Action Plan for Manchester City Council

Audit date: 3-5 March 2015

Completed October 2016

TO ADDRESS (RECOMMENDATION	BY (DATE)	PLANNED IMPROVEMENTS	Position as of October 2016
INCLUDING STANDARD PARAGRAPH)			
3.1.6(i) Carry out an urgent review of its food safety service and intervention strategy to ensure that it meets all the principles of the FLCoP and the Standard in the Framework Agreement. [The Standard -3.1]	·	A full review to ensure full compliance with the FLCoP and the Standard in the Framework Agreement.	Completed & Implemented.
3.1.6(ii) Ensure that future service plans include a clear comparison of the resources required to carry out the full range of statutory food law enforcement activities at all relevant food businesses in the area against the resources available to the Service. Details of how any shortfall identified will be addressed should also be provided. [The Standard -3.1]	·	The food service plan for 2015-16 will include a comparison of resources and identify details of any shortfall and proposes a method of addressing any shortfall.	•

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	Position as of October 2016
3.1.15(i) Following the full service review, the Authority should appoint a sufficient number of authorised officers to carry out the work set out in its service plan. The level of authorisation and duties of officers should be consistent with their qualifications, training, experience and the relevant Code of Practice. [The Standard -5.3]	Completed	Two additional food safety officers are to be recruited immediately and a further review of resources required will be carried out in 12 months. Additional administration support has been recruited to remove administrative tasks from authorised officers. The service provision of the Growth and Neighbourhoods Directorate is currently being reviewed. The need to increase the number of authorised officers will form part of this review.	Internal re-structure implemented in January 2016. The new design has a staffing structure of; 2 managers 10 EHO's 2 Technical Staff 1 Trainee EHO Administrative support is also provided by 1 FTE. As part of this re-structure an additional 3 EHO's were recruited externally and we in post between April & May 2016. We have just appointed a new Lead Food Officer and are recruiting for a replacement EHO.

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3.1.15(ii) Ensure that all authorised officers including the lead food officer and appropriate support staff receive the training needed to be competent to deliver the technical and administrative aspects of the work in which they will be involved, in accordance with the Food Law Code of Practice. [The Standard - 5.4]	Completed	Training will continue to be assessed through appraisals and at regular one to one meetings with particular emphasis placed on technical training needs.	Training needs are being identified and courses accessed across the team. Internal training budget is being accessed for access to funds for bespoke courses.
3.2.4 Take appropriate actions to ensure the accuracy of its food premises database, developing and fully implementing a suitable procedure to ensure that its food premises database accurately reflects the food businesses actively operating in its area. [The Standard-11.1 &11.2]	Completed	A new procedure to include regular reviews of the data base has been implemented.	New monitoring procedures have continued to be undertaken.
3.3.5 Ensure that food hygiene interventions at food premises in their area are carried out at a frequency which is not less than that determined under the intervention rating scheme set out in the Food Law Code of Practice. [The Standard – 7.1]	Completed and on- going	The review of the service will identify the staff resources required to carry out interventions at the required frequency.	All overdue high risk premises have been inspected. Newly registered premises are being issued to officer's to inspect within 28 days of opening.
3.3.13(i) Carry out interventions and approve or register establishments in accordance with the relevant legislation, Codes of Practice, centrally issued guidance and the Authority's policies and procedures. [The Standard- 7.2]	Completed	The operating procedures related to interventions and approved premises will be reviewed. A new approved premises approval recording form will be implemented and a new approved premises inspection sheet will be devised. The existing routine food hygiene inspection aid memoir will be reviewed and amended to capture more details. Increased monitoring of officers cases will be implemented.	A new inspection aide-memoir has been implemented. A new approved premises inspection form and case management process has been implemented. FHRS rescores are undertaken in accordance with the brand standard. Revisits are monitored.

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3.3.13(ii) Assess the compliance of establishments and systems in their area to the legally prescribed standards.	Completed	Implemented prior to action plan	Has been implemented.
3.3.13(iii) Take appropriate and timely action on any non-compliance found in accordance with the Authority's enforcement policy, the Food Law Code of Practice and centrally issued guidance. The reasons for any departure from its enforcement policy should be documented. [The Standard- 7.3 & 15.4]	Completed	Implemented prior to action plan	Has been implemented.
3.4.4 Ensure that all possible follow up actions are considered by officers during interventions. All decisions on enforcement action shall be made following consideration of the Authority's enforcement policy. The reasons for any departure from the criteria set out in the enforcement policy shall be documented. [The Standard-15.4]	Completed	Ensure monitoring systems in place to ensure that decisions on enforcement action are suitable and consistent.	Wider range of enforcement options being considered and implemented. We have successfully prosecuted 3 businesses with 8 more cases in preparation. We are working to increase use of the full range of enforcement options particularly Hygiene Improvement Notices.
3.5.2(i) Develop, maintain and implement documented internal monitoring procedures in accordance with Article 8 of Regulation (EC) No. 882/2004 (Official Feed and Food Controls), the Food Law Code of Practice and centrally issued guidance. This should include all aspects of the Service, including the work of contractors where appropriate. [The Standard – 19.1]	Completed	Has been implemented.	Increased Monitoring based on risk has now been implemented and records of the monitoring are available.
3.5.2(ii) Ensure that records of monitoring activities are maintained. [The Standard – 19.3]	Completed	Has been implemented.	Increased Monitoring has now been implemented and records of the monitoring are available.

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3.5.10 Maintain up to date 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, results of any sampling, details of any complaints and any action taken, and also relevant food registration and approval information. The authority should also record, with reasons, any deviations from set procedures.[The Standard-16.1]		Inspection aids memoirs will be reviewed and amended to capture and record additional details during the inspection.	New inspection proforma's for both approved premises and non-approved premises inspection have been devised and are in use.