- Inspections were carried out at intervals determined by Chapter 5.6 of the FLCoP
- Officers administering the scheme were trained and competent.

The audit also sought to identify areas of good and innovative FHRS working practice within Local Authorities. A key focus was on consistency with the Brand Standard.

4.0 Executive Summary

4.1 The Authority was selected for audit as it was representative of a LA with an average percentage rollout of the FHRS scheme prior to audit (85% of its food premises database).

4.2 The Authority was found to be operating the FHRS broadly in accordance with the obligations placed on it by participation in the Scheme. However, some improvements were identified to enable the Service to provide accurate data, consistent operation and the required level of protection to consumers and food business operators in order to meet the requirements of the FHRS Brand Standard, the Framework Agreement and the FLCoP. A summary of the main findings and key improvements necessary is set out below.

4.3 Strengths:

4.3.1 The Authority had two local performance indicators based on the Food Hygiene Rating Scheme, performance against which it reported quarterly to the divisional management team and Senior Leadership Team, providing high-level visibility in the Authority for the FHRS.

4.3.2 The Authority had awarded a food hygiene rating to all its registered food businesses other than those new businesses awaiting inspection. It had been active in taking up FSA grants to coach food businesses and promote display of the FHRS sticker. It had recently taken part in the FSA #WheresTheSticker campaign, encouraging consumers to pay attention to food hygiene ratings and ask to see stickers, by adding a publicity page to its website.

4.3.3 The Authority's website contained information for the public and food businesses about the FHRs scheme and how ratings were calculated. It also included a link to the FSA business web pages and the FHRs ratings website.

4.4 **Key areas for improvement:**

4.4.1 The Service had planned no interventions at D and E rated establishments for 2015/16, contrary to the FLCoP. These businesses included a mix of catering categories such as restaurants, take-aways and some premises serving vulnerable groups such as care establishments.

4.4.2 At the time of the audit, 398 food establishments were overdue a programmed intervention, some by three years or more. Although all food businesses had received a food hygiene rating, some ratings were significantly out of date. Auditors noted that the operations of these businesses and the corresponding risks posed to the public may have changed or increased.

4.4.3 The Authority had not estimated the resource required for each part of the Service and compared it with the resource available.

4.4.4 The Lead Food Officer was not appropriately qualified in accordance with her authorisation and duties, including her role as the Authority's food hygiene rating appeals adjudicator.

4.4.5 Internal monitoring was generally comprehensive and effective, however audit evidence indicated that the scope and extent of monitoring would benefit from a review.

5.0 **Audit Findings and Recommendations**

5.1 **Organisation and Management**

5.1.1 The Authority had in place a service delivery plan for 2015/16 which was generally written in accordance with the service planning guidance of the Framework Agreement on Official Feed and Food Controls by Local Authorities (the "Framework Agreement").

5.1.2 The Authority had documented a service review and identified variances within the service plan for 2015/16 and the Plan had been approved by the relevant member forum. The Authority had two local performance indicators based on the FHRs, one being the proportion of premises which are broadly compliant with food safety legislation and the other the proportion of premises with a food hygiene rating of three or more. It reported performance against those quarterly to the divisional

management team.

A concise version of this was reported upwards to the Senior Leadership Team (Director and Chief Exec.). Both indicators reflected a figure oscillating between the late 80's and early 90s percentiles in recent years. The percentage of food premises broadly compliant with food safety legislation in Q4 of 2014/15 stood at 92%.

- 5.1.3 The Plan included intervention targets of 100% of those interventions due for high risk, medium risk and new food businesses. However there were no interventions planned at D and E rated establishments, contrary to the FLCoP.
- 5.1.4 Overdue D and E rated establishments included a mix of catering categories such as restaurants, take-aways and some premises serving vulnerable groups such as care establishments. As these establishments had not received a regular intervention the Authority was unable to verify that the risk rating and food hygiene rating was an accurate reflection of the businesses' current food hygiene standards. Consequently, these establishments posed a potential significant reputational risk to the LA and an increased risk to public health.
- 5.1.5 Whilst some reference was made to inadequate resourcing auditors observed that the Plan could be strengthened by including more detail on what the impact of not completing the lower risk interventions would be for the Authority in terms of risk, statutory compliance and the accuracy of food hygiene ratings.
- 5.1.6 The Authority had not estimated the resource required for each part of the food law enforcement service and compared it with the resource available.

