
**Report on the Food Law Enforcement Service's
Arrangements for Food Premises Database
Management, Food Hygiene Inspections
and Internal Monitoring**

Chorley Borough Council

13 – 14 May 2008

Foreword

Audits of local authorities' food law enforcement services are part of the Food Standards Agency's arrangements to improve consumer protection and confidence in relation to food. These arrangements recognise that the enforcement of UK food law relating to food safety, hygiene, composition, labelling, imported food and feeding stuffs 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 Authority's Food Law Enforcement Service. The assessment includes the local arrangements in place for database management, inspections of food businesses and internal monitoring. It should be acknowledged that there will be considerable diversity in the way and manner in which local authorities may provide their food enforcement services reflecting local needs and priorities.

Agency audits assess local authorities' conformance against the Food Law Enforcement Standard "The Standard", which was published by the Agency as part of the Framework Agreement on Local Authority Food Law Enforcement and is available on the Agency's website at:
www.food.gov.uk/enforcement/.

The main aim of the audit scheme is to maintain and improve consumer protection and confidence by ensuring that local authorities are providing an effective food law enforcement service. The scheme also provides the opportunity to identify and disseminate good practice and provide information to inform Agency policy on food safety, standards and feeding stuffs.

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

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

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1. Introduction

- 1.1 This report records the results of an audit at Chorley Borough Council with regard to food hygiene enforcement under relevant headings of the Food Standards Agency Food Law Enforcement Standard. The audit focused on the Authority's arrangements for the management of the food premises database, food premises inspections, and internal monitoring. The report has been made available on the Agency's website at: www.food.gov.uk/enforcement/audits/. Hard copies are available from the Food Standards Agency's Local Authority Liaison Division at Aviation House, 125 Kingsway, London WC2B 6NH, Tel: 020 7276 8428.

Reason for the Audit

- 1.2 The power to set standards, monitor and audit local authority food law enforcement services was conferred on the Food Standards Agency by the Food Standards Act 1999 and Regulation 7 of the Official Feed and Food Controls (England) Regulations 2007. This audit of Chorley Borough Council was undertaken under section 12(4) of the Act as part of the Food Standards Agency's annual audit programme.
- 1.3 The Authority was included in the Food Standards Agency's programme of audits of local authority food law enforcement services, as it was a District council, had not been audited in the past by the Agency and was representative of a geographical mix of 10 authorities selected across England.

Scope of the Audit

- 1.4 The audit examined Chorley Borough Council's arrangements for food premises database management, food premises inspections, and internal monitoring with regard to food hygiene law enforcement. The scope of the audit also included an assessment of the Authority's overall organisation and management, and the internal monitoring of other food hygiene law enforcement activities.
- 1.5 Assurance was sought that key authority food hygiene law enforcement systems and arrangements were effective in supporting business compliance, and that local enforcement was managed and delivered effectively. The on-site element of the audit took place at the Authority's office at Bengal Street Depot, Bengal Street, Chorley on 13-14 May 2008.
- 1.6 The audit assessed the Authority's conformance against the requirements of the Standard which was adopted by the Food Standards Agency Board on 21 September 2000, (amended July 2004), 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/role/framework.

Background

- 1.7 Chorley is a Borough Council with a population of approximately 100,500 within an area of about 80 square miles. The Borough is predominantly rural in character but with small urban developments and an urban core centred on the former mill town of Chorley located at the foot of the West Pennine Moors. The town is now famous for its market heritage. Chorley, like most Lancashire towns, gained its wealth from the Industrial Revolution and was a vital cotton town. Today Chorley is expanding as a satellite residential town mostly inhabited by people working in the larger neighbouring towns such as Bolton and Preston; with new residential and industrial areas being developed on its outskirts.
- 1.8 Food hygiene law enforcement was the responsibility of the Public Health Team of the Environmental Health Section within the Neighbourhoods Directorate. The Team was also responsible for a wide range of environmental health functions, including health and safety and 'smokefree' legislation enforcement, food sampling and infectious disease control.
- 1.9 The Public Health Team was not responsible for the enforcement of food standards and feeding stuffs law enforcement, which was carried out by Lancashire County Council Trading Standards Service.
- 1.10 The Authority's food hygiene inspections plan for 2007/2008, as reported in the monitoring returns made to the Agency for the financial year 2006/2007, indicated that the Public Health Team was responsible for enforcing food hygiene legislation in 827 premises. These food businesses were predominantly within the catering (61%) and retail (34%) sectors. The monitoring returns also confirmed the Authority's food hygiene law enforcement activities in the year, as follows:

