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Report on the Food Law Enforcement Services

Carmarthenshire County Council
21st – 25th November 2016

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 Law Enforcement Services. The assessment includes consideration of the systems and procedures in place for interventions at food businesses, food sampling, internal management, control and investigation of outbreaks and food related infectious disease, advice to business, enforcement and food 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: <https://www.food.gov.uk/about-us/local-authorities>

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: <https://www.food.gov.uk/about-us/local-authorities#supporting-local-authorities>

The report contains some statistical data, for example on the number of food establishment inspections carried out. The FSA's website contains enforcement activity data for all UK local authorities and can be found at: <https://www.food.gov.uk/about-us/local-authorities#monitoring-local-authority-activity>

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.

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1 Introduction

- 1.1 This report records the results of an audit of food hygiene and food standards at Carmarthenshire County 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 <https://www.food.gov.uk/other/local-authority-audits-2010-2017-wales>

Reason for the Audit

- 1.2 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 services at Carmarthenshire County 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 England, Wales and Northern Ireland 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.¹
- 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 Carmarthenshire County Council's arrangements for the delivery of food hygiene and food standards enforcement services. The on-site element of the audit took place at the authority's offices at Ty

¹ 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).

Elwyn, Llanelli on 21st – 25th November 2016, and included verification visits at food businesses 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 business operator (FBO) compliance with legislative requirements.

- 1.6 The audit also afforded the opportunity for discussion with officers involved in food 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 21st 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: <https://www.food.gov.uk/about-us/local-authorities>
- 1.8 The audit also reviewed the action taken by the authority in relation to the FSA's focused audits on Shellfish Traceability and Authenticity and on Official Hygiene Controls at Dairy establishments in 2014.

Background

- 1.9 Carmarthenshire County Council is a unitary authority in south-west Wales, which covers an area of 2,365 sq. kilometers and is the third largest local authority in Wales. It borders five other local authority areas – Ceredigion to the north, Powys to the east, Swansea and Neath Port Talbot to the south and Pembrokeshire to the west.
- 1.10 Carmarthenshire includes a mix of rural, urban and coastal areas which stretch from the river Teifi in the north to Carmarthen Bay in the south. The area covers part of the Brecon Beacon National Park in the east and the main transport routes within the borough include the A40 and A48 roads which pass through the authority.
- 1.11 As a primarily rural county, the population density is low at 71 persons per sq. kilometre, compared with 140 persons per sq. kilometre for Wales as a whole. This scarcity of population is more apparent in rural Carmarthenshire than it is in the south and east of the county where 65% of the population reside on approximately 20% of the land area.

The main urban centres of the county include Llanelli, Carmarthen and Ammanford.

- 1.12 According to the 2011 Census, Carmarthenshire has a population of 183,777 with 95.6% of the population being white. It is reported that 32.8% of the population speaks, reads, writes or understands Welsh and the number of Welsh speakers is above the Wales average.
- 1.13 The economy is predominantly based on agricultural activity with the area being mostly rural. The exceptions are the three settlements to the south where the estuaries provided opportunities for the shellfish industry to develop.
- 1.14 The Welsh Index of Multiple Deprivation shows that overall Carmarthenshire is not 'deprived'. However, parts of the area appear in the 10% most deprived areas of Wales in terms of poor 'access to services'.
- 1.15 Food hygiene official controls were being delivered by officers in the authority's Food Safety and Workplace Health and Safety Team within the Environmental Health and Licensing Service, whilst food standards official controls were being carried out by officers in the Trading Standards Services Section. These teams were within the Housing, Public Protection and Provider Services in the Department of Communities.
- 1.16 Officers and support staff responsible for food hygiene and food standards were based at two area offices in Llanelli and Carmarthen.
- 1.17 The authority reported that it did not have a formal 24-hour emergency out-of-hours service. The Environmental Health and Licensing Services Service Delivery Plan 2016/17 states that any urgent emergency response is carried out on a goodwill basis. The out-of-hours service was not tested as part of the audit.
- 1.18 At the beginning of 2016/17 there were around 1,999 food business establishments in Carmarthenshire. In addition, there were 28 approved food establishments.

