

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

Derbyshire Dales District Council
15-17 December 2015



Foreword

Audits of local authorities' feed and food law enforcement services are part of the Food Standards Agency's 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 feeding stuffs is largely the responsibility of local authorities. These local authority regulatory functions are principally delivered through Environmental Health and Trading Standards Services.

The attached audit report examines the Authority's Food Law Enforcement Service. The assessment includes the local arrangements in place for database management, inspections of food businesses and internal monitoring. It should be acknowledged that there will be considerable diversity in the way and manner in which local authorities may provide their food enforcement services reflecting local needs and priorities.

Agency audits assess local authorities' conformance against the 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 and is available on the Agency's website at: www.food.gov.uk/enforcement/auditandmonitoring.

The main aim of the audit scheme is to maintain and improve consumer protection and confidence by ensuring that local authorities are providing an effective food law enforcement service. The scheme also provides the opportunity to identify and disseminate good practice and provide information to inform Agency policy on food safety, standards and feeding stuffs. Parallel local authority audit schemes are implemented by the Agency's offices in England, Wales and N. Ireland..

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

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

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1.0 Introduction

- 1.1 This report records the results of an audit at Derbyshire Dales District Council with regard to food hygiene enforcement, under relevant headings of the Food Standards Agency Food Law Enforcement Standard. The audit focused on the Authority's arrangements for the management of the food premises database, food premises interventions, and internal monitoring. The report has been made available on the Agency's website at:

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

Hard copies are available from the FSA's Regulatory Delivery Division, please email LAudit@foodstandards.gsi.gov.uk or phone 01904 232116.

Reason for the Audit

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

Scope of the Audit

- 1.5 The audit examined Derbyshire Dales District Council's arrangements for food premises database management, food premises interventions and internal monitoring, with regard to food hygiene law enforcement.

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

This included a reality check at a food business to assess the effectiveness of official controls implemented by the Authority at the 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. The scope of the audit also included an assessment of the Authority's overall organisation and management, and the internal monitoring of food hygiene law enforcement activities.

- 1.6 Assurance was sought that key Authority food hygiene law enforcement systems and arrangements were effective in supporting business compliance, and that local enforcement was managed and delivered effectively. The on-site element of the audit took place at the Authority's offices at Town Hall, Matlock, Derbyshire on 15-17 December 2015.

Background

- 1.7 The Derbyshire Dales District Council is situated in the East Midlands of England and has an area covering 792 km², with a population of approximately 71,281 (2014 estimate). Much of the district is situated in the Peak District which is also a National Park but most of the population is situated along the River Derwent. The main centre of population is Matlock and what is commonly known as the wider Matlock urban area.
- 1.8 The district is bordered by High Peak, Amber Valley, North East Derbyshire and South Derbyshire areas and also Sheffield in South Yorkshire. The main industries are tourism, agriculture and manufacturing, however much of the working population is employed in Sheffield and Chesterfield.
- 1.9 Food law enforcement was the responsibility of the Environmental Health Team which was part of Regulatory Services.
- 1.10 The Authority reported the profile of Derbyshire Dales District Council's food businesses as of 31 March 2015 as follows:

Type of Food Premises	Number
Primary Producers	41
Manufacturers/Packers	76
Importers/Exporters	0
Distributors/Transporters	37
Retailers	292
Restaurant/Caterers	968
Total Number of Food Premises	1414

2.0 Executive Summary

- 2.1 Derbyshire Dales District Council was selected for audit as Local Authority Enforcement Monitoring Scheme (LAEMS) data submitted by the Authority indicated a relatively high number of overdue inspection/interventions.
- 2.2 The Authority was delivering a range of food law enforcement and officers were competent and had generally assessed the compliance of establishments and systems in their area to the required standards.
- 2.3 Although the Authority had instigated an alternative enforcement strategy to deal with their overdue inspections, which were mainly in the low risk E category, this should be reviewed to ensure that the types of premises with the highest associated risks, based on the nature of the business and the processes involved, are prioritised. In addition the Authority should work quickly to ensure that the intervention/inspection programme is brought back up to date in accordance with the requirements of the Framework Agreement and the Food Law Code of Practice (FLCoP). A summary of the main findings and key improvements required is set out below.

