

Audit of Local Authority Service Delivery Operation of the Food Hygiene Rating Scheme

Thurrock Council
29-30 March 2016



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1.0 Introduction

- 1.1 This is a report on the outcomes of the Food Standards Agency's (FSA's) audit of Thurrock Council conducted between 29th and 30th March 2016 at The Council Offices, Civic Offices, New Road, Grays, Essex RM17 6SL. The audit was carried out as part of a programme of audits on local authority (LA) operation of the Food Hygiene Rating Scheme (FHRS). The report has been made available on the Agency's website at:

www.food.gov.uk/enforcement/auditandmonitoring/auditreports

Hard copies are available from the FSA by emailing the FSA at LAAudit@foodstandards.gsi.gov.uk or telephoning 01904 232116.

- 1.2 The audit was carried out under section 12(4) of the Food Standards Act 1999 and section 11 of the FHRS Brand Standard. The FSA is committed to fulfilling its role in monitoring and auditing the implementation and operation of the FHRS. Consistent implementation and operation of the FHRS is critical to ensuring that consumers are able to make meaningful comparisons of hygiene ratings for establishments both within a single local authority area and across different local authority areas, and to ensure businesses are treated fairly and equitably.
- 1.3 The Agency will produce a summary report covering outcomes from the audits of all local authorities assessed during this programme.

2.0 Scope of the Audit

- 2.1 The audit focused on the LA's operation of the FHRS with reference to the FHRS Brand Standard, the Framework Agreement and the Food Law Code of Practice (FLCoP). This included organisation and management, resources, development and implementation of appropriate control procedures, reporting of data, premises database, training of authorised officers and internal monitoring. Views on operation of the FHRS were sought to inform FSA policy development.

3.0 Objectives

- 3.1 The objectives of the audit were to gain assurance that:
- The LA had implemented the FHRS in accordance with the Brand Standard
 - There were procedures in place to ensure that the FHRS was operated consistently.

- Notifications of ratings, handling of appeals, requests for re inspection and rights to reply were dealt with efficiently.
- Scoring under Chapter 5.6 of the FLCoP was appropriately evidenced and justified.
- Inspections were carried out at intervals determined by Chapter 5.6 of the FLCoP
- Officers administering the scheme were trained and competent.

The audit also sought to identify areas of good and innovative FHRs working practice within Local Authorities. A key focus was on consistency with the Brand Standard.

4.0 Executive Summary

4.1 The Authority was selected for audit as it was representative of a LA with an average percentage (64%) of food businesses with a food hygiene rating of 5, when compared against national figures.

4.2 The Authority was found to be operating the FHRs broadly in accordance with the obligations placed on it by participation in the Scheme. However, some improvements were required to enable the Service to provide accurate and up to date data, consistent operation and the required level of protection to consumers and food business operators in order to meet the requirements of the FHRs Brand Standard, the Framework Agreement and the FLCoP. A summary of the main findings and key improvements necessary is set out below.

4.3 Strengths:

4.3.1 The Authority had been active in taking up FSA grants to coach food businesses and promote display of the FHRs sticker in low scoring food establishments.

4.3.2 The Authority's website contained information for the public and food businesses about the FHRs scheme and how ratings were calculated. It also included a link to the FSA business web pages and the FHRs ratings website.

4.3.3 A number of new procedures had been put in place in the last year, which were beginning to produce results in terms of improving internal monitoring, for example, although there was still work to do.

4.4 Key areas for improvement:

- 4.4.1 At the time of the audit, 122 food establishments were overdue a programmed intervention, some by three years. As a result, a significant number of food hygiene ratings were out of date. Although mostly awarded a low risk rating at their last inspection, auditors noted that the operations of these businesses and the corresponding risks posed to the public may have changed or increased. These businesses included potentially high risk establishments such as caring establishments and take-aways.
- 4.4.2 The Authority had not estimated the resource required for each part of the Service and compared it with the resource available.
- 4.4.3 FHRS appeals had not been consistently administered in accordance with the time limits specified in the Brand Standard.
- 4.4.4 Internal monitoring was generally comprehensive and effective, however audit evidence indicated that the scope and pace of monitoring would benefit from a review to ensure that accurate database reporting was put in place to allow reliable database monitoring and an acceleration in the process of cleansing the database (and therefore the FHRS website) of duplicate premises records.

