



Report on the Food and Feed Law Enforcement Service

Flintshire County Council
28 October – 1 November 2013

Foreword

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

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

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

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

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

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

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

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1 Introduction

- 1.1 This report records the results of an audit of food hygiene, food standards and feedingstuffs at Flintshire County Council under the headings of the FSA Feed and Food Law Enforcement Standard. It has been made publicly available on the Agency's website at www.food.gov.uk/enforcement/auditandmonitoring/auditreports

Reason for the Audit

- 1.2 The power to set standards, monitor and audit local authority food and feed law enforcement services was conferred on the FSA by the Food Standards Act 1999 and the Official Feed and Food Controls (Wales) Regulations 2009. The audit of the food and feed service at Flintshire County Council was undertaken under section 12(4) of the Act and Regulation 7 of the Regulations.
- 1.3 Regulation (EC) No. 882/2004 on official controls performed to ensure the verification of compliance with feed and food law, includes a requirement for competent authorities to carry out internal audits or to have external audits carried out. The purpose of these audits is to verify whether official controls relating to feed and food law are effectively implemented. To fulfil this requirement, the FSA, as the central competent authority for feed and food law in the UK has established external audit arrangements. In developing these, the Agency has taken account of the European Commission guidance on how such audits should be conducted.¹
- 1.4 The authority was audited as part of a three year programme (2013 – 2016) of full audits of the 22 local authorities in Wales.

Scope of the Audit

- 1.5 The audit covered Flintshire's arrangements for the delivery of food hygiene, food standards and feed law enforcement services. The on-site

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).

element of the audit took place at the authority's offices in Mold on 28 October – 1 November 2013. The audit included verification visits at food and feed businesses to assess the effectiveness of official controls implemented by the authority, and more specifically, the checks carried out by the authority's officers, to verify food and feed business operator (FBO/FeBO) compliance with legislative requirements. Port Health was not considered within the scope of the audit.

- 1.6 The audit also afforded the opportunity for discussion with officers involved in food and feed law enforcement with the aim of exploring key issues and gaining opinions to inform Agency policy.
- 1.7 The audit assessed the authority's conformance against "The Standard". The Standard was adopted by the FSA Board on 21st September 2000 (and was subject to its fifth amendment in April 2010), and forms part of the Agency's Framework Agreement with local authorities. The Framework Agreement can be found on the Agency's website at www.food.gov.uk/enforcement/enforcework/frameagree.

Background

- 1.8 Flintshire County Council is a unitary authority located in the north-eastern corner of Wales. Covering an area of 43,464 hectares, it is bordered by Denbighshire, Wrexham and the English county of Cheshire. The five major settlements are Mold, Flint, Buckley, Holywell and Deeside.
- 1.9 Flintshire's population of 152,500 is subject to small seasonal fluctuations due to the influx of tourists.
- 1.10 Flintshire was traditionally an industrial economy with coal, steel and textiles forming the mainstay. The decline of these industries in the early 1980s led to unemployment levels of up to 20 per cent. There has, however, been a dramatic recovery with the development of indigenous, small and medium sized businesses alongside inward investment. There are a number of industrial estates on which many manufacturers, including food manufacturers are located as well as the headquarters for a large national food retailer.

- 1.11 The coastal edge of Flintshire abuts the Dee Estuary which has three cockle beds and a mussel bed that fall within the authority's jurisdiction. These place significant demands on the food safety service, particularly during the six month cockle harvesting season. There is also a small port at Mostyn in respect of which the authority's food safety service has responsibility to issue Ship Sanitation Certificates and carry out food hygiene inspections on ships.
- 1.12 Flintshire as a whole has low levels of deprivation. However, there are pockets of deprivation with 4% of its local areas in the 10% most deprived in Wales, as determined by the 2011 Welsh Index of Multiple Deprivation.
- 1.13 Food and feed law enforcement was carried out by officers in the authority's Public Protection Service within the Environment Department. The delivery of food safety, standards and feedingstuffs enforcement services was overseen by the Health Protection Manager, whilst day to day management of the services was the responsibility of the Team Leader (Food Safety and Standards) and in respect of feedingstuffs, the Team Leader (Animal Health and Health Promotion).
- 1.14 Officers and support staff responsible for food hygiene, food standards and feed were based at County Hall in Mold. Services were available 08:30 – 17:00 Monday to Friday.
- 1.15 In 2013/14 the authority reported that there were 1,536 food establishments in Flintshire.
- 1.16 The Food Service Plan 2013/14 stated that the authority had allocated the following staff resources to the delivery of food and feedingstuffs enforcement:

5.5 full-time equivalent (FTE) Environmental Health Officers;
3 FTE Food Safety Officers;
1 FTE Trading Standards Officer;
0.4 FTE Trading Standards Enforcement Officer;
0.1 FTE Team Leader Animal Health & Health Promotion;
0.2 FTE Animal Health Enforcement Officer;
1 FTE Administration Officer

- 1.17 Expenditure on food safety and standards in 2012/13 was reported to have been £453,073 including staffing, travel, sampling and training, with a comparable amount planned to be spent in 2013/14.
- 1.18 The authority had been participating in the National Food Hygiene Rating Scheme which was launched in Wales in October 2010. At the time of the audit, the food hygiene ratings of 829 food establishments in Flintshire were available to the public on the National Food Hygiene Rating Scheme website.

2 Executive Summary

- 2.1 Flintshire County Council was audited as part of a three year rolling programme of all 22 local authority food and feed law enforcement services in Wales. Food and feed law enforcement was provided by the authority's Public Protection Service. The Health Protection Manager was responsible for overseeing the delivery of these services. Day to day management of food hygiene and food standards was the responsibility of the Team Leader (Food Hygiene and Food Standards) whilst day to day management of the authority's feed service was the responsibility of the Team Leader (Animal Health and Health Promotion).
- 2.2 A Food Service Plan 2013/1014 had been developed setting out the authority's plans for delivering food hygiene, food standards and feed services. The Service Plan was supplemented with a Food Standards/Food Safety Merger Action Plan and a Feedingstuffs Action Plan.
- 2.3 The Food Standards/Food Safety Merger Action Plan was scheduled for completion in March 2014. At the time of the audit good progress had been made and the authority was on course to complete the actions to target.
- 2.4 The authority demonstrated that it was taking a risk- based approach to delivering food hygiene and food standards interventions and had been proactive in assisting food businesses to comply with the law.
- 2.5 In respect of feedingstuffs enforcement the authority had focused its efforts in ensuring the accuracy of its feed database. At the time of the audit this work was continuing. There had been insufficient progress in delivering feed interventions. The Feedingstuffs Action Plan, setting out tasks to be delivered between October 2013 and March 2014, will assist the authority in meeting the requirements of the Feed Law Enforcement Code of Practice.

2.6 The Authority's Strengths

Documented Policies and Procedures for food hygiene and food standards

The authority had developed comprehensive policies and procedures which were accessible to staff and subject to regular review.

Primary Authority Scheme and Home Authority Principle

Participation in the Primary Authority Scheme and the provision of Home Authority advice demonstrated that the authority was committed to supporting local businesses.

Food Hygiene, Food Standards and Feed Advice to Business

The authority had been proactive in providing assistance to businesses to help them comply with the law.

Control and Investigation of Outbreaks and Food Related Infectious Disease

Comprehensive work procedures had been developed which were being implemented. Detailed records of investigations were being maintained.

Internal Monitoring Food Hygiene and Food Standards

Arrangements for internal monitoring of the authority's food hygiene and food standards services had been documented and were being implemented. The Team Leader was able to demonstrate that officers had been provided with detailed feedback on their work.

Food Safety and Standards Promotion

The authority had delivered a number of initiatives with the aim of promoting food safety and standards. These included food hygiene training, the provision of advice leaflets, regular articles in the local press and in the bi-annual newsletter for local residents.

2.7 The Authority's Key Areas for Improvement

Feed Organisation and Management

Arrangements for delivering the authority's feed service were included in the Food Service Plan. However, not all elements of the service planning guidance had been addressed. The activities planned fell short of those

required for the authority to demonstrate that it was providing a feed service that meets the requirements set out in the Feed Law Enforcement Code of Practice. Whilst the Feedingstuffs Action Plan provided some assurance that improvements to the service would be made, no estimate of the resources required to deliver the Action Plan against those that were available had been provided.

Food Hygiene, Food Standards and Feed Intervention Frequency

The authority was not carrying out feed interventions at the minimum frequencies required in the Codes of Practice. Further, food hygiene and standards interventions at lower-risk establishments were not always carried out at the required frequencies. Interventions carried out at the minimum frequency ensure that risks associated with food and feed businesses are identified and followed up in a timely manner.

Food Standards and Feed Interventions

Some food and feed establishments had been risk rated without being visited. The risk ratings had been based on the activities reported by food/feed business operators. Further, where food standards inspections had taken place, these had been largely announced rather than unannounced. These issues had been identified following internal monitoring. Delivery of the authority's Food Standards/Food Safety Merger Action Plan and the Feedingstuffs Action Plan will ensure inspections are carried out in accordance with the Food and Feed Law Codes of Practice.

Feed Records and Intervention/Inspection Reports

There was insufficient information available on feed establishment files to enable an officer who had not previously visited to establish its full compliance history and ensure a graduated approach to enforcement. Further, it was not always possible to identify whether feed business operators had been provided with reports following inspections.

Audit Findings

3 Organisation and Management

Strategic Framework, Policy and Service Planning

- 3.1 The authority operated a Cabinet style of local government with a Constitution that set out the authority's decision making arrangements. Under the Constitution, decisions on certain specific matters had been delegated to officers.
- 3.2 A 'Food Service Plan 2013/14' ('the Service Plan') had been developed which included some limited information about food law enforcement. The Service Plan had been approved by the relevant Cabinet Member in June 2013 and was available on the authority's website.
- 3.3 The contribution of the Food Service to the authority's Community Strategy and Improvement Plan had been acknowledged in the Service Plan, together with links to the Environment Directorate Plan and the Public Protection Service Plan.
- 3.4 The Service Plan set out the aims and objectives of the food service. The aims were "to promote, through education and enforcement, the sale and/or production of food which is fit and without risk to health and to prevent and control the spread of foodborne illness through education and enforcement."
- 3.5 The objectives of the service were:
- "Providing a complete and holistic food law enforcement service covering the areas of food hygiene and safety, food standards and animal feeding stuffs in accordance with relevant food legislation and Codes of Practice, thereby fulfilling statutory obligations.
 - Providing a responsive service to demand driven elements such as food safety incidents, outbreaks of food related infectious disease, complaints and request for advice from both businesses and members of the public, in accordance with the National and locally defined performance indicators, relevant Codes of Practice, plans and protocols.

- Assisting businesses to comply with all relevant legislation by using a balance of techniques and approaches in order to ensure the safety and well-being of the public and of the environment in line with the Public Protection Enforcement Policy.
- Maintaining an up-to-date database of all food establishments in the County so that resources can be effectively defined and utilised to meet statutory, national and locally defined targets of inspection, sampling, specific initiatives and tasks set by the FSA, other agencies, or based on local need.
- Providing an open and transparent Food Service with clear lines of communication for all service users.”

3.6 The Service Plan included the risk profiles of food businesses in Flintshire for food hygiene and food standards together with the number of planned inspections due for 2013/14. In respect of feed, it was reported that there was one high-risk establishment and 238 medium-risk establishments. A total of 24 establishments (10%) had been targeted for inspection.

Food hygiene risk ratings:

Risk category	Total premises	Inspections Due
A	4	4
B	65	64
C	589	335
D	255	210
E	499	383
Total	1,412	996

Food standards risk ratings:

Risk category	Total premises	Inspections Due
High	10	10
Medium	472	334
Low	819	495
Total	1,301	839

- 3.7 Food establishments categorised as A for food hygiene should be subject to interventions at a minimum frequency of six monthly and category B establishments 12 monthly. Assuming the risk ratings above remain at A and B, the number of category A and B interventions due in 2013/14 was 8 and 65 respectively.
- 3.8 In 2013/14 the authority planned to carry out all food hygiene interventions that were due at higher-risk (category A-C) establishments and 30% of those that were due at category D and E establishments. There was a plan in place to ensure all overdue food hygiene interventions at lower-risk food establishments would be completed in three years. In respect of food standards, inspections at 100% of high-risk establishments and 30% of medium-risk establishments were planned.
- 3.9 The inspection of new businesses and revisits to all premises receiving a National Food Hygiene Rating Scheme score of two or lower had been identified as key objectives for 2013/14, however an estimate of the resources required to deliver these had not been identified.
- 3.10 It was noted that there were 42 food manufacturers and packers in Flintshire ranging from cooked meat and ready meal manufacturers with national distribution to an on-farm milk pasteuriser supplying the local area. The number of product specific premises in the authority's area had not been included in the Service Plan contrary to the requirements of the Food Law Code of Practice.
- 3.11 Arrangements for food and feed sampling were detailed in the Service Plan. The authority belongs to the North West Food Liaison Group and the Welsh Food Microbiological Forum. Its sampling programme had been developed having regard to the priorities identified by these groups as well as priorities identified by the FSA and local needs.
- 3.12 The authority was committed to improving relationships with local businesses, providing them with an effective and responsive advice and assistance service. This commitment was demonstrated through its participation in the Primary and Home Authority Schemes.
- 3.13 Arrangements for internal monitoring '*quality assessment*' were set out in the Food Service Plan and included the arrangements for ensuring

consistency in service delivery. Internal monitoring arrangements for the feed service had not been included.