2.4 Key areas for improvement:

Service Planning: The Authority should develop and implement an annual Food Safety Service Plan in accordance with the Service Planning Guidance. The Plan should include a realistic estimate of the resources needed to deliver food law enforcement in accordance with the Food Law Code of Practice. The Plan should be submitted for approval to the appropriate Member forum or senior delegated officer.

Policies and Procedures: The Authority should ensure that all out of date food law policies and procedures are reviewed and brought up to date. In addition the Authority should set up and maintain a document control system to ensure all policies and procedures are reviewed on a regular basis and whenever there is a change to legislation or centrally issued guidance.

Training: The Authority needs to ensure that officers receive suitable update training for all the types of premises where they deliver official controls. In addition, the Authority should consider introducing a competency matrix to ensure officers training is kept up to date in the future.

Interventions and inspections: The Authority needs to ensure that food premises in the inspection programme are inspected within the 28 days specified by the Food Law Code of Practice and that overdue premises interventions are reduced.

3.0 Audit Findings

3.1 Organisation and Management

Strategic Framework, Policy and Service Planning

- 3.1.1 Auditors were informed that the Authority had embarked on a wide review of Environmental Health and a key consideration within that process was organisational structure within the Division. The Authority also intended to assess the level of resources it would need to deliver the key demands in regard to food safety activities.
- 3.1.2 The Food Safety Service Plan for 2015/16 had not been drafted and no Service Plan had been compiled since 2013/14. Auditors were informed that a Service Plan would be developed for 2016/17 (post Service Review) and submitted to the relevant Member forum or senior delegated officer for approval.
- 3.1.3 Generally, the 2013/14 Service Plan had been drafted in accordance with the Service Planning Guidance in the Framework Agreement and provided useful information on the Service's aims and objectives. Auditors discussed using the 2013/14 Service Plan as a model for future service plans. More specifically the importance of ensuring that the 2016/17 Service Plan continues to include an accurate and realistic estimate of the resources required to deliver the Service in accordance with the Food Law Code of Practice (FLCoP) against the resources available. The absence of such information makes it difficult to quantify any resource shortfalls to senior managers and elected Members. Auditors also discussed the need for future service plans to include full out of hours contact arrangements, details of the appointed Public Analyst and Food Examiner, reference to the RASSF alerts system and a fuller description of the demands placed upon the Service.

Recommendation

3.1.4 The Authority should:

Draw up, document and implement a service delivery plan in accordance with Service Planning Guidance in Chapter 1 of the Framework Agreement and submit the service delivery for approval to either the relevant member forum, or where appropriate the relevant senior delegated officer. [The Standard - 3.1 and 3.2]

Documented Policies and Procedures

- 3.1.5 An overarching system for the review of documented policies and procedures was not in place and procedures were generally out of date and in need of review to ensure that they were in line with current legislation and current guidance. Auditors were informed that the Authority had embarked on a programme to review and update policies and procedures. Auditors were informed that in future reviews of policies and procedures would be carried out annually and whenever there was a change to legislation or centrally issued guidance. Auditors discussed the benefit of implementing an overarching system to ensure that procedures and documentation are reviewed on a regular basis.

Recommendation

- 3.1.6 The Authority should:

Set-up, maintain and implement a control system for all documentation and ensure that all documented policies and procedures are reviewed and updated on a regular basis. [The Standard - 4.1 and 4.2]

Authorised Officers

- 3.1.7 The Authority was in the process of developing a procedure for the authorisation of its officers based upon their qualifications and experience. All officers had been appropriately and correctly authorised under the relevant legislation. However, authorisation documents should be reviewed to ensure the Official Feed and Food (England) Regulations 2009 are included.
- 3.1.8 Officer training and qualification records were easily retrievable and demonstrated that officers had carried out a minimum of 10 hours training annually based upon the principles of continuing professional development (CPD). However, generally officers were keeping their own CPD certificates, copies of which should be maintained by the Authority in accordance with the Framework Agreement. In addition we discussed the need for some officers to update their training on complex equipment, HACCP, imported food and enforcement procedures training where necessary.
- 3.1.9 Officer training was identified at annual PDRs, 1 to 1 meetings, team meetings and on an adhoc basis. We discussed the benefits of introducing a qualifications and competency matrix to ensure officers received essential update training on a regular basis.