5.0 Audit Findings and Recommendations

5.1 Organisation and Management

- 5.1.1 The Authority had in place a service delivery plan for 2015/16 which was not written in accordance with the service planning guidance of the Framework Agreement on Official Feed and Food Controls by Local Authorities (the “Framework Agreement”).
- 5.1.2 At the time of the audit, the Authority verbally reported the full time equivalent (FTE) resource for the food safety team as 4.6. The Authority had not included in its service plan an estimate of the resource required for each part of the service and compared it with the resource available, nor had it made reference to the profile of the Authority or the financial and staffing allocation for the food service.

Recommendation 1 - Service planning

[The Standard 3.1]

[See also paragraph 5.1.3]

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 for each area of service delivery (including those necessary to meet the intervention frequencies prescribed by the FLCoP), together with a comparison with the resources available. Include the profile of the Authority, the financial and staffing allocation for the food service.

- 5.1.3 The Service Plan included 100% intervention targets for high risk (A and B and non-compliant C rated), non-compliant businesses and approved establishments. It stated that the remaining premises would be prioritised for intervention based on their connection with vulnerable groups of consumers. However the service plan did not commit to meeting the intervention frequencies prescribed by the FLCoP.
- 5.1.4 Whilst some reference was made to inadequate resourcing it was felt the Plan could be strengthened by including more detail on what the impact of not completing outstanding interventions would be for the Authority in terms of risk, statutory compliance and the accuracy of food hygiene ratings.
- 5.1.5 The Authority had not carried out, documented and submitted to the relevant member forum or delegated senior officer a performance review based on the service plan.

Recommendation 2 – Performance review

[The Standard 3.2]

Carry out and document a performance review based on the service plan at least once a year and submit it for approval to either the relevant member forum or, where approval and management of service delivery plans has been delegated to senior officers, to the relevant senior officer.

- 5.1.6 There was reference to FHRS in the Food Team Plan, as well as a further reference to meeting a service plan target through the provision of advice to business.

5.2 FHRs implementation history

- 5.2.1 The Authority had launched the FHRs scheme in May 2012 by the “critical mass” approach.
- 5.2.2 In the last year the Authority had carried out a project funded by the FSA to promote the display of FHRs in low scoring establishments. It had also run a training programme targeting businesses with a food hygiene rating of 0-2, followed up with invitations to those businesses to apply for a re-score. The Authority advised auditors that this initiative had been a success and that it had produced a number of improved ratings. Some evidence of this was seen.
- 5.2.3 The Authority’s database indicated that 4.5% of food businesses which had received an intervention had not yet been given a food hygiene rating, although there was some doubt as to the accuracy of this figure (see paragraph 5.6.10 below). Officers advised auditors that the intention was to give these establishments a food hygiene rating as they became due.

5.3 Authorisation and Training

- 5.3.1 The authorisation and training records of five food safety officers, including the Lead Food Officer, were checked.
- 5.3.2 All officers had attended risk rating consistency training and HACCP training. All staff had achieved 10 hours CPD during the calendar year 2015 as required by the FLCoP. All officers were appropriately qualified in accordance with their authorisations and duties.
- 5.3.3 The training needs of the team had been assessed by the Lead Food Officer and agreed as part of the annual performance review process.
- 5.3.4 Although current at the time of the audit, Auditors reminded the Authority of the new FLCoP competency and training requirements in force from 1st April this year which would require imminent changes to the Authority’s authorisation procedure.

Recommendation 3 – Authorisation documents

[The Standard 5.1]

Update authorisations and any associated procedures to reflect current FLCoP requirements.

5.4 Inspection Procedures

- 5.4.1 The Authority had two procedures which prescribed the approach officers should take to FHRs interventions and inspections, including

the “Food Hygiene Rating Procedure” which constituted the Authority’s FHRS Consistency Framework, as required by the Brand Standard. Auditors observed that the “Food Hygiene and Standards Inspections Procedure” would shortly need to be updated to reflect the new FLCoP competency requirements in force from 1st April 2016.

