

Updated Action Plan for Doncaster Metropolitan Borough Council

Audit date: 6 - 7 November 2012

Action Plan updated: 23 January 2014 and 25 November 2014

| TO ADDRESS RECOMMENDATION (INCLUDING STANDARD PARAGRAPH) | BY (DATE) | PLANNED IMPROVEMENTS | PROGRESS | ACTION TAKEN TO DATE |
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| 3.1.8(i) Ensure that future Food Service Plans are in full accordance with the Service Planning Guidance in the Framework Agreement to include a review of the delivery of the Plan and an accurate estimate of the financial and staffing resources required to deliver the food law enforcement service. [The Standard – 3.1 and 3.2] | Completed | The Food Plan 2013/2014 will be developed to ensure it reflects the financial and staffing resources required to deliver the service. | Completed | Plan for 2013/2014 completed. |
| 3.1.8(ii) Submit the Plan for approval to the relevant member forum or relevant senior officers. [The Standard – 3.2] | Completed | Submit to relevant portfolio holder following the local government elections and Mayoral elections in 2013. | Completed | The action plan has been approved by a cabinet Member. |
| 3.1.8(iii) Ensure that the Service has a sufficient number of suitably qualified, experienced and competent officers to carry out the work set out in the Food Service Plan. [The Standard – 5.3] | Completed | Undertake budget review and recruit to vacant posts if possible. | Completed | New FTE member of staff (EHP) appointed and started work on the 15/07/2013. Recruitment now completed to vacant food compliance officer post. |

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| 3.1.12 Review and revise the documented food law enforcement procedures having regard to the Food Law Code of Practice and centrally issued guidance, to ensure they reflect operational procedures carried out in practice in relation to all interventions and enforcement activities carried out. [The Standard – 7.4 and 15.2] | Completed | A documented procedure has been drawn up for the service and enforcement of RANs. The inspection procedures for 852 and 853 premises have been reviewed to include the inspection proforma sheets which are being completed, scanned and attached to the inspection worksheets for future reference. | Completed | Comprehensive procedures been developed, reviewed and updated as necessary. |
| 3.1.21(i) Develop, maintain and implement a documented procedure for the authorisation of officers based on their competence. [The Standard – 5.1] | Completed | Develop a documented procedure which reflects the existing systems for authorisation of officers and monitoring and maintaining their professional competence. | Completed | The Training, Competency and Authorisation procedure has been amended to better reflect the process for authorisation of officers. |
| 3.1.21(ii) Officers should have adequate and up to date training, in particular in HACCP evaluation, and also the necessary specialist knowledge for their specific responsibilities, for example, approved establishments. [The Standard – 5.2] | Completed | To be confirmed pending FSA training programme for next year. | Completed | Most officers have undertaken recent HACCP training. Officers will undertake training in approved establishments when this is available. In the meantime, HACCP and factory inspections training will continue to be provided for officers. |
| 3.3.23(i) Ensure that food premises interventions and inspections are carried out at a frequency specified by the Food Law Code of Practice, with a priority given to higher risk establishments in the Authority's area. [The Standard -7.1] | Completed | To be reviewed 30 June pending recruitment to vacant posts. | Completed | Highest risk premises have and continue to be prioritised for interventions. Large number of low risk unrated and overdue establishments have been |

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| | | | | categorised through a triage approach. Updates have been provided to the FSA about progress on these establishments and a strategy for the management of these premises developed and is being implemented. |
| 3.3.23(ii) Establish and implement a procedure for the approach to management of overdue and unrated premises, giving a priority to interventions in higher risk premises in accordance with the Food Law Code of Practice. [The Standard – 7.1 and 7.4] | Completed | Establish procedure by the end of February and implement by the end of March. | Completed | A new procedure has been developed and implemented. |
| 3.3.23(iii) Inspect and approve food establishments in accordance with relevant legislation, the Food Law Code of Practice and Practice Guidance, including the use of appropriate aides-memoire at food premises. [The Standard -7.2] | Completed | All inspections of 852 and 853 premises are being recorded on LGA exemplar inspection proformas. An Internal monitoring procedure has now been adopted to ensure that inspection and approval procedures are being complied with. | Completed | With the adoption and implementation of the aide-memoire and close internal monitoring, there is improved evidence that officers have been inspecting and approving establishments in accordance with the FLCoP and Practice Guidance. |
| 3.3.23(iv) Assess the compliance of food premises to legally prescribed standards to confirm compliance with current legislation, the Food Law Code of Practice and centrally issued guidance. Take | Completed | The premises files relating to the 853/2004 premises audited have been reviewed and any missing information to be now included. Evidence of appropriate | Completed. | As 3.3.23(iii) above. There are still some improvements required on quality of details recorded and HACCP assessments by some |

