

# Report on the Food and Feed Law Enforcement Service

Blaenau Gwent County Borough Council 18-22 August 2014

# 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.

FSA audits assess local authorities' conformance against the Feed and Food Law Enforcement Standard. "The Standard", which was published by the FSA as part of the Framework Agreement on Official Feed and Food Controls by Local Authorities (amended April 2010) is available on the FSA'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 FSA 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 FSA's website contains enforcement activity data for all IJK local authorities found and can he 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.

	CONTENTS	Page
1	Introduction	6
	Reason for the Audit	6
	Scope of the Audit	6
	Background	7
2	Executive Summary	10
	Audit Findings	10
3	Organisation and Management	12
4	Review and Updating of Documented Policies and Procedures	17
5	Authorised Officers	18
6	Facilities and Equipment	22
7	Food & Feedingstuffs Establishments Interventions and Inspections	24
8	Food, Feed and Food Establishments Complaints	37
9	Primary Authority Scheme and Home Authority Principle	39
10	Advice to Business	40
11	Food & Feed Establishments Database	42
12	Food & Feed Inspection and Sampling	43
13	Control and Investigation of Outbreaks and Food Related Infectious Disease	45
14	Feed & Food Safety Incidents	47
15	Enforcement	48
16	Records and Interventions/Inspection Reports	51
17	Complaints About the Service	54
18	Liaison with Other Organisations	55
19	Internal Monitoring	56
20	Third Party or Peer Review	58
21	Food and Feed Safety and Standards Promotion	59

# **Annexes**

Α	Action Plan for Blaenau Gwent County Borough Council	61
В	Audit Approach/Methodology	74
С	Glossary	78

#### 1 Introduction

1.1 This report records the results of an audit of food hygiene, food standards and feedingstuffs at Blaenau Gwent County Borough Council under the headings of the FSA Feed and Food Law Enforcement Standard. It has been made publicly available on the FSA's website at <a href="https://www.food.gov.uk/enforcement/auditandmonitoring/auditreports">www.food.gov.uk/enforcement/auditandmonitoring/auditreports</a>

#### Reason for the Audit

- 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 Blaenau Gwent County Borough 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 FSA has taken account of the European Commission guidance on how such audits should be conducted.<sup>1</sup>
- 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 Blaenau Gwent's arrangements for the delivery of food hygiene, food standards and feed law enforcement services. The

<sup>&</sup>lt;sup>1</sup> 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).

on-site element of the audit took place at the authority's offices at Abertillery on 18-22 August 2014, and included verification visits at food businesses and a feed establishment 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.

- 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 FSA policy.
- 1.7 The audit assessed the authority's conformance against "The Standard". The Standard was adopted by the FSA Board on 21<sup>st</sup> September 2000 (and was subject to its fifth amendment in April 2010), and forms part of the FSA's Framework Agreement with local authorities. The Framework Agreement can be found on the FSA's website at www.food.gov.uk/enforcement/enforcework/frameagree

# Background

- 1.8 Blaenau Gwent County Borough Council is the smallest of the unitary authorities in Wales, covering an area of approximately 109 square kilometers (km). Located in south east Wales, it borders four other local authorities, including Caerphilly County Borough Council to the west, Monmouthshire County Council and Torfaen County Borough Council to the east, and Powys County Council to the north.
- There are a number of towns within Blaenau Gwent, comprising of Abertillery, Beaufort, Brynmawr, Crumlin, Ebbw Vale and Tredegar. The largest town in the borough is Ebbw Vale, which was previously a heavily industrialised area, once accommodating the largest steelworks in Europe, as well as a number of coal mines. At the end of the last century there was a considerable decline in the industry, eventually leading to the closure of the steelworks and all mines. In recent years, around one to two miles of Ebbw Vale and its surrounding areas have been redeveloped with a new hospital, school and leisure centre.
- 1.10 The surrounding area of the town of Abertillery, with its close proximity to the Brecon Beacons National Park and the Blaenavon World heritage

site is known for its varied natural beauty. Its location near to the Heads of the Valleys trunk road provides good road transport links to the M4 corridor. Abertillery has been included in the authority's remodeling and modernisation project using European funding spread over a period of five years.

- 1.11 Although there are a number of towns within Blaenau Gwent, the area is predominantly rural, with large spaces of undeveloped land and open countryside. According to 2011 census data approximately 74.9% of Blaenau Gwent's residents are economically active, the majority of which are in full time employment. The manufacturing industry is the main employer, providing work for around 20% of residents.
- 1.12 In 2011 the authority was reported to have a population of all usual residents of 69,814. The largest populated towns are Ebbw Vale with 8,835 residents, Tredegar with 6,063 residents and Brynmawr with 5,530 residents. A total of 72% express their national identity as Welsh and 7.8% of the population can speak Welsh.
- 1.13 Blaenau Gwent has high levels of deprivation with approximately 49% of all its areas falling into the 10% most deprived areas in Wales, as determined by the Welsh Index of Multiple Deprivation (WIMD).
- 1.14 Food and feed law enforcement was being delivered by officers in the authority's Public Protection Service. The Business and Commercial Services Team had responsibility for enforcing food hygiene legislation whilst the Trading Standards and Licensing Team carried out enforcement in respect of food standards and animal feedingstuffs legislation.
- 1.15 Financial pressures facing the authority had necessitated a number of changes to its staffing structure in the two years prior to the audit. Five Trading Standards posts had been lost including the Head of Trading Standards. More recently, a restructure had resulted in the loss of the authority's lead officer for food safety. The duties of the post had been transferred to the Business and Commercial Team Manager and a Specialist Environmental Health Officer who had been temporarily appointed lead officer for food safety. At the time of the audit, the authority had been involved in discussions with other local authorities in Gwent on a proposed merger of its Trading Standards functions. The

- authority had also entered into an agreement with another local authority to deliver official feed controls on farms in Blaenau Gwent.
- 1.16 Officers and support staff involved in the delivery of food and feed law enforcement services were located at offices on the first floor of Anvil Court, Church Street, Abertillery. The offices were open to members of the public on weekdays from 9am to 5pm. It was reported in the Service Plan that the authority did not operate a formal out-of-hours service for food matters, but had standby arrangements for civil contingencies, which operated 365 days a year. There were arrangements in place for a suitably authorised officer to be contacted out-of-hours in the event of any emergency food related or communicable disease issue.
- 1.17 The authority had entered into a reciprocal agreement with a neighbouring authority in the event that its duty officer could not make contact with food safety officers. Under the agreement food safety officers in the neighbouring authority would be contacted. The out-of-hour's service was not tested as part of the audit.
- 1.18 In 2013/14 there were 574 food establishments and 55 registered feed establishments on the authority's database. It was reported in the Service Plan that there were 13 food manufacturers in Blaenau Gwent and one establishment subject to approval.
- 1.19 The Team Manager Business and Commercial Services was responsible for planning the delivery of official food hygiene controls, whilst the Specialist Environmental Health Officer (EHO) who had been temporarily appointed as lead officer for food safety was responsible for undertaking qualitative internal monitoring. The management of the food standards and feed service was overseen by the Team Manager, Trading Standards and Licensing.
- 1.20 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 535 food establishments in Blaenau Gwent were available to the public on the National Food Hygiene Rating Scheme website.

# **Executive Summary**

- 2.1 Auditors acknowledged that the authority had undertaken a review of its management structure in 2013 appointing a Public Protection Manager to oversee the delivery of all Public Protection Services, including food and feed law enforcement. Financial pressures had necessitated further reviews resulting in the loss of several Trading Standards Officer posts and the manager for food safety who was also the appointed lead officer.
- 2.2 Despite the loss of posts, managers and officers were committed to ensuring food and feed law enforcement services were delivered in accordance with the relevant Codes of Practice and centrally issues guidance. Lead food safety officer duties had been reallocated and auditors were able to verify that a risk based approach had been taken to the delivery of food and feed official controls.
- 2.3 At the time of the audit, the authority demonstrated that it had been working with other authorities in Gwent to develop a collaborative Trading Standards Service and with another local authority to deliver its feed interventions on farms.

# 2.4 The Authority's Strengths

#### **Facilities and Equipment**

The authority had made available the necessary equipment for the effective delivery of food hygiene and food standards official controls, and had introduced the necessary arrangements for ensuring its effective maintenance and calibration.

#### **Food Hygiene Inspection Reports**

Food businesses had been provided with the necessary information following food hygiene inspections, and records of inspections were being kept by the authority for six years.

#### **Advice to Business**

The authority had been proactive in providing assistance to businesses to help them comply with food hygiene, food standards and feed legislation.

#### **Food Establishments Database**

Oversight of the authority's computerised food establishments database by the Business and Commercial Team Manager ensured information maintained was up to date, accurate and capable of providing monitoring reports.

# **Food Safety Incidents**

There was evidence that the authority had taken action to report a potential food incident arising locally to the FSA and had responded appropriately to food alerts notified to them.

# **Liaison with other Organisations**

Effective liaison arrangements were in place with other local authorities across Wales and with a range of internal and external stakeholders with an interest in food and feed matters.

# 2.5 The Authority's Key Areas for Improvement

#### **Authorised Officers**

Officers had been authorised without due consideration of their qualifications, training and experience; and authorisations did not contain all relevant statutes to enable officers to carry out their full range of duties.

#### **Food Standards Interventions**

Records relating to food standards inspections were not sufficiently detailed to confirm the effectiveness of interventions; in particular the extent to which officers had assessed business compliance with food standards requirements could not be determined. The capture of observations made in the course of an inspection/intervention is necessary to inform a graduated and consistent approach to enforcement and to facilitate effective internal monitoring.

# **Internal Monitoring**

The need to implement the qualitative internal monitoring procedure for food hygiene and to further develop arrangements for qualitative internal monitoring of food standards and feed official controls was identified.