- 5.4.2 Inspectors used an aide-memoire to record inspection findings and the food hygiene rating awarded. Inspections were either reported to the food business at the time of the inspection using a carbon copy form, or sent to the operator after the visit.
- 5.4.3 The inspection report format, report letters and safeguard measures forms used were all in accordance with the Brand Standard and FLCoP.
- 5.4.4 The Food Hygiene Rating Procedure reflected the requirements of the FSA FHRS Brand Standard.
- 5.4.5 The Authority’s Consistency Framework assigned the responsibility for determining appeals against food hygiene ratings to the Principal EHO (Lead Food Officer). Auditors were advised that in his absence an EHO would perform this role independently of the inspecting officer.
- 5.4.6 The Authority had put in place an approach to prioritise certain interventions, inspections had not been carried out at the frequencies prescribed by the FLCoP. At the time of the audit 122 food establishments were overdue a programmed inspection (including 29 unrated businesses), a significant number by three years. It was established that hygiene ratings at some overdue establishments were significantly out of date as a result. Auditors acknowledged that the Authority was forecast to realise the benefit of a higher FTE resource in 2016/17 as a result of the appointment of a new staff member in 2015.

Recommendation 4 - Frequency of official interventions

[The Standard 7.1]

Carry out interventions/inspections at all food hygiene establishments at a frequency which is not less than that determined under the hygiene intervention rating scheme set out in the FLCoP.

- 5.4.7 Overdue establishments included C, D and E rated establishments, which in turn included caring establishments, restaurants, take-aways, importers and exporters, manufacturers and schools. Auditors emphasised the increasing risk of low risk premises becoming higher risk the longer they remain without an intervention by a local Authority.

- 5.4.8 There is a clear need to address the backlog of inspections fully to ensure all food establishments receive interventions and food hygiene ratings at the frequency required by the FLCoP and FHRS Brand Standard in future.
- 5.4.9 A part of this element of the audit we also examined liaison arrangements with other local authorities regarding information on mobile, or itinerant, traders. These liaison arrangements are important in ensuring the consistent application of the Brand Standard across local authority boundaries. The Authority had a clear policy in place for registering mobile traders in accordance with the FLCoP, which included taking account of inspection findings from other local authorities. Auditors were advised that no requests for transfer of registration had been received.
- 5.4.10 A small number of larger food establishments had been found to have been inspected as separate units, contrary to the FLCoP. This has the potential to result in the upload of conflicting data to the FHRS website, potentially confusing the consumer. It was evident that the Authority had abandoned the policy of unitisation relatively recently and that it had been re-combining affected premises records as they became due for inspection. Due to the effect on consumer information, auditors advised the Authority that completion of this work should be prioritised.

Recommendation 5 – Risk ratings

[The Standard 7.2]

Identify the remaining unitised premises in the database and re-combine them into one record per food establishment in accordance with the FLCoP and associated centrally issued guidance.

- 5.4.11 Five food premises files were examined during the audit. All had been inspected at the appropriate frequency and by an appropriately authorised officer, and had generally been correctly risk rated. However, in two cases officers had not recorded sufficient information to justify their choice of risk rating. In addition, another premises had been awarded a confidence in management score on two consecutive occasions which was not in accordance with the FLCoP.

Recommendation 6 – Records

[The Standard 16.1]

Keep accurate records of intervention records to support the determination of compliance with legal requirements.

Recommendation 7 – Risk ratings

[The Standard 7.3]

Assess the compliance of establishments and systems in accordance with the scheme set out in Chapter 5.6 of the FLCoP and associated centrally issued guidance.

Reality Visit to a Food Premises

- 5.4.12 During the audit, a verification visit was undertaken to a local food business with an officer from the Authority. The main objective of the visit was to evaluate the effectiveness of the Authority's assessment of food business compliance with food law requirements and the justification of the food hygiene rating given.
- 5.4.13 The officer had a good working relationship with the FBO and was able to demonstrate a detailed knowledge of food safety legislation and food safety management systems at the establishment.

5.5 Notification of ratings and follow up

- 5.5.1 Of the five food premises files examined during the audit, the Authority was able to demonstrate that most premises had received a sticker and notification of their food hygiene rating in the format required by the Brand Standard and FLCoP within 14 days. However this evidence was not present for others; as a result the Authority was unable to satisfy itself completely that this part of the Brand Standard had been complied with in every case. Auditors noted that the recent introduction of a new inspection form may help to address these issues in the future.

