

Draft Action Plan for Kettering Borough Council

Audit date: 19-21 April 2016

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>Recommendation 1 - Service planning [The Standard 3.1]</p> <p>Draw up, document and implement the 2016/17 service delivery plan in accordance with the Service Planning Guidance of the Framework Agreement on Official Feed and Food Controls by Local Authorities. Include an estimate of the demands on the Service and the resources required together with a comparison of the resources available. Include the profile of the Authority, the financial and staffing allocation for the food service.</p>	<p>30 September 2016</p>	<p>Where possible, relevant parts of the Framework Agreement will be included within the Service Plan where we can and this will include some reference to staffing resources.</p>	<p>Head of Service already meets with the Strategic Management Team (CE/DCEs) on a monthly basis for Performance Clinic. The number of high risk inspections carried out against programme PI is reported together with any staffing issues as a result of sickness, vacancy, etc. and any potential for these to impact on service provision, performance against targets and ultimately risk to the LA and consumers as a result. In such circumstances SMT will be asked to agree to cover for such vacancies. Any cover must be within existing budgets. Staffing resources are provided against available finances. However a statement of FTE does not reflect the flexible resource available from within the team when required to deal with any major issue.</p> <p>SMT are aware of the resources available to us normally and as you saw during your visit the staff resources we have perform well in the key areas of risk management using the full range of enforcement powers, inspecting all high risk food businesses and dealing with major incidents, as they were with the norovirus outbreak at the time of your audit. We all know there are no additional resources – we use what we have to the best of our ability to manage risk to consumers.</p>

<p>Recommendation 2 - Policies and Procedures Review [The Standard – 4.2]</p> <p>Set up, maintain and implement a control system for all documentation relating to its enforcement activities.</p>	<p>30 September 2016</p>	<p>Written documentation control system to be introduced.</p>	<p>Outcome of Audit has been discussed with Head of Service and Health Protection Team and team engaged with required improvements.</p> <p>Health Services Manager to set up control system for documentation relating to enforcement activities.</p>
<p>Recommendation 3 - Authorisations and Training [The Standard – 5.1, 5.4 & 5.5]</p> <p>Review the authorisation procedure to ensure it takes account of the defined competencies contained within the FLCoP 2015.</p> <p>Ensure all officers are authorised to the appropriate level and authorisation documents accurately reflect the powers of the authorised officer.</p> <p>Devise and implement a documented procedure to assess the ongoing CPD requirements of authorised officers.</p>	<p>30 September 2016</p>	<p>All Food Policies and Procedures to be reviewed and updated as necessary.</p> <p>Work commenced on documented procedure for authorising and assessing ongoing needs of officers based on RDNA.</p>	<p>Outcome of Audit has been discussed with Head of Service and Health Protection Team and team engaged with required improvements.</p> <p>Policy and Procedure Improvements included in Health Protection Team Plan.with identified officers reviewing specific procedures.</p>
<p>Recommendation 4 - Food Premises Database [The Standard – 6.3]</p> <p>Ensure that returns submitted to the Agency accurately reflect the food premises profile of the LA area.</p>	<p>Completed</p>	<p>Error in recording resolved</p>	<p>Following the audit, an error in coding was identified in the Service's database resulting in premises not being identified for the LAEMS return.</p>

<p>Recommendation 5 - Interventions [The Standard – 7.1, 7.2, 7.4 & 7.5]</p> <p>Review the intervention procedure to ensure that it includes the rationale for the risk based allocation of inspections. It should also include an alternative enforcement strategy detailing when and for what type of premises the approach may be used.</p> <p>Carry out inspections at prescribed frequencies. Where low risk premises are not subject to surveillance (an alternative enforcement strategy), there is a risk that a change in activities to high risk processes will not be detected.</p> <p>Ensure that records of completed inspections are retrievable. In particular approved premises records should be maintained according to standards sets out in the FLCoP.</p> <p>Ensure that in all communication with FBO's on matters of non-compliance appropriate time scales are given for compliance.</p>	<p>30 September 2016</p>	<p>All Food Policies and Procedures to be reviewed and updated as necessary.</p> <p>All activities to be in accordance with procedures.</p>	<p>Outcome of Audit has been discussed with Head of Service and Health Protection Team and team engaged with required improvements.</p> <p>Policy and Procedure Improvements included in Health Protection Team Plan.with identified officers reviewing specific procedures.</p> <p>All high risk inspections are carried out at prescribed frequencies. Due to historical staffing shortages not all low risk inspections have been in accordance with prescribed frequencies but Cat D premises which may be at risk of change e.g. caterers, are identified and subject to intervention.</p>
<p>Recommendation 6 - Enforcement Policy [The Standard 15.1, 15.2 & 15.3]</p> <p>Review the enforcement policy to ensure it reflects current statutory guidance, covers all relevant enforcement options and out of date references are removed. [See paragraphs 3.4.1]</p> <p>Ensure that enforcement action is carried out (service of notices) in accordance with legislation and the FLCoP. [See paragraphs 3.4.4]</p> <p>Publicise the policy once reviewed and make it readily available e.g. on the LA website.</p>	<p>30 September 2016</p>	<p>All Food Policies and Procedures to be reviewed and updated as necessary.</p> <p>All actions to be in accordance with procedures and policies.</p> <p>Revised enforcement policy to be on website</p>	<p>Outcome of Audit has been discussed with Head of Service and Health Protection Team and team engaged with required improvements.</p> <p>Policy and Procedure Improvements included in Health Protection Team Plan. Health Services Manager to review enforcement policy.</p>

<p>Recommendation 7 - Internal monitoring [The Standard 19.1&19.3]</p> <p>Develop and implement a documented internal monitoring procedure that covers all areas of the service. Records of monitoring should be retained for a minimum of 2 years.</p>	<p>30 September 2016</p>	<p>All Food Policies and Procedures to be reviewed and updated as necessary.</p>	<p>Outcome of Audit has been discussed with Head of Service and Health Protection Team and team engaged with required improvements.</p> <p>Policy and Procedure Improvements included in Health Protection Team Plan. Health Services Manager to develop internal monitoring procedure.</p>
<p>Recommendation 8 - Complaints Policy [The Standard 8.2 & 8.3]</p> <p>Review the complaints policy to ensure officers are advised as to when it is appropriate to liaise with a Primary Authority.</p> <p>Ensure that records of complaint investigations are recorded in sufficient detail.</p>	<p>30 September 2016</p>	<p>All Food Policies and Procedures to be reviewed and updated as necessary.</p>	<p>Outcome of Audit has been discussed with Head of Service and Health Protection Team and team engaged with required improvements.</p> <p>Policy and Procedure Improvements included in Health Protection Team Plan.with identified officers reviewing specific procedures.</p>
<p>Recommendation 9 - Sampling [The Standard 12.3]</p> <p>Documented records should be kept of sampling results and analysis and interventions carried out as a result.</p>	<p>30 September 2016</p>	<p>All Food Policies and Procedures to be reviewed and updated as necessary</p>	<p>Outcome of Audit has been discussed with Head of Service and Health Protection Team and team engaged with required improvements.</p> <p>All food officers reminded by email of the requirement to ensure that copies of results, any correspondence and any actions, including details of any phone calls, are recorded on Flare pending policy review.</p>