- 3.14 The Service Plan provided details of the staff available for food and feed enforcement but did not identify the actual resources required to deliver the service.
- 3.15 Whilst the cost of providing the food hygiene and standards service had been provided in the Service Plan, this information was not provided for feed.
- 3.16 The Service Plan included a review of performance against 2012/13 performance indicators and details of service achievements. Areas for service improvement were also highlighted which included:
- Increasing the number of food hygiene inspections carried out on D and E rated premises to achieve 30% in 2013/14.
 - Increasing the number of medium risk food standards inspections to achieve 30% in 2013/14.
 - Promoting the 'Food Safety on a Budget' handbook to parent and toddler groups.
 - Developing the Dee Estuary collaboration to improve enforcement in relation to shellfish gathering.
 - Risk rating new businesses to identify those that should be prioritised for inspection.
- 3.17 In addition to the Service Plan, the authority had developed a Food Standards/Food Safety Merger Action Plan and a Feedingstuffs Action Plan. Progress in delivering these Action Plans was overseen by the Health Protection Manager.

Recommendations

3.18 The authority should:

- (i) Ensure future Food and Feed Service Plans are developed in accordance with the Service Planning Guidance in the Framework Agreement. Detailed information on the authority's feed service should be provided together with a robust analysis of the resources required to deliver the food and feed services against those available. [The Standard – 3.1]
- (ii) Address any variance in meeting the feed service delivery plan in subsequent Service Plans. [The Standard-3.3]

4 Review and Updating of Documented Policies and Procedures

- 4.1 The authority had formal document control procedures in place for food safety, standards and feed. Controlled documents included policies, procedures and other working documents, for example service plans, inspection plans and internal monitoring schedules.
- 4.2 Controlled documents had been password protected and stored electronically on a shared drive. Hard copies were also available in Procedures Manuals stored in the Food Safety and Trading Standards offices. It was the responsibility of Team Leaders to develop new procedures, update existing procedures and ensure the removal of superseded documents.
- 4.3 The authority had developed a range of documented policies and procedures in connection with food and feed law enforcement. Some of these had been based on templates produced collaboratively by the Wales Heads of Environmental Health (WHeEH) Food Safety Technical Panel, others were specific to Flintshire. A commitment had been provided by the authority to review internally produced policies and procedures at least every 5 years and whenever there were changes to legislation/guidance.
- 4.4 It was evident that policies and procedures had been subject to regular review. No superseded documents were found to be in place during the audit.

5 Authorised Officers

- 5.1 The authority's scheme of delegation had been set out in its Constitution and provided the Interim Public Protection Manager with delegated powers to authorise officers. There was a generic delegation of powers to all Corporate Directors and Heads of Service, and the authority was able to provide evidence that the scheme had been approved by full Council in 2009 and updated in 2013.
- 5.2 The authority had a documented competency based procedure for the authorisation of food and feed officers. The authority also maintained a matrix setting out the competencies required of food and feed officers.
- 5.3 A staff performance appraisal system was in place which informed officer learning and development plans. Auditors found these plans to be focused, incorporating operational priorities and key individual training needs. The authority had training procedures for food safety, food standards and feed officers.
- 5.4 The authority had appointed a lead officer for food hygiene, communicable disease and food standards and a lead officer for feed hygiene. The lead officers had the requisite specialist knowledge, qualifications and training.
- 5.5 Auditors were advised that four officers currently seconded out of the food safety team had retained their full authorisations for food hygiene and standards work. Auditors considered this satisfactory, subject to the application of the provisions of the Food Law Code of Practice and the authority's own procedures on authorisation and training.
- 5.6 The authority employed 17 officers across the food hygiene, food standards and feed hygiene services. The authorisations, competency assessments, qualification and training records of ten officers involved in delivering official controls during the previous two years were examined.
- 5.7 All officers checked provided evidence of qualifications consistent with their authorisations. Food standards consistency training was programmed for all food enforcement staff for the 2013/14 period as part of the authority's strategy to use hygiene enforcement officers to carry out lower-risk food standards work.

- 5.8 The authority had not authorised officers to carry out duties under a number of relevant statutory instruments. Details of these omissions were provided to the Health Protection Manager.
- 5.9 The following issues relating to authorisations were also identified:
- No food standards or feed officers had been authorised under the Trade in Animal & Related Products (Wales) Regulations 2011 or the Animal By-Products (Enforcement) (Wales) Regulations 2011. It was noted however that the Team Leader (Food Hygiene and Food Standards) had been authorised under this legislation.
 - Four food hygiene officers checked had not been authorised under regulation 14 of the Food Hygiene (Wales) Regulations 2006, leaving them with no powers of entry under these regulations.
 - Minor amendments were required to officer authorisations in respect of the Official Feed & Food Control (Wales) Regulations and the Contaminants in Food (Wales) Regulations.
- 5.10 Auditors were able to verify from the records available that all officers checked had received the minimum 10 hours ongoing training, including, where appropriate, consistency training on the application of food hygiene risk ratings and the Agency's training on the control of cross contamination. However, in respect of four officers, records suggested that further training had been received in respect of which certificates were not available.
- 5.11 Officer capacity to deliver the range of official feed controls in accordance with the Feed Law Enforcement Code of Practice was discussed with managers and the need to identify the resources required against those available in accordance with recommendation 3.18(i) was identified as a priority.

Recommendations

- 5.12 The authority should:

- (i) Review and update officer authorisations to ensure they are appropriately authorised under current relevant legislation in accordance with their qualifications, training, experience and the relevant Code of Practice. [The Standard – 5.3]
- (ii) Maintain training records in accordance with the relevant Codes of Practice. [The Standard – 5.5]

6 Facilities and Equipment

- 6.1 The authority had the necessary facilities and equipment required for the effective delivery of the food hygiene and food standards services, and for undertaking animal feed sampling activities, which were appropriately stored and accessible to relevant officers.
- 6.2 A procedure for equipment maintenance and calibration had been developed to ensure equipment such as thermometers were properly maintained, calibrated as necessary and removed from service when found to be defective. The procedure contained most of the required information however, the calibration tolerance was not specified.
- 6.3 Where appropriate, equipment allocated to authorised officers was calibrated on an annual basis with calibration records being maintained and faulty equipment removed from use. Officers had been issued with dual use infra-red / probe devices and individual probe thermometers. A reference thermometer and self-calibration test caps were being used for calibration.
- 6.4 Records relating to the reference thermometer, the 63°C test cap, the data logger and all infra-red and individual probe thermometers were examined. Generally, temperature monitoring equipment used for enforcement purposes had valid calibration certificates and appropriate calibration records had been kept. A calibration certificate was not available for the data logger, but auditors were advised that this device was new and covered within the manufacturer's guarantee period for accuracy.
- 6.5 All infra-red and probe devices were found to be within the temperature tolerance referred to in centrally issued guidance. An amendment was required to the calibration procedure to reflect the requirements of the Food Law Code of Practice in respect of calibration tolerances.
- 6.6 A procedure was available for the maintenance and calibration of weighing equipment used when sampling feed. Testing was specified prior to sampling, on site and upon return to the office. As no feed sampling had been undertaken, no feed sampling weighing equipment records were audited.

- 6.7 The authority's food and feed databases were capable of providing the information required by the FSA. A number of checks were carried out during the audit which confirmed that databases were generally operated in such a way to enable accurate reports to be generated. The practice of coding food standards interventions other than inspections as inspections had been identified as a result of internal monitoring by the Team Leader and corrective action taken.
- 6.8 The food and feed databases together with other electronic documents used in connection with food and feed law enforcement services were subject to regular backup to prevent the loss of data.
- 6.9 The authority had an Information Security Policy Statement to ensure business continuity and minimise damage by preventing or reducing the impact of security incidents. In respect of food and feed law enforcement services, officers had been provided with individual passwords, access for entering and deleting data had been restricted, documented data input protocols had been developed and staff had been trained.

Recommendation

- 6.10 The authority should:
- (i) Review, amend and implement the documented procedure for the maintenance and calibration of equipment. [The Standard - 6.2]

7 Food and Feedingstuffs Establishments Interventions and Inspections

Food Hygiene

- 7.1 The authority's Food Service Plan for 2013-14 stated that there were 1,536 food premises in its area, consisting of approximately 1,009 caterers, with the remainder being made up predominately of retailers.
- 7.2 In 2012/13 the authority had reported through LAEMS that 100% of its higher-risk food businesses had been inspected, i.e. those rated A-C, and 58.76% of A-E rated food businesses due to be inspected had been inspected. It was evident from this data that the authority had adopted a risk-based approach to managing its inspection programme. During this period 88.64% of food businesses on the authority's database were 'broadly compliant' with food hygiene law (excluding unrated businesses and those outside the scope of the risk rating scheme). This represented a reduction of approximately 2.1% from 90.74% of businesses reported as 'broadly compliant' in the previous year.
- 7.3 The authority had developed a broad range of documented procedures aimed at establishing a uniform approach to the range of food hygiene interventions undertaken. These procedures covered food inspections, revisits, alternative enforcement strategies and approval of product specific establishments, and were supplemented by administration procedures. An examination of each document confirmed that reference had been made to relevant legislation and that they were in accordance the Food Law Code of Practice and relevant centrally issued guidance.
- 7.4 At the time of the audit there were a total of 542 premises overdue for inspection by more than 28 days, of which 21 premises were higher-risk. These higher-risk premises had been due for inspection in the two months preceding the audit. The remainder of the overdue inspections related to lower-risk premises.
- 7.5 The Team Leader for Food Safety and Food Standards informed auditors that the authority had introduced a system for proactively managing interventions at new businesses. The system involved generating a monthly report to identify new businesses on the authority's database, and subsequently making telephone contact with the

registered operator in order to identify and prioritise those that posed the highest risk for inspection.

- 7.6 The authority had developed Food Hygiene Inspection Sheets for Catering and Retail Premises, and for Non-Catering establishments, which had been reviewed in September 2013 against centrally issued guidance. A general inspection aide-memoire had also been produced for approved premises, and for manufacturers that were not subject to approval.
- 7.7 During the audit an examination of records relating to 10 food establishments was undertaken. Their inspection histories confirmed that in the main they had been inspected at the frequencies required by the Food Law Code of Practice. However, in recent years, three premises had not been inspected at the required frequencies, two of which were higher-risk. The higher-risk premises had been inspected more than five months after their due dates, whilst a category D rated premises remained overdue for inspection for more than five years. The Food Law Code of Practice requires that interventions take place within 28 days of their due date.
- 7.8 Inspection records were available and legible for the 10 food premises audited. The information recorded by officers on inspection forms was in general sufficiently detailed to demonstrate that an assessment of compliance with legal requirements, including procedures based on Hazard Analysis Critical Control Points (HACCP) had been undertaken, and that discussions relating to monitoring of Critical Control Points (CCPs) had taken place. Information was also available to demonstrate that consideration was being given to imported foods, but auditors were unable to verify that where relevant, checks on the source of health/ID markings on raw materials had taken place.
- 7.9 In six cases, records confirmed that officers had undertaken an appropriate assessment of the effectiveness of cross contamination controls. In two cases, the operations within the establishments did not involve the handling of both raw and ready to eat foods and in the remaining two cases, records were insufficient to demonstrate that officers had fully considered business compliance in protecting food against cross contamination risks.