Recommendation 1 - Service planning

[The Standard 3.1]

Include in the service plan an estimate of the demands on the Service and the resources required for each area of service delivery (including those necessary to meet nationally driven outcome targets such as the intervention frequencies prescribed by the FLCoP), together with a comparison with the resources available.

5.2 FHRs implementation history

- 5.2.1 The Authority had launched the FHRs taking the “Critical Mass” approach in 2011. Prior to the audit the rollout rate of the scheme had been 85%. However a recent project launched in October 2015 meant that at the time of the audit all food premises within the scope of the scheme (with the exception of unrated establishments) had a food hygiene rating assigned to them.
- 5.2.2 In the last two years the Authority had applied for and received two FSA grants to promote the display of FHRs in low scoring establishments and to coach low rated businesses in SFBB respectively.
- 5.2.3 The Authority had recently supported the FSA #WheresTheSticker campaign, encouraging consumers to pay attention to food hygiene ratings and ask to see rating stickers, by adding a publicity page to its website.

5.3 Authorisation and Training

- 5.3.1 The authorisation and training records of five food safety officers, including the Lead Food Officer, were checked.
- 5.3.2 The Lead Food Officer was not appropriately qualified in accordance with her authorisation and duties, including her role as food hygiene rating appeals adjudicator. Auditors were advised that the Head of Service would deputise in appeal arbitration in the absence of the Lead Food Officer. However, neither officer met the competency requirements laid down in the FLCoP. Auditors discussed options for alternative arrangements for appeals and interim Lead Food Officer cover while her qualification was pending.
- 5.3.3 The training needs of the team had been assessed by the Lead Food Officer and agreed during one to one meetings with staff according to the needs of the service. Training records had been maintained by the Authority.
- 5.3.4 All officers had attended risk rating consistency training and HACCP (Hazard Analysis and Critical Control Point) training. All had achieved 10 hours CPD (Continuous Professional Development) over the past year as required by the FLCoP
- 5.3.5 No officers were separately authorised in writing to deal with matters arising under the Food Safety & Hygiene (England) Regulations 2013 in accordance with the FLCoP.

Recommendation 2 - Qualification and authorisation of officers

[The Standard 5.3]

- (i) Ensure that the level of authorisation and duties of the Lead Food Officer are consistent with their qualifications and the relevant Code of Practice.
- (ii) Ensure that the level of authorisation and duties of authorised officers are consistent with their qualifications and the relevant Code of Practice.

5.4 Inspection Procedures

5.4.1 The Authority had in place an inspection procedure which dated back to 2010 and did not completely reflect all practices in place at the time of the inspection with regard to FHRs. However, auditors were advised that the procedure was considered redundant and the Authority had identified a review of the procedure in its work plan for the year.

Recommendation 3 – Intervention/inspection procedures

[The Standard 7.4]

Put in place an intervention/inspection procedure/s for the range of interventions it carries out.

5.4.2 The Authority also had in place an FHRs Brand Standard Consistency Framework which reflected the requirements of the FSA FHRs Brand Standard; it provided officers with comprehensive guidance on the scheme. The Framework was generally up to date and contained a number of signposts to the Brand Standard and associated FSA documents. Auditors observed that the Consistency Framework would benefit from a review to amend the references to “annex 5” of the FLCoP.

5.4.3 The Consistency Framework assigned the responsibility for determining appeals against food hygiene ratings to the Lead Food Officer. Appeals and decisions made were recorded as service requests and records of appeals had been maintained.

5.4.4 Inspectors used an aide-memoire and sometimes their notebooks to record inspection findings together with the food hygiene rating awarded. The Authority was using FSA appeal and revisit request model forms in its communications with businesses.

- 5.4.5 Acknowledging that the Authority had put in place an approach to prioritise certain interventions, inspections had not been carried out at the frequencies prescribed by the FLCoP. At the time of the audit, 398 food establishments were overdue a programmed inspection/intervention, some by three years or more. Although all food businesses had received a food hygiene rating, ratings at some overdue establishments were significantly out of date.

Recommendation 4 - Frequency of official interventions

[The Standard 7.1]

Carry out interventions/inspections at all food hygiene establishments in its area at a frequency which is not less than that determined under the hygiene intervention rating scheme set out in the FLCoP.