- 1.19 In 2016/17 the authority had 8.95 and 4 full time equivalent (FTE) officers involved in the delivery of food hygiene and food standards official controls, respectively.
- 1.20 The authority provided officers with opportunities for continuing professional development (CPD) in their field of work. A training budget was available for Environmental Health and Trading Standards services and this had been maintained year on year.
- 1.21 The annual budget for the Public Protection Service was £3,226,793 in 2016/17, which includes an unspecified allocation for food law enforcement.
- 1.22 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 1,650 food establishments in Carmarthenshire were available to the public on the FSA's Food Hygiene Rating Scheme website.

2 Executive Summary

- 2.1 The audit examined Carmarthenshire County Council's arrangements for the delivery of official food controls. This included reality checks at food establishments to assess the effectiveness of official controls and, more specifically, the checks carried out by the authority's officers, to verify food business operator (FBO) compliance with legislative requirements. The scope of the audit also included an assessment of the authority's overall organisation and management, and the internal monitoring of food law enforcement activities.
- 2.2 The Head of Housing, Public Protection and Provider Services had overall responsibility for the delivery of food law enforcement services. Food hygiene official controls were being delivered by officers in the authority's Food Safety and Workplace Health and Safety Team within the Environmental Health and Licensing Service, whilst food standards official controls were being delivered by officers in the Trading Standards Service.
- 2.3 The authority had established service planning arrangements in place together with systems for on-going monitoring, reviewing and reporting performance. Service planning documents contained some but not all the information set-out in the Service Planning Guidance in the Framework Agreement. The plan had not included an overall estimate of the staff resources required to deliver the food hygiene and food standards services. The authority had undertaken a review of its food hygiene performance against the previous year's plan. However, no review had been documented for the previous years' delivery of the food standards service.
- 2.4 The authority had authorisation arrangements available to ensure the effective service delivery by appropriately authorised officers. Authorisations required amendment to ensure officers are authorised under all necessary legislation. In general, officers had been authorised in accordance with their qualifications, training and experience. However, the authorisations of officers who are not normally involved in the delivery of official controls, required review to ensure that they are consistent with their competencies.

- 2.5 A documented work procedure had been developed to ensure the accuracy of the authority's food establishment database. Audit checks confirmed that generally food establishment information held on the database was up to date but the need for improvement in relation to the accuracy of risk rating data and planned intervention dates for food hygiene. With regards to food standards, improvement was required to ensure that database records relating to interventions and interventions ratings were accurate. The authority had provided Local Authority Enforcement Monitoring System (LAEMS) returns to the FSA in respect of previous reporting periods.
- 2.6 Record and database checks confirmed that the food hygiene service had prioritised inspections of higher-risk and specialist businesses, with the exception of a small number of cases. However, not all lower risk rated establishments had been subject to interventions at the frequencies required by the Food Law Code of Practice. In respect of food standards, auditors were unable to assess whether interventions had been carried out at the required frequencies, as the risk rating scheme being used by the authority did not relate solely to food standards activities and was not equivalent to the scheme set-out within the Food Law Code of Practice.
- 2.7 Intervention records demonstrated that a thorough assessment of business compliance had been undertaken during some inspections in respect of food hygiene inspections. This was particularly the case where a recently updated inspection form had been used, for food standards inspections. In some cases, insufficient information had been captured to demonstrate that officers had undertaken a thorough assessment of business compliance in accordance with the Food Law Code of Practice. Food hygiene risk ratings were generally in accordance with inspection findings.
- 2.8 Revisits and follow-up action had generally taken place as required to check compliance with food hygiene and food standards requirements; with a few exceptions.
- 2.9 Food hygiene inspection reports were generally being adequately maintained by the authority; in accordance with the Food Law Code of Practice. However, the need to improve approved establishment records was identified. In general, food standards inspection reports

contained all of the information required when undertaken using the current procedures.

2.10 The authority's actions in respect of food incident interventions and food hygiene sampling had been carried out in accordance with the Food Law Code of Practice. The need for improvements were identified in relation to the authority's response to food complaints and food establishment complaints, food standards sampling and notifications of food related infectious disease.

2.11 The authority had been proactive in providing advice and guidance to food businesses. Initiatives had also taken place to promote food hygiene and food standards.