- 7.10 The risk ratings applied to food establishments were consistent with the inspection findings in all but one case, where on the basis of the information available, an incorrect score in relation to consumers at risk, had been applied. Nonetheless, where this incorrect score had been applied there would have been no change in the overall risk category and frequency of intervention.
- 7.11 The procedure for Food Hygiene Revisits stated that, “generally, any food business assessed as not being ‘broadly compliant’ with food hygiene legislation will be subject to a revisit.” In the 10 cases audited, revisits were not required in four premises. Where revisits were required, evidence confirmed that these had taken place in five out of six cases, although two of these revisits were not carried out within the specified timescales.
- 7.12 In general, appropriate enforcement action, in accordance with the authority’s Enforcement Policy had been taken by officers in all cases where non-compliances had been identified.
- 7.13 The records of 10 approved establishments were examined. Approvals had generally been granted in a timely and appropriate manner, although, auditors noted that application forms were unavailable in four cases. In one case, an establishment had been issued with two approval numbers and in another case a conditional approval was issued but there was no record of this being extended following an inspection within three months. A full approval appeared to have been determined, however, due to delays in issuing documents and errors with dates, the process of approval was not in accordance with the Food Law Code of Practice and centrally issued guidance. A full approval notification was issued to correct these errors four months after full approval appeared to have been granted.
- 7.14 The inspection histories confirmed that eight out of the 10 approved establishments had not been inspected at the frequencies required by the Food Law Code of Practice. The establishments which had not been inspected at the required frequencies were category B, C and E rated. Two of these were recently overdue and seven had excessive gaps between previous inspections.

- 7.15 Eight of the 10 approved establishments had been risk rated correctly at the latest inspection although the rating errors on the remaining two would not have altered the overall risk rating category at the time. In one case where a rating was lowered, there was no explanation or managerial sign-off recorded on the file, contrary to the Food Law Code of Practice.
- 7.16 Appropriate product specific inspection forms had been used by officers in conducting inspections of approved establishments in half of the cases. In the other half, notes were recorded on lined paper. In all cases the scope and confirmation of operations were captured during the inspection. However, information relating to the assessment of critical control points was insufficient in three cases. On four files there was sufficient information to demonstrate that an effective assessment of staff training had been undertaken but in two cases there was none. In the remaining four cases, some information was present but this was incomplete. In general, there was insufficient information to indicate that health markings were being checked on incoming ingredients or outgoing products.
- 7.17 The authority had produced an Alternative Enforcement Strategy (AES) for category E premises that had a stated aim, 'to minimise the number of visits made to low-risk food businesses'. The approach contained within the strategy was sufficient to capture all the information required to assess whether an intervention visit was required. However, auditors noted that one of the objectives listed in the strategy was not consistent with the requirements of the Food Law Code of Practice, namely that, 'the team will aim to undertake an alternative intervention in at least 20% of the total number of category E premises annually that are due for inspection'. The Food Law Code of Practice requires that, if not included in the planned inspection programme, all premises rated as low-risk must be subject to an alternative enforcement strategy at least once every three years.
- 7.18 Although the authority had an AES, it had not been implemented. The Team Leader for Food Safety and Food Standards advised auditors that the authority was not proposing to fully implement the strategy until all low-risk businesses included in the scope of the Food Hygiene Rating Scheme (FHRS) had been inspected and risk rated.

Recommendations

- 7.19 The authority should:
- (i) Ensure that all food hygiene interventions/inspections are carried out at the minimum frequency specified by the Food Law Code of Practice. [The Standard -7.1]
 - (ii) Carry out hygiene interventions/inspections of lower-risk premises in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard -7.2]
 - (iii) Ensure that observations made and/or data obtained in the course of an inspection is recorded in a timely manner. [The Standard – 7.5]

Verification Visits to Food Premises

- 7.20 During the audit, verification visits were made to two food establishments with authorised officers of the authority who had carried out the last food hygiene inspections. The main objective of the visits was to consider the effectiveness of the authority's assessment of food business compliance with food law requirements.
- 7.21 The officers were knowledgeable about the businesses and demonstrated an appropriate understanding of the food safety risks associated with the activities at each premises. The officers demonstrated that they had carried out a thorough inspection and had appropriately assessed compliance with legal requirements and centrally issued guidance, and were offering helpful advice to food business operators.
- 7.22 The findings of the previous inspection had been appropriately recorded and records held on file reflected the conditions observed at the premises. Where it had been required, there was evidence that appropriate follow-up action had been undertaken.

Food Standards

- 7.23 The authority had developed a food standards policy which required officers to carry out unannounced inspections in accordance with the Food Law Code of Practice. The policy also specified that food businesses should only be risk rated following an inspection, partial inspection or audit.
- 7.24 A range of documented food standards interventions procedures had been developed. However, the authority did not have a food standards revisit policy.
- 7.25 The authority did not operate an Alternative Enforcement Strategy for food standards, favouring an approach based on inspection visits.
- 7.26 Auditors noted that there was an action plan in place to increase the authority's capacity to carry out food standards official controls largely within existing resources.
- 7.27 During the audit an examination of records relating to nine food establishments was undertaken. Two of these were discounted from further checks as one had been incorrectly coded as having been subject to a full inspection and the other was a packaging business not a food business. An intervention at a further establishment had been incorrectly coded as an inspection despite several unsuccessful attempts by officers to access the establishment. As the establishment had been registered since 2011 it remained subject to further checks.
- 7.28 The records supported the information in the Service Plan which indicated that the authority was prioritising interventions at high-risk food establishments. However, interventions were overdue at five of the seven food establishments. One of these had previously been rated as high-risk (two months overdue), two as medium-risk (three and three and half months overdue) and one low-risk (18 months overdue). One of the establishments had not previously been risk rated.
- 7.29 Inspections had been announced, contrary to the Food Code of Practice and the authority's own intervention procedure. Although the authority's procedure permitted announced interventions in exceptional

circumstances, the authority had not documented the reasons for announcing inspections at the premises checked.

- 7.30 Food standards risk ratings had generally been awarded in accordance with the Food Law Code of Practice. However, in three cases, food establishments had been risk rated without being visited.
- 7.31 Observations made during inspections of high-risk food establishments had been suitably recorded. The records relating to three of the five medium and low-risk businesses examined were not to the same standard, with a failure in every case to record key information required to determine the extent of assessment with legal requirements, including the size and scale of the business, an assessment of any documented quality management system, verification of business traceability controls and product recall/withdrawal arrangements.
- 7.32 Failure to record this information in a timely manner limits the business information available to the next inspecting officer, potentially compromising an informed, graduated and risk-based approach to enforcement.

Recommendations

- 7.33 The authority should:
- (i) Ensure all food standards interventions are carried out at a frequency not less than that determined under the intervention rating scheme set out in the Food Law Code of Practice and assess the compliance of establishments and systems to the legally prescribed standards. [The Standard -7.1 & 7.3]
 - (ii) Carry out interventions/inspections and register establishments in accordance with the relevant legislation, Codes of Practice, and centrally issued guidance. [The Standard -7.2]
 - (iii) Set up, maintain and implement a documented food standards revisit

procedure. [The Standard 7.4]

- (iv) Record observations made and/or data obtained in the course of an inspection/intervention in a timely manner to prevent loss of relevant information. [The Standard 7.5]

Verification Visits

- 7.34 Verification visits to two food manufacturers were carried out with food standards officers. The officers both demonstrated a good level of knowledge of the businesses and the information gained by auditors during the visits supported the conclusions reached following the file checks carried out.

Feed

- 7.35 The authority's Food Service Plan for 2013-2014 stated that there were a total of 239 feed establishments in its area subject to feed interventions; one high-risk and 238 medium-risk. The authority had reported in pre-audit information that there were 243 feed establishments of which 16 had received a feed premises risk rating.
- 7.36 It was stated in the Service Plan that 24 medium-risk inspections would be undertaken in 2013/4. There was no commitment to inspect the high-risk establishment. Notwithstanding the fact that there were only 16 medium-risk establishments on the database, the programme of 24 planned inspections for 2013/14 was insufficient to comply with the Feed Law Enforcement Code of Practice.
- 7.37 According to the list of feed establishments provided prior to the audit, at least 119 were overdue for an inspection and 227 had not been risk rated. In respect of the files selected for audit, inspection of the high-risk establishment was overdue by 2½ years and five medium-risk establishments were overdue for inspection by periods ranging between 5 months and 7 years.
- 7.38 Auditors noted that some recent progress has been made to improve the accuracy of the feed database. In early 2013 considerable effort was made to encourage farms to register. This initiative has resulted in

further establishments being identified and an increase in the number of establishments on the database since the Service Plan was written. The responses provided to a mailshot had also provided information about the nature of feed activities carried out at these newly registered premises. This will assist in developing a risk-based approach and identifying those unrated businesses which should be prioritised for inspection. Auditors identified a number of unrated premises registered as feed manufacturers (Codes R1 –R4) which should be prioritised for inspection.

- 7.39 In 2012/13 the authority reported in its annual feed return to the FSA that no feed inspections had been carried out. According to the database, two feed inspections had been carried out during that period.
- 7.40 The authority had adopted a procedure for feed inspections that was generally in accordance with the Feed Law Enforcement Code of Practice. However, the procedure permitted risk ratings to be changed following information obtained from complaints or sampling results. It should be noted that risk ratings may only be changed following a primary inspection in accordance with the Feed Law Enforcement Code of Practice.
- 7.41 The procedure referred to the use of the Feed Business Premises Report for recording inspections. This document, contained within Annex 6 of the Feed Law Enforcement Code of Practice is a list of matters which need to be included in reports to feed businesses and may not be suitable for capturing all information required during inspections. The FSA has developed a suite of forms for recording information gathered during feed business inspections. Whether these forms or any other forms are to be used, they should be suitable to gather sufficient information to inform a graduated approach to enforcement and the procedure should make reference to the appropriate forms.
- 7.42 No policy or procedure had been documented on the use of Alternative Enforcement Strategies in feed establishments or for undertaking revisits or secondary visits to check on compliance where contraventions have been identified.
- 7.43 File checks on eight establishments which had been subject to inspection within the last six years were carried out. A further two

establishments selected for file checks had been mis-coded as no inspections had taken place. It was established that one of these establishments had never produced feed.

- 7.44 All 10 feed establishments had been registered, including the premises that had never produced feed and three supermarkets. In six cases the date of receipt of the registration form was available. Auditors were advised that none of the supermarkets supplied waste food for feed and that the inspections related to the retail sale of pet food only. This activity is exempt from registration under the Feed Law Enforcement Code of Practice. One other establishment, a brewer producing grains for a local farm had been incorrectly registered as a general feed supplier rather than a supplier of co-products of the food industry.
- 7.45 Records of the eight feed establishments audited confirmed that inspections had been carried out by suitably qualified and authorised officers. Seven had been correctly risk rated. The exception was the brewer in which the additional score would have increased the risk rating from low to medium-risk. Generally, inspections had not been carried out at the required frequencies.
- 7.46 An inspection record was available in respect of only one of the inspections where the FSA's inspection form had been used. The inspection information available in respect of the remaining seven establishments was not sufficient to assist in informing subsequent inspections, a graduated and consistent approach to enforcement and effective internal monitoring.
- 7.47 It was not generally possible to confirm or assess the scope of inspections or that appropriate inspections had been carried out in all but one case due to lack of sufficiently detailed records maintained by officers. The absence of records other than limited information on the database meant that seven of the eight files examined did not demonstrate capture of the size and scale or type of business, information on HACCP, training, composition, labelling, presentation, suppliers or traceability.
- 7.48 None of the establishments had been subject to follow-up action. However, apart from one case, where action was not required, it was not

possible to determine from the records available whether follow-up action was required.

Recommendations

- 7.49 The authority should:
- (i) Ensure that feed establishment interventions and inspections are carried out at the frequency specified by the Feed Law Enforcement Code of Practice. [The Standard - 7.1]
 - (ii) Carry out inspections / interventions and approve or register feed establishments in accordance with relevant legislation and the Feed Law Enforcement Code of Practice and centrally issued guidance. [The Standard - 7.2]
 - (iii) Set up, maintain and implement documented procedures for AES and revisits and revise the feed inspections procedure relating to use of appropriate inspection forms and risk rating. [The Standard – 7.4]
 - (iv) Record observations and data obtained from interventions in a timely manner to prevent its loss and ensure contemporaneous records are legible and retrievable. [The Standard – 7.5]

Feed Establishment Verification Visit

7.50 During the audit, a verification visit was made to a feed business with an authorised officer of the authority, who had carried out the last feed inspection of the establishment. The aim of the visit was to assess the effectiveness of the authority's assessment of feed business compliance with feed law requirements.