- 5.4.6 The overdue establishments included category C, D and E intervention rated establishments. There is an increasing risk of lower risk premises becoming higher risk the longer they remain without an intervention by a local Authority.
- 5.4.7 Compounding this risk, the Authority's data indicated that the number of overdue inspections has risen from 157 at the end of March 2015 and 175 at the same time a year earlier. Following procurement of contractor resource to carry out overdue interventions, the Authority advised auditors that a proportion of compliant C rated, D and E rated inspections would now be completed by the end of the financial year 2015/16, along with all A, B and non-compliant C rated and unrated establishments.
- 5.4.8 Whilst we acknowledge the impact of long term sickness of a member of the food safety team, there is a clear need to not only address the intervention backlog but put in place a sustainable plan to ensure all food establishments receive interventions at the frequency required by the FLCoP in future.
- 5.4.9 At the time of the audit there were 13 unrated establishments. The Authority was intending to inspect all of these by the end of March 2016.
- 5.4.10 Auditors examined liaison arrangements with other local authorities regarding information on mobile, or itinerant, traders. These liaison arrangements are important in ensuring the consistent application of the Brand Standard across local authority boundaries. The Authority through the Gloucestershire Food Liaison Group had in place a regional arrangement for transferring responsibility for the registration of mobile traders which was in accordance with the FLCoP.

- 5.4.11 Five food premises files were examined during the audit. Of these, four had been inspected at the appropriate frequency. All had been inspected by an appropriately authorised officer and had generally been correctly risk rated, however in some cases officers had not recorded sufficient information to justify their choice of rating. In one case, the database food hygiene rating differed from that in the inspection report; it was determined this was most likely the result of a report drafting error.

Recommendation 5 - Recording of scoring evidence

[The Standard 16.1]

[See also paragraph 5.5.8]

Ensure officers record the determination of compliance with legal requirements in sufficient detail to justify their choice of rating and confirm adequate assessment of compliance with hygiene and structural requirements.

- 5.4.12 One of the premises checked had been awarded a confidence in management score of 10 on two consecutive occasions despite not having a fully satisfactory food safety management system, contrary to the FLCoP.

Recommendation 6 – Scoring

[The Standard 7.2]

Ensure that the “confidence in management” score of the hygiene risk rating scheme is applied in accordance with the FLCoP.

- 5.4.13 No post-intervention adjustments had been made by the Authority, other than on appeal, consistency check or re-rating visit.

Reality Visit to a Food Premises

- 5.4.14 During the audit, a verification visit was undertaken to a local food business with an officer from the Authority. The main objective of the visit was to evaluate the effectiveness of the Authority’s assessment of food business compliance with food law requirements.
- 5.4.15 The officer had a good working relationship with the FBO and was able to demonstrate a detailed knowledge of food safety legislation and food safety management systems at the establishment.

5.5 Notification of ratings and follow up

- 5.5.1 The Authority operated a policy that inspection report forms were issued at all inspections. For premises issued a rating of 0-4 these reports were followed by an FHRs notification letter which met the requirements of the Brand Standard and the FLCoP.
- 5.5.2 The Authority confirmed that businesses awarded a “5” rating were issued with an on-site report but not generally a follow up letter. The on-site report format used was generally in accordance with the Brand Standard and FLCoP but did not include any contact details for a senior officer, a reasoned breakdown of the food hygiene rating (e.g. where individual scores of five were given) and rating publication information, contrary to the FLCoP and FHRs Brand Standard respectively.

Recommendation 7 – Notification Policy: food hygiene ratings & contact details

[The FHRs Brand Standard, Revision 3, Section 5]

[The Standard 16.1]

- (i) Amend your policy to ensure that when a food hygiene ratings of 5 is notified to a food business, written communication includes the reasoning for and breakdown of the rating and details of where the food hygiene rating will be published.
- (ii) Ensure food businesses intervention reports include contact details for a senior officer.

- 5.5.3 All five premises checked had received notification of their food hygiene rating in the format required by the Brand Standard and FLCoP within the prescribed 14 days. All premises had received their rating sticker. Where relevant, all risk rating downgrades had been signed off by the Lead Food Officer.
- 5.5.4 The food hygiene rating score on the Authority’s database matched that found on the FHRs website for all five premises.
- 5.5.5 The Authority reported that it was not aware of any food hygiene rating stickers being defaced or tampered with.

Re-Inspection/Re-visits

- 5.5.6 Five food premises re-Inspection/re-visit files were examined during the audit. All had been correctly administered in accordance with the Brand Standard.