Recommendations

3.1.10 The Authority should:

- (i) Set up, maintain and implement a documented procedure for the authorisation of officers based on their competence and in accordance with the Food Law Code of Practice and any centrally issued guidance. [The Standard 5.1]
- (ii) Ensure that all authorised officers including the lead food officer receive the training needed to be competent to deliver the technical and administrative aspects of the work in which they will be involved, in accordance with the Food Law Code of Practice. [The Standard 5.4]
- (iii) Maintain records of training of each authorised officer in accordance with the Food Law Code of Practice. [The Standard 5.5]

3.2 Food Premises Database

- 3.2.1 The Service had access to the M3 database which was capable of providing accurate annual returns to the Agency. There was no dedicated administrator for the database and its overall accuracy was now overseen by the Head of Regulatory Services who had access to a number of validation reports for checking the accuracy of the data. We were informed that historically validation reports were only run before submitting a LAEMS return to the Agency, but the Authority now intended to run the reports quarterly to provide a more contemporary picture of the accuracy of the data allowing for prompt correction of detected anomalies. We also discussed reviewing the current validation reports and introducing new reports where necessary.
- 3.2.2 Database assessments prior to the audit and reports run on site confirmed that the system was generally accurate for A, B, C and D premises. A project to deal with overdue E-rated premises meant that the data for that category was likely to be inaccurate until the results of the survey had been uploaded to the system. Some minor anomalies relating to risk scoring and missing fields were detected and discussed.
- 3.2.3 The Authority had not developed a protocol to maintain the accuracy of the database. In practice database accuracy was maintained by a mixture of restricted access, mandatory fields and annual training with the software provider. We discussed the benefits of developing a database entry protocol to provide guidance for new officers unfamiliar with the system and serve as a reference document for more experienced operators.

Recommendation

3.2.4 The Authority should:

Set up, maintain and implement a documented procedure to ensure the food premises database is accurate and up to date. [The Standard – 11.2]

3.3 Food Premises Inspections

- 3.3.1 The Authority's Food Safety Service Plan 2013/14 had set out the food premises profile by risk category and the interventions programme for the year. This should be continued when the 2016/17 Food Safety Service Plan is developed. The priorities set out for the annual inspection programme had been based on risk.
- 3.3.2 A spreadsheet provided by the Authority showed approximately 770 overdue inspections across all risk categories. The number of overdue inspections mostly related to category E premises which had grown over recent years due to the policy of concentrating resources on category A, B, C and D premises. To deal with this the Authority had launched an alternative enforcement strategy (AES) project in February 2014. This involved contacting all E-rated premises by letter with the aim of encouraging them to fill in an online questionnaire to establish if their business had changed their food activities, potentially moving them into a higher risk category. To date 426 notifications had been sent out and around 259 responses had been received. The information was then filtered and checked against historical data and follow-up phone calls were instigated where necessary. At a future date businesses which had potentially moved into a higher risk category and businesses which had failed to complete the questionnaire would be targeted for an inspection. It was noted that because the responses had not yet been recorded on the database as an AES intervention the Authority's database and submitted LAEMS data for E-rated and overdue inspections would not be accurate.
- 3.3.3 Auditors discussed the need for the Authority to ensure that the E-rated premises with the highest potential risk are given priority in the continuing project and that plans are developed to ensure that relevant premises are inspected where necessary. In carrying out this work the Authority should have regard to maintaining the intervention programme relating to the higher risk categories and ensure that the Authority brings its inspection programme back in accordance with the frequencies specified in the FLCoP. In addition, we discussed the flexibilities specified in the Food Law Code of Practice. The Authority stated this was already a key consideration of the Service Review and options would be explored at the earliest opportunity.
- 3.3.4 The Authority had developed a food hygiene inspection procedure for the inspection of general food premises but it had not been updated recently. Auditors were informed that it would be updated as part of the ongoing review of policies and procedures.
- 3.3.5 File record checks for five general food premises were carried out. Whilst we found evidence of some detailed inspection records we did find some variation in the quality of the recording of observations made on site between officers. This included some incomplete aide memoires and some inconsistency in the allocation of risk scores. Where significant non-compliances had been found the electronic

record indicated such matters had not always been effectively followed up, although on most occasions effective action had been taken. During inspections officers had effectively assessed HACCP requirements and conformance with the Agency's E.coli Guidance. Generally the files checked had been inspected within the 28 day frequency specified by the FLCoP.