7.51 It was clear that the officer was competent to carry out a thorough feed inspection and demonstrated sufficient knowledge about the premises and the operations carried out. The visit highlighted an issue identified by the file check relating to the addition of a registered feed business operator (FeBO) but no re-registration process had been undertaken. No

contemporaneous inspections notes were available so it was not possible to confirm the scope and depth of the inspection undertaken. The inspection had taken place some 3½ years prior to the audit and the activities of the business had altered considerably according to the feed business operator, including expansion to undertake the export of feed to a third country. The physical condition of the processing environment indicated that potential contraventions of feed hygiene legislation may exist. Changes to the activities taking place and the physical condition of the processing environment supported the findings of the file check - that a primary inspection should be undertaken. No product lists or examples of labels were available on file and it was recommended that this information be obtained during the next inspection.

8 Food, Feed and Food Establishments Complaints

- 8.1 The authority had a documented policy and procedure for dealing with complaints about food and associated food premises. The procedure included specific detail relating to imported food but limited references to feed complaints.
- 8.2 The target response time for responding to complaints was clearly indicated in the procedure as being five days.
- 8.3 The records of 10 food hygiene and 10 food standards complaints were requested for examination. Auditors were advised that no feed complaints had been received in the two years prior to the audit.

Food Hygiene

- 8.4 Records of complaints had been maintained on the food premises database and/or premises files. Complaint information was generally comprehensive, in accordance with the Food Law Code of Practice and centrally issued guidance.
- 8.5 Seven of the 10 complaints had been investigated by the authority, two had been assessed as not requiring investigation and one was still under investigation. In one case there had been a delay of four weeks in contacting the food supplier and no contact had been made with the Primary, Home or Originating Authority. In another case the investigation had been delayed which meant the target response time had not been met.
- 8.6 Further action had not been required in any of the cases, but in one case it had been necessary to notify the FSA and this had been done.
- 8.7 In all but two cases the results of investigations had been notified to the appropriate parties.
- 8.8 The file checks provided evidence that internal monitoring had been carried out on complaint investigations and that issues identified by auditors had generally been identified by the Team Leader. Appropriate feedback on internal monitoring of complaints had been provided to officers.

Food Standards

- 8.9 Complaint information including details of the complainant, the food and associated food establishment had been recorded on the authority's database in all cases.
- 8.10 All but three complaints had been responded to within the target response time. In two cases, relating to meat authenticity there were no investigation records. In the remaining case, an allergy alert had been received in late December 2012 relating to a product supplied by the Primary Authority. There were no records of any action taken to investigate the complaint with the partner company until the following February.
- 8.11 In most cases, complaint information had been maintained on the complaint records. However in one case, the lack of records on either the file or database made it difficult to determine whether the investigation had been completed and if so, that the complainant had been informed of the outcome of the investigation.

Recommendations

- 8.12 The authority should:
- (i) Review and update the documented procedure to provide comprehensive guidance for officers on investigating feed complaints. [The Standard – 8.1]
 - (ii) Investigate all food complaints received in accordance with the Food Law Code of Practice, centrally issued guidance and its own policy and procedures. [The Standard – 8.2]

9 Primary Authority Scheme and Home Authority Principle

- 9.1 The authority's commitment to the Primary Authority Scheme and Home Authority Principle was set out in the Food Service Plan.
- 9.2 A procedure had been developed to provide guidance for officers dealing with businesses that had Primary Authority Partnerships with other authorities. These businesses had been flagged on the food premises database. Procedures had also been developed to assist officers where the authority acted as a Home/Originating Authority or Primary Authority.
- 9.3 The authority had agreed to act as Primary Authority to a national food retailer and there was a Primary Authority Agreement in place. Detailed records of communications with the company and other authorities were being maintained.
- 9.4 The authority was acting as Home Authority to 41 food businesses based in the area. Records examined during the audit demonstrated that the authority was providing accurate and timely advice to businesses and had responded appropriately to requests for information from other local authorities.
- 9.5 Primary Authority considerations had been included in some work procedures, for example enforcement procedures. Further, officers had access to the Primary Authority website and the Home Authority database and could therefore identify Primary and Home Authorities and local authority contacts. Auditors were able to evidence that the authority, in its capacity as an enforcing authority, had regard to Primary Authority matters.

10 Advice to Businesses

- 10.1 The authority had been proactive in providing food hygiene, food standards and feed advice to businesses. There was evidence that advice was provided to businesses during inspections as well as on request.
- 10.2 In 2013 a campaign to promote feed business registration had been launched. Posters had been developed and a mailshot targeted some 700 potential feed businesses. A question and answer feed business information pack had also been developed. The campaign had been successful in identifying new feed businesses which had been entered onto the authority's feed database for intervention.
- 10.3 Technical advice was being provided to businesses in respect of which it acted as a Primary Authority and Home Authority.
- 10.4 The authority had provided targeted mailshots to food businesses handling raw and ready-to-eat foods regarding the control of cross contamination. Butchers, delicatessens, hotels and other businesses known to use vac-packers had been prioritised for this advice.
- 10.5 All food businesses had been provided with written notification of the impending requirement for the mandatory display of food hygiene ratings.
- 10.6 The authority had benefited from FSA grant funding to assist businesses in developing their food safety management systems. Businesses which had been identified as requiring further support had been targeted for coaching visits.
- 10.7 A joint funding bid with a neighbouring authority to deliver food hygiene training in Cantonese had been successful and the training scheduled to take place in November 2013.
- 10.8 A food team officer assisted in delivering training provided by the authority to market traders. The course, 'Introduction to Market Traders' provided an opportunity to assist market traders to comply with food law. Further, the Team Leader had delivered a presentation - "Maintaining Your Food Hygiene Rating" at a Hospitality Conference in 2013.

- 10.9 Traders at the annual Mold Food Fair had been provided with a Trader Advisory pack prior to the event. This provided food hygiene and food standards advice. In addition, officers manned a stand over the weekend of the event providing food hygiene and food standards information and advice.
- 10.10 To assist food businesses to comply with food standards law, mailshots had been sent to relevant businesses regarding counterfeit alcohol, allergens and a dangerous chemical found in some body building supplements. Trading Standards officers had used social media to provide business advice and in 2013 had hosted an “Ask the Expert” event which included food standards.
- 10.11 A Public Protection New Business Pack had been developed collaboratively with a neighbouring authority which was due to be launched at the time of the audit. The pack included advice on food hygiene and safety matters, food standards and feed.

11 Food and Feed Establishments Database

- 11.1 The authority had documented procedures in place to ensure that its food and feed premises databases were up to date and accurate.
- 11.2 The procedures provided details of the methods that would be used and included periodic checking of local newspapers for new food businesses, routine checks of planning and licensing applications, discussion of supplier details with existing food and feed businesses, following up enquiries from potential new businesses and liaison with the Care and Social Services Inspectorate Wales.
- 11.3 Auditors randomly selected 10 food businesses located in the authority's area from the Internet. All were found to be recorded on the food premises database and included in the authority's planned food hygiene and food standards interventions programmes.
- 11.4 In respect of feed, auditors acknowledged the recent work that had been carried out to promote feed registration and the consequential increase in new feed businesses on the database. During the audit it was noted that a review of historical information on the feed premises database was required to ensure its accuracy.
- 11.5 It was evident during the audit that the authority had systems in place to control the information entered onto the databases e.g. restricted access for entering and deleting information, dedicated and trained data inputting staff.
- 11.6 The Team Leaders and administrative support staff were key to ensuring the accuracy of the food and feed establishments databases, carrying out regular data verification checks.

Recommendation

- 11.7 The authority should:
- (i) Carry out a review of the feed database to ensure its accuracy. [The Standard – 11.1]

12 Food and Feed Inspection and Sampling

- 12.1 The authority had a documented sampling policy for food hygiene, food standards and feed.
- 12.2 The authority had developed a food sampling procedure which was being followed by officers. The procedure did not include information on the procurement of samples or on the preservation of samples whilst under the control of the authority. A feed sampling procedure had also been developed. Auditors noted that the feed sampling procedure did not include reference to the preservation of the chain of evidence in the form of sample security sealing.
- 12.3 Separate sampling programmes for food hygiene and food standards had been established, which were in accordance with the authority's sampling policy. National enforcement priorities had been considered, and the sampling programme was being implemented.
- 12.4 No feed sampling programme had been developed; the authority had a policy of taking feed samples on a reactive basis in response to complaints.
- 12.5 The authority's food hygiene, food standards and feed intervention procedures incorporated the inspection of food by reference to the Food Law Code of Practice. No departures from the Code of Practice were identified in this regard.
- 12.6 In addition to funding its own sampling, the authority had successfully applied for grants from the FSA to fund food standards and shellfish sampling.
- 12.7 The laboratories appointed by the authority for the examination of food and feed had been properly accredited and were on the list of Official Laboratories that the UK Government had notified to the European Commission.
- 12.8 All microbiological and food standards samples had been taken by appropriately authorised officers in accordance with the authority's sampling policy and programmes. Sampling results were available in all cases.

- 12.9 Audit checks of ten samples taken for microbiological examination were carried out of which two had produced unsatisfactory results. The authority was able to demonstrate that food businesses had been informed of the unsatisfactory results and appropriate action taken on receipt of sample results in accordance with the authority's own procedures and the Food Law Code of Practice.
- 12.10 Audit checks of ten food standards samples were carried out of which eight had produced unsatisfactory results. The authority was able to demonstrate that food businesses had been informed of the unsatisfactory results in all relevant cases, and appropriate action had been taken on receipt of sample results in almost all cases. However, in one case, there was no evidence of follow-up to ensure the business had taken action to ensure compliance.
- 12.11 The authority had not taken any feed samples in the two years prior to the audit.

Recommendations

- 12.12 The authority should:
- (i) Set up, maintain and implement a documented feed sampling programme having regard to any centrally issued guidance and the relevant Code of Practice. [The Standard - 12.4]
 - (ii) Review, update where necessary, maintain and implement the documented sampling procedures in respect of the procurement and preservation of samples (food), and continuity of evidence (feed) in accordance with the relevant Codes of Practice and centrally issued guidance. [The Standard - 12.5]

13 Control and Investigation of Outbreaks and Food Related Infectious Disease

- 13.1 The authority had identified a lead officer for communicable disease who had attended events as part of the Wales Lead Officer Training Programme.
- 13.2 An Outbreak Control Plan had been developed in consultation with relevant stakeholders and approved for adoption by the authority's Executive. The plan was based on a template that had been produced by a multi-agency group including Public Health Wales and Welsh Government.
- 13.3 A Food Related Sporadic Infectious Disease Investigation Procedure, and General Community Food Poisoning Outbreak Investigation Guidelines had been developed by the authority which were supported by a range of guidance documents and questionnaires. The procedure made reference to the investigation of suspect foods and implicated food premises.
- 13.4 A protocol had been developed setting out the authority's arrangements for dealing with food related infectious disease incidents out-of-hours. These arrangements were based on goodwill and were not tested during the audit. Auditors discussed the benefit of referencing these arrangements in the work procedure.
- 13.5 In the two years prior to the audit, the authority had investigated one outbreak that was linked to a food premises in its area. Records relating to the outbreak were examined, which confirmed that the authority had carried out a thorough investigation in accordance with its procedure. Auditors noted that officers had used appropriate questionnaires to interview suspected cases, a visit had been made to the implicated premises and contact had been made with the appropriate agencies including relevant neighbouring local authorities.
- 13.6 Notifications relating to ten sporadic cases of food related infectious diseases were selected for audit, of which records relating to eight cases were examined. The remaining two cases had been inappropriately recorded; one was found to be an input error on the database and the other was an individual connected to the outbreak.

- 13.7 In all eight cases auditors confirmed that thorough investigations had been carried out by competent officers and appropriate action had been taken. Auditors noted that in one case, whilst initial contact had been made within the authority's target response time and written public health advice relating to the infection concerned had been provided, the investigation was limited to ascertaining whether the sufferer was in a high-risk occupation. The investigation was subsequently completed following several unsuccessful attempts to contact the case.
- 13.8 Records relating to the control and investigation of outbreaks and food related infectious disease were being kept for at least six years in accordance with the Food Law Code of Practice.

14 Feed and Food Safety Incidents

- 14.1 The authority had a comprehensive procedure for dealing with food alerts and food incidents and a separate feed incident procedure. The procedure for food alerts and food incidents had been developed in accordance with the Food Law Code of Practice and included out-of-hours arrangements.
- 14.2 The feed incidents procedure provided guidance for officers on identifying a feed hazard, carrying out a risk assessment, notifying the FSA, media relations and the Rapid Alert System for Feed. However, it did not provide guidance on responding to feed alerts notified by the FSA or the out- of-hours arrangements.
- 14.3 Team Leaders were responsible for ensuring food and feed alerts were responded to appropriately. The Health Protection Manager was the nominated deputy.
- 14.4 Auditors examined records in respect of five food alerts for action issued during the previous year. Three had been received by the Food Safety and Standards Team and responded to in accordance with FSA advice.
- 14.5 Action taken by the authority had been detailed on a hard copy of the food alert or a note attached to it. All correspondence, including officer emails relating to food alerts had been maintained on file and were easily retrievable.
- 14.6 In respect of the two food alerts which had not been received by the Food Safety and Standards Team, further investigations found that they had been received elsewhere within the authority, but not provided with a response. At the time of the audit, the Team Leader put back-up arrangements in place to ensure such information was better shared within the authority to prevent a recurrence.
- 14.7 Prior to the on-site element of the audit, auditors were able to verify that the FSA had been notified of serious localised incidents and wider food safety problems in accordance with the relevant Codes of Practice.