2.12 There was some evidence of internal monitoring of the food hygiene and food standards services. Further development and implementation of the authority's internal monitoring procedures will assist in achieving improvements.

2.13 Auditors established that some progress had been made in implementing requirements following the 2014 focused audit of Official Hygiene Controls at Dairy establishments and the 2014 Shellfish Traceability and Authenticity Exercise. The action plans for these audits have been updated accordingly.

2.14 The Authority's Strengths

Advice to Businesses

The authority had been proactive and was able to demonstrate that it works with businesses to help them comply with the food hygiene and food standards law.

Incidents

The authority was able to demonstrate that it had initiated and responded to notifications of incidents in a timely and effective manner, investigating and sharing information with the FSA and other authorities.

Food Safety and Standards Promotion

The authority had delivered a number of initiatives with the aim of promoting food hygiene and standards. The authority demonstrated good practice in using social media to promote awareness of initiatives.

2.15 The Authority's Key Areas for Improvement

Officer Authorisations

The authority's authorisation procedures required updating and consistent implementation to ensure officers are properly authorised under all relevant legislation and in accordance with their qualifications, training and experience.

Food Hygiene and Food Standards Intervention Frequencies

Food hygiene interventions had not been carried out at the minimum frequencies required by the Food Law Code of Practice whilst minimum frequencies for food standards interventions had not been correctly determined in accordance with the Food Law Code of Practice due to the use of an incompatible risk rating scheme. Interventions carried out at the minimum frequency ensure that risks associated with food businesses are identified and followed up in a timely manner.

Food Hygiene Interventions and Inspections

Information captured by officers during interventions was not always available or sufficiently detailed to demonstrate that thorough assessments of business compliance had been undertaken for all key aspects. The process of approval had not been consistently applied in accordance with the Food Law Code of Practice whilst records relating to approved establishments required improvement.

Food Establishments' Database

The authority's database included errors with regards to risk ratings and due inspection dates for food hygiene, and records and risk ratings for food standards.

Control and Investigation of Food Related Infectious Disease

Records of food related infectious disease did not always demonstrate that appropriate investigations had been carried out.

Enforcement

Enforcement action had not always been taken in accordance with the Enforcement Policy, Food Law Code of Practice and centrally issued guidance.

Audit Findings

3 Organisation and Management

Strategic Framework, Policy and Service Planning

- 3.1 The authority's Constitution set-out its decision making arrangements. Decisions on most operational matters had been delegated to the Director of Social Care, Health and Housing and to the Head of Public Protection (now the Head of Housing and Public Protection). The delivery of food law enforcement was overseen by an appointed Executive Board Member.
- 3.2 An 'Environmental Health and Licensing Services Service Delivery Plan 2016/17' ('the Service Plan') had been developed by the authority. The Service Plan had been approved at an Executive Board Member Decisions Meeting for Environmental and Public Protection on the 19th May 2016.
- 3.3 The Service Plan contained most of the information set-out in the Service Planning Guidance in the Framework Agreement, including a profile of the authority and the scope of the service. The Service Plan would benefit from the inclusion of a chart showing the managers and officers responsible for the delivery of food official controls. The times of operation, service delivery points and aims and objectives of the service were clearly set out.
- 3.4 The Service Plan stated there were approximately 1,994 food establishments in Carmarthenshire.
- 3.5 A breakdown of food establishments by business type was provided together with the number of planned food hygiene and food standards interventions due in 2016/17 by risk rating category.

3.6 In respect of food hygiene the following information was provided in the Service Plan:

Category	Planned Inspections 2016/17
A	2
B	62
C	502
D	171
E	249
Unrated	51
Total Inspections	1037
FHRS Revisits (estimated)	45
Estimated revisits	50
FSM projected visits	0
Total visits	95

3.7 The targets and priorities for food hygiene had been identified in the Service Plan. These included a commitment to deliver all inspections / interventions due at higher-risk establishments.

3.8 In respect of lower-risk establishments, the Service Plan stated that they would receive either an inspection or would be subject to alternative intervention activity; in accordance with the Food Law Code of Practice.