Recommendation 8 – Internal Monitoring

[The Standard 19.1]

Keep records sufficient to demonstrate that businesses have received a sticker and notification of their hygiene rating within 14 days of their food hygiene rating intervention in the format required by the Brand Standard.

- 5.5.2 The food hygiene rating score on the database for all five premises matched that found on the FHRS website.

Re-Inspection/Re-visits

- 5.5.3 Five food premises re-Inspection/re-visit files were examined during the audit. All had been correctly administered in accordance with the Brand Standard.
- 5.5.4 The Authority advised auditors that it had become aware of a food business deliberately displaying the incorrect food hygiene rating. As a result the inspecting officer had referred the matter to Trading Standards colleagues for action.

Appeals

- 5.5.5 Appeals were determined by the Lead Food Officer as a matter of policy, deputised by an EHO (one who had not carried out the inspection concerned) in his absence.
- 5.5.6 Two appeals against a food hygiene rating had been made to the Authority in the two years prior to the audit. One had been accepted almost two months after the inspection date, contrary to the Brand Standard and the outcome of the other had been notified to the FBO in excess of 7 days of the appeal being lodged.

Recommendation 9 – FHRS Appeals

[The FHRS Brand Standard, section 6]

Observe the timescales laid down in the Brand Standard when administering food hygiene rating appeals.

- 5.5.7 The appeals were otherwise administered in accordance with the Brand Standard and FLCoP.

Right to Reply

- 5.5.8 One business had taken advantage of the right to reply in the two years preceding the audit. The process had generally been administered correctly, however auditors were unable to find evidence that the Authority had given the food business operator an opportunity to comment on the final wording before publication.

Recommendation 10 – FHRs Right To Reply

[The FHRs Brand Standard, section 7]

When 'right to reply' wording is amended, give the food business operator an opportunity to comment on the final wording before publication.

5.6 Food Premises Database

- 5.6.1 The Authority had in place a food premises database which was generally capable of providing the information required by the FSA to populate the FHRs website. The database was not yet able to upload food businesses awaiting inspection (this is a characteristic of this database model recognised by the FSA), however the Authority were expecting this functionality to appear with the next update of their database software in May 2016.
- 5.6.2 The database was backed up daily and access permissions to delete records were limited to the Lead Food Officer.
- 5.6.3 The database was generally up to date. Prior to the audit, a search was carried out using the internet and six food businesses were checked against the Authority's database. One business was not present on the food database; officers undertook to write to the business and request that they register.
- 5.6.4 The remaining five businesses included within the food hygiene intervention programme had their food hygiene rating information correctly presented on the FSA website in accordance with FHRs Brand Standard requirements.
- 5.6.5 The Authority had put in place an FHRs Upload Procedure which prescribed the audit and upload of its data to the FSA FHRs database every fortnight.
- 5.6.6 A successful live data upload was carried out during the audit and in accordance with the FSA IT guidance for the Brand Standard. The Authority were routinely running monitoring reports against the data export and data dump and demonstrated using these reports to spot and amend errors.
- 5.6.7 Database checks included quarterly rolling checks on all business status types and auditors were supplied with evidence of a significant reduction in the number of anomalous status labels as a result of this monitoring. A few businesses still had an inaccurate business status or local authority enforcement monitoring system (LAEMS) business type allocated to them, however auditors acknowledged that the database/upload monitoring procedure was relatively new and the

effects of improved monitoring were still accumulating. The Authority undertook to review its procedure as a result of this audit.

Recommendation 11 - Database maintenance and monitoring

[The Standard 11.2]

[See also paragraph 5.6.9, 5.6.11]

Review and where necessary amend database monitoring procedures to ensure that the detection of erroneous food hygiene ratings, LAEMS business types, FHRS business statuses and duplicate premises records is successful.

- 5.6.8 Auditors passed a brief list of potential anomalies generated by the FSA FHRS team for review to the Audit Liaison Officer.
- 5.6.9 A number of food businesses on the Authority's database were found to be duplicates where old premises records had not been closed down. These issues were found to have resulted in differing food hygiene ratings appearing for the same food premises on the FSA food hygiene ratings website.