Recommendation

14.8 The authority should:

- (i) Ensure the feed incidents procedure includes out-of-hours contact arrangements and guidance for officers on responding to feed alerts notified by the FSA, and the procedure for responding to food safety incidents is suitably amended to include the back-up arrangements.
[The Standard – 14.1 and 14.4]

15 Enforcement

- 15.1 The authority's Public Protection Service had developed an Enforcement Policy which had been adopted by the Cabinet in 2009. The Cabinet had provided the Head of Public Protection, in consultation with the Executive Member for Leisure and Public Protection with authority to update the Policy as necessary to take account of changes in national guidance, legal process or best practice. The policy had been subject to amendment in 2010.
- 15.2 There were a number of detailed enforcement procedures in place covering the range of enforcement options available which had largely been developed in accordance with the Food Law Code of Practice and other official guidance. In respect of feed the procedure did not provide information on the method of service of legal notices.
- 15.3 Records of five Hygiene Improvement Notices (HIN), one Remedial Action Notice (RAN), two Detentions, one Certification of food and two Voluntary Closures were examined. These were assessed against official guidance, the authority's Enforcement Policy and documented procedures.
- 15.4 Where HINs had been served it had been the appropriate course of action in all cases. All notices had been signed and served by officers witnessing the contraventions and appropriate timescales had been identified for remedial works. In four out of five cases there was evidence that revisits had been carried out following expiration of the notices and that compliance had been confirmed in writing to the food business operators.
- 15.5 In one case relating to food hygiene training, the same offence had been repeated across five inspection cycles. Informal action had been taken following the first three inspections whilst HIN's had been served following subsequent inspections. Earlier and further formal action should have been considered in respect of these offences to secure compliance.
- 15.6 In a further two cases where HINs had been served to deal with the absence of hot water, the circumstances were such that Hygiene Emergency Prohibition Notice or RAN procedures should have been considered to secure more immediate improvements.

- 15.7 In all but one case notices had been correctly drafted. The exception related to insufficient detail of the legal contravention being provided. In this case, the notice had also been extended with the use of an extension notice contrary to the authority's policy and centrally issued guidance.
- 15.8 Details of the local court had not been provided with HINs. However, the notice template was amended to include this information during the audit.
- 15.9 Where a RAN had been served it was found to be the appropriate course of action. The notice had been correctly drafted except that it had been served on the company secretary rather than the company. Auditors were unable to verify from the records available that food production had ceased in accordance with the requirements of the notice.
- 15.10 Records of two food establishments that had agreed to close voluntarily were examined. Auditors were able to confirm that in both cases this had been an appropriate course of action and there was evidence that the voluntary closures had been confirmed in writing to the food business operators. Auditors noted that the closures had been agreed by the food business operators but these were not the individuals named on the food business registration forms. Whilst officers were aware of this at the time and were confident they had taken appropriate action under the circumstances, there was no evidence that the businesses were subsequently requested to complete new registration forms in order to ensure the authority's database was kept up to date. Further, there was insufficient evidence that the food establishments had been monitored after closure to ensure they remained closed.
- 15.11 Records of two cases where food had been detained by the authority, and one case where food had been certified under Regulation 27 of the Food Hygiene (Wales) Regulations 2006 as failing to meet food safety requirements were examined. Detention of food had been the appropriate course of action. The procedure for certifying food in accordance with the requirements of the Food Law Code of Practice was discussed with officers.

- 15.12 Where food had been detained, the correct legal process had been followed and the food subsequently disposed of by the food business operator under the supervision of two authorised officers to prevent it from re-entering the human food chain.
- 15.13 There had been no simple cautions or prosecutions in respect of food hygiene and no formal action in respect of food standards or feed in the two years prior to the audit.

Recommendations

- 15.14 The authority should:
- (i) Ensure that food hygiene law enforcement is carried out in accordance with the Food Law Code of Practice, centrally issued guidance and the authority's own documented procedures. [The Standard -15.2 & 15.3]
 - (ii) Ensure all enforcement decisions are made following consideration of the authority's Enforcement Policy and the reasons for departure from the policy are documented. [The Standard -15.4]

16 Records and Interventions/Inspections Reports

Food Hygiene

- 16.1 Food business records, including registration and approval documents, inspection sheets/aide-memoires and correspondence were maintained by the authority on hard copy, premises files. Details of the date and type of intervention associated with food businesses, as well as the premises risk profile, were also maintained on the authority's electronic database. Auditors noted that all of the premises files examined were well organised, with records held in chronological order. Where relevant, information relating to the last three inspections was retrievable and records were being retained for six years.
- 16.2 Officers were using inspection report letters to communicate inspection findings to food businesses, which clearly differentiated between legal requirements and recommendations for good practice. These letters also detailed corrective actions and timescales required to achieve compliance, as well as indicating any further follow-up action intended by the authority. Further, where appropriate, letters had been copied to persons or organisations with an interest in the inspection findings.
- 16.3 Overall, the records on the premises files and electronic database were accurate. Registration forms were available on all but one of the premises files examined, but in this case follow-up action had been scheduled. In one case the food business operator's details on the registration form did not correspond with those contained on the latest inspection records and correspondence.
- 16.4 Audit checks confirmed that inspection forms/aide-memoires and correspondence included details of the food business operator, inspection dates, type of business, the specific food law and areas inspected, name and designation of inspecting officer, documents examined, whether samples were taken and the authority's address and contact details of a senior officer in case of dispute.
- 16.5 Auditors confirmed that in all of the premises files examined, letters had been sent to the business following inspection, although it was noted that in five out of the 10 general premises, these were not sent within 14 days of the inspection, as required by the authority's procedures. In

these instances, letters were sent between 20 and 87 days beyond the 14 day limit with no documented explanation for the delay.

- 16.6 When cross-referencing information relating to inspections/interventions held on the premises files with the electronic database, auditors were able to verify that the system was up to date and the risk ratings were accurate.

Recommendation

- 16.7 The authority should:
- (i) Record, with reasons any deviations from set procedures. [The Standard -16.1]

Food Standards

- 16.8 Auditors examined records relating to the nine food establishments selected for audit.
- 16.9 Three of the nine businesses had been wrongly coded as full food standards inspections, when it was apparent from file notes that they were not. Consequently, further checks reported in this section were not applicable to them.
- 16.10 In respect of three of the six relevant food businesses, there was insufficient information available to indicate whether legal contraventions had been identified at these businesses at the last inspection, and therefore whether any follow-up action by the authority was required.
- 16.11 Four of the six relevant food businesses had received written inspection reports but two had not, contrary to the Food Law Code of Practice.
- 16.12 The four inspection reports did not contain all of the information required by the Food Law Code of Practice, including the designation of the

inspecting officer, contact details for a senior officer, the presence or absence of legal contraventions and a clear distinction between legal requirements and recommendations.

- 16.13 Food business registration forms were available in all relevant cases and had been marked with the date of receipt, as required by the Code of Practice.
- 16.14 The authority was able to demonstrate that where records were available they were legible, retrievable and were being retained for six years.

Recommendation

- 16.15 The authority should:
- (i) Maintain up to date and accurate records in retrievable form on all food establishments in its area in accordance with the Food Law Code of Practice and centrally issued guidance. These records should include reports of all interventions/inspections, the determination of compliance with legal requirements made by the authorised officer, details of action taken where non-compliance is identified, details of any enforcement action taken, and relevant food registration information.
[The Standard -16.1]

Feed

- 16.16 There was limited information available relating to the small number of feed interventions that had been undertaken. It was not possible, in seven out of eight cases, for an officer who had not previously visited a business, to establish its full compliance history and ensure a graduated approach to enforcement.
- 16.17 It was not possible to identify whether feed business operators had been provided with reports following inspections of seven of the eight establishments. In the one case where a report had been issued, it was legible and listed key areas of discussion with the feed business operator. However it did not make reference to the specific feed law

under which the inspection was conducted or provide full details of the inspecting officer or a senior officer as required by the Feed Law Enforcement Code of Practice. It was not possible to ascertain whether inspections had been followed-up with letters as none were available.

Recommendations

16.18 The authority should:

- (i) Maintain up to date, accurate records in a retrievable form on all relevant feed establishments and imported feed in accordance with the Feed Law Enforcement Code of Practice and centrally issued guidance. These records should include reports of all interventions / inspections, the determination of compliance with legal requirements made by the officer and details of action taken. [The Standard – 16.1]
- (ii) Ensure feed records and intervention / inspection reports are kept for at least 6 years. [The Standard - 16.2]

17 Complaints about the Service

- 17.1 The authority had developed a Compliments, Concerns and Complaints Policy which was available to the public and food businesses on its website.
- 17.2 Whilst no complaints had been received about food or feed services during the 2 years prior to the audit, the Health Protection Manager was able to demonstrate that there were effective arrangements in place within the service to investigate and report on the outcome of complaint investigations.

18 Liaison with Other Organisations

18.1 The authority had liaison arrangements in place with neighbouring authorities and was contributing to the development of the North Wales collaboration agenda “Collaboration Plus”. Liaison arrangements were also in place with other bodies aimed at facilitating consistent enforcement. They included participation in the following:

- Directors of Public Protection Wales (DPPW);
- Wales Heads of Environmental Health (WHeEH);
- Wales Heads of Trading Standards (WHOTS);
- Food and Agriculture Group for Wales;
- All Wales Food Safety Technical Panel;
- North Wales Food Safety Technical Panel;
- Welsh Food Microbiological Forum (WFMF);
- North Wales Food and Metrology Panel;
- Communicable Disease Technical Panel (CDTP);
- Primary Authority Supermarkets Group

18.2 Minutes of liaison group meetings were available and confirmed regular attendance by appropriate service representatives.

18.3 The authority also had liaison arrangements with:

- The Food Standards Agency;
- Public Health Wales (PHW);
- The Better Regulation Delivery Office (BRDO)

19 Internal Monitoring

- 19.1 The authority had developed procedures for quantitative and qualitative internal monitoring of the food safety, food standards and feed services.
- 19.2 Quantitative internal monitoring of food safety and standards had been carried out by the Team Leader in accordance with the documented procedure.
- 19.3 The procedure identified those aspects of performance that would be monitored monthly, quarterly and annually. This included consideration of the number of programmed inspections carried out and the number of new businesses inspected against the numbers due, the percentage of food businesses 'broadly compliant' with food hygiene legislation, the number of overdue actions, the number of significant legislative breaches and written warnings, the number of food establishments that had been rated as either 0,1 or 2 under the National Food Hygiene Rating Scheme and the number of establishments that had ceased trading.
- 19.4 A number of quantitative performance indicators relating to food safety and standards had been identified for inclusion on the authority's corporate performance monitoring system. Performance against these was reported quarterly to the Head of Service and six monthly to the relevant Scrutiny Committee.
- 19.5 The Team Leader had carried out qualitative internal monitoring in accordance with the documented procedure. All aspects of the food law enforcement service had been subject to internal monitoring and officers were routinely provided with feedback on their work.
- 19.6 To promote consistency, two accompanied inspections were carried out with each officer annually, either by the Team Leader or another member of the team as a peer review. A proforma had been developed to record the findings of accompanied inspections.
- 19.7 The Team Leader also carried out accompanied inspections with newly qualified officers, contractors, officers transferring from other teams or returning to work in order to assess their competencies. Until such time

as the Team Leader assessed them as being competent they were accompanied by suitably experienced officers.

- 19.8 Verification inspections were undertaken by the Team Leader to assess the quality of inspections and compliance with procedures.
- 19.9 On a quarterly basis the Team Leader selected a sample of inspections that had been carried out for internal monitoring. Records and documentation relating to the inspections were reviewed and the findings recorded.
- 19.10 Feedback was provided on the outcome of internal monitoring to officers individually and at team meetings which took place monthly.
- 19.11 Corrective action following internal monitoring had been documented by the Team Leader in the form of emails to individual members of staff.
- 19.12 Officers had attended training provided by the FSA and in-house to ensure the consistent application of food hygiene risk ratings in accordance with Annex 5 of the Food Law Code of Practice.
- 19.13 Records relating to internal monitoring were being maintained by the Team Leader for 2 years in accordance with the Food Law Code of Practice.
- 19.14 Internal monitoring procedures in respect of feed had not been implemented.
- 19.15 A Public Protection Customer Satisfaction Survey had been carried out in 2012/13 which included the food and feed law enforcement services. Overall, 80% of residents and 100% of businesses surveyed reported that they had been satisfied with the services provided.