# **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 its decision making arrangements. Under the Constitution, decisions on certain specific matters had been delegated to officers.
- 3.2 The authority had developed a 'Food Law Service Delivery Plan 2014/15' ('the Service Plan') which included information relating to feed law enforcement. The Service Plan had been endorsed by the Council's Executive Committee in July 2014 and was available on its website.
- 3.3 The Service Plan was largely in line with the Service Planning Guidance contained in the Framework Agreement. It included a profile of the authority, the organisational structure, the scope of the service and demands.
- The times of operation, service delivery points and the contribution of food and feed services to the authority's overarching vision for Blaenau Gwent 'a better place to live, work and visit' was acknowledged in the Service Plan. Further, the high level outcomes in the Community Strategy that the services supported were identified. These were:
  - Blaenau Gwent is a thriving economy
  - Blaenau Gwent Is a safe place, where people feel safe
  - Blaenau Gwent Is a fair and inclusive place
  - People in Blaenau Gwent lead healthy and independent lives
- 3.5 The Service Plan set out the aims and objectives of the food and feed service. The aim was to ensure that all food and feed produced and /or sold within the County Borough:
  - Is safe to eat:
  - Is wholesome, and
  - Does not involve any unfair trading practices which prejudice the consumer of other business

3.6 The Service Plan included the risk profiles of food and feed businesses in Blaenau Gwent and the number of interventions due:

# Food hygiene

Risk category	Frequency	Total	Interventions
		premises	Due
Α	6 months	0	0
В	12 months	25	25
С	18 months	196	124
D	2 years	62	24
E	Alternative	267	85
	Enforcement		
	Strategy or		
	interventions		
	every 3		
	years		
Unrated		12	12*
Outside		4	
Programme			
Total		566	271

<sup>\*</sup>Figure may be subject to change dependant on risks identified following initial intervention

# Food standards:

Risk category	Frequency	Total premises	Inspections
			Due
А	12 months	10	10
В	2 years	198	69
С	AES or	363	70
	interventions		
	every 5		
	years		
Unrated		1	1
Total		572	150

#### Feed

Category	Total premises	Interventions Due
R5	2	2
R6	1	1
R7	7	7
R12	4	4
R13	41	21
Total	55	55

- 3.7 Estimates of the number of new food and feed establishments that would require inspection during the year and the number of revisits to follow-up non-compliances had not been provided.
- 3.8 Details of two FSA funded projects to improve implementation of food safety management procedures by takeaways and retail establishments with food hygiene ratings of two or below were provided in the Service Plan.
- 3.9 The authority had indicated the likely demand for most aspects of food and feed enforcement. The requirement to estimate the demand and resources required to deliver the full range of food and feed official controls against those available was discussed with officers.
- 3.10 Arrangements for food and feed sampling were detailed in the Service Plan. The sampling programme included participation in the Welsh Food Microbiological Forum programme and surveys organised by the Wales Heads of Trading Standards and Greater Gwent Food Group.
- 3.11 The Service Plan made reference to the authority's Enforcement Policy for Environmental Health (including food hygiene) which had been approved by the Council's Executive in 2012 prior to a service reconfiguration. The Policy was scheduled for review in 2014/15 to include all Public Protection Services (including food standards and feed).
- 3.12 The authority supported businesses through its commitment to the Primary Authority Scheme and Home Authority Principle, providing

information on its website and responding to all requests for service and information.

- 3.13 Arrangements for internal monitoring were set out in the Service Plan. They included:-
  - Review of random samples of interventions by lead officers;
  - Monitoring of performance against the team's operational plan which was reported quarterly to the Service Manager and discussed at Team Managers individual supervision sessions;
  - A programme of Personal Development Reviews for officers;
- 3.14 The officer resource required to deliver food and feed law enforcement services and those allocated to the services were detailed in the Service Plan. For food safety/hygiene and communicable disease this was 4.48 full time equivalent officers and for food standards and feed this was 0.68 full time equivalent officers.
- 3.15 The costs of providing food and feed law enforcement services had been estimated in the Service Plan. Estimated expenditure for food safety and hygiene was £257,910 and for communicable disease control £38,660. The costs for food standards and feed had been combined at £59,740 and did not include feed work undertaken by Powys County Council. The requirement to provide more detailed financial information and examine the trend of growth or reduction in costs was discussed with officers.
- 3.16 The 2014/15 Service Plan set out how the performance of the food enforcement service would be reviewed and included a review of 2013/14 performance in respect of food hygiene and food standards. The authority's performance in delivering feed official controls had not been subject to review.
- 3.17 The authority had identified areas for improvement in its 2014/15 Service Plan which included:-
  - More effective use of information technology;
  - Review of policies/procedures;
  - Use of the UK Food Surveillance System (UKFSS) database for microbiological samples;

- Production of additional guidance for officers in the use of the new system for infectious disease surveillance in Wales-Information Bureau for Infectious Disease (IBID);
- Development of a feed establishments risk profile.

#### Recommendations

# 3.18 The authority should:

- (i) Ensure that future Food Law Enforcement Service Plans are developed in accordance with the Service Planning Guidance in the Framework Agreement. In particular, an estimate of the full range of service demands should be provided together with an analysis of the resources required against those available. Plans to address any shortfalls identified and detailed costs should be included. [The Standard 3.1]
- (ii) Review its performance in carrying out official feed controls at least once a year for approval by the relevant member forum or senior officer. Any variance in meeting the Service Plan should be addressed by the authority in its subsequent Service Plan. [The Standard 3.2 and 3.3]

# 4 Review and Updating of Documented Policies and Procedures

- 4.1 The authority had a document control system for food hygiene which had been developed 'to ensure all documentation in use by the commercial team is kept up to date with legislative and other changes, and that all officers within the team have access to the latest (up- to- date) and only the latest version of these documents'. There was a similar but separate document control procedure for food standards and feed.
- 4.2 Controlled documents were stored electronically with read only access for officers. Printed copies of documents had been designated as uncontrolled.
- 4.3 The Team Manager Business and Commercial Services and the Trading Standards Team Leader were responsible for authorising new documents and amending existing ones. Changes to controlled documents could be requested by officers who were alerted to new issues of controlled documents by email.
- 4.4 The authority had developed a range of documented policies and procedures in connection with food and feed law enforcement. Some of the procedures had been based on templates produced collaboratively by the Welsh Heads of Environmental Health Food Safety Expert Panel, others were specific to Blaenau Gwent.
- 4.5 Auditors noted that following recent changes to the staffing structure, all documented policies and procedures had been identified for review. Whilst progress had been made, a number of documents were awaiting review.
- 4.6 Auditors were able to verify that officers had access to policies and procedures, legislation and centrally issued guidance on the intranet and internet. No superseded documents were found to be in use during the audit.

# Recommendation

- 4.7 The authority should:
- (i) Ensure all documented policies and procedures are reviewed at regular intervals and whenever there are changes to legislation or centrally issued guidance. [The Standard 4.1]

#### 5 Authorised Officers

- The authority's scheme of delegation had been set-out in its Constitution, which provided the Executive, the Licensing Committee, Director of Environment and Regeneration, the Head of Public Services, the Service Manager for Public Protection and the Public Protection Manager with the ability to exercise functions in relation to various food and communicable disease legislation. The Constitution provided these post holders with the authority to appoint or authorise officers. The Head of Legal or any solicitor had been given the delegated power to instigate legal proceedings on behalf of the authority.
- A report agreed by the Executive Committee contained evidence to enable auditors to verify that officers had been authorised under some key legislation. The report also contained reference to certain functions for which specific post holders had been given the delegated authority under the Constitution, as opposed to the Executive.
- The authority had developed two procedures for the authorisation of food and feed enforcement officers 'Trading Standards Section Procedure for Authorisation of Food and Feed Officers' and 'Authorisation and Competence of Officers: Food Hygiene'. These procedures set-out how the authorisations of individual officers were restricted to ensure that their duties reflected their qualifications, experience and training. However, officers had been authorised, initially, to exercise all powers under legislation, without due regard to their qualifications, experience and training.
- The authorisation procedures contained competency matrices that detailed the requirements that officers must demonstrate with regards to qualifications, experience and training to be deemed competent by the authority.
- 5.5 Lead officers for food hygiene, food standards, and communicable disease had been appointed by the authority, all of whom had the requisite qualifications and training and were able to demonstrate appropriate knowledge. Auditors noted that the appointed lead feed officer had not been deemed competent to carry out the full range of enforcement duties in accordance with the Feed Law Enforcement Code of Practice.

- At the time of the audit one officer had been authorised to undertake food standards and feed official controls. Plans were being progressed to appoint an additional food standards officer on a temporary basis and arrangements were also being developed with a neighbouring authority to deliver feed official controls on farms.
- 5.7 Training and development plans were in place for officers which had been agreed during annual performance reviews and there was evidence that training and development opportunities had been discussed at one-to-one meetings with managers. Officers had received the minimum 10 hours continuing professional development (CPD) required by the Codes of Practice.
- 5.8 The authorisations, qualifications and training records of 10 officers that had been involved in the delivery of official food and feed controls in the two years prior to the audit were examined. Auditors noted that officers had been authorised under some key legislation, but a number of statutes for which specific authorisation is required had not been included. The appointed feed officer had not been authorised under the Agriculture Act 1970.
- 5.9 Several officers had been authorised by the FSA under the Food and Environment Protection Act 1995.
- 5.10 Auditors were able to confirm that, in general, the authorisations of officers carrying out food hygiene and food standards official controls were consistent with their qualifications and training. An officer in a neighbouring authority had been authorised to undertake official feed controls in Blaenau Gwent, but there was no record that an assessment of this individual's qualifications, training or competence had been undertaken prior to authorisation. However, at the time of the audit the officer had not undertaken official controls on behalf of the authority.
- 5.11 Records of qualifications and training were being maintained by the authority for permanent officers. However, records had not been kept for the officers of the neighbouring authority who had been authorised to undertake official feed controls.

#### Recommendations

# 5.12 The authority should:

- (i) Review, amend and implement its scheme of delegation and authorisation procedures to ensure that officers are appropriately authorised under all the relevant statutes in accordance with the scheme, and that authorisations are based on an assessment of competence in accordance with the relevant Codes of Practice and centrally issued guidance. [The Standard 5.1]
- (ii) Appoint an officer with specialist knowledge to have lead responsibility for feed legislation in accordance with the Feed Law Enforcement Code of Practice. [The Standard – 5.2]
- (iii) Review and where necessary amend officer authorisations to ensure the level of authorisation is specified and consistent with their qualifications, training, experience and the relevant Code of Practice. [The Standard 5.3]
- (iv) Ensure that all feed officers receive the training required to be competent to deliver the work in which they will be involved, in accordance with the Feed Law Enforcement Code of Practice. [The Standard 5.4]
- (v) Maintain records of relevant academic or other qualifications, training and experience of all authorised feed officers in accordance with the Feed Law Enforcement Code of Practice. [The Standard 5.5]

# 6 Facilities and Equipment

- The authority had the necessary facilities and equipment for the effective delivery of the range of food hygiene and food standards official controls. Arrangements were in place with a neighbouring authority for the use of its feed sampling equipment when required.
- A procedure for the maintenance and calibration of equipment used by the Commercial Services Team had been developed to ensure equipment such as thermometers and refrigerators were properly maintained, calibrated as necessary and removed from service when found to be defective. The procedure included a list of equipment that required calibration, as well as information on the frequency of checks, method of calibration, the system for recording results and the action to be taken if tolerances are exceeded.
- 6.3 The Team Manager Business & Commercial Services, Lead Food Hygiene Officer and Environmental Health Technician were responsible for ensuring that equipment is calibrated in accordance with the procedure. All temperature monitoring equipment was being calibrated externally on an annual basis by a UKAS accredited laboratory.
- Officers responsible for the delivery of food hygiene official controls had each been issued with an infra-red and probe thermometer. The procedure stipulated that these would be calibrated in-house by the officers to which they were assigned at least once every two months using a reference thermometer. Records relating to in-house and external calibration checks were being maintained by the authority.
- An examination of records relating to calibration checks carried out in the 12 months prior to the audit confirmed that all equipment had been appropriately calibrated.
- The food standards calibration procedure made reference to checks carried out on equipment used for undertaking food standards interventions. All relevant equipment was calibrated externally, and auditors were advised that any equipment found to be defective by the calibrating UKAS laboratory would be repaired by that laboratory prior to its return. Calibration certificates for specified equipment had been supplied and were being maintained by the authority.