3.9 The following information was provided in respect of food standards:

Category	Planned Inspections 2016/17
A – High	50
B – Medium	800
Unrated + low	25
Total	875

3.10 The targets and priorities for food standards interventions, included a commitment to undertake inspections / interventions at all high-risk establishments, 50% of medium-risk establishments and 20% of low-risk establishments as they become due; in accordance with the programme identified at the start of the year.

3.11 The Service Plan did not set-out in detail the number of unrated, new businesses and low-risk businesses requiring an alternative intervention during the year.

3.12 The authority's priorities and intervention targets set-out in the Service Plan had been determined based on a risk assessment. However, the risk assessment scheme in use for food standards was not in accordance with the Food Law Code of Practice.

3.13 The resources available to deliver food law enforcement services were detailed in the Service Plan as follows:

	FTE Food safety* 2015/16 FTE	FTE Food safety* 2016/17 FTE	FTE Food standards^ 2015/16 FTE	FTE Food standards^ 2016/17 FTE
Head of Public Protection				
Public Health Services Manager	0.2	0.2		
Principal Officer	0.7	0.7	0.6	0.6
Senior officers	0.8	0.8		
EHP'S	7.35	7.35		
Technical Assistant - sampling	0.2	0.8	2.5	2.5
Animal Health Officers	0.05	0.05		
Total	9.3	9.9	3.1	3.1

Note :- * 'Food safety' includes inspection (including implementing the food hygiene rating scheme), advice, sampling, shellfish monitoring, infectious disease, health improvement,

3.14 This table does not indicate the number of FTE Trading Standards Officers involved in food law enforcement.

3.15 The authority had indicated the likely demand or resource required for some aspects of food service delivery. Estimates relating to Home Authority and Primary Authority work, food standards service requests, providing advice to business and food standards liaison & promotion work had not been specified as required by the FSA's Service Planning Guidance. In addition, an overall assessment of the resources required to deliver the full range of food official controls against those available had not been provided.

- 3.16 The Service Plan included information on the authority's Enforcement Policy and its approach to staff development. The need to undertake many programmed inspections out-of-hours had also been emphasised. However, the Service Plan would benefit by including information on the resources available for the development of staff involved in food law enforcement.
- 3.17 The authority confirmed it did not have any Primary Authority or Home Authority arrangements with businesses. The Service Plan provided a commitment to support locally based manufacturers and other regulators as an Originating Authority under the Home Authority principle. The statement would benefit from better quantifying the demand on each service and the FTE required to deliver it.
- 3.18 Arrangements for internal monitoring or '*quality assessment*' of the food hygiene service were set-out in the Service Plan. This should be further developed to include arrangements for internal monitoring in respect of food standards.
- 3.19 The overall cost of public protection services had been provided in the Service Plan. This included trends in expenditure and a breakdown of some non-fixed costs, such as staffing, equipment, investment in IT, travel and sampling. Further, information with regards to subsistence and a reference to the departmental financial provision for legal action should be provided in accordance with the Service Planning Guidance.
- 3.20 The Service Plan set-out how the authority's performance in delivering food official controls would be reviewed against the previous year's plan. The latest review of the food hygiene service had been included in an end of year report for the appropriate scrutiny committee. However, the review of the food standards service had not been documented. The food hygiene review did not cover all targets set-out in the Service Plan.
- 3.21 The variations in achieving the targets set-out in the previous year's Service Plan were not provided.
- 3.22 The authority had incorporated a number of areas for improvement in its 2016/17 Service Plan, which were not specific to food services nor based on the required review of performance against targets set-out in the previous year's Service Plan.

Recommendations

3.23 The authority should:

- (i) Ensure future Service Plans for food hygiene and food standards are developed in accordance with the Service Planning Guidance in the Framework Agreement. In particular, an estimate of the resources required to deliver the services against those available should be provided. [The Standard – 3.1]
- (ii) Ensure the annual performance review includes all information on the previous year's performance against the food hygiene and food standards Service Plans and any specified performance targets, standards and outcomes. Ensure this review is submitted for approval to either the relevant member forum or appropriately delegated senior officer. [The Standard – 3.2]