Appeals

- 5.5.7 Only one appeal against a food hygiene rating had been made to the Authority in the two years prior to the audit. Notwithstanding the Lead Food Officer qualification issue reported, the appeal had been correctly administered in accordance with the Brand Standard and the Authority's Consistency Framework and the FBO had been informed of the outcome in writing within seven days of the appeal being lodged.
- 5.5.8 However, the intervention risk score upheld by the officer on the re-score visit which preceded the appeal was not supported by the information recorded in the inspection report, which had suggested a lower food hygiene rating would have been representative of the conditions found. A recommendation has been made in section 5.4 of this report.

Right to Reply

- 5.5.9 No businesses had taken advantage of the right to reply in the two years preceding the audit, however the associated procedure was outlined for officers in the Consistency Framework and was in accordance with the Brand Standard. The procedure included a link to the relevant form on the Authority's shared computer drive.

5.6 Food Premises Database

- 5.6.1 The Authority had in place a food premises database which was capable of providing the information required by the FSA to populate the FHRS database.
- 5.6.2 The database was backed up daily and access permissions were limited with further restrictions permitting only key staff to create new food businesses.
- 5.6.3 The database was up to date. Prior to the audit, a search was carried out using the internet and seven food businesses were checked against the Authority's database. One of these businesses was found to be closed and the remainder were included in the food hygiene intervention programme. The Authority carried out regular checks of database accuracy by comparison with the Hospitality Association, planning and licensing applications and local lifestyle magazines.
- 5.6.4 All six businesses included within the food hygiene intervention programme had their food hygiene rating information correctly

presented on the FSA website (and correctly not presented in the case of a sensitive business checked) in accordance with FHRIS Brand Standard requirements. Auditors observed that in one case the business could not be found by town name, as the town name had been entered in the wrong field on the database.

- 5.6.5 The Authority had put in place an FHRIS Upload Procedure which prescribed the audit and upload of its data to the FSA FHRIS database every other Monday. The procedure followed the published FSA IT guidance for the FHRIS.
- 5.6.6 A successful live data upload was carried out during the audit and in accordance with the FSA IT guidance for the Brand Standard. The Authority were routinely running and retaining monitoring reports against the data export and data dump and demonstrated experience of using these reports to spot and amend errors.
- 5.6.7 Auditors and colleagues from the FSA FHRIS team carried out a number of other checks of the whole database. The correct FHRIS status tag had been applied to almost all businesses. However, a check of four of a number of potential anomalies found one village hall classified as exempt contrary to the Brand Standard. Auditors recommended reminding officers of the criteria for classifying these types of premises. Although the Lead Food Officer advised auditors that she checked all new food business registrations for accuracy, she undertook to carry out a full review of the list of potential anomalies generated by the FSA to identify and correct any further errors.

Recommendation 8 – FHRIS upload procedure

[The FHRIS Brand Standard 11.4]

[See also paragraphs 5.6.10, 5.6.11]

Add detail to the documented FHRIS upload procedure to describe existing checks during and following database upload via the FHRIS portal, and include FHRIS business status categories and conflicting database/website food hygiene ratings. Implement these checks.

- 5.6.8 A significant number of category D intervention rated businesses had inspection intervals which did not match their corresponding risk rating. On investigation this was found to be the result of a database error resulting from the change in C and D risk score bandings in recent years. The Lead Food Officer agreed to review the database and resolve this error. All affected inspections had been allocated their next inspection six months sooner than was required by the FLCoP.

Recommendation 9 - Database maintenance and monitoring

[The Standard 11.2]

[See also paragraphs 5.6.9, 5.6.11]

- (i) Review, where necessary amend and implement documented database maintenance and monitoring procedures to include checks for anomalous inspection date intervals and duplicate premises.
- (ii) Resolve the existing database error which has produced anomalous inspection periods for some historic D rated businesses.

5.6.9 Few duplicate premises were found, however a very small number had resulted in duplicate entries visible on the FHRS website with conflicting scores. The cause was determined to be officer database input error and the possibility of informal re-training was discussed.

5.6.10 A small number of premises had food hygiene ratings published on the website which did not reflect the true food hygiene rating awarded at the last inspection. This was determined to be the result of officer database input error. Once again, auditors suggested officer re-training and a consideration of extending internal monitoring to prevent a recurrence.