- 3.3.6 Inspection report forms and/or letters had been consistently provided to the food business operator (FBO) following each intervention, which provided useful advice to businesses as well as confirming the key points found on inspection and any proposed follow-up action to be taken by the Authority.
- 3.3.7 File checks were carried out on the intervention and enforcement records in relation to three approved establishments' files. The approval process had been carried out in line with the FLCoP and Practice Guidance. However, in one instance, it was noted the justification for granting a full approval instead of a conditional approval could have been recorded in more detail on the inspection aide memoir. Files for all approved premises contained key business information required by Annex 10 of the FLCoP Practice Guidance in an easily retrievable form. Not all documentation had been scanned in to the electronic database for approval files but it was noted the Authority had been able to retrieve paper files when requested.
- 3.3.8 The relevant product specific aide memoire had been used in relation to all three approved premises but some inconsistencies in record keeping, similar to the general premises files, were noted.

Recommendations

3.3.9 The Authority should:

- (i) Carry out interventions at all relevant food premises in the area at a frequency which is not less than that determined under the intervention rating scheme set out in the Food Law Code of Practice (FLCoP) and other centrally issued guidance. [The Standard 7.1]
- (ii) Carry out interventions/inspections, and approve establishments, in accordance with the relevant legislation, Food Law Code of Practice centrally issued guidance and the Authority's own policies and procedures. [The Standard - 7.2]
- (iii) Review, and update documented procedures, including those related to product specific establishments and the range of interventions/inspections carried out, in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard - 7.4]
- (iv) Assess the compliance of establishments and systems to legally prescribed standards as required by Article 10(2) of Regulation (EC) No. 882/2004, having regard to any relevant centrally issued guidance and take appropriate action on any non-compliance found in accordance with the Authority's own Enforcement Policy. Ensure that observations made in the course of an inspection are effectively recorded. [The Standard - 7.3 and 7.5]

Verification Visit to a Food Premises

3.3.10 During the audit a verification visit was undertaken to a local butchers' shop 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 verify the effectiveness of the Authority's assessment of food business compliance with food law requirements.

3.3.11 The officer was able to demonstrate familiarity with the premises and the operations carried out. The officer had effectively assessed the businesses compliance with legal requirements including an assessment of the implementation of the FSA's Guidance on E.coli O157 Cross Contamination Guidance and the premises reflected the records held by the Authority.

3.4 Enforcement

- 3.4.1 The Authority had developed an appropriate corporate Enforcement Policy, which outlined the Authority's commitment to taking appropriate formal action in cases of non-compliance. The Policy contained broad guidance for officers and businesses on the different types of enforcement actions possible and the situations when they might be appropriate. The Policy had been approved by the appropriate Member forum.
- 3.4.2 The Service's documented enforcement procedures were out of date and required reviewing and updating. Auditors were informed that this would be carried out as part of the Authority's ongoing programme to review and update policies and procedures.
- 3.4.3 A range of formal enforcement activities were examined during the audit including two Hygiene Improvement Notices (HIN's) and one voluntary closure. The actions taken in relation to voluntary closure had been appropriate given the circumstances and generally detailed records had been kept by officers. Notices had been accurately drafted and follow up actions had been identified. However, we discussed the use of HINs for the control of dual use equipment which could have been dealt with by way of Hygiene Emergency Prohibition Notice in accordance with centrally issued guidance.
- 3.4.4 We examined one prosecution file. The file was well organised and showed that a thorough investigation had been carried out resulting in a successful prosecution. We discussed the need for the Authority to show, with reference to the Enforcement Policy, documented justification for the escalation of enforcement, particularly when proceeding straight to prosecution, without the intermediary enforcement measure of issuing notices.

Recommendations

3.4.5 The Authority should:

- (i) Set up, maintain and implement, and where appropriate review and update, documented procedures for follow up and enforcement actions in accordance with the Food Law Code of Practice and official guidance. [The Standard – 15.2]
- (ii) Carry out food law enforcement in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 15.3]

3.5 Internal Monitoring, Third Party or Peer Review

Internal Monitoring

- 3.5.1 Although the Authority had not developed a documented internal monitoring procedure there was some evidence that both quantitative and qualitative monitoring checks across a range of food law enforcement activities had been carried out, although this was not always documented.
- 3.5.2 Routine quantitative monitoring checks were being carried out in respect of the annual intervention programme and these had been discussed at 1 to 1 meetings with officers and team meetings.
- 3.5.3 Some qualitative monitoring checks had been carried out, such as checks on Food Hygiene Rating Scheme data, aides-memoire and progress on enforcement actions. Monitoring was implemented as part of 1 to 1 meetings and performance reviews.
- 3.5.4 Auditors were informed that a monitoring procedure would be developed and implemented to ensure proper documentation of current monitoring activities and expanded to include accompanied inspections. We discussed the need to keep monitoring routine, risk based and concentrated on areas of weakness.