4 Review and Updating of Documented Policies and Procedures

- 4.1 The authority had developed separate operational procedures on document control for the food hygiene and food standards services. These included control over the production, approval, review, updating and storage of policies, procedures and associated documents.
- 4.2 Documents for the food hygiene service were stored electronically and protected from unauthorised access. The food standards system involved maintenance of a hard copy quality manual.
- 4.3 Managers were responsible for developing, reviewing and approving documents as well as ensuring they were subject to review at specified intervals and as appropriate, following changes. Permission to make changes to the list of documents or individual documents was restricted to nominated individuals. They were also responsible for ensuring the removal of superseded documents.
- 4.4 Auditors were able to verify that officers had access to policies and procedures, legislation and centrally issued guidance in hardcopy or electronically. The Trading Standards Section had access to legislation and guidance through a subscription to an external enforcement information service.
- 4.5 Most documents had been subject to review in line with the procedures. However, the enforcement policies required updating to include current information and references.

Recommendations

- 4.6 The authority should:
- (i) Ensure that the adopted enforcement policy is updated with current information and references and is reviewed at regular intervals in accordance with document control procedures. [The Standard – 4.1 & 4.2]

5 Authorised Officers

- 5.1 The authority's Scheme of Delegation to Officers set-out in its Constitution provided the Director of Social Care, Health and Housing and the Head of Public Protection (now the Head of Housing and Public Protection) with delegated authority in respect of powers of entry and execution of duties relating to the food hygiene and food standards services. This included the delegated authority to authorise other officers and to authorise legal action in conjunction with the Head of Administration and Law.
- 5.2 Separate documented procedures had been developed for the authorisation of food hygiene and food standards officers based on their qualifications and experience.
- 5.3 Lead officers for food hygiene and standards and communicable disease had been appointed, all of whom had the requisite qualifications, training and were able to demonstrate appropriate knowledge.
- 5.4 The authority had systems in place to identify officer training needs including individual assessments and internal monitoring activities. There were documented staff development plans and the authority was providing a combination of in-house and externally sourced training. All officers were required to achieve 10 hours of CPD in accordance with the Food Law Code of Practice. The authority had a budget for officer training and development, although it was not clear how much was allocated for the benefit of food law enforcement. Auditors were advised that, in practice, there were significant limitations on the ability to undertake training opportunities that involved significant cost.
- 5.5 An examination of the qualification and training records of six officers involved in the delivery of food hygiene official controls and four officers involved in delivery of food standards official controls was undertaken. Records were being maintained by the authority for officers on the authority's file plan and on hardcopy files, respectively.
- 5.6 All but one food standards officer and all but one food hygiene officer had been authorised in accordance with their qualifications, training and experience. Authorisations for food hygiene officers had been signed by an officer other than the Head of Housing and Public Protection contrary to the authorisation procedure. This was also contrary to the Scheme of

Delegation as the officer did not have the necessary delegated authority. Further, a matrix detailing the range of authorisations in the department, included a number of non-food officers. No information was provided on the competence of these officers to undertake food law enforcement duties. In addition, officer warrants cards differed from the instruments in writing and some key legislation was absent from authorisation documents and one item required updating. Authorisations for food standards officers included all of the key legislation required for the delivery of the range of official food controls but needed updating for some minor legislation. Further, the authority had authorised officers under the Food and Environment Protection Act 1985 for which the FSA is responsible. It was acknowledged by auditors' that the system of authorising officers was under review.

- 5.7 Academic and other relevant qualifications were available for all but one food hygiene officer and all but one food standards officer. Auditors were advised that arrangements were in progress to provide a copy of the food standards qualification from the awarding body.
- 5.8 All officers had received the minimum 10 hours of CPD required by the Food Law Code of Practice. Further, all but one officer had received the necessary training to deliver the technical aspects of the work for which they are involved. The authority would benefit from ensuring one officer receives formal HACCP training commensurate with their duties.