Recommendation 12 - Database cleansing

[The Standard 6.3]

Carry out a database cleansing exercise to remove all duplicate food premises.

- 5.6.10 A significant number of food businesses on the database spreadsheet provided to auditors before the audit appeared to have been inspected but had no food hygiene rating awarded, or had a food hygiene rating which differed from the component risk scores. On investigation, a sample of those premises did have the correct hygiene ratings on the FSA website. This appeared to be a reporting problem.

Recommendation 13 - Database training

[The Standard 5.4]

[See also paragraph 5.6.11]

- (i) Ensure officers and support staff receive additional training on database reporting to ensure the provision of accurate information to both the Lead Food Officer and others (internal reporting) and to the FSA.
- (ii) Ensure officers receive additional informal training on intervention record entry to ensure the provision of accurate information to the FSA and the Public.

5.6.11 The FSA FHRS website was found to be displaying an incorrect rating for at least one food business as a result of the inspecting officer having not pressed the “import” button to correctly record the most recent inspection.

5.7 Consistency Framework

5.7.1 The Authority carried out some internal monitoring against the requirements of the FHRS Brand Standard and its own Consistency Framework.

5.7.2 Over the last year, this had included annual documented accompanied inspections and quarterly inspection paperwork checks for each officer, regular review of outstanding inspections by the Lead Food Officer as well as team meetings and joint inspections where food ratings were often discussed and agreed by both officers. The Lead Food Officer was responsible for internal monitoring, which included checking (and in one case seen, amending) contract inspector food hygiene ratings. In his absence officers were checking and signing off one another’s changes to food hygiene ratings following inspections.

5.7.3 The authority advised auditors that it had taken part in the national FHRS consistency exercise recently conducted by the FSA, however it had not submitted its results to the Agency. The LA demonstrated that in-house informal food hygiene rating consistency discussions and exercises had taken place in team meetings. The Authority reported that there had been no regional consistency exercises arranged by the Essex FLG, however it was evident that consistency discussions did take place.

Recommendation 14 – Review of consistency framework

[The FHRs Brand Standard, section 11]

Participate in consistency training organised and funded by the FSA, or ensure participation in equivalent training.

5.8 Local Authority Website

5.8.1 The Authority's website contained information for the public and food businesses about the FHRs scheme and how ratings were calculated and included a link to the FSA business web pages and the FHRs ratings website.

5.9 FHRs Website

5.9.1 The Authority had published its current e-mail address and website address but not its logo on the FHRs website. The Authority undertook to contact the FSA FHRs team to arrange publication.

Audit Team: **Alun Barnes – Lead Auditor**
 Jamie Tomlinson – Auditor

Food Standards Agency
Local Delivery Audit Team

ANNEX A - Action Plan for Thurrock Council

Audit date: 29-30 March 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 for each area of service delivery (including those necessary to meet the intervention frequencies prescribed by the FLCoP), together with a comparison with the resources available. Include the profile of the Authority, the financial and staffing allocation for the food service.</p>	<p>30 June 2016</p>	<p>While there is a current service plan in place which meets the Councils criteria and format, this will be amended to meet the Service Planning Guidance of the Framework Agreement on Official Feed and Food Controls by Local Authorities.</p>	<p>Reviewed Service Planning Guidance and contacted other LAs to consider suitable format that meets 3.1 of The Standard while also meeting Thurrock Councils key corporate content standards.</p> <p>The delay in completing this is due to other work pressures relating to the LAEMS return.</p>
<p>Recommendation 2 – Performance review [The Standard 3.2]</p> <p>Carry out and document a performance review based on the service plan at least once a year and submit it for approval to either the relevant member forum or, where approval and management of service delivery plans has been delegated to senior officers, to the relevant senior officer.</p>	<p>October 2016</p>	<p>Review of performance against the Service Plan to be carried out, documented and submitted to the Head of Residents Services in October 2016. This will be submitted to Cleaner, Greener & Safer Overview and Scrutiny Committee in July 2017.</p>	<p>Target date takes into account internal reporting mechanisms.</p>