Recommendation

3.5.5 The Authority should:

Set up, maintain and implement risk based documented internal monitoring procedures in accordance with Article 8 of Regulation (EC) No. 882/2004 (Official Feed and Food Controls), the Food Law Code of Practice and centrally issued guidance. [The Standard – 19.1]

Food and Food Premises Complaints

- 3.5.6 Auditors were informed that the Authority's Food Complaints Policy and procedure would be reviewed and updated as part of the wide ranging review of policies and procedures.
- 3.5.7 A range of food and food premises complaints were assessed as part of the audit. In general appropriate investigations had been carried out, records maintained and the FBO informed of the results. There was one complaint where we felt the FSA should perhaps

have been informed, in case of the need to issue a Food Alert, and this was discussed.

Recommendation

3.5.8 The Authority should:

Review and update the documented procedure in relation to food and food premises complaints. [The Standard – 8.1]

Food Inspection and Sampling

- 3.5.9 The Authority's Food Sampling Policy and Food Sampling Procedure had been recently updated. The Authority was able to demonstrate its commitment to risk based sampling as part of its intervention strategy and had taken part in recent local and regional sampling programmes. In addition, as part of the 2015/16 regional sampling programme the Authority would be carrying out a focussed sampling programme on imported food from third countries in the 4th Quarter.
- 3.5.10 In addition, the Authority was making extensive use of ATP sampling and reported that this had been effective, with businesses responding positively to the quick results produced by the tests. We discussed ensuring ATP tests are reported in the LAEMS figures.
- 3.5.11 An annual sampling programme had been developed and implemented. The sampling plan focused on participation in national and regional sampling initiatives and had been developed in conjunction with the local food liaison group.
- 3.5.12 Two unsatisfactory sample records were examined as part of the audit. Although the samples had been found to be unsatisfactory the results had been compromised due to a rise in temperature during transport. However, in each case appropriate records had been maintained and the food business operator informed of the results by telephone. The Authority should ensure that FBOs are subsequently advised of adverse results in writing.

Records

- 3.5.13 Records of food law enforcement activities were maintained mainly in electronic files, with a small number of approved premises also maintained on paper files. In general, records were easily retrievable and up to date.

Third Party or Peer Review

- 3.5.14 The Authority had participated in an inter authority audit (IAA) carried out on 13–14 November 2013 by the Derbyshire Food Liaison Group and the report issued 9 April 2014. The IAA had covered a number of areas in common with this audit. The recommendations from the IAA had been compiled into an action plan and the Authority had been working towards their completion. The IAA is a useful process in helping Local Authority's to ensure the maintenance of high standards in food safety enforcement and the Agency supports its continued implementation.

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Food Standards Agency
Regulatory Delivery Division

ANNEX A - Action Plan for Derbyshire Dales District Council

Audit date: 15-17 December 2015

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.1.4 Draw up, document and implement a service delivery plan in accordance with Service Planning Guidance in Chapter 1 of the Framework Agreement and submit the service delivery for approval to either the relevant member forum, or where appropriate the relevant senior delegated officer. [The Standard - 3.1 and 3.2]	Draft document end March 2016 * Awaiting new financial year Committee schedule; anticipated first meeting 7 th July.	To generate a 2016/17 service delivery plan as per Chapter 1 guidance, to be considered by Corporate Leadership Team (CLT) and approved by Community & Environment Committee.	In-house discussions as regards necessary components and route of necessary approval.
3.1.6 Set-up, maintain and implement a control system for all documentation and ensure that all documented policies and procedures are reviewed and updated on a regular basis. [The Standard - 4.1 and 4.2]	End August 2016	To generate a policy and procedure matrix which includes annual reviews, but also takes account of external review triggers. The matrix shall be a standing item within team meetings going forwards.	An electronic file review is on-going to archive old policy and procedure documents, streamline existing, whilst also establishing examples of best practice.
3.1.10 (i) Set up, maintain and implement a documented procedure for the authorisation of officers based on their competence and in accordance with the Food Law Code of Practice and any centrally issued guidance. [The Standard 5.1]	End August 2016	In the short term to add additional information to the recently revised authorisation procedure. In the longer term to work with colleagues in the Derbyshire Food Liaison Group (DFLG) in order to established a competency matrix approach in accordance with revised COP Guidance.	In-house discussions as regards most appropriate course of action to compliment 2015 work already completed on authorisation review and reissue in 2014/15.