- 6.7 The authority had a computer system that was used to maintain its food and feed premises databases. The computer system was password protected to prevent access by unauthorised persons.
- 6.8 System administrators set-up new users, provided management information and performance reports, as well as support in the provision of data for the authority's annual Local Authority Enforcement Monitoring System (LAEMS) return.
- 6.9 The computer system was capable of automatically uploading food hygiene and food standards data to LAEMS and in 2013/14 the LAEMS return had been provided to the FSA in a timely manner.
- 6.10 In 2013/14 the authority had submitted its annual feed return to the FSA.
- 6.11 Appropriate back-up systems were in place to minimise the risk of loss of information from the databases and electronic files used for the storage of key information.

# 7 Food and Feedingstuffs Establishments Interventions and Inspections

# Food Hygiene

- 7.1 In 2013/14 the authority had reported through LAEMS that 97.4% of category A-E rated food businesses that were due an intervention had been inspected. All of its higher-risk food businesses had been subject to inspection. Further, 92.46% of food businesses were 'broadly compliant' with food hygiene law (excluding unrated businesses and those outside the scope of the risk rating scheme). This represented an improvement of approximately 2.26% from 90.20% of businesses reported as 'broadly compliant' in the previous year.
- 7.2 Information supplied by the authority from its food establishment database prior to the on-site audit indicated that there were a total of six establishments overdue an official control intervention by more than 28 days, of which four were categorised as higher-risk and two were lower-risk. The data supplied by the authority demonstrated that it had adopted a risk-based approach to managing its interventions programme.
- 7.3 The authority had developed a range of documented procedures aimed at establishing a consistent approach to carrying out official controls in respect of food hygiene interventions, revisits and the approval of product specific establishments. An examination of these procedures confirmed that all made reference to relevant legislation, had been subject to review and were in accordance with the requirements of the Food Law Code of Practice and relevant centrally issued guidance.
- 7.4 Auditors noted that the general procedure covering food hygiene interventions did not contain information on the authority's approach to partial inspections. In addition, although the procedure contained reference to officers checking establishment files for 'any red flag issues', information on the specific arrangements or criteria for flagging records had not been set-out. The authority would benefit from including details of the arrangements for flagging concerns or matters that require review at future interventions on establishment files.
- 7.5 Separate food hygiene aide-memoires had been developed by the authority to assist officers in their inspections of both higher-risk and low-

risk food businesses. The model LACORS inspection form for approved establishments had also been adopted. The authority advised of its intention for officers to use the LACORS form for undertaking future inspections at manufacturing establishments.

- 7.6 During the audit an examination of records relating to 10 food establishments was undertaken. Records confirmed that all establishments were registered and that the latest interventions had been carried out at the frequency required by the Food Law Code of Practice. However, one establishment had been found to be two months overdue during its previous inspection cycle. The Food Law Code of Practice requires that interventions take place within 28 days of their due date.
- 7.7 Inspection records were available for the 10 food establishments selected for audit. In six cases, the information recorded by officers on inspection aide-memoires was sufficiently detailed to evidence that thorough assessments of compliance with procedures based on Hazard Analysis Critical Control Point (HACCP) requirements had taken place, and that Critical Control Points (CCP) identified in the businesses' food operations had been captured. In the remaining four cases, there was insufficient information recorded on aide-memoires to enable auditors to verify that an adequate assessment of business compliance with HACCP requirements had been undertaken or that adequate CCP information had been retained. In all 4 cases officers indicated that an approach of reporting by exception had been adopted during these interventions, contrary to the Standard in the Framework Agreement.
- 7.8 In five cases, inspection records confirmed that officers had undertaken an appropriate assessment of hygiene training of food handlers. In the other five cases, there was insufficient information available to determine the extent of assessments of food handler training or that relevant personnel had been considered. Nonetheless, in all cases a record of officers' discussions that had taken place with food handlers, other than the food business operators (FBO) had been captured, where appropriate.
- 7.9 Supplier information had, in general, been noted by officers on inspection records. However, in four cases, as a consequence of the authority's practice or recording by exception, there was insufficient evidence to demonstrate that an assessment of traceability of incoming

food, including checks on identification marks had taken place, and in one case, there was no record that recall procedures had been checked. Auditors were able to confirm that in six out of 10 cases consideration had been given to imported foods, where appropriate.

- 7.10 The inspection records confirmed that in six cases, officers had undertaken an appropriate assessment of the effectiveness of cross contamination controls, where food activities involved the handling of both raw and ready to eat foods. In the remaining four cases, there was insufficient information available to determine the extent of officer assessments of controls in place for protecting food against cross-contamination. This was due to the practice of recording by exception.
- 7.11 In general, where the level of detail captured on inspection records was insufficient to enable auditors to verify that thorough assessments of compliance, these related to inspections undertaken by officers who had not used an appropriate aide-memoire to record their observations.
- 7.12 Overall, the risk ratings scores applied to establishments were consistent with the inspection findings. However, in one case the 'confidence in management/control procedures' score was not consistent with the inspection findings.
- 7.13 The authority's Food Hygiene Revisits procedure stated that revisits were required to establishments that were not broadly compliant. The procedure also made reference to the timescales stipulated in the Wales Heads of Environmental Health Food Safety Expert Panel Food Hygiene Revisit Policy on the timing of revisits.
- 7.14 Where inspection records of the 10 establishments selected for audit indicated that revisits were required, evidence was available to confirm that timely revisits had taken place, in accordance with the authority's procedure.
- 7.15 In respect of two establishments, records indicated that enforcement action was required to deal with serious/on-going contraventions, but this had not taken place. Also in two cases officers had not appropriately red-flagged or highlighted a number of recurring issues of non-compliance with HACCP requirements, cross-contamination risks and poor food handling practices.

- 7.16 Prior to the audit the authority had informed the FSA that there was one approved establishment in its area. An examination of the records relating to this establishment confirmed that the business had been appropriately approved and that all of the file information required by the Food Law Practice Guidance was available.
- 7.17 Auditors were able to verify from the inspection history that in recent years the approved establishment had been inspected in accordance with the frequency determined by the risk rating category that had been applied. However, the risk rating following the latest inspection was incorrect, as the additional score for businesses involved in the production of food for vulnerable groups had not been allocated. This had resulted in a reduction in the risk rating category. Nonetheless, there were no potential public health implications as the authority was prioritising interventions at this establishment to take place at increased frequencies of not more than six months.
- 7.18 Whilst auditors noted that inspections at the approved establishment had not been carried out using an aide-memoire, the contemporaneous notes made by officers during the most recent visit, were sufficiently detailed to confirm that a full scope inspection had been carried out and that, in general, a thorough assessment of business compliance with hygiene requirements had taken place. However, information had not been captured to demonstrate that consideration had been given to the appropriateness of training received by food handlers.
- 7.19 At the time of the audit an Alternative Enforcement Strategy (AES) had not been adopted for maintaining surveillance of low-risk establishments. The authority had indicated in its Service Plan that an AES would be applied to 85 establishments during the year.

#### Recommendations

- 7.20 The authority should:
- (i) Carry out interventions/inspections in accordance with the Food Law Code of Practice and centrally issued guidance, and the authority's policies and procedures. [The Standard 7.2]
- (ii) Assess the compliance of establishments in its area to the legally prescribed standards and take appropriate action on any non-compliance found, in accordance with the authority's Enforcement Policy. [The Standard -7.3]
- (iii) Amend its documented procedures to set-out its approach to partial inspections and further develop the arrangements for red-flagging. [The Standard 7.4]
- (iv) Ensure that observations made in the course of an inspection are recorded in a timely manner to prevent loss of relevant information. [The Standard 7.5]

#### Verification Visits to Food Establishments

- 7.21 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.
- 7.22 The officers were knowledgeable about the businesses and demonstrated an appropriate understanding of the food safety risks associated with the activities at each establishment. In one case the officer demonstrated that a thorough, full scope inspection had been carried out. In the other case it was confirmed that a partial inspection

had been undertaken. Whilst a partial inspection had been appropriate in the circumstances, the authority had not developed a policy or provided officers with any guidance on undertaking partial inspections.

7.23 Auditors discussed the importance of officers ensuring that sufficient detail is recorded on inspection aide-memoires to reflect the extent of assessment of business compliance with hygiene requirements that had taken place.

#### Food Standards

- 7.24 The 2014-2015 Service Plan indicated that full inspections would be carried out where they were due at all establishments in accordance with the frequencies prescribed in Annex 5 of the Food Law Code of Practice. In total 150 establishments were programmed to receive an intervention, of which 10 were category A, 69 category B, 70 category C rated, and one premises was unrated.
- 7.25 A review of service performance detailed in the plan for 2013/14 indicated that 94.56% of category A-C rated establishments due to be inspected had been inspected. This corresponded with the data that had been supplied by the authority through LAEMS for the same reporting period. The establishments at which interventions were outstanding included six category B and 10 category C establishments.
- 7.26 The authority had developed a documented procedure for food standards interventions, which detailed the process to be followed for undertaking an inspection. A recent revision had been made to the procedure to include criteria for revisits to food businesses. The procedure was supplemented with several comprehensive LACORS aide-memoires that outlined the main points to consider when conducting full scope food standards inspections of certain types of establishments. An examination of these documents confirmed that their content was in accordance with the Food Law Code of Practice.
- 7.27 Information supplied by the authority from its database prior to the audit indicated that there were five establishments, excluding unrated businesses, which were overdue an official control intervention by more than 28 days. These overdue interventions consisted of three at category B establishments and two at category C establishments, all of which had

been due an intervention within a period of six months. The authority was able to demonstrate that, in general, food standards interventions were being undertaken at frequencies not less than that determined by Annex 5 of the Food Law Code of Practice, and that it had adopted a risk-based approach to its interventions programme.