Recommendations

5.9 The authority should:

- (i) Review and amend its authorisations to ensure officers are appropriately authorised under all relevant legislation; and ensure authorisation documents for food hygiene officers are signed by a person delegated with the power to do so in accordance with the Constitution and the authority's procedure. [The Standard – 5.1]
- (ii) Ensure the level of authorisation of all food hygiene and food standards officers is consistent with their qualifications and training. [The Standard – 5.3]
- (iii) Ensure all authorised food hygiene officers meet the training requirements set out in the Food Law Code of Practice; including training in HACCP. [The Standard – 5.4]
- (iv) Maintain records of all relevant academic or other qualifications for authorised food hygiene and food standards officers. [The Standard – 5.5]

6 Facilities and Equipment

- 6.1 The authority had all of the necessary facilities and equipment required for the effective delivery of food hygiene and food standards services, which were appropriately stored and accessible to relevant officers.
- 6.2 A procedure for calibration of thermometers had been developed, but this did not fully detail the arrangements for ensuring thermometers were properly identified, assessed for accuracy and withdrawn from use when found to be faulty. In practice, the procedure being applied made reference to testing, including in use checks, together with action to be taken where tolerances were exceeded. However, the tolerances being applied were not in accordance with centrally issued guidance. No procedures for the maintenance of equipment had been developed for the food hygiene and food standards services.
- 6.3 Officers had been supplied with thermometers, which were being calibrated using iced / boiling water in accordance with the procedure and calibrated in a laboratory at least annually. Records relating to calibration were being maintained by the authority.
- 6.4 An examination of records relating to the latest calibration checks confirmed that all thermometers were within acceptable tolerances in accordance with the authority's procedure.
- 6.5 The authority's food establishments database was capable of providing the information required by the FSA. The database, together with other electronic documents used in connection with food law enforcement services was subject to regular back-up to prevent the loss of data.
- 6.6 The authority had systems in place to ensure business continuity and minimise damage by preventing or reducing the impact of security incidents. In respect of food law enforcement services, officers had been provided with individual passwords and access for entering and deleting data had been restricted on an individual basis. Data input protocols had been developed and auditors were advised that issues were discussed during team meetings in order to achieve consistency.

Recommendations

6.7 The authority should:

- (i) Amend the documented procedure for the calibration of thermometers to ensure specified tolerances are in accordance with centrally issued guidance and set-up documented procedures for the maintenance of equipment used by food hygiene and food standards services. [The Standard - 6.2]

7 Food Establishments Interventions and Inspections

Food Hygiene

- 7.1 In 2015/16 the authority reported through LAEMS that of the 1,999 food businesses within its area all category A-E rated food establishments due an intervention had received one. Furthermore, 94.25% of food businesses were 'broadly compliant' with food hygiene legislation. This was consistent with the percentage of broadly compliant establishments reported in the previous year.
- 7.2 Information provided during the audit indicated that the authority had adopted a risk-based approach to managing its food hygiene intervention programme. At the time of the audit 117 establishments were overdue an intervention in accordance with the frequencies specified in the Food Law Code of Practice. Of these, 21 (1 category B and 20 category C) related to businesses rated higher-risk and were overdue by between 1 month and 10 months.
- 7.3 The authority had developed documented procedures aimed at establishing a uniform approach to carrying out food hygiene interventions. Procedures were also in place for interventions at approved establishments. An examination of these procedures confirmed that they were generally in accordance with the requirements of the Food Law Code of Practice and relevant centrally issued guidance. Auditors discussed the benefit of including details of the authority's arrangements for managing interventions at new businesses and the timeliness of enforcement re-visits to check compliance. The procedures would benefit by including information for officers on 'red-flagging' and arrangements for sampling during inspections.
- 7.4 In relation to the procedure for interventions at approved establishments, auditors discussed the benefit of providing details to officers in relation to interventions at these establishments; including setting out the local approach to inspection. The procedure would also benefit from including information on the timeliness of approval visits and arrangements for notifying the FSA and FBOs of approvals.
- 7.5 A food hygiene inspection aide-memoire had been developed by the authority to assist officers with undertaking a thorough assessment of business compliance during inspections.