3.1.10 (ii) Ensure that all authorised officers including the lead food officer receive the training needed to be competent to deliver the technical and administrative aspects of the work in which they will be involved, in accordance with the Food Law Code of Practice. [The Standard 5.4]	End March 2016	To generate a list of key skills/knowledge prompts to be considered in parallel to the annual Personal Development Review (PDR) process for Food Officers. This will ensure specific training needs are identified and resourced accordingly.	The review of the Corporate PDR process has just been completed ready for roll-out in March/April 2016. Dates for 1-2-1 meetings with all staff are now being established accordingly.
3.1.10 (iii) Maintain records of training of each authorised officer in accordance with the Food Law Code of Practice. [The Standard 5.5]	End March 2016	To adopt one template for the central recording of CPD by front facing Food Officers from the 1 st April 2016. This shall include a prompt concerning the scanning of certificates accordingly.	In-house team meeting concerning necessary components.
3.2.4 Set up, maintain and implement a documented procedure to ensure the food premises database is accurate and up to date. [The Standard – 11.2]	Adopted End August 2016	To continue to run a suite of validations reports on a quarterly base to help trouble shoot anomalies in a more timely way. To generate a series of data entry instruction scripts for the various task types on the M3 system, with a view to them being further enhanced over time and periodically reviewed.	In-house discussion concerning FSA observations; an increased frequency in the running of associated reports; on-site discussions with database provider.
3.3.9 The Authority should: (i) Carry out interventions at all relevant food premises in the area at a frequency which is not less than that determined under the intervention rating scheme set out in the Food Law Code of Practice (FLCoP) and other centrally issued guidance. [The Standard 7.1]	End August 2016	To review, realign and reinvigorate the process as regards the approach to Cat 'E' rated premises to ensure the database is fully reflective of current status and captured by LAEMs 2016/17. To fast track those premises which may of increased or changed activity which increases their risk rating score or by their title may suggest a higher risk activity.	AES approach already discussed on-site with database provider to ensure LAEM's capture. Data extract already being worked on as regards over-due premises etc.
(ii) Carry out interventions/inspections, and approve establishments, in accordance with the relevant legislation, Food Law Code of Practice centrally issued guidance and the Authority's own policies and procedures. [The Standard - 7.2]	End August 2016	To generate an intervention/inspection procedure specific to approved premises to ensure officer consistency and adherence to the Code.	In-house discussion of FSA observations with Food Team colleagues and more specifically those officers who deal with Approved Premises.

(iii) Review, and update documented procedures, including those related to product specific establishments and the range of interventions/inspections carried out, in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard - 7.4]	End August 2016	To continue with the review and development programme of policies and procedures commenced in 2015, including document relaunch and officer familiarisation.	An electronic file review is on-going to archive old policy and procedure documents, streamline existing, whilst also establishing examples of best practice.
(iv) Assess the compliance of establishments and systems to legally prescribed standards as required by Article 10(2) of Regulation (EC) No. 882/2004, having regard to any relevant centrally issued guidance and take appropriate action on any non-compliance found in accordance with the Authority's own Enforcement Policy. Ensure that observations made in the course of an inspection are effectively recorded. [The Standard - 7.3 and 7.5]	End August 2016 Completed	To develop non-compliance premises procedure notes (as part of the policy and procedures review), to help ensure consistency of officer handling of such cases, plus a graduated and proportionate enforcement approach as per the Corporate Enforcement Policy. To underline the importance of file notes (electronic or otherwise) in connection with officer decision making and the necessary audit trail.	In-house team meeting to discuss FSA observations, necessary audit trails of decision making, the necessary steps of recording albeit sampling results, voluntary closure, through to prosecution. These discussions will be supported by revised policies and procedures in due course.
3.4.5 (i) Set up, maintain and implement, and where appropriate review and update, documented procedures for follow up and enforcement actions in accordance with the Food Law Code of Practice and official guidance. [The Standard – 15.2]	End August 2016	To develop non-compliance premises procedure notes as stated above.	In-house team meeting discussion as regards 0-2 star rated premises (poor performers), voluntary closure activities and consistency of approach.
3.4.5 (ii) Carry out food law enforcement in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 15.3]	End August 2016	To develop non-compliance premises procedure notes as stated above.	In-house team meeting discussions as regards the recording of activity against prosecution files and graduated/fast track enforcement etc.
3.5.5 Set up, maintain and implement risk based documented internal monitoring procedures in accordance with Article 8 of Regulation (EC) No. 882/2004 (Official Feed and Food Controls), the Food Law Code of Practice and centrally issued guidance. [The Standard – 19.1]	End August 2016	To build upon the system of file checks already in place making sure there is the necessary x-linkages with associated policies and procedures (as necessary). To include accompanied visits over time.	In-house discussions with Head of Regulatory Services as regards existing file checks and necessary expansion.