- 7.28 A Food Standards Inspection Report form, which also served as a report of visit had been developed by the authority for use by officers in recording inspection findings. However, the form did not contain sufficient fields to facilitate the necessary capture of observations made in the course of undertaking a full scope assessment of business compliance with requirements relevant to food standards.
- 7.29 During the audit an examination was carried out of records relating to 10 food standards inspections. The inspection histories held on the database confirmed that in recent years all establishments had been inspected at the frequencies required by the Food Law Code of Practice.
- 7.30 Relevant inspection records were available for all establishments subject to audit checks. In one case, in addition to a completed report form, detailed inspection notes had been made on a number of sheets of lined paper. The information that had been captured was sufficient to enable auditors to verify that the size, scale and type of food activity undertaken at the business had been considered, and that an adequate assessment of compliance with relevant food standards requirements had taken place.
- 7.31 In respect of the other nine cases, whilst reports provided an overall indication of the aspects of food standards law that had been considered by officers, information capture was limited to exception reporting. Audit checks established that records did not contain an appropriate level of detail to confirm the extent and nature of the food operations; or to demonstrate that an adequate assessment of compliance with legal provisions relating to quality systems, traceability, compositional standards, product packaging and labelling had been undertaken, as appropriate.
- 7.32 The authority was using the intervention rating scheme at Annex 5 of the Food Law Code of Practice for determining food standards intervention frequencies. Audit checks confirmed that the risk rating scores under

part I of the scoring system had been correctly applied in all cases, and in seven of the 10 cases the scores applied under parts 2 and 3, reflected the issues noted on inspection report forms. However, in two cases compliance scores had been allocated which implied that minor food standards contraventions had been identified, but there were no records of these on the inspection documentation. In the remaining case, high scores had been applied for both compliance and confidence in management, but there was insufficient information available to justify their application.

- 7.33 In two cases, inspection records indicated that enforcement revisits were required to check that the contraventions identified had been remedied. A record was available to confirm that a revisit had been carried out in one case, but in the other case there was no evidence that a revisit had taken place in the five months following the discovery of the noncompliances.
- In respect of managing food standards interventions at new businesses, the authority had adopted a system whereby officers initially made contact with food business operators in order to obtain details relating to the size, scale and nature of the food activities undertaken. Auditors were advised that where information indicated that the potential hazard to the consumer associated with a business appeared to be low-risk; then these establishments were being risk rated without the benefit of inspection, contrary to the Food Law Code of Practice. However, the authority was able to demonstrate that such businesses were being provided with a range of verbal and written food standards advice to assist them in complying with statutory requirements.

#### Recommendations

- 7.35 The authority should:
- (i) Carry out food standards inspections of new businesses in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard -7.2]
- (ii) Assess the compliance of establishments in its area to legally prescribed standards; and take appropriate action on any non-compliance found, in accordance with the authority's Enforcement Policy. [The Standard -7.3]
- (iii) Ensure observations made in the course of an inspection are recorded in a timely manner to prevent loss of relevant information. [The Standard 7.5]

#### Verification Visits to Food Establishments

- 7.36 During the audit, a verification visit was made to one food establishment with an authorised officer of the authority who had carried out the last food standards inspection. The main objective of the visit was to consider the effectiveness of the authority's assessment of the systems within the business for ensuring that food meets the requirements of food standards law.
- 7.37 The officer was knowledgeable about the business and had an appropriate understanding of the aspects of food standards controls that were relevant to the operations undertaken. The officer demonstrated that they had considered the relevant key food standards controls during the inspection and had appropriately assessed compliance with applicable statutory requirements.
- 7.38 The findings of the previous inspection, detailed on the report form and sheets of lined paper, reflected the conditions observed at the establishment.

#### Feed

- 7.39 The 2014-2015 Service Plan indicated that all 55 registered feed establishments in Blaenau Gwent would be subject to an intervention during the year.
- 7.40 Auditors were advised of the authority's intention to carry out a risk profiling exercise of the feed establishments in its area, using a range of approaches to gather intelligence. This included undertaking a programme of planned visits to establishments at which operators had previously informed the authority that their activities did not require registration as a feed business.
- 7.41 The authority had an agreement with a neighbouring local authority to undertake feed interventions at farms in Blaenau Gwent. However, this arrangement had not been implemented at the time of the audit.
- 7.42 The authority had adopted a range of feed inspection procedures, including those developed by the Gwent Feed Group, and several forms to assist officers in their inspection of different types of registered feed establishments. Whilst the information contained within the procedures was in accordance with the Feed Law Enforcement Code of Practice, auditors noted that its approach to preparing and conducting an inspection had not been set-out. Further, the circumstances under which an establishment should be subject to a secondary inspection had not been included.
- 7.43 During the audit, the authority advised that inspections of feed processing establishments were being routinely carried out on an announced basis. This approach is contrary to the Feed Law Enforcement Code of Practice, which states that where possible, inspections should be undertaken without prior notification. Auditors discussed the benefits of the authority documenting its policy in respect of announced and unannounced interventions that takes into account the relevant requirements.
- 7.44 The authority had recently implemented the intervention rating scheme in the Feed Law Enforcement Code of Practice for determining feed establishment intervention frequencies. An alternative risk rating scheme

that the authority could not evidence and which was not comparable with that in the Feed Law Enforcement Code of Practice had previously been used.

- 7.45 The records relating to 10 feed establishments reported to have been subject to an intervention were examined. The inspection histories confirmed that in recent years nine of the 10 establishments had been inspected at the required frequencies determine by the establishments' risk rating. The one establishment that had not received an intervention at the correct frequency remained overdue by three months. Auditors noted from the records that this medium-risk establishment had not received an initial inspection for more than 12 months after it had been added to the authority's feed establishment database.
- 7.46 Records of observations made by officers at the most recent inspection were available for seven of the 10 feed establishments. Where aidememoires/inspection forms had been used, these were suitable for the type of establishment inspected and enabled auditors to verify that full scope inspections had taken place.
- 7.47 Details of the size and scale of the business' feed activities had been captured in five of the seven establishments. Whilst the details of animal feed suppliers to four of the seven had not been recorded, in all cases there was evidence that officers had considered the business' traceability system.
- 7.48 The information that had been captured by officers on inspection records was sufficient to demonstrate that an assessment of business compliance with requirements relating to HACCP, composition and labelling had been undertaken, as appropriate.
- In all cases risk ratings had been applied to establishments following inspections. The information detailed on records in relation to three of the establishments indicated that the risk rating scores that had been applied were appropriate. However, in the remaining establishments, the risk rating applied in one case did not fully reflect the inspection findings and in another cases there was insufficient information available to confirm whether the risk rating was appropriate. In the other five cases, the authority was not able to identify the particular scheme against which the businesses had been risk rated.

- 7.50 In general, where records indicated that a secondary inspection was required to ensure that contraventions had been remedied, auditors were able to verify that this had taken place. However, in one case relating to a business at which HACCP contraventions had been identified, there was no evidence that a secondary inspection or other follow-up had taken place in the eight months following discovery.
- 7.51 At the time of the audit the authority was not implementing an AES at low-risk feed establishments.

#### Recommendations

- 7.52 The authority should:
- (i) Ensure that feed establishment interventions and inspections are carried out at the frequencies specified by the Feed Law Enforcement Code of Practice. [The Standard 7.1]
- (ii) Carry out inspections/interventions and 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) Ensure that appropriate action is taken to follow up non-compliance in accordance with its Enforcement Policy. [The Standard 7.3]
- (iv) Ensure that all observations made in the course of an inspection/intervention are recorded in a timely manner to prevent loss of relevant information, and officers' contemporaneous records of interventions are stored in such a way that they are retrievable. [The Standard 7.5]

Feed Establishment Verification Visit

- 7.53 During the audit, a verification visit was made to one feed establishment with the authorised officer of the authority who had carried out the last feed inspection. The main objective of the visit was to consider the effectiveness of the authority's assessment of compliance with feed law requirements at the establishment.
- 7.55 The officer demonstrated that they had appropriately assessed compliance with relevant feed law requirements and that they were aware of the feed hazards associated with the business' operations. Further, the records relating to the latest inspection were reflective of the conditions observed at the establishment.

## 8 Food, Feed and Food Establishments Complaints

- 8.1 The Service Plan set-out the authority's policy in respect of food and feed complaints. In particular, it stated that complaints about foodstuffs and feedingstuffs would be investigated in accordance with the Codes of Practice, and that complaints relating to establishments are also investigated.
- A documented Food and Food Premises Complaints Procedure (Food Hygiene) based on a template produced by the Wales Heads of Environmental Health Food Safety Expert Panel had been adopted by the authority. Several documents were appended to the procedure including flow charts and pro-forma. A procedural document entitled, 'Handling Service Requests' that set-out the approach to dealing with requests for service received by officers responsible for delivering the food hygiene service was also in place.
- 8.3 A separate Procedure for Food and Feed Complaints and Complaints about Feed Premises had been developed. A recent amendment had been made to the procedure to include details of the arrangements for the secure receipt and storage of food or feedingstuffs subject to complaint. The content of the authority's procedures were in accordance with the Codes of Practice and official guidance.
- 8.4 Records relating to 10 food hygiene and 10 food standards complaints received by the authority in the two years prior to the audit were requested for examination. There had been no complaints relating to feedingstuffs or the condition of feed establishments during the same period.

### Food Hygiene

8.5 Auditors were able to verify from the information available that in all but one case, officers had responded within the target time of one day specified in the procedure. The exception had been responded to more than four weeks beyond the target time. The authority advised auditors of its intention to review the challenging target response time that had been set.

8.6 In all cases complaints had been thoroughly investigated and where the complainant's details had been provided, there was evidence that they had been informed of the outcome of investigations.

#### Food Standards

- 8.7 Audit checks of the records relating to the 10 food standards complaints confirmed that eight had been investigated in accordance with the authority's procedure. In the remaining cases, there was a delay of seven days in carrying out an investigation into a complaint concerning food past its use-by date in one case, and in both cases there was no evidence that complainants had been informed of the outcome of the investigations.
- 8.8 The action taken following the investigation of all food hygiene and food standards complaints was in accordance with the authority's Enforcement Policy.