Enforcement Activity	Number
Food hygiene inspections	438
Other visits	0
Revisits	344
Advisory and sampling visits	290
Establishments subject to Hygiene Improvement Notices	1
Seizures, detentions and surrenders	0
Informal samples	0
Official samples	260

2. Executive Summary

- 2.1 The Council had a draft Food Service Plan for 2008/2009 which was due to be submitted for Member approval. This was broadly in line with the Agency's Service Planning Guidance in the Framework Agreement, although it did not cover some aspects of the Guidance. Future service planning could benefit from including these to ensure they are in accordance with official guidance.
- 2.2 The Service had effective arrangements in place for ensuring that the food database was up-to-date and that information relating to inspections and other food law enforcement activities was accurate. There were also effective systems for database back-up and to manage access. The database system needed to be reconfigured to consistently add 'the additional score of 22' as appropriate to individual premises catering for vulnerable groups, to ensure correct risk rating of relevant premises in accordance with the risk rating scheme in the Food Law Code of Practice.
- 2.3 File and database records checks confirmed that the Authority had implemented an effective food premises inspection programme and inspections across all risk categories were being carried out at the minimum frequencies and within the time frames specified in the Food Law Code of Practice. Approved establishments had been correctly re-approved in accordance with current EU hygiene regulations.
- 2.4 The Authority had a procedure for the authorisation of officers based upon a competency assessment which was recorded in a clear and comprehensive competency matrix. However, the associated schedule of authorisation did not reflect the ability, qualifications, experience and responsibilities of individual officers as set out in the competency matrix.
- 2.5 There was evidence of comprehensive quantitative and qualitative internal monitoring across all food law enforcement activities. The internal monitoring procedures and arrangements required further development to ensure that the frequency, responsibilities and approaches to internal monitoring were more clearly defined.

3. Audit Findings

3.1 Organisation and Management

Strategic Framework, Policy and Service Planning

- 3.1.1 A Food Safety Service Plan for 2008/2009 had been drafted. This, along with previous Food Service Plans formed part of the appendix of the Neighbourhoods Directorate Business Improvement Plan for the year. The 2008/2009 Business Improvement Plan had yet to be submitted to elected Members for approval, as Council elections had just taken place and new Members had only recently assumed office.
- 3.1.2 Although the Service Plan was broadly in line with the Service Planning Guidance, it did not adequately cover some areas of the Service in accordance with the Guidance in the Framework Agreement. The plan therefore needed to be further developed to include:
- An annual review of performance, including the measures taken to address variances in previous Service Plans and any required areas for improvement;
 - Confirmation of the Authority's policy in relation to the implementation of alternative enforcement strategies;
 - Details of the demands on the service including a breakdown of *all* planned food law enforcement activities.
- 3.1.3 The Authority's key objective for food safety in the 2008/2009 Business Improvement Plan was to 'Deliver the Council's food safety enforcement obligations in accordance with the new Code of Practice and regulatory guidance', with the intended outcomes of the 'enforcement strategy reviewed and amended to fit national guidance' and 'new reporting mechanism in place'. The plan also set out the service targets:
- New Code of Practice published by the Food Standards Agency to inform food safety enforcement strategies;
 - Reconfigure database to meet with reporting requirements;
 - Review the inspection database and integrate alternative interventions to ensure compliance with legislation.