3.5.8 Review and update the documented procedure in relation to food and food premises complaints. [The Standard – 8.1]	End August 2016	To continue with the review and development programme of policies and procedures commenced in 2015, including document relaunch and officer familiarisation.	Necessary components already established through in-house team meeting discussions.
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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 policies and procedures.

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

- Derbyshire Dales District Council Food Service Plan 2013/2014
- Draft Performance Plan and Revenue Budget 2014/15
- Derbyshire Dales District Council staff structure
- Draft procedure for Qualifications, Experience and Authorisation of Officers
- Scheme of Delegation – Part 3 Council Constitution
- Delegated officer powers matrix and officer authorisation documentation
- Allocation of Inspections procedure
- Self-Assessment Questionnaire for Low Risk Businesses
- Procedure for High Risk Food Premises
- Aide memoirs and inspection letters (various)
- Advice leaflet – Reducing the Risks of E.coli O157
- Business Cleaning and Cross Contamination Training Initiative
- Food Complaint Record Checklist
- Procedure for Investigating Food Complaints
- Management of Database procedure
- Food Sampling Policy
- Food Sampling Programme 2015/16
- Food Sampling Procedure
- Corporate Enforcement Policy
- Draft Hygiene Improvement Notice Procedure
- Draft Protocol on Food Law Enforcement
- Inter Authority Audit Report
- Minutes of liaison group meetings
- Minutes of team meetings.

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

- Officer training records
- General food premises inspection records
- Approved establishment records
- Food and food premises complaint records
- Records of food sampling
- Internal monitoring records
- Formal enforcement records.

(3) Review of Database records:

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

- Principal Environmental Health Officer
- Divisional Environmental Health Officer
- Environmental Health Officers (x2)
- Environmental Health Technical Officer

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

(5) On site verification check:

A verification visit was made with the Authority's officers to a local food business. The purpose of the visit was to verify the outcome of the last inspection carried out by the Local Authority 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, having particular regard to LA checks on FBO compliance with HACCP based food management systems.

ANNEX C - Glossary

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

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

	electronic system used by local authorities to report their food law enforcement activities to the Food Standards Agency.
Member forum	A local authority forum at which Council Members discuss and make decisions on food law enforcement services.
Metropolitan Authority	A local authority normally associated with a large urban conurbation in which the County and District Council functions are combined.
Risk rating	A system that rates food premises according to risk and determines how frequently those premises should be inspected. For example, high risk premises should be inspected at least every six months.
Safer food, better business	A food safety management system, developed by the Food Standards Agency to help small catering and retail businesses put in place food safety management procedures and comply with food hygiene regulations.
Service Plan	A document produced by a local authority setting out their plans on providing and delivering a food service to the local community.
Trading Standards	The Department within a local authority which carries out, amongst other responsibilities, the enforcement of food standards and feeding stuffs legislation.
Trading Standards Officer (TSO)	Officer employed by the local authority who, amongst other responsibilities, may enforce food standards and feeding stuffs legislation.
Unitary Authority	A local authority in which the County and District Council functions are combined, examples being Metropolitan District/Borough Councils, and London Boroughs. A Unitary Authority's responsibilities will include food hygiene, food standards and feeding stuffs enforcement.