Recommendation 10 - Database training

[The Standard 5.4]

[See also paragraphs 5.6.7, 5.6.9]

Ensure officers and support staff receive additional informal training on database new food premises creation and intervention/inspection data entry.

5.6.11 The Authority had not documented its existing internal monitoring in sufficient detail to identify the individual checks to be carried out in order to maintain consistency and meet the requirements of the Framework Agreement. Whilst database monitoring was extensive, the findings of the audit indicated that a review of its scope would be beneficial.

5.7 Consistency Framework

5.7.1 The Authority carried out some further quantitative, as well as qualitative internal monitoring against the requirements of the FHRS Brand Standard and its own Consistency Framework.

- 5.7.2 This included discussion of inspection workload during one-to-one meetings with officers, as well as performance against FHRs notification, re-inspection and appeal targets, sampling work reviews, complaint response targets and individual premises case discussions. The Authority was able to demonstrate that it had undertaken FHRs consistency exercises during team meetings and provided evidence of Lead Food Officer checks on risk rating category downgrades.
- 5.7.3 In addition to the database monitoring checks already detailed in this report, the Authority monitored officer performance against inspection workload targets and provided evidence of follow-up during officer one-to-one meetings.
- 5.7.4 The Authority acknowledged that it had not maintained quarterly accompanied inspections and inspection report checks with each officer over the last year, contrary to its own Consistency Framework.

Recommendation 11 – Review of consistency framework

[The Standard 19.1]

Review and implement the LAs FHRs Brand Standard Consistency Framework fully, taking into account the findings detailed in this audit report. Checks shall include officers' recording of the determination of compliance with legal requirements to justify their choice of rating.

- 5.7.5 Auditors were provided with evidence demonstrating that the Authority had planned to lead the regional FSA FHRs Inter-Authority Audit and had trained an officer as the lead assessor. However, due to unplanned long-term staff absence the project had been unable to proceed further.
- 5.7.6 The Authority had not taken part in the national FHRs consistency exercise recently conducted by the FSA. Although the Authority had taken part in a regional consistency workshop in January 2015, file and database checks indicated the importance of maintaining internal consistency workshops, regional consistency workshops and taking part in the next FSA national consistency exercise.

5.8 Local Authority Website

- 5.8.1 The Authority's website contained information for the public and food businesses about the FHRs scheme and how ratings were calculated and included a link to the FSA business web pages and the FHRs ratings website.

5.9 FHRS Website

- 5.9.1 The Authority had published its current e-mail address, website address and logo on the FHRS website.

5.10 Issues Outside of Scope

- 5.10.1 Auditors observed that no section about the Authority's delivery of advice to business had been included in the Food Service Plan for 2015/16. Although required to meet the service planning guidance of the Framework Agreement, this was outside the scope of the audit.

Audit Team: **Alun Barnes – Lead Auditor**
Chris Green – Auditor

Food Standards Agency
Local Delivery Audit Team

ANNEX A - Action Plan for Cheltenham Borough Council

Audit date: 10-11 February 2016

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>Recommendation 1 - Service planning [The Standard 3.1]</p> <p>Include in the service plan an estimate of the demands on the Service and the resources required for each area of service delivery (including those necessary to meet nationally driven outcome targets such as the intervention frequencies prescribed by the FLCoP), together with a comparison with the resources available.</p>	<p>14/06/2016</p>	<p>Service plan for 2016-2017 will include all aspects of this recommendation in accordance with the service planning guidance of the Framework Agreement.</p>	<p>Target date takes into account committee cycle. Cabinet does not sit in May due to elections.</p>

<p>Recommendation 2 - Qualification and authorisation of officers [The Standard 5.3]</p>			
<p>(i) Ensure that the level of authorisation and duties of the Lead Food Officer are consistent with their qualifications and the relevant Code of Practice.</p>	<p>30/09/2016</p>	<p>Full registration to be finalized</p>	<p>Target date takes account of assessment and registration time table. Interim arrangements for lead officer operational as per e mail to A Barnes 25/02/2016</p>
<p>(ii) Ensure that the level of authorisation and duties of authorised officers are consistent with their qualifications and the relevant Code of Practice.</p>	<p>31/05/2016</p>	<p>Authorisation of officers to be updated. Target date takes into account review of Council constitution currently being undertaken.</p> <p>Authorisations will include separate written authorisation under the Food Safety & Hygiene (England) Regulations 2013.</p> <p>Authorisations will be against individual regulations including other statutory instruments where appropriate</p>	<p>Level of authorisation and duties of officers currently inspecting premises are consistent with their qualifications.</p>