Recommendation

19.16 The authority should:

- (i) Implement the documented internal monitoring procedures for feed and maintain records of internal monitoring for at least two years. [The Standard – 19.1 and 19.3]

20 Third Party or Peer Review

20.1 There had been no peer reviews or third party audits of the food or feed law enforcement services during the two years prior to the audit.

21 Food and Feed Safety and Standards Promotion

- 21.1 The authority had delivered a number of initiatives with the aim of promoting food safety. Activities included:
- Promoting the National Food Hygiene Rating Scheme;
 - Promoting hand washing at local schools;
 - Production and promotion of a booklet “Eating Safely on a Budget”;
 - Promoting food safety at the Denbigh and Flint Agricultural Show
- 21.2 Articles promoting food safety had been published in the monthly Environment Bulletin, an internal staff publication, covering topics such as barbecue safety and food safety at Christmas.
- 21.3 There was evidence that safe food handling practices and hand hygiene had been routinely discussed with cases during infectious disease investigations.
- 21.4 The food safety service was represented on the multi-agency ‘Flintshire Healthy and Sustainable Pre- School Scheme’.
- 21.5 The authority had worked collaboratively with a neighbouring authority to promote food hygiene, food standards and feed at the Flint and Denbigh Agricultural Show. The event promoted the ‘Farm to Fork’ approach and included presentations, exhibitions and competitions.
- 21.6 Records of promotional activities were being maintained by the Team Leaders.

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Action Plan for Flintshire County Council
Audit Date: 28 October - 1 November 2013

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.18(i) Ensure future Food and Feed Service Plans are developed in accordance with the Service Planning Guidance in the Framework Agreement. More comprehensive information on the authority's feed service should be provided together with a robust analysis of the resources required to deliver the food and feed services against those available. [The Standard – 3.1]</p>	<p>September 2014</p>	<p><u>Food Hygiene / Food Standards</u></p> <p>This recommendation relates to:-</p> <p>a.) Lack of inclusion of the number of approved premises in the County.</p> <p>b.) Lack of inclusion of the resource requirements to deliver the Food Service in accordance with the Food Law Code of Practice in its entirety.</p> <p>c.) Lack of inclusion of an estimate of the resources required to revisit all 0, 1 and 2 rated premises and for the inspection of new businesses.</p> <p>Future service plans will ensure that all of the above are included and will include an analysis of</p>	<p>The Service Plan for 2014-15 has been written in draft being pending the receipt of our final audit report. It is due to go to Cabinet in September 2014. All the planned improvements are being incorporated in to this document.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
		<p>the resources required to fully deliver the food service against those available.</p> <p><u>Feed</u> This recommendation relates to the level of information provided about the feed service in general but with particular regard to :-</p> <ul style="list-style-type: none"> a) Lack of information detailing the resources required to deliver the range of official feed controls required to fully meet the requirements of the Feed Law Enforcement Code of Practice. b) Lack of information detailing the cost of providing the feed service c) Lack of information detailing the internal monitoring arrangements of the feed service. <p>Planned improvements include a detailed analysis of resources needed against those actually available. This will have regard to the impact of 'earned</p>	<p>The Service Plan for 2014/15 includes considerably more comprehensive information regarding FCC Feed Service and includes all the planned improvements identified.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
		recognition' which is being introduced in the revised Feed Law Code of Practice, which is anticipated to be introduced in Wales in the near future, and the collaborative North Wales Feed service workplan agreed by North Wales heads of Trading Standards (NWHoTS).	
3.18(ii) Address any variance in meeting the feed service delivery plan in subsequent service plans. [The Standard-3.3]	Completed	A detailed review of 2013/14 feed law service delivery will be undertaken against the targets set in the 2013/14 Service Plan. Any variances will be addressed in the 2014/15 Service Plan.	Review has been undertaken and variances addressed in the 2014/15 Service plan.
5.12(i) Review and update all officer authorisations to ensure they are appropriately authorised under current relevant legislation in accordance with their level of qualifications, training, experience and the relevant Code of Practice. [The Standard – 5.3]	Completed	<u>Food Hygiene/Food Standards/Feed</u> All authorisations will be reviewed and updated where necessary. This will be maintained in line with changes in legislation.	This has already been implemented.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
5.12(ii) Maintain records of relevant qualifications, training and experience of authorised officers and appropriate support staff in accordance with the relevant Codes of Practice. [The Standard – 5.5]	Completed	<p><u>Food Hygiene /Food Standards</u></p> <p>Training records already held will be supplemented by copies of CPD certificates which will be held electronically in a central shared drive.</p> <p><u>Feed</u></p> <p>Copies of all training records and qualifications will be held on officer's personal file.</p>	<p>All officers have been asked to provide copies of their CPD. For future courses, there is a direct instruction that all CPD is scanned on to the shared drive in addition to being written in the register.</p> <p>All records collated and held centrally for feed officers.</p>
6.11(i) Review, amend and implement the documented procedure for maintenance and calibration. [The Standard - 6.2]	Completed	<p><u>Food Hygiene</u></p> <p>The procedure on calibration of thermometers needs to be amended to accommodate the observation that the written procedure did not make specific mention of the tolerance for the calibration of temperature</p>	<p>The procedure has been reviewed and has been amended to include specific reference to the tolerance of 0.5°C in the written procedure</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
		probes. Although this was cited on the record forms it was not included in the written procedure.	
<p><u>Food Hygiene</u> 7.19(i) Ensure that all food premises hygiene interventions/inspections are carried out at the minimum frequency specified by the Food Law Code of Practice. [The Standard -7.1]</p>	Completed	<p>This relates to the recommendation that all inspections should be carried out within 28 days of being due. Whilst FCC has consistently achieved 100% of the High Risk inspections due each financial year, some High Risk inspections have not been carried out within 28 days of being due, although they have been done within the annual programme in which they were due.</p> <p>Planned Improvements:- All High Risk inspections due this year are to be completed within 28 days of becoming due. This will be monitored by the Team Leader at monthly one to</p>	<p>Officers have been told in a minuted formal meeting that they are to inspect in date order of inspections due. Quarterly inspection lists have been provided with list in date order of next inspection due. We already have an interventions analysis spreadsheet where officers have to complete a text box if they are over the 28 day period to give a reason why the inspection is overdue.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
		<p>ones. Any deviations from this 28 day are to be documented on the electronic database.</p>	
<p>7.19 (ii) Carry out hygiene interventions/inspections of lower risk premises in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard -7.2]</p>	<p>a.) and b.) As of April 2014 and on-going through 2014/15.</p> <p>c.) End of March 2016.</p>	<p>a.) All overdue D rated inspections and D rated premises due this year are to be completed this financial year. This equates to 175 inspections.</p> <p>b.) D rated inspections due this year are to be done within 28 days of being due.</p> <p>c.) An Alternative Enforcement Strategy (AES) is to be devised and implemented to pull in all overdue E rated premises within a 2 year period.</p>	<p>FCC has implemented an Alternative Enforcement Strategy since the audit was undertaken, where all premises overdue an inspection that would fall outside the scope of the Food Hygiene Rating Act or may not qualify as a food business were sent an AES questionnaire in March 2014. Approximately 50 food businesses have responded. The remaining 120 premises are to be contacted by telephone to carry out the questionnaire using the telephone.</p>
<p>7.19 (iii) Ensure that observations made and/or data obtained in the course of an inspection is recorded in a timely manner. [The Standard – 7.5]</p>	<p>Completed</p>	<p>This recommendation relates to the auditors view that insufficient information was being provided by officers in some instances on the aide memoir that is used to</p>	<p>Officers have been directed to complete as much of the aide memoir they need to, to ensure the next inspecting officer can ascertain the level</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
		<p>assist officers during their inspections.</p> <p>Planned Improvements:- Officers are to complete the aide memoir to sufficient detail to enable other officers to make the necessary assessment to inform risk-based, graduated action.</p>	<p>of practices in place at the time and the assessment of whether those practices etc were adequate.</p> <p>The Internal Monitoring procedure already included an assessment of this form being filled in comprehensively, prior to the FSA audit.</p>
<p><u>Food Standards</u> 7.34 (i) Ensure that food standards interventions are carried out at a frequency not less than that determined under the intervention rating scheme set out in by the Food Law Code of Practice and assess the compliance of establishments and systems to the legally prescribed standards. [The Standard -7.1 & 7.3]</p>	<p>End of March 2017.</p>	<p>This relates to the recommendation that all inspections should be carried out within 28 days of being due. Whilst FCC has consistently achieved 100% of the High Risk inspections due each financial year, some High Risk inspections have not been carried out within 28 days of being due.</p> <p><u>Low and Medium Risk Premises</u></p>	<p>Officers have been told in a minuted formal meeting that they are to inspect in date order of inspections due. Quarterly inspection lists have been provided with list in date order of next inspection due. We already have an interventions analysis spreadsheet where officers have to complete a text box if they are over the 28 day period to give a reason why the inspection is overdue.</p> <p>The Team Leader had already identified this was an issue in</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
		<p>There is a back log of premises that are overdue their food standards inspection.</p>	<p>the 2013/14 Service Plan prior to the audit and had devised an Action Plan.</p> <p>All EHOs have been allocated Food Standards inspections to do at the same time as they carry out Food Hygiene Inspections as of March 2014.</p> <p>The Team Leader is assigning inspection lists to the TSO and TSEO in line with how work is allocated for Food Hygiene.</p> <p>Since the audit, 2 Food Safety Officers are completing the Food Standards module to enable them to be competent to carry out food Standards work.</p> <p>The Team has all been brought together in to the same office which is assisting in communication, monitoring of work being undertaken and</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
			aligning work culture and processes.
7.34(ii) Carry out interventions/inspections and register establishments in accordance with the relevant legislation, Codes of Practice, and centrally issued guidance. [The Standard -7.2]	Completed	<u>Food Standards</u> This recommendation relates to announced Food Standards inspections taking place but the reason for the visit being announced, (rather than unannounced) not being recorded.	Inspections are to be unannounced, unless there is valid, documented reason for the visit to be announced.
7.34 (iii) Set up, maintain and implement a documented food standards revisit procedure. [The Standard 7.4]	Completed	This recommendation relates to the Revisit Procedure not mentioning Food Standards revisits in it. Planned Improvement:- A Revisit Procedure / Policy for Food Standards will be written.	A revisit policy / procedure has been written for Food Standards.
7.34 (iv) Record observations made and/or data obtained in the course of an inspection/intervention in a	August 2014	An aide memoir is to be produced for Food Standards inspections that is used by all	EHOs undertaking Food Standards work have been recording findings on their aide

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
timely manner to prevent loss of relevant information. [The Standard 7.5]		officers undertaking Food Standards inspections.	memoir in the relevant Food Standards section. This has not been done by the TSO and TSEO. A draft form has just been produced and has been sent to the team for comment.
<p><u>Feedingstuffs</u> 7.50 (i) Ensure that feed establishment interventions and inspections are carried out at the frequency specified by the Feed Law Enforcement Code of Practice. [The Standard - 7.1]</p>	End of March 2017.	<p>Following the review of the feed premises database in 2013 accuracy has improved. This is an ongoing exercise.</p> <p>The need to improve accuracy across all six North Wales LA's has been identified as one of the three priorities across North Wales and is the focus of collaborative working planned for the delivery of the feed function across North Wales during 2014/15.</p> <p>Due to the number of premises involved that are currently unrated a plan to inspect around 100 premises a year on top of those identified already as medium or high risk has been</p>	<p>Work is ongoing as part of the NWHoTS collaboration to provide a joined up approach utilising what expertise there is in this field across the region as part of a number of projects to improve compliance.</p> <p>A plan has been agreed in Flintshire to target an additional 100 premises that are currently unrated for feed during the period 2014/15, this is part of a three year plan targeting 100 currently unrated premises each year. This plan is currently in the early stages of implementation and will be expanded following training of AHO's in feed and an expected change to the</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
		agreed. This plan will run in Flintshire for a period of three years, on completion of which all premises will be correctly risk assessed based on inspection. This plan will ensure that issues regarding inclusion of all regulated premises, correct assessment of risk and inspection frequency of premises are in accordance with the FLECP.	qualification requirements for officers as a result of a new FLECP later in 2014.
7.50 (ii) Carry out inspections / interventions and approve or register feed establishments in accordance with relevant legislation and the Feed Law Enforcement Code of Practice and centrally issued guidance. [The Standard - 7.2]	April 2015 for High risk and ongoing to end of March 2017 for lower risk/unrated.	Premises database is constantly being updated with new businesses being added, and existing business details revised where found necessary as a result of inspection work undertaken. Planned inspection of all high risk premises is planned during the year and a percentage of medium risk and currently unrated premises.	All high risk premises inspected prior to 31 st March 2014 with database amended as necessary to reflect actual current risk.
7.50 (iii) Set up, maintain and implement documented procedures for AES and revisits and revise the feed inspections procedure relating	Jan 2015	Procedures re alternative interventions and revisits are to be developed and documented for feed.	Work on feed procedures to ensure consistency and uniformity across Wales is currently being undertaken on

