

## ANNEX A - Completed Action Plan for Eden District Council

**Audit date: 16-17 March 2016**

**Completed: 02 February 2017**

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	PROGRESS	ACTION TAKEN TO DATE
<p><b>Recommendation 1 – Recording of inspections</b>                      [The Standard - 7.3 &amp; 7.5]                      Ensure consistent recording of inspection findings by officers, using the appropriate inspection aides- memoire to demonstrate that businesses are assessed against all relevant food hygiene legislation on each occasion and to support the food hygiene rating scores awarded.</p>	<p>Completed</p>	<p>Inspection aide memoires have been reviewed and extended to include:                      improved coverage of specialist process records eg sous vide, vac packing</p> <ul style="list-style-type: none"> <li>• more detail on the food safety management system</li> <li>• more detail on the implementation of the FSA E. coli guidance</li> <li>• improved traceability information</li> <li>• improved cleaning information</li> <li>• summary of justification for FHR rating awarded</li> <li>• summary of improvements implemented where a re-rating visit has been carried out</li> </ul>	<p>Completed</p>	<p>Team meeting held on 5/5/2016 to discuss:</p> <ul style="list-style-type: none"> <li>• the Draft Report and matters raised during the audit that require improvement</li> <li>• Revised inspection aide memoires to ensure more comprehensive information is documented during inspections as per the 'planned improvements' bullet points.</li> <li>• Monitoring programme implemented to ensure compliance</li> </ul>

<p><b>Recommendation 2 – Monitoring of service delivery</b> [The Standard – 19.1 and 19.2]  Increase the monitoring of inspection aides- memoire and letters to businesses to check that;</p> <ul style="list-style-type: none"> <li>• Sufficient evidence is recorded by officers to support the food hygiene rating awarded in every case.</li> <li>• All ratings are consistent with any legal contraventions and recommendations reported. This should include suitable reference to the guidance for officers contained in Section 3 of the Brand Standard.</li> </ul>	<p>Completed</p>	<ul style="list-style-type: none"> <li>• Monitoring procedure revised to increase monitoring of inspections, including the use of the revised aide memoires, the letter and FHR rating checks. Monitoring monthly initially for 3 months, and then quarterly thereafter to ensure sufficient evidence recorded on files to justify FHRs rating awarded</li> <li>• Team meeting held in July 2016 to discuss use of the revised aide memoires, including use of the justification summary for FHR rating. Standing item on Team meeting agendas</li> </ul>	<p>Completed</p>	<ul style="list-style-type: none"> <li>• Monitoring Procedure revised and programme of monitoring introduced, incorporating monthly, quarterly and annual monitoring to cover all aspects of the FHRs, as set out in the in house procedure for the FHRs Consistency Framework. Monitoring results subsequently discussed with Team. Full data cleansing completed.</li> <li>• Worked through three recent inspection examples during the Team meeting on 5/5/2016 as part of an internal consistency exercise; and reinforced the use of the guidance in Section 3 of the Brand Standard with all officers.</li> <li>• Implemented a peer discussion form to record the outcome of officer in house consultations in relation to scoring decisions where appropriate, to promote understanding and consistency</li> <li>• Team participation in FHRs national consistency exercise in July 2016 and SEHO completion of FHRs online training</li> <li>• FHRs standing agenda item at Team meetings</li> <li>• Mobile's policy implemented.</li> </ul>
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