<p>Recommendation 3 – Authorisation documents [The Standard 5.1]</p> <p>Update authorisations and any associated procedures to reflect current FLCoP requirements.</p>	<p>30 June 2016</p>	<p>Although current at the time of the audit, changes will be made to the authorisation procedure to reflect new FLCoP requirements.</p>	<p>Review undertaken of training requirements. All staff undertaken RDNA self-assessment to identify and prioritise development needs.</p>
<p>Recommendation 4 - Frequency of official interventions [The Standard 7.1]</p> <p>Carry out interventions/inspections at all food hygiene establishments at a frequency which is not less than that determined under the hygiene intervention rating scheme set out in the FLCoP.</p>	<p>1/10/16</p>	<p>Arrangements have been made to carryout interventions/inspections at due and overdue premises in accordance with the FLCoP.</p>	<p>Team meeting to set individual inspection targets for inspections</p>
<p>Recommendation 5 – Risk ratings [The Standard 7.2]</p> <p>Identify the remaining unitised premises in the database and re-combine them into one record per food establishment in accordance with the FLCoP and associated centrally issued guidance.</p>	<p>Completed</p>	<p>Completed</p>	<p>Premises have been identified and sorted into those suitable for unitisation. Premises have been merged on database to form one record in accordance with FLCoP</p>
<p>Recommendation 6 – Records [The Standard 16.1]</p> <p>Keep accurate records of intervention records to support the determination of compliance with legal requirements.</p>	<p>Completed</p>	<p>While it has been acknowledged that internal monitoring is generally comprehensive and effective, additional checks will be introduced of records to monitor compliance with the standard.</p>	<p>Team meeting undertaken reinforce the expected standards of recording sufficient detail on intervention documentation</p>

<p>Recommendation 7 – Risk ratings [The Standard 7.3]</p> <p>Assess the compliance of establishments and systems in accordance with the scheme set out in Chapter 5.6 of the FLCoP and associated centrally issued guidance.</p>	<p>Completed</p>	<p>Changes will be made to the Uniform auto templates to extract the breakdown of the previous inspections to avoid scoring a 10 in the confidence in management category on two occasions.</p>	<p>Team meeting undertaken to reinforce need to assess compliance effectively with the FLCoP. All food staff enrolled on additional training for intervention risk rating and food law code of practice course</p>
<p>Recommendation 8 – Internal Monitoring [The Standard 19.1]</p> <p>Keep records sufficient to demonstrate that businesses have received a sticker and notification of their hygiene rating within 14 days of their food hygiene rating intervention in the format required by the Brand Standard.</p>	<p>Completed</p>	<p>Completed</p>	<p>Team meeting undertaken to reinforce the importance of completing and scanning all FHRS documents to file. While a new FHRS carbon copy had been introduced prior to the audit to indicate whether a FHRS sticker was left at the time of inspection, additional internal monitoring checks have been introduced to ensure that all documents are scanned and readable.</p>
<p>Recommendation 9 – FHRS Appeals [The FHRS Brand Standard, section 6]</p> <p>Observe the timescales laid down in the Brand Standard when administering food hygiene rating appeals.</p>	<p>Completed</p>	<p>Timescales laid down in the brand standard to be adhered to. Additional monitoring procedure introduced to check adherence to timescales.</p>	<p>Team meeting undertaken reinforce the expected standards</p>

<p>Recommendation 10 – FHRS Right To Reply [The FHRS Brand Standard, section 7]</p> <p>When ‘right to reply’ wording is amended, give the food business operator an opportunity to comment on the final wording before publication.</p>	<p>Completed</p>	<p>Procedure introduced to ensure that the amended right of reply wording is provided in writing allowing the food business operator the opportunity to comment prior to publication.</p>	<p>Team meeting undertaken reinforce the expected standards and amended procedure</p>
<p>Recommendation 11 - Database maintenance and monitoring [The Standard 11.2]</p> <p>Review and where necessary amend database monitoring procedures to ensure that the detection of erroneous food hygiene ratings, LAEMS business types, FHRS business statuses and duplicate premises records is successful.</p>	<p>Completed</p>	<p>Procedure amended to include the detection of erroneous food hygiene ratings, LAEMS business types, FHRS</p> <p>Dedicated Uniform database IT role to be created to undertake a wide range of Uniform functions. This should assist with database maintenance and cleansing.</p>	<p>Team meeting undertaken to discuss amended procedure.</p> <p>Discussions ongoing with Brentwood Council regarding database support</p>
<p>Recommendation 12 - Database cleansing [The Standard 6.3]</p> <p>Carry out a database cleansing exercise to remove all duplicate food premises.</p>	<p>Completed</p>	<p>Dedicated Uniform database IT role to be created to undertake a wide range of Uniform functions. This should assist with database maintenance and cleansing.</p>	<p>Data extracted from Uniform and lists checked to remove all duplicate food premises on EH database.</p>