3.1.4 The staffing allocation to deliver the food safety service was detailed in the Plan as follows:

Staffing allocation	Full time equivalent (FTE)
Public Health Team Leader	0.6
EHO	2.0
Public Health Technical Officer	1.0

Recommendations

3.1.5 The Authority should:

- (i) Ensure that future Food Service Plans include all the details required by the Service Planning Guidance in the Framework Agreement. [The Standard – 3.1]
- (ii) Ensure that an annual review of performance against the Food Service Plan is carried out and submitted for appropriate Member approval. Any variance in meeting the service delivery plan should be addressed in the subsequent year's service arrangements. [The Standard – 3.2 & 3.3]

Documented Policies and Procedures

3.1.6 The Authority had developed and implemented policies and procedures covering a range of food law enforcement activities which formed part of its ISO 9001:2000 quality management system certification. This included a comprehensive electronically based document control procedure.

3.1.7 Whilst it was evident that a number of documents had been reviewed and updated, others contained out of date references to legislation or statutory guidance. The audit therefore highlighted the need to further develop the procedure for periodic and ad hoc reviews of documented policies and procedures.

3.1.8 Officers had access to up to date versions of legislation and statutory guidance via an on-line technical information service.

Recommendation

3.1.9 The Authority should:

Further develop the document control system to ensure that internal food hygiene policies and procedures are up to date and cover the full range of food law enforcement activities. The review process also needs to ensure that policies and procedures are reviewed at regular intervals and whenever there are changes to legislation and official guidance. [The Standard – 4.1 & 4.2]

Officer Authorisations

- 3.1.10 The Authority had a documented procedure for the authorisation of officers which included an officer authorisation process flowchart. The Head of Service had delegated powers to authorise individual officers under relevant legislation, based upon an assessment of their level of qualifications, experience and training. Officer competency, training undertaken and development needs were recorded in a comprehensive and clear 'competency matrix'.
- 3.1.11 It was observed that individual officers' schedules of authorisation did not adequately reflect the scope and limits of the individual officer's authorisation in accordance with the records in the competency matrix, as newly qualified and more experienced officers' schedules of authorisation were identical in content. However, the audits confirmed that in practice the competency matrix was used as the basis for determining the scope and limits of officer authorisations.
- 3.1.12 Officers' individual learning and development needs were assessed as part of the Authority's performance review process. This should be complemented by developing an officer training plan based on identified individual and team learning and development needs.
- 3.1.13 Officers were in general receiving adequate and appropriate training, but there was a need for the Authority to provide additional training on formal enforcement to their officers (see paragraph 3.3.9).

Recommendations

3.1.14 The Authority should:

- (i) Review and revise the Service's documented procedure on the authorisation of officers to detail the competency assessment process by which authorisations are conferred, based on an officer's individual qualifications, training and experience and ensure that officers' schedules of authorisation reflect the extent of individual officer authorisations. [The Standard – 5.1]
- (ii) Maintain and implement a documented training programme to ensure that officer and team training needs, in respect of food law enforcement, are met. [The Standard – 5.4]

3.2 Food Premises Database

- 3.2.1 Audit checks on the database confirmed that the Authority was operating a database system that was capable of providing the statistical monitoring returns required by the Food Standards Agency.
- 3.2.2 The Authority had a procedure on 'Validation and Verification of Product and Service', which the auditors were advised also encompassed measures to ensure the accuracy and completeness of the database. Whilst there was no specific procedures relating to the management of the food premises database, in practice the Service relied upon updating food registrations and the local knowledge and observations of officers to ensure database accuracy.
- 3.2.3 The database contained all 10 food premises that were randomly chosen from an on-line directory accessed through an internet search engine. All of the 10 premises were also included in the Authority's food hygiene inspection programme.
- 3.2.4 The database was managed by a Systems Manager, who had responsibility for configuring the system to take into account new policies and procedures, and to ensure that any software updates were effectively implemented. In addition the database was regularly backed up and maintained to ensure the accuracy, completeness and integrity of data.
- 3.2.5 There were a number of measures in place to control access to the database. Officers were able to input data, such as inspections, but access to functions that impacted on the accuracy and integrity of the database, such as the addition, amendment and deletion of premises details were restricted to designated administrative staff.
- 3.2.6 The food hygiene risk rating module on the database had been incorrectly configured to automatically award an additional 20 points to types of premises that were likely to cater for vulnerable groups such as day nurseries, care homes and nursing homes, regardless of the numbers and age groups of consumers. The risk scores were therefore not generated in accordance with the Food Law Code of Practice, which requires that an additional score of 22 points should be given only where there are more than 20 people in a vulnerable group (i.e. those under 5 or over 65, or people who are sick or immunocompromised). As a result some premises were not in the correct risk categories, either because an additional score of 20 had been inappropriately awarded or in cases where the additional score was appropriate, the deficit of 2 points had in many cases incorrectly placed the premises in a lower risk category and were therefore being inspected at a lower frequency than required by the Food Law Code of Practice.