#### Recommendation

- 8.9 The authority should:
- (i) Ensure the target response times specified in complaint procedures are met and that the outcome of food standards complaint investigations is communicated to complainants. [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 Service Plan.
- 9.2 Officers had received training on Primary Authority matters and had been issued with passwords to access the Primary Authority and Home Authority on-line databases.
- 9.3 The authority did not have any formal Home Authority agreements. However, records examined during the audit demonstrated that the authority had implemented the Home Authority Principle and had responded appropriately to requests for information from businesses and other authorities.
- 9.4 Primary Authority considerations had been included in the Environmental Health Enforcement Policy and in some work procedures although not in the food hygiene complaints procedure or the sampling procedure. In practice, there was evidence that liaison had taken place with a Primary Authority in respect of an unsatisfactory sampling result.
- 9.5 Auditors were able to verify during the audit 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.
- 10.2 Funding provided by the FSA had been used to assist food businesses in developing their food safety management systems. Coaching visits had been carried out at establishments with a food hygiene rating of two or below.
- 10.3 Food safety advice was provided on the authority's website including information on:
  - Food safety management
  - Starting a food business
  - Mobile food vendors advice leaflet
  - Chilled cabinet advice leaflet
  - Food complaints
  - Catering at small local events information leaflet
  - Preparing and cooking Doner kebabs advice leaflet
  - Hygienic preparation of ice
  - Food hygiene rating inspections
  - Food premises approval
  - Food premises registration
- 10.4 An Event Safety Guide and Temporary Event Guidance aimed at organisers of outdoor and temporary events had been developed by the authority incorporating information on foods safety. Detailed records of the advice provided by officers were being maintained on the authority's food establishment database.
- The authority provided a Food Safety Newsletter to food businesses which also included advice on food standards.
- 10.6 Food standards advice for businesses on the authority's website included information on food labelling and food allergens. A link to the FSA's on-line allergens training was provided as well as a link to 'Business Companion' on the Trading Standards Institute website. Business Companion provided comprehensive food standards and feed advice for businesses.
- 10.7 Social media had been used to promote feed business registration, including a link to the FSA's *Feed Hygiene Regulation* (183/2005): *Information for Farmers*. Further, social media had been used to remind caterers of their obligations in respect of the disposal of food waste.

- 10.8 Technical advice had been provided to food businesses in respect of which the authority acted as Home Authority.
- 10.9 There was evidence that advice was provided to businesses during inspections as well as on request.

## 11 Food and Feed Establishments Database

- 11.1 The authority had a documented procedure in place setting out its approach to ensuring its electronic database of food and feed establishments was accurate, up to date and to minimise the risk of corruption or loss of information.
- 11.2 Systems administrators were responsible for ensuring the correct functioning of the database and that access to the database was restricted to authorised personnel.
- 11.3 The accuracy of the database was informed by officers obtaining up to date information during inspections, by monitoring returned mail and by comparison with telephone and business directories.
- The authority had worked to improve the accuracy of its feed database as part of a FSA funded collaboration project.
- 11.5 Eleven food establishments and one feed establishment were randomly selected from an internet-based business directory prior to the audit and compared against the authority's food and feed establishments databases. All twelve businesses had registered with the authority and had been included on the databases.

## 12 Food and Feed Inspection and Sampling

- The Service Plan set-out the authority's policy on the sampling of food and feedingstuffs. The factors taken into account when formulating sampling programmes and a statement outlining the additional sampling activities that the authority may undertake, were referenced. However, details were not provided on the authority's approach to formal sampling.
- The authority had developed a procedure for the Sampling of Food which described the method for taking samples for microbiological analysis and the action that should follow on receipt of laboratory results. Auditors noted that the procedure did not fully accord with the Food Law Code of Practice and relevant guidance, as the document had not been reviewed since 2010 and thus made reference to out-dated information.
- 12.3 Procedures had also been developed for food standards and feed sampling. The procedure covering official food standards samples was in accordance with the Food Law Code of Practice and relevant guidance, but the procedure for feed sampling consisted of a general document that provided officers with information on where advice for taking samples of feedingstuffs could be obtained, should the need arise. Therefore, the latter procedure was not sufficient to meet the requirements of the Standard.
- 12.4 A food hygiene sampling programme had been produced which reflected the authority's sampling priorities detailed in its policy. However, there were no sampling programmes for food standards or feed. Auditors were advised that the authority had not allocated a budget for planned food standards and feed sampling, but was able to evidence that samples of food were being taken in the course of investigations. The authority had also made use of FSA funding to participate in food standards sampling projects.
- The authority had appointed a Public and Agricultural Analyst for the examination of food and feed samples, and had an agreement in place with Public Health Wales (PHW) for the microbiological analysis of food. The appointed laboratories were on the recognised list of UK designated Official Laboratories.

## Food Hygiene

During the audit, records of 10 samples submitted for microbiological analysis were examined. In all cases details of the samples obtained, the results of analysis and records of the action taken to follow-up on borderline and unsatisfactory results were available. In two out of three cases relating to foods obtained from businesses with Primary Authority Partnerships, there was no record of the authorities having been informed of unsatisfactory results, contrary to the authority's procedure.

#### Food Standards and Feed

- 12.7 Audit checks were carried out of records relating to 10 food standards samples. The results of analysis had been uploaded onto UKFSSinet and were available in hardcopy. Where results indicated that follow-up was required, there was evidence that appropriate investigations had been initiated. In two cases, auditors noted that investigations were ongoing.
- 12.8 Audit checks confirmed that all microbiological and food standards samples had been taken by appropriately trained and authorised officers.
- 12.9 The authority reported that it had not sampled any feedingstuffs in the two years prior to the audit

#### Recommendations

- 12.10 The authority should:
- (i) Amend its sampling policy to include details of its approach to formal sampling of food and feed; and set-up food standards and feed sampling programmes that accord with the appropriate Codes of Practice and relevant guidance. [The Standard 12.4]
- (ii) Review, amend and fully implement its Food and Feed Sampling procedures in accordance the Codes of Practice and centrally issued guidance. [The Standard 12.5]

## 13 Control and Investigation of Outbreaks and Food Related Infectious Disease

- The authority had identified lead officers 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. The plan was based on a template that had been produced by a multi-agency group, including Public Health Wales and Welsh Government.
- The authority had arrangements for providing an out-of-hours response to cases of food related infectious disease.
- A procedure for investigating sporadic cases of food related infectious disease had been developed by the authority. The procedure was supported by a range of advisory leaflets and questionnaires.
- 13.5 Records relating to two outbreaks and 10 notifications of food related infectious diseases were examined. In the case of the outbreaks, no further investigative activity had been required due to the nature of the outbreak and timing of the notification.
- 13.6 In respect of the 10 notifications of food related infectious disease, officers had completed the appropriate questionnaires with the cases, where this had been possible. Audit checks confirmed that in six cases thorough investigations had been undertaken in accordance with the procedure. In another case relating to the notification of a high-risk organism, the authority was able to evidence that a thorough investigation had taken place. However, there had been a delay of two days against the authority's target response time in attempting contact with the case.
- 13.7 Letters had been sent to the remaining three cases requesting they make contact with the authority. However, there was no record of attempts being made by officers to carry out the investigations over the telephone or in person, as appropriate. An investigation was undertaken following contact from one of these cases, but no contact had been

- received from the other two cases, one of which related to the notification of a high-risk organism.
- 13.8 In all cases appropriate follow-up action had been taken where this had been identified as necessary.

## Recommendation

- 13.9 The authority should:
- (i) Ensure that its procedure for the investigation of food related infectious disease notifications is fully implemented in all cases. [The Standard 13.2]

## 14 Feed and Food Safety Incidents

- 14.1 The authority had a documented Food and Feed Alerts and Incidents Procedure. The procedure set out how the authority responded to Food Incidents, Food Alerts for Action, Product Withdrawal Information Notices and Product Recall Information Notices, including those received outside normal office hours.
- The authority had a computer system that was capable of receiving notifications and it was stated in the procedure that 'actions taken in response to Action Alerts will be recorded together with a copy of the relevant alert received so that it is retrievable for possible follow up action or audit by the FSA'.
- 14.3 The procedure stated that the Team Manager Business and Commercial Services, Team Manager Trading Standards and Licensing and the lead officers for food hygiene, food standards and feed hygiene had primary responsibility for its effective operation. The arrangement for alerting the FSA where an actual or potential food hazard was identified locally was included in the procedure.
- 14.4 Auditors examined records in respect of five food alerts for action issued during the previous three years. All had been promptly received and responded to in accordance with FSA advice.
- 14.5 Action taken by the authority had been documented and correspondence, including officer emails relating to food alerts, were retrievable.
- 14.6 Auditors were able to verify that the authority was aware of the requirement to notify the FSA of any potential food alerts or incidents arising locally and had done so in a recent case.

#### 15 Enforcement

- The authority had separate enforcement policies covering the regulatory functions exercised by the food hygiene service; and the food standards and feed service, referred to as the Housing and Environmental Health Policy Document and Public Protection Division Enforcement and Prosecution Policy, respectively. The Housing and Environmental Health Policy had been approved by the Council's Executive in July 2012. There was no evidence that the Public Protection Division Enforcement and Prosecution Policy had been appropriately approved.
- The Housing and Environmental Health Policy was generally in accordance with the Food Law Code of Practice, and official guidance. Information that was not contained in this document, included criteria for the use of all available enforcement options, as well as the arrangements for ensuring compliance with food law in establishments where the authority is itself the food business operator.
- The Public Protection Division Enforcement and Prosecution Policy had not been reviewed since 2005. It did not include the criteria for the use of the available enforcement options nor the arrangements for ensuring compliance with food law in establishments where the authority is the food business operator. The process for raising queries or complaints relating to compliance and/or enforcement activities had not been included. Further, the policy did not set-out the authority's approach to enforcement at businesses that had entered into Primary Authority Partnerships. Auditors were advised of the authority's intention to set-up a combined Public Protection Enforcement Policy.
- The authority had not set-up documented procedures for the range of enforcement options available to authorised officers, contrary to the requirements of the Standard. However, the food hygiene service had developed a generic procedure covering the proper delivery of notices, but this did not detail the circumstances for the use of certain notices or the arrangements for ensuring due legal process is followed.
- In respect of food standards and feed, authorised officers had access to a number of decision diagrams to assist them in determining what action to take in dealing with suspect imported foods. In addition, a series of template forms for the preparation of prosecution case files had also been developed for officer use.

- 15.6 The authority reported that the following enforcement action had been taken in the two years prior to the audit:
  - 14 Hygiene Improvement Notices (HINs)
  - Four Remedial Action Notices (RANs)
  - One simple caution relating to food standards offences
- 15.7 An examination of 10 HINs and associated records confirmed that the action taken was appropriate, and that the notices had been clearly worded and included details of the contravention and works required to achieve compliance. Evidence was also available to confirm that timely checks on compliance had taken place. However, in respect of one HIN relating to a limited company, the notice had not been served at the correct address.
- All four RANs served by the authority were subject to audit checks. The records indicated that the use of RANs was necessary in all cases to deal with serious food hygiene contraventions. The notices had been duly served and there was evidence that officers had carried out follow-up checks to monitor compliance.
- The case file relating to the simple caution could not be retrieved by the authority at the time of the audit. Some information relating to the case was available, consisting of a collection of photographs and photocopies of notebook entries pertaining to the alleged offences, and a letter inviting the food business operator to attend a formal interview. Due to the limited information available, auditors were unable to confirm whether a simple caution was the appropriate course of action in the circumstances or verify that it had been administered in accordance with the authority's policy and official guidance.