<p>Recommendation 3 – Intervention/inspection procedures [The Standard 7.4]</p> <p>Put in place an intervention/inspection procedure/s for the range of interventions it carries out.</p>	<p>30/09/2016</p>	<p>Undertake review of outdated inspection procedure to include all practices relating to FHRS.</p>	
<p>Recommendation 4 - Frequency of official interventions [The Standard 7.1]</p> <p>Carry out interventions/inspections at all food hygiene establishments in its area at a frequency which is not less than that determined under the hygiene intervention rating scheme set out in the FLCoP.</p>	<p>31/01/2017</p>	<p>All A, B, non-compliant C food establishments will be inspected in accordance with FLCoP.</p> <p>Review of overdue compliant Cs, Ds and Es will produce priority list according to current risk profile and main use.</p> <p>Forthcoming service plan to include all overdue inspections (as detailed for recommendation 1)</p>	<p>All A, B, noncompliant C and new premises scheduled by 31/03/2016 will be achieved.</p> <p>Contractor secured to assist with overdue establishments. Priority will be given to premises producing high risk foods.</p> <p>31/03/2016 – specification for outstanding inspections agreed agency officer. All outstanding inspections scheduled for completion by 31/10/2016.</p>

<p>Recommendation 5 - Recording of scoring evidence [The Standard 16.1]</p> <p>Ensure officers record the determination of compliance with legal requirements in sufficient detail to justify their choice of rating and confirm adequate assessment of compliance with hygiene and structural requirements.</p>	<p>30/06/2016</p>	<p>Structured revision training scheduled for 25th May 2016 will include review of all inspection records since audit to ensure all officers have recorded improved risk rating justification.</p>	<p>Team meeting on 14th March 2016 – all officers aware of requirements of this recommendation.</p> <p>Internal monitoring of this requirement has been undertaken at 1-2-1 and team meetings.</p>
<p>Recommendation 6 – Scoring [The Standard 7.2]</p> <p>Ensure that the “confidence in management” score of the hygiene risk rating scheme is applied in accordance with the FLCoP.</p>	<p>30/06/2016</p>	<p>Structured revision training scheduled for 25th May 2016 will include review of all inspection records since audit to ensure confidence in management risk rating is applied in accordance with the FLCoP</p>	<p>Team meeting on 14th March 2016 – all officers aware of requirements of this recommendation.</p> <p>Internal monitoring of this requirement has been undertaken at 1-2-1 and team meetings.</p>

<p>Recommendation 7 – Notification Policy: food hygiene ratings & contact details [The FHR Standard, Revision 3, Section 5] [The Standard 16.1]</p> <p>(i) Amend your policy to ensure that when a food hygiene ratings of 5 is notified to a food business, written communication includes the reasoning for and breakdown of the rating and details of where the food hygiene rating will be published.</p> <p>(ii) Ensure food businesses intervention reports include contact details for a senior officer.</p>	<p>30/06/2016</p> <p>Completed</p>	<p>Policy will be amended to include FHR 5 rated premises.</p> <p>Template letters for FHR 5 rated premises have been reintroduced.</p>	<p>Team meeting of 14th March 2016 – all inspecting officers made aware of this requirement.</p>
<p>Recommendation 8 – FHR upload procedure [The FHR Standard 11.4]</p> <p>Add detail to the documented FHR upload procedure to describe existing checks during and following database upload via the FHR portal, and include FHR business status categories and conflicting database/website food hygiene ratings. Implement these checks.</p>	<p>31/05/2016</p>	<p>Written upload procedure to be expanded to include remedial action to be undertaken following report outcomes that display database/website anomalies.</p>	<p>Checks implemented at all uploads undertaken since audit.</p>