3.2.7 The Authority promptly resolved the configuration problem and introduced procedures to ensure officers made individual risk assessments to determine if the additional 22 points for vulnerable groups was appropriate.

3.3 Food Premises Inspections

3.3.1 The Authority's Service Plan for 2008/2009 showed the following profile for food hygiene premises:

Risk category	No.	%*
A	2	0.5
B	31	3.5
C	429	50
D-E	399	46
TOTAL	861	

* figures rounded to nearest 0.5 %

In addition there were 11 approved establishments.

3.3.2 File and database record checks confirmed that the Authority had implemented an effective food premises inspection programme across all risk categories. All inspections were being carried out at the minimum frequencies and within the time frames specified in the Food Law Code of Practice. There was evidence that officers were proactive in providing advice and support to assist food businesses in complying with current legislation and relevant guidance.

3.3.3 The Authority had developed inspection procedures for general food hygiene inspections, and inspection of approved establishments. However, procedures on follow-up actions following inspections required review to ensure they encompassed the full range of available enforcement options.

3.3.4 The records of food hygiene inspections of 5 food businesses were examined. A database report produced during the audit confirmed that there were no premises overdue an inspection. Premises also received a timely revisit where appropriate, to ensure that required works had been completed.

3.3.5 Apart from the issues identified in relation to the risk scoring of premises catering for vulnerable groups, the risk rating scores awarded to food premises appeared to reflect the findings on inspection. However, it was not always clear from the inspection records on file that appropriate assessments of the business's progress in implementing procedures based on hazard analysis and critical control points (HACCP) had been undertaken. It was acknowledged that the food hygiene inspection form could be improved to prompt officers to record their findings in relation to the assessment of implementation of HACCP-based procedures in more detail. In addition the inspection form could be improved to prompt officers to record important details such as the size and scale of the business and information on food handlers' hygiene training.

- 3.3.6 A standard report of inspection form was left with the food business operator (FBO) at the end of every inspection. The existing form did not make provision for officers to record all the information required by the Food Law Code of Practice. However, this had already been recognised by the Service and a revised inspection report form had been recently developed.
- 3.3.7 Files for 3 product-specific establishments requiring approval under Regulation (EC) No. 853/2004 were also examined. The premises had been inspected at the minimum frequency set out in the Food Law Code of Practice. File records were found to be well ordered and information was easily retrievable, although in some cases files did not contain all the information on the premises as recommended in the Food Law Practice Guidance.
- 3.3.8 File records also confirmed that the Authority's officers had assessed compliance of relevant establishments under new EU food hygiene regulations. Approval documents were being re-issued under Regulation (EC) No. 853/2004 to confirm that the establishments complied with the new hygiene requirements.
- 3.3.9 Checks were made on the records for 3 hygiene improvement notices served following inspections. All the notices were signed by a correctly authorised officer who had witnessed the contravention and contained details of the regulation contravened. Some necessary improvements in relation to the wording of the notices were identified. In 1 case, measures to be taken to address contraventions identified were continuous in nature, which meant that compliance with the notice could not be achieved. Two notices also contained unclear wording with regards to the reasons for the contravention. There was no written confirmation to the FBO following any of the notices to confirm that the required works had been satisfactorily completed.