- 7.6 A total of 10 food establishments that had been subject to recent inspection were selected for audit. An examination of records relating to nine of these establishments was undertaken. The remaining establishment, which was category D rated was not subject to audit, as it had ceased trading prior to the audit and the records were not available. Auditors confirmed that, in recent years, all but three establishments had been inspected at the frequencies required by the Food Law Code of Practice. However, in the remaining three cases, a category B, a category C and one category D rated establishment had been overdue an intervention by between one and three months past the due date. The Food Law Code of Practice requires that interventions take place within 28 days of their due date.
- 7.7 Inspection records were available and legible for the nine food establishments audited and sufficient information had been captured to enable auditors to verify the size, scale and scope of the business operations in seven cases. In the remaining two cases, insufficient information had been captured.
- 7.8 In six cases, the level of detail recorded on aides-memoire was appropriate to enable auditors to verify that thorough assessments of business compliance with requirements relating to Hazard Analysis Critical Control Point (HACCP) had taken place. In the remaining three cases, the level of detail recorded was not sufficient for auditors to verify, whether an adequate assessment of compliance with HACCP requirements had taken place.
- 7.9 In seven of the nine cases, inspection records confirmed that officers had undertaken an appropriate assessment of the effectiveness of cross contamination controls. In the remaining cases, there was insufficient information on the inspection record to allow auditors to verify that the officer had fully considered all aspects of cross contamination control.
- 7.10 Auditors were able to confirm that in all but one case information on hygiene training undertaken by food handlers had been captured and in six out of nine cases, discussions with food handlers responsible for monitoring and undertaking corrective actions at CCPs had been documented. In the remaining cases, there was insufficient information available.

- 7.11 Where appropriate, supplier and customer information in relation to traceability had been recorded. In all cases, auditors were unable to confirm officers had undertaken checks on health / I.D. marks to verify the source of foods. There was evidence in two cases to demonstrate that officers had considered imported foods. Further in one applicable case, auditors were unable to verify that the adequacy of the establishment's product recall/withdrawal system had been assessed.
- 7.12 The risk ratings applied to establishments were consistent with the inspection findings in all cases. However, in one case, auditors noted that a food hygiene rating notified to a business did not correspond to the relevant elements of the food hygiene intervention rating scheme used to calculate the risk rating. In addition, an analysis of the database identified some officer errors relating to a small number of risk ratings.
- 7.13 Auditors were able to confirm that appropriate follow up action had taken place in eight cases where contraventions had been identified at the previous intervention. In the remaining case, involving a Hygiene Improvement Notice, auditors noted that there was no evidence that follow-up action had taken place within a five month period.
- 7.14 In respect of the most recent inspections, where records indicated that follow-up action was required, auditors were able to confirm this had taken place in all but one case. In this case, there was no evidence that visits to check compliance had been undertaken between the service of a Remedial Action Notice and its withdrawal approximately one month later.
- 7.15 The authority informed the FSA just prior to the audit that there were 30 approved establishments in its area, of which the records relating to 10 were examined.
- 7.16 In six cases, auditors were able to confirm that the authority had followed the appropriate process for issuing approvals to establishments. In three cases, auditors identified that establishments had been granted full approval on a single inspection contrary to centrally issued guidance. In the remaining case, auditors were unable to verify the process applied to the establishment requiring approval prior to it being granted full approval.

- 7.17 Auditors were able to confirm in all but one case, recent inspections at establishments had been undertaken at the frequency required by the Food Law Code of Practice by appropriately qualified officers. In the remaining case, a B rated establishment had been subject to an intervention approximately two months after its due date. The Food Law Code of Practice requires that interventions take place within 28 days of their due date.
- 7.18 Approved establishment inspection records were assessed in nine of the 10 cases, as the authority had incorrectly recorded on its database that an intervention had been undertaken in one of its establishments where it had not taken place.
- 7.19 Information captured on aides-memoire during the most recent inspections of approved establishments was sufficient to confirm that full scope inspections had taken place, and that officers had undertaken thorough assessments of business compliance with food hygiene requirements in three cases.
- 7.20 In four cases, insufficient information regarding product specific requirements had been documented. In one case, there was insufficient information as to whether structural requirements were sufficient to meet statutory obligations. In the remaining case, insufficient information was available on the aide-memoire to demonstrate that a thorough assessment of compliance had taken place.
- 7.21 Auditors were able to confirm that officers had assessed the use of health marks and commercial documents by the business in three cases. Likewise, in four cases auditors were able to verify that I.D / health marks of raw materials had been adequately assessed. In the remaining cases auditors were unable to verify from the officers' records whether these checks had taken place.
- 7.22 Auditors were able to confirm that in five cases, an adequate assessment of training and discussions with food handlers other than the FBO had taken place, where appropriate. In the remaining cases, there was insufficient evidence to allow auditors to verify that these checks had taken place.
- 7.23 In all cases the risk ratings that had been applied to approved establishments were consistent with the inspection findings. However, in

one case auditors noted that an establishment had been given a new risk rating without being subject to an intervention, contrary to the requirements of the Food Law Code of Practice.