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
to use of appropriate inspection forms and risk rating. [The Standard – 7.4]		Premises inspection procedure to be amended regarding use of appropriate forms and risk rating of premises activity.	behalf of all 22 local authorities by a WHoTS working group in conjunction with FSA Wales. Target date for delivery is currently late 2014. FCC advised by FSA to await this rather than develop own procedures.
7.50 (iv) Record observations and data obtained from interventions in a timely manner to prevent its loss and ensure contemporaneous records are legible and retrievable. [The Standard – 7.5]	Ongoing	This is being done and is utilising FSA inspection forms and timely data inputting on to the database along with current physical storage of documents and planned future use of the EDMS system for electronic storage of documents.	Accurate recording by officers of data obtained using standard forms, with data inputting being carried out as soon as practical after inspections. This being monitored by team leader.
8.12 (i) Review and update the documented procedure to provide comprehensive guidance for officers on investigating feed complaints. [The Standard – 8.1]	Ongoing	Guidance procedure for officers regarding investigation of feed complaints to be further developed and updated in line with centrally produced guidance.	As per 7.50(iii) above.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
8.12 (ii) Investigate complaints received in accordance with the Food Law Code of Practice, centrally issued guidance and its own policy and procedures. [The Standard – 8.2]	Completed	In light of the auditors view that the Complaint procedure for Food Hygiene and Food Standards had not been followed in all instances, this procedure will be amended to allow deviation from it in circumstances when it is not appropriate to investigate a complaint. A clear policy on when a complaint should not be investigated will be set out.	<p>The Team Leader has gone through each complaint as part of the internal monitoring procedure already in place prior to the audit. They are happy with all actions taken by the investigating officer except in one instance where the Team Leader had already identified this to the officer concerned. This was recorded on the complaint file which the auditor saw.</p> <p>The procedure has been amended to include reference to an investigating officer being able to deviate from the procedure as long as they record the reason for this deviation on the complaint file and this deviation can be justified on public health grounds.</p>
11.7 (i) Carry out a review of the feed database to ensure its accuracy. [The Standard – 11.1]	October 2014	The majority of the work necessary to ensure accuracy of the database has now been	Prior to the FSA audit all relevant premises were contacted to review their

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		<p>done. However, some further work is necessary regarding accuracy of risk ratings. This is being done as part of FCC's own action plan and as part of a NWHoTS action plan that identifies this as an area for improvement as one of its three priorities to improve feed service delivery across North Wales.</p>	<p>current feed activities and to reassess risk. The Feed premises database has been updated based on this. This work has continued following the audit and in response to FSA recommendations made at the time, and has included a further review of registered feed premises to ensure accuracy. Premises currently unrated are included in a three year plan to ensure accuracy of assessed risk.</p>
<p>12.12(i) Set up, maintain and implement a documented feed sampling programme having regard to any centrally issued or relevant guidance and the relevant Code of Practice, [The Standard - 12.4]</p>	<p>Pending</p>	<p>There is currently no available budget to undertake a feed sampling programme within the budget of the AH&HP team. However, Flintshire are part of an NWHoTS bid for funding made in March 2014 to FSA Wales (outcome still pending (July 2014)). This forms part of the two feed service delivery projects proposed by NWHoTS as collaborative approach to improving feed service delivery</p>	<p>Flintshire are currently awaiting the outcome of an NWHoTS bid made in March 2014 to FSA Wales for funding in support of a North Wales wide intelligence led feed sampling programme for 2014/15. The aim of this approach is to target any identifiable problem areas with the limited resource available to achieve maximum effect.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
		<p>across North Wales. Sampling of Feed is one of NWHoTS three priorities for improvement in feed service delivery for 2014/15. Delivery of a sampling programme will be subject to receipt of grant funding from FSA Wales through NWHoTS, and the level will be dependent on how much grant is received. Otherwise any sampling to be undertaken would be dependent on FCC making funding available.</p>	
<p>12.12(ii) Review, update where necessary, maintain and implement the documented sampling procedures in respect of the procurement and preservation of samples (food), continuity of evidence (feed) in accordance with the relevant Codes of Practice and centrally issued guidance. [The Standard - 12.5]</p>	<p>August 2014</p>	<p><u>Food</u></p> <p>The Food Hygiene Sampling Procedure will be amended to cover specific instructions on the storage of food samples following sampling. This was already in place at the time of audit for the Food Standards Sampling Procedure. The Food Sampling Policy already sets out the information on procurement of samples.</p>	<p>The Food Hygiene Sampling Procedure is currently being amended to include this additional safeguard.</p>

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		<p><u>Feed</u></p> <p>Review of sampling procedure to be conducted considering all points raised by FSA.</p>	<p>Reference to the preservation of the chain of evidence in the form of sample security sealing has been incorporated into our feed sampling procedure. More generally work on feed procedures to ensure consistency and uniformity across Wales is currently being undertaken on behalf of all 22 local authorities by a WHoTS working group in conjunction with FSA Wales. Target date for delivery is currently late 2014. FCC advised by FSA to await this rather than develop own procedures.</p>
<p>14.8 (i) Ensure the feed incidents procedure includes out-of-hours contact arrangements and guidance for officers on responding to feed alerts notified by the FSA. [The Standard – 14.1]</p>	<p>August 2014</p>	<p>Procedure to be reviewed in line with FSA’s comments. There are no formal out of hours arrangement in place. However, details of current out of hours arrangements (as per animal health/disease incidents dealt with by AH&HP Team) through</p>	<p>Procedure in process of being reviewed.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
		Call-Connect to be shared with FSA.	
15.14 (i) Ensure that food hygiene law enforcement is carried out in accordance with the Food Law Code of Practice, centrally issued guidance and the authority's own documented procedures. [The Standard -15.2 & 15.3]	Completed	a) The team are to attend Enforcement Sanctions training in May 2014. b) Explanations to always be recorded on premises file when procedure has been deviated from.	Review has been undertaken of detailed points raised by the FSA audit and corrective measures put in place where necessary.
15.14(ii) Ensure all enforcement decisions are made following consideration of the authority's enforcement policy and the reasons for departure from the policy are documented. [The Standard -15.4]	Completed	This recommendation relates to there not being explicit explanation as to why a food business operator had not been prosecuted instead of being served with a hygiene improvement notice.	The aide memoir form had already been amended prior to the audit to include a section on enforcement action and rationale.
<u>Food Hygiene</u> 16.7(i) Record, with reasons any deviations from set procedures. [The Standard – 16.1]	Completed	This recommendation relates to instances of audit reports being sent out after 14 days to the food business operator but there being no explanation for the delay in it being sent recorded on file.	The Team Leader had already introduced a system for identifying when reports are being sent out to ensure that reports were being sent out within 14 days in compliance with the Food Hygiene Rating

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
		In future deviations on the reports being sent out later will be recorded on file.	Scheme. Any deviation on reports going out is recorded on the database.
<p><u>Food Standards</u> 16.15(i) Maintain up to date and accurate records in retrievable form on all food establishments in its area in accordance with the Food Law Code of Practice and centrally issued guidance. These records shall include reports of all interventions/inspections, the determination of compliance with legal requirements made by the authorised officer, details of action taken where non-compliance was identified, details of any enforcement action taken, and relevant food registration information. [The Standard -16.1]</p>	By end of March 2015	<p>This recommendation relates to:</p> <ul style="list-style-type: none"> a.) Paper-based premises files not being available for all premises in relation to Food Standards. b.) The database records not being comprehensive. c.) Inspection report forms not giving a breakdown of legal contraventions and what was only recommendation. d.) The report of inspection form did not have all the information on it that it is supposed to have. <p>Improvements:-</p> <ul style="list-style-type: none"> a.) Merge premises files between Food Hygiene and Food Standards. b.) Database records to be 	<p>All team members are now in the same office. This has allowed the merging of premises files to start. Food Safety already had a file for each premises and so Food Standards information is being put on to these same files. All documents are being scanned on to the database as part of the new Mobile and Agile working practice.</p> <p>Prior to the audit, documented instruction had been given to ensure there was a clear distinction between legal contravention and recommendation. This is also being monitored by the Team Leader.</p> <p>Quotes have been requested</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
		<p>comprehensive by scanning on all documents as of February 2014.</p> <p>c.) Provide a clear distinction between legal contravention and recommendation.</p> <p>d.) Devise a new report of inspection form for Food Standards and set up a template letter for use, similar to Food Hygiene templates.</p>	<p>for the alterations to be made to the Food Standards Inspection Form.</p>
<p><u>Feed</u> 16.18(i) Maintain up to date, accurate records in a retrievable form on all relevant feed establishments and imported feed in accordance with the Feed Law Enforcement Code of Practice and centrally issued guidance. These records should include reports of all interventions / inspections, the determination of compliance with</p>	<p>Ongoing</p>	<p>These records now exist for all work completed since the FSA audit. However, recognise this needs to be maintained fully.</p>	<p>All feed work undertaken incorporates use of FSA inspection forms, use of a manual filing system for paper records, and updating of the feed premise database to record all work conducted.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
legal requirements made by the officer and details of action taken. [The Standard – 16.1]			
16.18(ii) Ensure records and intervention / inspection reports are kept for at least 6 years. [The Standard - 16.2]	Completed	This is now being done	This is being done.
19.16(i) Implement the documented internal monitoring procedures for feed and maintain records of internal monitoring for at least two years. [The Standard – 19.1 and 19.3]	Completed.	This is now being done	This is being done.

Audit Approach/Methodology

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

(1) Examination of Local authority policies and procedures

The following policies, procedures and linked documents were examined:

Annex B

Audit Approach/Methodology

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

(1) Examination of Local Authority policies and procedures

The following policies, procedures and linked documents were examined:

- Flintshire County Council Food Service – Service Plan 2013-14
- Minutes of meetings of the Executive of Flintshire County Council dated; 18.06.2013, 10.07.2013 and 15.11.2011 relating to Approval of Food Service Plans
- Food Standards/Food Safety Merger Action Plan – November 2012
- Feed Stuffs Action Plan – October 2013 to End of March 2014
- Feeding Stuffs Improvement Plan 2013
- North Wales Trading Standards Collaboration Development Plan – June 2013 – June 2015
- Trading Standards Collaboration Work Plan Monthly Progress Report – 02.08.2013
- North Wales Trading Standards Collaboration Memorandum of Understanding as to Governing Principles – September 2013
- Staff Briefing Note 1. North Wales Public Protection Collaboration
- Flintshire County Council Improvement Plan 2013-2017
- Operational Action Plan 2013 – Health Protection Food Safety & Food Standards

- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Document Control Procedure
- Flintshire County Council Public Protection Service – Feeding Stuffs - Document Control Procedure
- Flintshire County Council Constitution – updated August 2013
- Letter of Appointment of Public Analyst and Agricultural or Deputy Agricultural Analysts dated 03.10.2013
- Flintshire County Council Directorate of Environment Public Protection Service Authorisation of Officers – Issue No. 4
- Flintshire County Council Public Protection Service – Food Hygiene and Food Standards - General Training
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Food Related Infectious Disease Training
- Flintshire County Council Public Protection Service – Feeding Stuffs - Training Programme 2013/14
- Food Safety and Food Standards – Learning and Development Plan 2012 – 2013
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Maintenance Procedure
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Calibration Procedure for Food Measuring Thermometers
- Flintshire County Council Public Protection Service – Feeding Stuffs - Weighing and Measuring Equipment Use, Calibration and Maintenance
- Flintshire County Council Information Security Policy Statement
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Food Hygiene Interventions Procedure
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Food Standards Intervention Procedure
- Food Hygiene Inspection Sheet Catering and Retail Premises
- Food Hygiene Inspection Sheet Non-Catering
- Flintshire County Council Public Protection Service – Procedure for Food Hygiene Revisits
- Flintshire County Council Public Protection Service – Website: Introduction to the Inspection Form(s) for General Food Hygiene of &/or Establishments Requiring Approval
- Flintshire County Council Public Protection Service Procedure for Imported Foods Controls as an Inland Authority
- Flintshire County Council Public Protection Service Procedure for Non-Statutory Food Export Certification