#### Recommendations

## 15.10 The authority should:

- (i) Set-up, maintain and implement a documented Enforcement Policy, in accordance with the relevant Codes of Practice and other official guidance, and ensure that the policy is appropriately approved. The Enforcement Policy or an accurate summary should be readily available to the public and food businesses in its area. [The Standard 15.1]
- (ii) Set-up, maintain and implement documented procedures for all available enforcement actions in accordance with the relevant Codes of Practice and centrally issued guidance. [The Standard 15.2]
- (iii) Ensure that it is able to demonstrate that Simple Cautions relating to food standards offences are administered in accordance with the Food Law Code of Practice and official guidance. [The Standard 15.3]
- (iv) Ensure that it is able to demonstrate that decisions on enforcement actions in respect of food standards offences are made following consideration of its Enforcement Policy. [The Standard 15.4]

## 16 Records and Interventions/Inspections Reports

#### Food Hygiene

- 16.1 Food business records, including registration forms, inspection aidememoires, post inspection visit report forms and correspondence were being stored by the authority in hardcopy files and on its electronic database. Details of the date and types of intervention undertaken at food businesses, as well as the establishment risk profile and food hygiene rating, were also maintained. Information relating to food establishments selected for audit was retrievable. Where relevant, information relating to the last three inspections/interventions was available and records were being retained for six years.
- Officers were using inspection letters to communicate 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. Auditors noted that six of the 10 letters held on file had not been signed by the inspecting officer.
- Overall, post-inspection report forms and inspection letters contained the information required to be provided to food business operators under Annex 6 of the Food Law Code of Practice. However, the contact details of a senior officer in case of dispute were not available on the most recent correspondence for two of the 10 establishments subject to audit checks.
- In all cases inspection letters had been sent to food businesses within 14 days from the date of the latest intervention as required by the authority's procedure.

#### Food Standards

16.5 Food standards inspection report forms for small to medium sized food businesses were being maintained by the authority in hard copy on a central file; whereas records relating to large, food manufacturers were held in hard copy on establishment specific files. Details of the date and type of intervention undertaken, as well as the establishment risk rating profile, were also being recorded on the authority's database.

- The latest inspection report forms relating to the 10 food establishments selected for audit were all retrievable and legible, and the authority was able to demonstrate that such records were being retained for six years.
- Officers were using Food Standards Inspection Report forms to communicate inspection findings to food business operators. These forms contained most of the information that businesses are required to be provided with following an intervention, as specified in Annex 6 of the Food Law Code of Practice. Information that had not been provided on forms included the key points that were discussed, a distinction between contraventions identified and recommendations for good practice, and the timescales for achieving compliance. In addition, the appropriate designation and contact details of the inspecting officer were not consistently provided.
- 16.8 Auditors were able to verify that information held on the hard copy inspection report forms and the database corresponded.

#### Recommendation

- 16.9 The authority should:
- (i) Ensure that Food Standards Inspection Report forms provided to businesses following interventions/inspections contain all of the information required by the Food Law Code of Practice. [The Standard 16.1]

#### Feed

16.10 Feed intervention records and reports were being maintained by the authority in hard copy. Details of the date and type of intervention undertaken and the risk rating score applied to an establishment were available on the authority's database. Audit checks confirmed that where relevant, records were being kept for six years.

- 16.11 In general, inspection record forms were being used by officers to communicate findings to feed business operators and in some instances inspections letters had been sent following an intervention. Auditors were able to confirm that inspection forms had been left at six of the 10 feed establishments subject to audit checks.
- 16.12 The record forms that feed business operators had been provided with following inspections contained some of the information required by Annex 6 of the Feed Law Enforcement Code of Practice. However, auditors noted that there were inconsistencies in the information that had been provided in reports.

#### Recommendations

- 16.13 The authority should:
- (i) Maintain up to date, accurate records in a retrievable form on all relevant feed establishments and ensure that reports provided to feed businesses following interventions/inspections contain all of the information required by the Feed Law Enforcement Code of Practice. [The Standard 16.1]

## 17 Complaints about the Service

- 17.1 The authority had a corporate compliments, comments and complaints procedure *Your Voice Counts* which was available to the public and food businesses on its website. Complaints were dealt with under a two stage procedure, initially by the officer concerned and then, if the customer was not satisfied by someone not directly involved in delivering the service.
- 17.2 No complaints about the authority's food or feed services had been received in the two years prior to the audit. However, auditors were able to verify from the records available, that there were effective arrangements in place within Public Protection to respond to and report outcomes of complaint investigations.
- 17.3 Auditors noted that in respect of food hygiene and food standards the details of a senior officer were provided on correspondence should businesses wish to complain following an inspection or other intervention. This information was also available on the most recent feed reports.

## 18 Liaison with Other Organisations

- 18.1 The authority had liaison arrangements in place with neighbouring authorities and was contributing to the development of plans for regional delivery of Trading Standards across Gwent.
- 18.2 Liaison arrangements were in place with other appropriate bodies aimed at facilitating consistent enforcement. They included participation in the following:
  - Directors of Public Protection Wales (DPPW);
  - Wales Heads of Environmental Health (WHOEH);
  - Wales Heads of Trading Standards;
  - Wales Food Safety Expert Panel;
  - Welsh Food Microbiological Forum;
  - Wales Food and Agriculture Group;
  - Local Government Regulation Food Labelling Forum;
  - South East Wales Food Safety Task Group;
  - Food Hygiene Rating Scheme co-ordination Group;
  - Greater Gwent Food Standards Group;
  - South East Wales Communicable Disease Liaison Group
- 18.3 Minutes of liaison group meetings were available and confirmed regular attendance by appropriate service representatives.
- 18.4 The authority also had liaison arrangements with:
  - Food Standards Agency
  - Public Health Wales
  - Public Analyst
  - Wales Food Fraud Unit
  - Care and Social Services Inspectorate (Wales)
  - Local Health Board
- Liaison arrangements were also in place with the authority's Planning and Licensing services. The Senior Trading Standards Officer represented Trading Standards in Wales, providing advice to the Food Group of Value Wales, a division of Welsh Government which drives best practice in procurement across the Welsh public sector.

## 19 Internal Monitoring

- 19.1 Internal monitoring is important to ensure performance targets are met, and that services are being delivered in accordance with legislative requirements, centrally issued guidance and the authority's own procedures. It also ensures consistency in service delivery.
- 19.2 The Public Protection Service produced a quarterly performance monitoring matrix containing quantitative information on food and feed service delivery. This was discussed at supervision sessions between the Public Protection Manager and Team Managers.
- 19.3 An internal monitoring procedure had been developed for food hygiene which had been subject to recent revision. When implemented in full the procedure will enable the authority to meet the requirements of the Framework Agreement.
- 19.4 The Team Manager Business and Commercial Services was able to provide evidence that qualitative internal monitoring of the food establishments database was being routinely carried out in accordance with the FSA's *Making Every Inspection Count*.
- 19.5 Officers had attended training provided by the FSA to ensure the consistent assessment of food hygiene intervention ratings under Annex 5 of the Food Law Code of Practice. Further consistency exercises had taken place to meet the authority's commitment to provide at least one consistency exercise per annum as part of the annual team training programme.
- 19.6 There was evidence that regular team meetings had taken place where technical issues had been discussed and training needs identified.
- 19.7 In practice auditors were able to verify that limited qualitative internal monitoring of food hygiene interventions had taken place. The exception was in the case of a less experienced officer who as part of their development had been subject to closer monitoring.
- 19.8 Auditors noted that apart from at annual performance appraisals, officers had not been provided with feedback on qualitative aspects of their work.

- 19.9 In respect of food standards and feed an internal monitoring procedure had been developed which required amendment to enable the authority to verify its conformance with all aspects of the Standard, relevant legislation, Codes of Practice and centrally issued guidance.
- 19.10 In practice there was some evidence of internal monitoring of food standards work by the Trading Standards Manager at regular work review meetings. The delivery of official feed controls had not been subject to qualitative internal monitoring.

#### Recommendations

- 19.11 The authority should:
- (i) Fully implement its documented internal monitoring procedure for food hygiene. [The Standard 19.1]
- (ii) Further develop, maintain and implement its documented internal monitoring procedure for food standards and feed so as to enable it to verify its conformance with the Standard, relevant legislation, Codes of Practice, centrally issued guidance and its own documented policies and procedures. [The Standard – 19.1 and 19.2]
- (iii) Ensure internal monitoring records are kept for at least 2 years.

## 20 Third Party or Peer Review

20.1 In January 2014 the authority, in common with the other 21 local authorities in Wales, had submitted information in respect of two FSA focused audits - Response of Local Government in Wales to the Recommendations of the Public Inquiry into the September 2005 Outbreak of *E. coli* O157 in South Wales and Local Authority Management of Interventions in New Food Businesses. These focused audit reports are available at:

www.food.gov.uk/enforcement/auditandmonitoring

www.food.gov.uk/enforcement/auditandmonitoring

The authority's Environmental Health service, which included food hygiene and the investigation of food related infectious disease, had been subject to a review by the Wales Audit Office in 2013/14. At the time of the audit the outcome of this review was awaited.

## 21 Food and Feed Safety and Standards Promotion

- 21.1 The authority had delivered a number of initiatives with the aim of promoting food and feed safety and standards.
- 21.2 Participation in Food Safety Week in 2014 had included a number of activities to raise awareness of Campylobacter, promoting the theme 'Don't Wash Raw Chicken'. These included providing:
  - Promotional materials to selected take-away establishments and GP surgeries
  - Leaflets and posters to luncheon clubs
  - Posters to butchers
  - Information on the authority's website and using social media
- 21.3 Food hygiene training in Chinese, facilitated by another local authority, had been promoted to relevant food businesses.
- The authority had also participated in Allergy Awareness Week, targeting caterers and providing information on its website and on social media.
- 21.5 Social media had been used to raise awareness of the need for feed establishments to register with the authority.
- 21.6 Information on food hygiene and food standards was available for consumers and businesses on the authority's website.
- 21.7 Records of food safety and standards promotion were being maintained by the lead officers.