<p>Recommendation 9 - Database maintenance and monitoring [The Standard 11.2]</p> <p>(i) Review, where necessary amend and implement documented database maintenance and monitoring procedures to include checks for anomalous inspection date intervals and duplicate premises.</p> <p>(ii) Resolve the existing database error which has produced anomalous inspection periods for some historic D rated businesses.</p>	<p>30/04/2016</p> <p>Completed</p>	<p>Documented database maintenance and monitoring procedure will include a quarterly check for anomalous inspection date intervals using an Access report to interrogate 'interventions due' data. These procedures will include a check for duplicate premises (by Trading As name as well as by unique premises reference number (UPRN)).</p>	<p>Team meeting 14th March 2016 confirmed that officers will carry out an additional check for anomalous inspection date intervals when using the risk summary screen of the commercial premises database.</p>
<p>Recommendation 10 - Database training [The Standard 5.4]</p> <p>Ensure officers and support staff receive additional informal training on database new food premises creation and intervention/inspection data entry.</p>	<p>30/04/2016</p>	<p>April team briefings will include refresher training for officers and support staff based on documented procedures</p>	<p>Officers advised of this recommendation at team meeting on 14th March 2016</p>

<p>Recommendation 11 – Review of consistency framework [The Standard 19.1]</p> <p>Review and implement the LAs FHRS Brand Standard Consistency Framework fully, taking into account the findings detailed in this audit report. Checks shall include officers’ recording of the determination of compliance with legal requirements to justify their choice of rating.</p>	<p>30/06/2016</p>	<p>Review of framework to include all audit findings.</p> <p>Re introduce documented accompanied visits in accordance with the consistency framework</p> <p>Continue to undertake consistency exercises within team in accordance with the FHRS Brand Standard.</p> <p>Participate in regional and national consistency exercises as they become available.</p>	<p>Officers advised of this recommendation at team meeting on 14th March 2016.</p> <p>Officers recording to be checked at individual 121s to include documented checks on audit recommendations 5 and 6.</p>
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ANNEX B - Audit Approach/Methodology

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

- (1) Examination of LA plans, policies and procedures.
- (2) A range of LA file records were reviewed.
- (3) Review of Database records
- (4) Officer interviews

ANNEX C - Glossary

Authorised officer	A suitably qualified officer who is authorised by the local authority to act on its behalf in, for example, the enforcement of legislation.
Brand Standard	This Guidance represents the 'Brand Standard' for the Food Hygiene Rating Scheme (FHRS). Local authorities in England and Northern Ireland operating the FHRS are expected to follow it in full.
Codes of Practice	Government Codes of Practice issued under Section 40 of the Food Safety Act 1990 as guidance to local authorities on the enforcement of food legislation.
County Council	A local authority whose geographical area corresponds to the county and whose responsibilities include food standards and feeding stuffs enforcement.
District Council	A local authority of a smaller geographical area and situated within a County Council whose responsibilities include food hygiene enforcement.
Environmental Health Officer (EHO)	Officer employed by the local authority to enforce food safety legislation.
Feeding stuffs	Term used in legislation on feed mixes for farm animals and pet food.
Food hygiene	The legal requirements covering the safety and wholesomeness of food.

Food standards	The legal requirements covering the quality, composition, labelling, presentation and advertising of food, and materials in contact with food.
Framework Agreement	<p>The Framework Agreement consists of:</p> <ul style="list-style-type: none"> • Food and Feed Law Enforcement Standard • Service Planning Guidance • Monitoring Scheme • Audit Scheme <p>The Standard and the Service Planning Guidance set out the Agency's expectations on the planning and delivery of food and feed law enforcement.</p> <p>The Monitoring Scheme requires local authorities to submit yearly returns via LAEMS to the Agency on their food enforcement activities i.e. numbers of inspections, samples and prosecutions.</p> <p>Under the Audit Scheme the Food Standards Agency will be conducting audits of the food and feed law enforcement services of local authorities against the criteria set out in the Standard.</p>
Full Time Equivalents (FTE)	A figure which represents that part of an individual officer's time available to a particular role or set of duties. It reflects the fact that individuals may work part-time, or may have other responsibilities within the organisation not related to food and feed enforcement.
Member forum	A local authority forum at which Council Members discuss and make decisions on food law enforcement services.
Metropolitan Authority	A local authority normally associated with a large urban conurbation in which the County and District Council functions are combined.
Service Plan	A document produced by a local authority setting out their plans on providing and delivering a food service to the local community.
Trading Standards	The Department within a local authority which carries out, amongst other responsibilities, the enforcement of food standards and feeding stuffs

legislation.

Trading Standards
Officer (TSO)

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

Unitary Authority

A local authority in which the County and District Council functions are combined, examples being Metropolitan District/Borough Councils, and London Boroughs. A Unitary Authority's responsibilities will include food hygiene, food standards and feeding stuffs enforcement.