<p>Recommendation 13 - Database training [The Standard 5.4]</p> <p>(i) Ensure officers and support staff receive additional training on database reporting to ensure the provision of accurate information to both the Lead Food Officer and others (internal reporting) and to the FSA.</p> <p>(ii) Ensure officers receive additional informal training on intervention record entry to ensure the provision of accurate information to the FSA and the Public.</p>	<p>31.10.16 (Depending on training dates)</p> <p>31.06.16</p>	<p>Database reporting training to be provided to officers and support staff where appropriate</p> <p>Procedures to be updated following upgrade</p> <p>In house training to be provided to all officers on intervention record entry</p>	<p>Major upgrade to Uniform May 2015</p>
<p>Recommendation 14 – Review of consistency framework [The FHRS Brand Standard, section 11]</p> <p>Participate in consistency training organised and funded by the FSA, or ensure participation in equivalent training.</p>	<p>31.10.16 (Depending on training dates)</p>	<p>While all staff have already undertaken FSA consistency training, further refresher training will be provided on consistency framework.</p>	<p>Staff to participate in upcoming FSA consistency exercise.</p> <p>Discussions ongoing with Essex Food Group</p>

ANNEX B - Audit Approach/Methodology

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

- (1) Examination of LA plans, policies and procedures.
- (2) A range of LA file records were reviewed.
- (3) Review of Database records
- (4) Officer interviews

ANNEX C - Glossary

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.
Brand Standard	This Guidance represents the 'Brand Standard' for the Food Hygiene Rating Scheme (FHRS). Local authorities in England and Northern Ireland operating the FHRS are expected to follow it in full.
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.
County Council	A local authority whose geographical area corresponds to the county and whose responsibilities include food standards and feeding stuffs enforcement.
District Council	A local authority of a smaller geographical area and situated within a County Council whose responsibilities include food hygiene enforcement.
Environmental Health Officer (EHO)	Officer employed by the local authority to enforce food safety legislation.
Feeding stuffs	Term used in legislation on feed mixes for farm animals and pet food.
Food hygiene	The legal requirements covering the safety and wholesomeness of food.

Food standards	The legal requirements covering the quality, composition, labelling, presentation and advertising of food, and materials in contact with food.
Framework Agreement	<p>The Framework Agreement consists of:</p> <ul style="list-style-type: none"> • Food and Feed Law Enforcement Standard • Service Planning Guidance • Monitoring Scheme • Audit Scheme <p>The Standard and the Service Planning Guidance set out the Agency's expectations on the planning and delivery of food and feed law enforcement.</p> <p>The Monitoring Scheme requires local authorities to submit yearly returns via LAEMS to the Agency on their food enforcement activities i.e. numbers of inspections, samples and prosecutions.</p> <p>Under the Audit Scheme the Food Standards Agency will be conducting audits of the food and feed law enforcement services of local authorities against the criteria set out in the Standard.</p>
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 and feed enforcement.
Member forum	A local authority forum at which Council Members discuss and make decisions on food law enforcement services.
Metropolitan Authority	A local authority normally associated with a large urban conurbation in which the County and District Council functions are combined.
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 Department within a local authority which carries out, amongst other responsibilities, the enforcement of food standards and feeding stuffs

legislation.

Trading Standards
Officer (TSO)

Officer employed by the local authority who, amongst other responsibilities, may enforce food standards and feeding stuffs legislation.

Unitary Authority

A local authority in which the County and District Council functions are combined, examples being Metropolitan District/Borough Councils, and London Boroughs. A Unitary Authority's responsibilities will include food hygiene, food standards and feeding stuffs enforcement.