Recommendations

- 3.3.10 The Authority should:
- (i) Ensure that records of inspections contain sufficient detail to demonstrate an adequate assessment of compliance by the officer of premises and systems to the legally prescribed standards [The Standard - 7.3 & 16.1]
 - (ii) Ensure that in relation to Hygiene Improvement Notices, enforcement actions are carried out consistently in accordance with the relevant Food Law Code of Practice and centrally issued guidance. [The Standard – 15.2 & 15.3]

3.4 Internal Monitoring, Third Party or Peer Review

Internal Monitoring

- 3.4.1 The Authority had implemented a 'Validation and Verification of Product and Service' procedure as part of their Quality Management System. The auditors were advised that this covered both quantitative and qualitative internal monitoring arrangements covering all food hygiene enforcement activities.
- 3.4.2 In practice a variety of internal monitoring approaches were implemented. Quantitative monitoring activities were centred around monthly team meetings, where reports of progress against the inspection and sampling programmes were discussed and minuted, in addition to outstanding food complaints and service requests.
- 3.4.3 There was evidence that extensive qualitative monitoring was carried out. All inspection forms were monitored by the Public Health Team Leader and a specific box on the food hygiene inspection form was initialled to confirm this had taken place. Officers were subject to an accompanied inspection with the Public Health Team Leader at least once a year and a comprehensive Accompanied Visit Report form was then completed and discussed with the officer.
- 3.4.4 All other actions were also 'signed off' by the Public Health Team Leader before the action was closed on the database system, including actions on adverse sample results, food premises and food hygiene complaints, investigations of outbreaks and food related infectious disease notifications, food alerts requiring action, and all formal enforcement actions, including hygiene improvement notices.
- 3.4.5 The internal monitoring procedure required further development to ensure that the frequency, responsibilities and approaches to monitoring were more clearly defined. In addition internal monitoring procedures should be improved to include monitoring of inspection frequency and verification of appropriateness of food premises risk scoring.
- 3.4.6 A file check was made on the voluntary closure that was carried out. The action was found to be appropriate in the circumstances, and there was evidence that the premises had been checked to ensure it remained closed. However, the template for the voluntary closure agreement did not make provision for the FBO to sign and therefore confirm their agreement to comply with with the terms of the arrangement.
- 3.4.7 Checks were made on file and database records of 5 food and food premises complaints. In general these were found to have been appropriately investigated by officers and effective and appropriate follow-up action had been taken, however in the case of 2

complaints where home authority contact was appropriate, records did not confirm if this had been undertaken. There was evidence of internal monitoring of all complaint investigations.

- 3.4.8 Checks were made on 4 microbiological samples that had returned unsatisfactory examination results. All the samples were part of the sampling programme, and in each case there was evidence that appropriate follow-up action was taken. There was also evidence of internal monitoring of follow-up actions taken in all cases where food sample examination results were unsatisfactory.
- 3.4.9 Records of recent food alerts issued by the Food Standards Agency were examined. Comprehensive records were being maintained of food alerts received and action taken where necessary. Where action had taken place, there was adequate evidence of internal monitoring.
- 3.4.10 The records for an outbreak of food related infectious disease was examined. Appropriate investigations and follow-up actions had been undertaken and there was evidence of internal monitoring on the file.

Recommendation

- 3.4.11 The Authority should:

Expand the documented internal monitoring procedure to ensure it fully reflects all the internal monitoring that takes place of the food law enforcement service's activities, including detail of the frequency, responsibilities and approach to internal monitoring.
[The Standard – 19.1]

Third Party or Peer Review

- 3.4.12 The Authority had participated in a Lancashire Chief Environmental Health Officers' (LACEHO) inter-authority audit (IAA) scheme in 2006. Whilst the scheme did not incorporate a formal review mechanism, it was evident that corrective actions had been taken by the Authority to address recommendations made in the report.
- 3.4.13 The Authority also underwent regular external audits as part of its BS EN ISO 9001:2000 quality management system certification in addition to a 3 year rolling programme of internal audits against the quality standard. Corrective action taken in response to internal audit findings were reviewed by senior managers and recorded on the internal audit form.