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| appropriate action on any non-compliances found in accordance with the Authority's enforcement policy. [The Standard -7.3] | | enforcement actions on the approved establishments is now available. An Internal monitoring procedure has now been adopted to ensure that inspection and approval procedures for 852 and 853 premises are being complied with. | | officers. This continues to be monitored by the lead officer. |
| 3.3.23(v) Ensure that records of inspection and key details of business operations are stored in such a way that they are retrievable and provide complete records of HACCP evaluations and business compliance histories. [The Standard -7.5] | Completed | An inspection proforma based on that developed by Basingstoke and Deane is now in use for all premises inspections and is being attached to all inspection worksheets. An LGA exemplar inspection proforma is also now in use to record inspections of 853 premises. An internal monitoring procedure has been adopted to ensure that inspection and approval procedures for 852 and 853 premises are being complied with. | Completed | Retrievability of records has been much improved since the introduction of the aide-memoire and exemplar approved establishment proforma and saving this to database worksheets. |
| 3.3.23(vi) Maintain up to date, accurate and comprehensive records for all establishments including those approved under Regulation (EC) No. 853/2004 in accordance with Annexe 10 of the Food Law Practice Guidance. [The Standard -16.1] | Completed | All approved establishment files have now been reviewed and updated and all future inspections will be recorded on amended LGA exemplar forms for 853 premises. An inspection proforma based on that developed by Basingstoke and Deane is now in use for all 852 premises inspections and is being attached to all inspection | Completed | Up to date and accurate records on interventions and food law enforcement activities are much improved. This continues to be monitored by the lead food officer. |

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| | | worksheets. An internal monitoring procedure has been adopted to ensure that inspection and approval procedures for 852 and 853 premises are being complied with. | | |
| 3.4.9(i) Review and revise the enforcement policy to reflect the food enforcement service and activities. Maintain and implement the policy in accordance with the Food Law Code of Practice and other official guidance. [The Standard - 15.1] | Completed | A draft enforcement policy has been drawn up for the whole of Environmental Protection which will include food enforcement. This is to be approved by the management team with a view to being signed off by an appropriate member forum. | Completed | The existing enforcement policy has been reviewed and updated. A review of the corporate enforcement policy is currently underway. |
| 3.4.9(ii) Develop a documented procedure for the serving and enforcement of remedial action notices. Review and revise other enforcement procedures, where applicable in line with the Food Law Code of Practice and centrally issued guidance. Ensure the documented procedures are implemented for all follow-up and enforcement actions in accordance with the Food Law Code of Practice. [The Standard - 15.2] | Completed | A documented procedure has been drawn up for the service and enforcement of remedial action notices (RAN). Existing prosecution templates and guidance will be drawn together in a revised prosecution procedure, and all procedures will be reviewed to ensure inclusion of E.coli guidance and primary authority referrals. | Completed | Documented procedures have been drawn up for the service and enforcement of RANs and prosecution procedures. |

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| 3.5.8(i) Review, revise and fully implement the internal monitoring procedure to include risk based and proportionate documented internal monitoring in accordance with Article 8 of Regulation (EC) No. 882/2004, the Food Law Code of Practice and centrally issued guidance. [The Standard - 19.1] | Completed | Review, revise and fully implement the internal monitoring procedure to include risk based and proportionate documented internal monitoring. | Completed | The internal monitoring procedure has been revised, updated and is being implemented. |
| 3.5.8(ii) Verify the conformance of the Service with the Standard in the Framework Agreement, the Food Law Code of Practice, relevant centrally issued guidance and the Authority's own documented policies and procedures. [The Standard - 19.2] | Completed | Review, revise and fully implement the internal monitoring procedure to include risk based and proportionate documented internal monitoring. | Completed | Monitoring compliance with conformance of the standard is being carried out and records maintained on the database. |
| 3.5.8(iii) Ensure records of internal monitoring activities are maintained. [The Standard - 19.3] | Completed | The internal monitoring procedure is being reviewed and this will include provision of appropriate records. | Completed | Monitoring compliance with conformance of the standard is being carried out and records maintained on the database. |
| 3.5.11 Revise the documented procedures to include complaints about food establishments including any Primary Authority and referral arrangements. [The Standard - 8.1] | Completed | The procedures relating to food complaints have been updated to include complaints about establishments and primary authority referral arrangements. | Completed | The procedures relating to food complaints have been updated to include complaints about food establishments and primary authority referral arrangements. |