- Flintshire County Council Public Protection Service – Feeding Stuffs - Registration and Approvals Procedure
- Spread sheet of feed hygiene visits since 01.02.2002
- Spread sheet of higher risk food hygiene premises
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Procedure for Approval of Food Business Establishments Handling Food of Animal Origin
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Procedure for the Routine Inspection of Premises Approved Under EC Regulation 853/2004 and Manufacturers (Non-Approved)
- Flintshire County Council Public Protection Service – Feeding Stuffs - Inspection Procedure
- Spread sheet of feed premises and associated risk ratings
- A Guide to the Feed Hygiene Regulation No.183/2005 for Enforcement Officers (aide memoire for officers)
- Table containing breakdown of number of feed premises by R activity codes
- Flintshire County Council Public Protection Service – Food Safety, Food Standards & Feeding stuffs - Complaints Policy
- Flintshire County Council Public Protection Service – Food Safety, Food Standards & Feedingstuffs - Food Complaints Procedure
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Service Requests/Advice to Business Procedure
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Water Disconnections Procedure
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Procedure for Planning Enquiries
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Procedure for Dealing with Primary Authority Scheme Businesses as an Enforcing Authority
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Home/Originating Authority Administration Procedure
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Primary Authority Admin Procedure
- Iceland Foods Limited and Flintshire County Council Agreement Relating to the Participation in the Primary Authority Scheme – April 2009
- Flintshire County Council Public Protection Service – Summary of Feeding Stuffs Promotion Work, accompanied by advice leaflet entitled: Guidance to

Farmers and Feed Business Operators on the EC Feed Hygiene Regulations (183/2005) and 'Are You Registered?' poster

- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Advice to Business Report
- Flintshire County Council Power point presentation entitled: How to Improve Your Food Hygiene Rating
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Procedure for the Maintenance of an Accurate Food Premises Database
- Flintshire County Council Public Protection Service – Feeding Stuffs - Procedure for the Maintenance of an Accurate Feeding Stuffs Premises Database
- Flintshire County Council Public Protection Service - Feeding Stuffs - Sampling Policy
- Flintshire County Council Public Protection Service – Food Safety & Food Standards – Food and Feeding Stuffs Sampling Policy
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Food Hygiene Sampling Procedure
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Food Standards General Sampling Procedure
- Flintshire County Council Food Safety Food Sampling Programme 2013/2014
- Flintshire County Council Public Protection Service – Feeding Stuffs - Sampling Plan 2013/14
- Flintshire County Council Public Protection Service – Feeding Stuffs - Sampling Procedure
- Minutes of the meeting of the Executive of Flintshire County Council dated; 18.10.2011 relating to the adoption of the Communicable Disease Outbreak Plan for Wales
- Minutes of the meeting of the Executives of Flintshire County Council dated; 20.09.2011 relating to the adoption of an Enforcement Policy
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Food Related Sporadic Infectious Disease Investigation Procedure
- Flintshire County Council Food Safety Section General Community Food Poisoning Outbreak Investigation Guidelines – September 2013
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Procedure for Food Alerts and Food Incidents
- Flintshire County Council Public Protection Service – Feeding Stuffs - Feed Incident Procedure

- Flintshire County Council Enforcement Policy Public Protection Service – July 2010
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Enforcement Procedure
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Procedure for Hygiene Emergency Prohibition Procedure
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Procedure for the Serving of a Remedial Action Notice
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Procedure for the Detention and Seizure of Food
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Hygiene Improvement Notice Administration Procedure
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Importation of POAO from Third Countries
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Enforcement Action – Food not of Animal Origin
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Voluntary Surrender of Food
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Voluntary Closure Procedure
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Alternative Enforcement Strategy for Low Risk Food Premises
- Flintshire County Council Public Protection Service – Food Safety & Food Standards - Procedure National Food Hygiene Rating Scheme 2010
- Flintshire County Council Public Protection Service – Food Safety, Food Standards & Feedingstuffs – Legal Proceedings Procedure
- Flintshire County Council Public Protection Service – Feeding Stuffs – Enforcement Procedure
- Flintshire County Council Compliments, Concerns and Complaints Policy
- Minutes of meetings of Wales Heads of Trading Standards Food and Agricultural Group for Wales dated; 04.06.2013 and 04.12.2012
- Minutes of meetings of North Wales Food Safety Technical Panel dated; 30.05.2013, 06.12.2012 and 06.09.2012
- Minutes of meetings of Society of Directors of Public Protection Wales Food Safety Technical Panel dated; 05.03.2013 and 10.12.2012
- Minutes of meetings of North Wales Food and Metrology Panel dated; 06.06.2013, 07.03.2013 and 22.10.2012

- Minutes of meetings of Department for Business Innovations & Skills Primary Authority Supermarkets Group dated: 27.06.2013, 27.03.2013 and 09.01.2013
- Minutes of meetings of Communicable Disease Technical Panel dated; 18.07.2013, 02.05.2013 and 20.03.2013
- Flintshire County Council Public Protection Service – Food Safety & Food Standards – Procedure for Monitoring of Enforcement and Informal Action
- Flintshire County Council Public Protection Service – Food Safety & Food Standards – Quantitative Internal Monitoring Procedure
- Flintshire County Council Public Protection Service – Feeding Stuffs – Internal Monitoring of Enforcement and Informal Action Procedure
- Flintshire County Council Public Protection Service – Feeding Stuffs – Quantitative Internal Monitoring Procedure
- Note of customer satisfaction comments 12/13, accompanied by Customer Satisfaction Survey form
- Minutes of meetings of Flintshire County Council Public Protection Food Safety Section dated; 09.09.2013, 05.08.2013 and 08.07.2013
- Flintshire County Council Internal Audit Report – April 2013

(2) File reviews

A number of local authority records were reviewed during the audit, including:

- General food premises inspection files
- Approved establishment files
- Food and food premises complaint records
- Formal enforcement records
- Officer authorisations, competency checklists and training records
- Internal monitoring records
- Calibration records
- Food Incident records

(3) Review of Database records:

A selection of database records were considered during the audit in order to:

- Review and assess the completeness of database records of food/ feed inspections, food/feed and food/feed premises complaint investigations,

samples taken by the authority, formal enforcement and other activities and to verify consistency with file records

- Assess the completeness and accuracy of the food and feed premises databases
- Assess the capability of the system to generate food/feed law enforcement activity reports and the monitoring information required by the Food Standards Agency.

(4) Officer interviews

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

Interim Public Protection Manager
Health Protection Manager
Team Leader Food Safety and Food Standards
Team Leader Animal Health and Health Promotion
Environmental Health Officer
Food Safety Officer
Trading Standards Officer
Trading Standards Enforcement Officer

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

(5) On-site verification checks:

Verification visits were made with officers to four local food businesses and a feed business. The purpose of these visits was to verify the outcome of the last inspections carried out by the LA and to assess the extent to which enforcement activities and decisions met the requirements of relevant legislation, the relevant Codes of Practice and centrally issued guidance documents.

ANNEX C

Glossary

Approved premises	Food manufacturing premises that has been approved by the local authority, within the context of specific legislation, and issued a unique identification code relevant in national and/or international trade.
Authorised officer	A suitably qualified officer who is authorised by the local authority to act on its behalf in, for example, the enforcement of legislation.
Codes of Practice	Government Codes of Practice issued under Section 40 of the Food Safety Act 1990 as guidance to local authorities on the enforcement of food legislation.
CPIA	The Criminal Procedures and Investigations Act 1996 – governs procedures for undertaking criminal investigations and proceedings.
Critical Control Point (CCP)	A stage in the operations of a food business at which control is essential to prevent or eliminate a food hazard or to reduce it to acceptable levels.
Directors of Public Protection Wales (DPPW)	Collective organisation of local authority officers heading up Public Health Protection Services in Wales.
Environmental Health Professional/Officer (EHP/EHO)	Officer employed by the local authority to enforce food safety legislation.
Food Examiner	A person holding the prescribed qualifications who undertakes microbiological analysis on behalf of the local authority.

Food Hazard Warnings/ Food Alerts	This is a system operated by the Food Standards Agency to alert the public and local authorities to national or regional problems concerning the safety of food.
Food/feed hygiene	The legal requirements covering the safety and wholesomeness of food/feed.
Food Hygiene Rating Scheme (FHRS)	A scheme of rating food businesses to provide consumers with information on their hygiene standards.
Food standards	The legal requirements covering the quality, composition, labelling, presentation and advertising of food, and materials in contact with food.
Food Standards Agency (FSA)	The UK regulator for food safety, food standards and animal feed.
Framework Agreement	<p>The Framework Agreement consists of:</p> <ul style="list-style-type: none"> • Food Law Enforcement Standard • Service Planning Guidance • Monitoring Scheme • Audit Scheme

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

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

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

Full Time Equivalents (FTE)	A figure which represents that part of an individual officer's time available to a particular role or set of duties. It reflects the fact that individuals may work part-time, or may have other responsibilities within the organisation not related to food enforcement.
HACCP	Hazard Analysis Critical Control Point – a food safety management system used within food businesses to identify points in the production process where it is critical for food safety that the Control measure is carried out correctly, thereby eliminating or reducing the hazard to a safe level.
Home Authority	An authority where the relevant decision making base of an enterprise is located and which has taken on the responsibility of advising that business on food safety/food standards issues. Acts as the central contact point for other enforcing authorities' enquiries with regard to that company's food related policies and procedures.
Hygiene Improvement Notice (HIN)	A notice served by an Authorised Officer of the local authority under Regulation 6 of the Food Hygiene (Wales) Regulations 2006, requiring the proprietor of a food business to carry out suitable works to ensure that the business complies with hygiene regulations.
Inspection	The examination of a food or feed establishment in order to verify compliance with food and feed law.
Intervention	A methods or technique used by an authority for verifying or supporting business compliance with food or feed law.
Inter Authority Auditing	A system whereby local authorities might audit each others' food law enforcement services against an agreed quality standard.

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 locally elected Council Members discuss and make decisions on food law enforcement services.
National Trading Standards Board (NTSB)	A body that is accountable to government providing leadership influence, support and resources to help combat consumer and business detriment locally, regionally and nationally.
OCD returns	Returns on local food law enforcement activities required to be made to the European Union under the Official Control of Foodstuffs Directive.
Official Controls (OC)	Any form of control for the verification of compliance with food and feed law.
Originating authority	An authority in whose area a business produces or packages goods or services and for which the authority acts as a central contact point for other enforcing authorities' enquiries in relation to the those products.
PACE	The Police and Criminal Evidence Act 1984 – governs procedures for gathering evidence in criminal investigations.
Primary Authority	A local authority which has developed a partnership with a business which trades across local authority boundaries and provides advice to that business.
Public Analyst	An officer, holding the prescribed qualifications, who is formally appointed by the local authority to carry out chemical analysis of food samples.

Registration	A legal process requiring all food business operators to notify the appropriate food authority when setting-up a food business.
Remedial Action Notices (RAN)	A notice served by an Authorised Officer of the local authority under Regulation 9 of the Food Hygiene (Wales) Regulations 2006 (as amended) on a food business operator to impose restrictions on an establishment, equipment or process until specified works have been carried out to comply with food hygiene requirements.
Risk rating	A system that rates food premises according to risk and determines how frequently those premises should be inspected. For example, high risk hygiene premises should be inspected at least every 6 months.
Service Plan	A document produced by a local authority setting out their plans on providing and delivering a food service to the local community.
Trading Standards	The service within a local authority which carries out, amongst other responsibilities, the enforcement of food standards and feedingstuffs legislation.
Trading Standards Officer (TSO)	Officer employed by the local authority who, amongst other responsibilities, may enforce food standards and feedingstuffs legislation.
Unitary authority	A local authority in which all the functions are combined, examples being Welsh Authorities and London Boroughs. A Unitary authority's responsibilities will include food hygiene, food standards and feedingstuffs enforcement.
Unrated business	A food business identified by an authority that has not been subject to a regulatory risk rating

assessment.

Wales Heads of
Environmental Health
(WWhoEH)

A group of senior local authority Environmental Health professionals that support and promote Environmental and Public Health in Wales.

Wales Heads of
Trading Standards
(WWhoTS)

A group of senior local authority Trading Standards professionals who support and promote Trading Standards in Wales.