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Local Authority Liaison Division

Action Plan for Chorley Borough Council

Audit date: 13 -14 May 2008

IMPROVEMENTS	BY (DATE)	TO ADDRESS RECOMMENDATION (INCLUDING STANDARD PARAGRAPH)	ACTION TAKEN
Review service planning process and cross reference the guidance in the Framework Agreement with the Food Service Plan.	30/04/09	3.1.5(i) Ensure that future Food Service Plans include all the details required by the Service Planning Guidance in the Framework Agreement. [The Standard – 3.1]	During the 2009/2010 business planning process we will cross reference the guidance in the Framework Agreement to ensure that the Food Service Plan is fully compliant.
Review of performance against the service plan to be carried out, documented and submitted for member approval in April 2009.	30/04/09	3.5.1(ii) Ensure that an annual review of performance against the Food Service Plan is carried out and submitted for appropriate Member approval. Any variance in meeting the service delivery plan should be addressed in the subsequent year's service arrangements. [The Standard – 3.2 & 3.3]	A quarterly review of performance against the Food Service Plan will be incorporated into the corporate performance round table process.
Carry out a full review of the documented policies, procedures and master documents in accordance with new Food Law Code of Practice. Implement a system that ensures regular reviews are carried out.	31/07/08	3.1.9 Further develop the document control system to ensure that internal food hygiene policies and procedures are up to date and cover the full range of food law enforcement activities. The review process also needs to ensure that policies and procedures are reviewed at regular intervals and whenever there are changes to legislation and official guidance. [The Standard – 4.1 & 4.2]	All master documents have been updated / deleted as necessary. A discussion will be held to establish the enforcement activities that are suitable for the premises in the Chorley area. The Enforcement Policy will be reviewed and take into account the new Compliance Code for Regulators. An agenda item is now on the Public Health team meetings for document review.
Revise the Authorisation procedure to explain the competency assessment process more clearly.	31/07/08	3.1.14(i) Review and revise the Service's documented procedure on the authorisation of officers to detail the competency assessment process by which authorisations are conferred, based on an officer's individual qualifications, training and experience and ensure that officers' schedules of authorisation reflect the extent of individual officer authorisations. [The Standard – 5.1]	Authorisation Procedure (QAP8) will be revised to include a reference of the link to the competency matrix and how competency is assessed.

Reinforcement of the corporate procedures for assessment of training needs and the importance of personal development plans. Ensure the issues raised in Public Health Team meetings are fed back into the corporate training plan for officer development.	Ongoing	3.1.14 (ii) Maintain and implement a documented training programme to ensure that officer and team training needs, in respect of food law enforcement, are met. [The Standard – 5.4]	Formal Enforcement Training, which includes, PACE, RIPA and Prosecution workshops has been arranged for all officers in July 08. The standard “Training” item on the team meetings will now prompt discussions on training needs as well as lessons learnt from training that has been attended.
The Food Hygiene inspection checklist will be reviewed to enable officers to suitably assess compliance with legally prescribed standards.	31/08/08	3.3.10(i) Ensure that records of inspections contain sufficient detail to demonstrate an adequate assessment of compliance by the officer of premises and systems to the legally prescribed standards. [The Standard - 7.3 & 16.1]	All other LA's in Lancashire and LACORS Guidance have been consulted to establish areas of good practice and the information will be used to update Chorley's inspection checklist.
Ensure that all officers are aware of the relevant LACORS guidance and all that all notices are checked prior to service in the future.	Completed	3.3.10(ii) Ensure that in relation to Hygiene Improvement Notices, enforcement actions are carried out consistently in accordance with the relevant Food Law Code of Practice and centrally issued guidance. [The Standard – 15.2 & 15.3]	All officers have been issued with the relevant LACORS guidance and all notices will be discussed and signed off by a lead officer prior to service in the future.
Expand the exiting procedures to reflect internal monitoring arrangements for all Environmental Health Services.	31/08/08	3.4.11 Expand the documented internal monitoring procedure to ensure it fully reflects all the internal monitoring that takes place of the food law enforcement service's activities, including detail of the frequency, responsibilities and approach to internal monitoring. [The Standard – 19.1]	Lead food officer to meet with Service Improvement Manger to review the procedures in place to reflect the internal monitoring arrangements for all Environmental Health services.

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.
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 geographic 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 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 law enforcement.</p> <p>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.</p> <p>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.</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 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.
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.
OCD returns	Returns on local food law enforcement activities required to be made to the European Union under the Official Control of Foodstuffs Directive.
Risk rating	A system that rates food premises according to risk and determines how frequently those premises should be inspected. For example, high risk 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 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.