#### Auditors:

Lead Auditor: Kate Thompson
Auditors: Alun Barnes

Craig Sewell

Daniel Morelli

Food Standards Agency Wales 11th Floor Southgate House Wood Street Cardiff CF10 1EW

## **ANNEX A**

# Action Plan for Blaenau Gwent County Borough Council Audit Date: 18 - 22 August 2014

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.18 (i) Ensure that future Food Law Enforcement Service Plans are developed in accordance with the Service Planning Guidance in the Framework Agreement. In particular, an estimate of the full range of service demands should be provided together with an analysis of the resources required against those available. Plans to address any shortfalls identified and detailed costs should be included. [The Standard – 3.1]	July 2017 (finalised plan) September 2017 (member approval)	The Food Law Service Delivery Plan for 2017/18 will be produced in accordance with the Service Planning Guidance going forward and will address the specific areas and comments identified for improvement in the Audit report regarding service resource and demand.	Ongoing
3.18 (ii) Review its performance in carrying out official feed controls at least once a year for approval by the relevant member forum or senior officer. Any variance in meeting the Service Plan should be addressed by the authority in its subsequent Service Plan. [The Standard - 3.2 and 3.3]	April 2015	Since April 2015 feed enforcement is being carried out on a regional basis and in line with directions given by the Lead Regional Feed Officer. As the result the responsibility for subsequent service plans for feed no longer rests directly with the Authority.	Completed

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
4.7 (i) Ensure all documented policies and procedures are reviewed at regular intervals and whenever there are changes to legislation or centrally issued guidance. [The Standard – 4.1]	March 2018	Food Hygiene / Food Standards: The annual review of the policies / procedures relevant to the food law service has been built in as a rolling action within the Food Law Service Delivery Plan. Policies/procedures will be updated between the annual reviews where necessary. As a result of the collaboration between Blaenau Gwent and Torfaen County Borough Council's Public Protection Service a review of all policies / procedures is planned for 2017/18 to produce a single combined version of each document wherever reasonably practicable.	Ongoing
5.12 (i) Review, amend and implement its scheme of delegation and authorisation procedures to ensure that officers are appropriately authorised under all the relevant statutes in accordance with the scheme, and that authorisations are based on an assessment of competence in accordance with the relevant Codes of Practice and centrally issued guidance. [The Standard – 5.1]	August 2016	The scheme of delegation through the Council's constitutional provisions was amended in August 2016. The power to authorise all individual officers now rests with the Director of Environment and Regeneration. As each new authorisation is put to the Director for approval going forward the competency assessment to inform the level of authorisation will be provided alongside the request for authorisation.	Completed
5.12 (ii) Appoint an officer with specialist knowledge to have lead responsibility for feed legislation in accordance with the Feed Law Enforcement Code of Practice. [The Standard – 5.2]	April 2015	Since April 2015 feed enforcement is being carried out on a regional basis and a Lead Regional Feed Officer has been appointed as part of these arrangements as a result. This officer has responsibility for the delivery of feed enforcement work in the Blaenau Gwent area.	Completed

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
5.12 (iii) Review and where necessary amend officer authorisations to ensure the level of authorisation is specified and consistent with their qualifications, training, experience and the relevant Code of Practice. [The Standard – 5.3]	August 2016	Food Hygiene / Food Standards: Officer authorisations and the process of authorisation have been revised in order to take account of the issues identified during the audit. The review has included the requirement to provide the competency assessment with the authorisation request for any future authorisations.	Completed
5.12 (iv) Ensure that all feed officers receive the training required to be competent to deliver the work in which they will be involved, in accordance with the Feed Law Enforcement Code of Practice. [The Standard – 5.4]	April 2015	Since April 2015 feed enforcement is being carried out on a regional basis and a Lead Regional Feed Officer has been appointed as part of these arrangements as a result. The responsibility for ensuring that staff receive the training that they require now sits with this lead officer.	Completed
5.12 (v) Maintain records of relevant academic or other qualifications, training and experience of all authorised feed officers in accordance with the Feed Law Enforcement Code of Practice. [The Standard – 5.5]	April 2015	Since April 2015 feed enforcement is being carried out on a regional basis and a Lead Regional Feed Officer has been appointed as part of these arrangements as a result. The responsibility for ensuring that records of relevant qualifications, training and experience are available now sits with this lead officer. Blaenau Gwent County Borough Council however does still hold and maintain records directly for the authorised feed officer employed directly by the Council but whom operates under the Regional feed arrangements.	Completed

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
7.20 (i) Carry out interventions/inspections in accordance with the Food Law Code of Practice and centrally issued guidance, and the authority's policies and procedures. [The Standard – 7.2]	Red flagging guidance – December 2014  Consistenc y Training - October 2015	Food Hygiene: It is noted that of 10 food hygiene related premises selected for audit only 1 was identified by the auditors as potentially requiring an alternative score in respect of confidence in management / control procedures. All officers have participated in food hygiene rating scheme consistency training since the audit and scoring was found to be consistent between officers during the exercise. Scoring consistency will continue to be assessed through internal monitoring arrangements and during any interactive consistency training exercises. With regards to the arrangements for red flagging additional guidance was developed in conjunction with the FSA regarding the process of red flagging and this guidance has been disseminated to all officers (the same issue is also addressed in respect of point 7.2(iii) below).	Completed
7.20 (ii) Assess the compliance of establishments in its area to the legally prescribed standards and take appropriate action on any non-compliance found, in accordance with the authority's Enforcement Policy. [The Standard -7.3]	Initial debrief - August / September 2014 Refresher training - December 2017	Food Hygiene: Officers received a post audit de-brief highlighting the key issues identified during the audit. It is the intention to repeat this exercise using the learning from both the Blaenau Gwent and Torfaen audit's as a refresher training exercise for staff in both Councils. Ongoing compliance with the requirements will be assessed through internal monitoring.	Initial debrief completed.  Collaborative training planned for quarter 3 2017/18.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
7.20 (iii) Amend its documented procedures to set-out its approach to partial inspections and further develop the arrangements for red-flagging. [The Standard – 7.4]	December 2014	Food Hygiene: Partial inspections are no longer permitted and compliance with this is assessed through internal monitoring. Additional guidance was developed in conjunction with the FSA regarding the recording of CCP's and the process of red flagging and this guidance has been disseminated to all officers.	Completed.
7.20 (iv) Ensure that observations made in the course of an inspection are recorded in a timely manner to prevent loss of relevant information. [The Standard – 7.5]	Initial debrief - August / September 2014  Refresher training – December 2017	Food Hygiene: Officers received a post audit de-brief highlighting the key issues identified during the audit which included the need to record issue of compliance as well as non-compliance. It is the intention to repeat this exercise using the learning from both the Blaenau Gwent and Torfaen audit's as a refresher training exercise for staff in both Councils. Ongoing compliance with the requirements will be assessed through internal monitoring.	Initial debrief completed.  Collaborative training planned for quarter 3 2017/18.
7.35 (i) Carry out food standards inspections of new businesses in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard -7.2]	September 2014	Food Standards: The Authority operates a risk based inspection programme which identifies inspection frequencies for premises that is in compliance with the Food Law Code of Practice, every effort is and will continue to be made to ensure that programmed interventions are delivered in accordance with this . All new businesses are being visited before a risk rating is applied.	Completed

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
7.35 (ii) Assess the compliance of establishments in its area to legally prescribed standards; and take appropriate action on any non-compliance found, in accordance with the authority's Enforcement Policy. [The Standard - 7.3]	September 2014 Refresher training – December 2017	Officers received a post audit debrief highlighting the key issues raised during the audit which included ensuring that the post inspection forms or other records captured sufficient data to justify the risk applied to the business and that appropriate action is taken on non-compliances. It is the intention to repeat this exercise using the learning from both the Blaenau Gwent and Torfaen audit's as a refresher training exercise for staff in both Councils. Ongoing compliance with the requirements will be assessed through internal monitoring.	Initial debrief completed.  Collaborative training planned for quarter 3 2017/18.
7.35 (iii) Ensure observations made in the course of an inspection are recorded in a timely manner to prevent loss of relevant information. [The Standard – 7.5]	September 2014 Refresher training – December 2017	Officers received a post audit debrief highlighting the key issues raised during the audit which included ensuring observations made during an inspection are recorded in a timely manner. It is the intention to repeat this exercise using the learning from both the Blaenau Gwent and Torfaen audit's as a refresher training exercise for staff in both Councils. Ongoing compliance with the requirements will be assessed through internal monitoring.	Initial debrief completed.  Collaborative training planned for quarter 3 2017/18.
7.52 (i) Ensure that feed establishment interventions and inspections are carried out at the frequencies specified by the Feed Law Enforcement Code of Practice. [The Standard - 7.1]	April 2015	Since April 2015 feed enforcement is being carried out on a regional basis and in line with directions given by the Lead Regional Feed Officer. As the result the responsibility for interventions for feed no longer rests directly with the Authority.	Completed

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
7.52 (ii) Carry out inspections/interventions and 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	Since April 2015 feed enforcement is being carried out on a regional basis and in line with directions given by the Lead Regional Feed Officer. As the result the responsibility for interventions for feed no longer rests directly with the Authority.	Completed
7.52 (iii) Ensure that appropriate action is taken to follow up non-compliance in accordance with its Enforcement Policy. [The Standard – 7.3]	April 2015	Since April 2015 feed enforcement is being carried out on a regional basis and in line with directions given by the Lead Regional Feed Officer. As the result the responsibility for interventions for feed and subsequent follow-up action in respect of non-compliances no longer rests directly with the Authority.	Completed.
7.52 (iv) Ensure that all observations made in the course of an inspection/intervention are recorded in a timely manner to prevent loss of relevant information, and officers' contemporaneous records of interventions are stored in such a way that they are retrievable. [The Standard – 7.5]	April 2015	Since April 2015 feed enforcement is being carried out on a regional basis and in line with directions given by the Lead Regional Feed Officer. As the result the responsibility for interventions and this recording of observations during intervention no longer rests directly with the Authority.	Completed.

BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
September	Officers received a post audit de-brief highlighting the	Initial de-
2014	key issues identified during the audit which included	brief
	the need to ensure adherence to the internal food	completed.
Refresher	standards complaints procedure and of the need to	
training –	document communications to complainants. It is the	
December	intention to repeat this exercise using the learning	Collaborativ
2017	from both the Blaenau Gwent and Torfaen audit's as	e training
	a refresher training exercise for staff in both Councils.	planned for
	Ongoing compliance with the requirements will be	quarter 3
	assessed through internal monitoring.	2017/18.
April 2015	·	Completed.
	3	
	. ,	
	rests directly with the Authority.	
	Food Utarions / Food Ctandards, The 2047/40 Food	T. b.
I.d. 0047		To be
July 2017	·	included in
	•	2017/18
	approach to formal sampling.	plan.
	Food Standards: A sampling programme for food	Completed
		Completed
August		
2014		
	,	
_	September 2014  Refresher training – December 2017  April 2015  July 2017  August	September 2014 Officers received a post audit de-brief highlighting the key issues identified during the audit which included the need to ensure adherence to the internal food standards complaints procedure and of the need to document communications to complainants. It is the intention to repeat this exercise using the learning from both the Blaenau Gwent and Torfaen audit's as a refresher training exercise for staff in both Councils. Ongoing compliance with the requirements will be assessed through internal monitoring.  April 2015 Feed: Since April 2015 feed enforcement is being carried out on a regional basis and in line with directions given by the Lead Regional Feed Officer. As the result the responsibility for sampling no longer rests directly with the Authority.  Food Hygiene / Food Standards: The 2017/18 Food Law Service Delivery Plan and future plans will include a statement in respect of the Council's approach to formal sampling.  Food Standards: A sampling programme for food standards was in existence at the time of the audit. A sampling programme has been produced for each

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
12.10 (ii) Review, amend and fully implement its Food and Feed Sampling procedures in accordance the Codes of Practice and centrally issued guidance. [The Standard – 12.5]	April 2015	<b>Feed:</b> Since April 2015 feed enforcement is being carried out on a regional basis and in line with directions given by the Lead Regional Feed Officer. As the result the responsibility for sampling no longer rests directly with the Authority.	Completed.
	March 2018	As a result of the collaboration between Blaenau Gwent and Torfaen County Borough Council's Public Protection Service a review of all policies / procedures is planned for 2017/18 to produce a single combined version of each document wherever reasonably practicable. This review will include a revision of the food hygiene procedure relating to sampling and will address any areas of improvement identified during the audit.	Ongoing
13.9 (i) Ensure that its procedure for the investigation of food related infectious disease notifications is fully implemented in all cases. [The Standard -13.2]	August 2014	Food Hygiene: A new procedure had been developed prior to the audit as a result of the Council's own identification of improvements needed to the method of ensuring timely allocation of cases to officers and the standardisation of the minimum requirements in terms of case contact. The cases identified in the audit where improvement was required pre-dated the implementation of this revised procedure. The revised procedure continues to be implemented.	Completed.

<b>`</b>	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
	September 2017	A documented enforcement policy was in place for Environmental Health (including food hygiene) and had been appropriately approved by Executive, a point which was demonstrated at the time of the audit. Whilst there was an enforcement policy in place for Trading Standards (including Food Standards) which had been formally adopted it had been recognised that it had been sometime since this policy had been reviewed and during September 2013 when the two services came together under Public Protection it was agreed that food standards would informally adopt the Environmental Health policy. As a result of the collaboration with Torfaen County Borough Council the enforcement policy has been reviewed with a view to bringing in a single enforcement policy, the draft of which has been submitted through the Corporate Management Team and is now going through the process of formal approval. The new enforcement policy will include criteria for the use of all enforcement options and the arrangements for ensuring compliance in establishments where the authority is the food business operator.	Ongoing

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
15.10 (ii) Set-up, maintain and implement documented procedures for all available enforcement actions in accordance with the relevant Codes of Practice and centrally issued guidance. [The Standard – 15.2]	March 2018	Food Hygiene / Food Standards: As a result of the collaboration between Blaenau Gwent and Torfaen County Borough Council's Public Protection Service a review of all policies / procedures is planned for 2017/18 to produce a single combined version of each document, this will include procedures relating to enforcement action.	Ongoing.
15.10 (iii) Ensure that it is able to demonstrate that Simple Cautions relating to food standards offences are administered in accordance with the Food Law Code of Practice and official guidance. [The Standard – 15.3]	September 2014.	Officers received a post audit de-brief highlighting the key issues identified during the audit which included the need to ensure simple cautions are recorded correctly. Ongoing compliance with the requirements will be assessed through internal monitoring.	Completed.
15.10 (iv) Ensure that it is able to demonstrate that decisions on enforcement actions in respect of food standards offences are made following consideration of its Enforcement Policy. [The Standard – 15.4]	September 2014	Officers received a post audit de-brief highlighting the key issues identified during the audit which included the need to complete a checklist which demonstrates that the internal enforcement policy had been considered. Ongoing compliance with the requirements will be assessed through internal monitoring.	Completed.
16.9 (i) Ensure that Food Standards Inspection Report forms provided to businesses following interventions / inspections contain all of the information required by the Food Law Code of Practice. [The Standard -16.1]	September 2014	Officers received a post audit debrief highlighting the key issues raised during the audit which included ensuring that the post inspection forms left with the business were completed in full. Ongoing compliance with the requirements will be assessed through internal monitoring.	Completed.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
16.13 (i) Maintain up to date, accurate records in a retrievable form on all relevant feed establishments and ensure that reports provided to feed businesses following interventions / inspections contain all of the information required by the Feed Law Enforcement Code of Practice. [The Standard – 16.1]	April 2015	Feed: Since April 2015 feed enforcement is being carried out on a regional basis and in line with directions given by the Lead Regional Feed Officer. As the result the responsibility for maintaining records no longer rests directly with the Authority.	Completed.
19.11 (i) Fully implement its documented internal monitoring procedure for food hygiene. [The Standard – 19.1]	December 2017.	Food Hygiene: There has been a further revision to the internal monitoring procedure and work continues to implement this in full. The Authority is involved in the ongoing development of an internal monitoring toolkit with the FSA and Food Safety Expert Panel and the internal monitoring arrangements will be further reviewed as a result of this work. As part of the collaborative working arrangements a single internal monitoring procedure will be produced between Blaenau Gwent and Torfaen.	Ongoing.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
19.11 (ii) Further develop, maintain and implement its documented internal monitoring procedure for food standards and feed so as to enable it to verify its conformance with the Standard, relevant legislation, Codes of Practice, centrally issued guidance and its own	April 2015	<b>Feed:</b> Since April 2015 feed enforcement is being carried out on a regional basis and in line with directions given by the Lead Regional Feed Officer. As the result the responsibility for maintaining records no longer rests directly with the Authority.	Completed.
documented policies and procedures. [The Standard – 19.1 and 19.2]	December 2017	Food Standards: The internal monitoring procedure commenced full implementation post audit and internal monitoring activities are ongoing. It has been recognised that internal monitoring covered interventions and complaints but sampling actions were not fully covered. This will be addressed when a single procedure is produced following the collaboration between Blaenau Gwent and Torfaen County Borough Council Public Protection Services.	Ongoing
19.11 (iii) Ensure internal monitoring records are kept for at least 2 years.	September 2014	<b>Food Hygiene / Food Standards:</b> Records of internal monitoring activities are now being kept for a minimum period of 2 years.	Completed.

## **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:

- Business Planning Service Management Plan Template
- Food Safety Service Delivery Plan 2013/14
- Blaenau Gwent County Council Food Law Service Delivery Plan 2014/2015 and associated Cabinet report and record of decision by Leader and members of the Executive Committee
- Gwent Feed Group Funding Bid 2014/15
- Gwent Feed Group Project Report 2013/14
- Final Report Greater Gwent Animal Feed Project, September 2012 to April 2013
- Food Hygiene Reports to Regeneration & Environment Scrutiny Committee

  RANs Report Dec 2012, FHRS update report Jan 2013 and Focused Audit Improvement Plan following FSA Audit 2010
- Food Hygiene Team Document Control System Procedure revised 8/12/10
- Report to Executive Committee requesting authorisation of officers, June 2014
- Report of Executive to Members of the Council 16<sup>th</sup> July 2014
- Public Protection Commercial procedure for the Authorisation and Competence of Officers, issue date 6/8/14
- Public Protection Commercial Food Hygiene Training programme 2014/15
- Employee training records
- Food Hygiene Calibration & Maintenance Procedure
- Trading Standards calibration certificates
- Food hygiene Inspections Procedure revision 3/1/13
- Food hygiene Revisits Procedure revision 3/1/13
- Food Hygiene Inspection Form (pro-forma)
- Food Hygiene Inspection (Low Risk Premises) Form (pro-forma)
- Premises Revisit or Rescore Report pro-forma
- Suggested Level of Food Safety Management System Required table revised November 2013
- Approved Premises Applications Procedure
- Approved Premises Interventions Procedure
- Approved premises inspection form / manufacturing premises inspection form

- Inspection form for the specific food hygiene requirements for establishments manufacturing meat products and requiring approval
- Internal Monitoring Procedure for Food Hygiene
- Commercial team internal monitoring procedure, revised December 2012
- Trading standards procedure for internal monitoring
- Trading Standards and Licensing team Meeting 4th July 14
- Letter confirming Public Appointment Public Analyst, Agricultural Analyst
   & Scientific Advisor 31.07.14
- Administration guide for IBID
- Procedure: use of COSURV and receipt of notifications
- Procedure for Food Standards Inspections and Interventions
- Food standards inspection protocol/aide-memoire for manufacturing premises
- LACORS food standards inspection protocol/aide-memoire for catering establishments
- LACORS food standards inspection protocol/aide-memoire for retail premises
- Work instruction dealing with feedstuffs at farms, reviewed May 2014
- Feed business inspection form 08/13 (R11 and R13)
- Feed business inspection form 08/13 (R7)
- Feed business inspection form 08/13 (R1R6)
- Feed business inspection form 08/13 (R12)
- Feed business inspection form 08/13 (R8/R9)
- Feed business inspection form 08/13 (A1A8)
- Feed business inspection form 08/13 (R10)
- Public Protection Division Handling Service Requests Procedure, February 2008
- Trading standards section procedure for food and feed complaints
- Blaenau Gwent food safety newsletter issue 6
- Public protection temporary event guidance for officers and event safety guide for businesses
- Trading standards procedure for ensuring accuracy of database
- Food hygiene sampling of food procedure, revision 4/11/10
- Food hygiene sampling programme 2014/15
- Trading standards procedure for official food samples
- Procedure for feed sampling
- Food/feed alerts & incidents procedure
- Environmental health enforcement policy May 2012
- Public protection enforcement and prosecution policy
- Food hygiene service of legal notice procedure, revised January 2012
- Gwent feed group work instructions actions when feed or premises is unsatisfactory
- Work instruction serving feed hygiene improvement notices

- Work instruction serving feed hygiene emergency hygiene prohibition notices / voluntary closure and prohibition
- Corporate compliments, comments and complaints policy
- Notes from Gwent feed group meetings 2013 and 2014
- Internal food standards officers meeting minutes, 2014
- Food and occupational health and safety team minutes 2013
- Food hygiene promotional activities

## (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:

Public Protection Manager Business and Commercial Team Manager Trading Standards Manager
Lead Officer Food Hygiene and Safety
Lead Officer Food Standards and Feed
Environmental Health Officers, including officer with lead responsibility for communicable diseases

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 three local food businesses and one 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.

## **Glossary**

Approved establishments

Food manufacturing establishment 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)

An organisation of officer heading up public protection services within Welsh local authorities.

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

The Framework Agreement consists of:

- 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 Council Members discuss and make decisions on food law enforcement services.

National Trading Standards Board (NTSB) An association of Chief Trading Standards officers.

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 establishments according to risk and determines how frequently those establishments should be inspected. For example, high risk hygiene establishments 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 (WHoEH) A group of professional representatives that support and promote environmental and public health in Wales.

Wales Heads of Trading Standards (WHoTS) A group of professional representatives that support and promote Trading Standards in Wales.