- 7.24 The authority's food interventions procedure detailed when an Alternative Enforcement Strategy (AES) could be used for category E rated establishments, which included an example self-assessment questionnaire as an appendix. The procedure would benefit from including details as to what criteria would trigger an inspection visit following the receipt of a self-assessment questionnaire.
- 7.25 The authority reported that it had not implemented an Alternative Enforcement Strategy (AES) in the two years prior to the audit.

Recommendations

- 7.26 The authority should:
- (i) Ensure that food hygiene interventions/inspections are carried out at the minimum frequency specified by the Food Law Code of Practice. [The Standard -7.1]
 - (ii) Carry out food hygiene interventions / inspections and approve and register establishments in accordance with the Food Law Code of Practice, centrally issued guidance and its procedures. In particular, ensure that, where applicable, intervention risk rating and follow up are undertaken consistently in accordance with the Food Law Code of Practice, centrally issued guidance, and local procedures. [The Standard – 7.2]
 - (iii) Fully assess the compliance of establishments in its area to the legally prescribed standards. [The Standard – 7.3]
 - (iv) Ensure that the documented procedures for interventions are reviewed to include reference to the local arrangements for red flagging, timescales for revisits and a direction to officers as to whether to take samples. Additionally, amend the documented procedure for approved establishments to include localised arrangements for undertaking interventions and the process of approval. With respect to the Alternative Enforcement Strategy Procedure, amend to include details as to the information that would trigger a visit by the authority. [The Standard – 7.4]
 - (v) Ensure that observations made and/or data obtained in the course of a food hygiene intervention/inspection are recorded in a timely manner to prevent the loss of relevant information. [The Standard – 7.5]

Verification Visits to Food Establishments

- 7.27 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.

- 7.28 The officers were knowledgeable about the businesses and demonstrated an appropriate understanding of the food safety risks associated with the activities at each establishment. The officers demonstrated that they had carried out a detailed inspection and had appropriately assessed compliance with legal requirements and centrally issued guidance and were offering helpful advice to the FBOs. In one case, the officer identified that no hot water was available in the establishment and made an appropriate commitment to revisit the following day.

Food Standards

- 7.29 In 2015/16 the authority had reported through LAEMS that 100% of low to high-risk rated food businesses due to be inspected had been inspected. This was consistent with the previous year.
- 7.30 The authority had developed a food standards inspection procedure which was generally in accordance with the Food Law Code of Practice. However, the procedure required the use of a non-food specific risk rating scheme. For this reason, no assessment could be made in relation to the frequency of interventions against the requirements of the Food Law Code of Practice. The procedure would benefit from amendment to ensure the authority is operating a risk rating scheme that is in accordance with the Food Law Code of Practice.
- 7.31 High and low-risk inspection aides-memoire were in use by the authority along with a report of visit form that had been developed by the authority for use by officers in recording inspection findings. The forms, if used together, contained sufficient fields to facilitate the necessary capture of observations made and/or data obtained in undertaking a full scope assessment of business compliance with requirements relevant to food standards.
- 7.32 Ten food standards interventions were selected for audit. Two of these files were found to relate to unrated establishments or non-food visits and as such could not be considered. An examination was carried out of the remaining records held on the authority's database and in hardcopy

for eight food establishments reported to have been subject to food standards inspections.

- 7.33 Records of observations relating to the latest inspection were retrievable and legible in all cases examined. In six cases, officers' observations had been captured using the authority's recently introduced food standards inspection aides-memoire. The remaining two interventions had been undertaken prior to the procedural amendment and as such the current forms had not been used and records had been made using older forms.
- 7.34 Auditors were able to confirm that officer assessments of compliance with composition, presentation and labelling requirements, product recall and traceability had been undertaken in six cases. However, one of these cases had limited information in relation to presentation / labelling due to insufficient capture of information by the officer. In the remaining two cases, there were insufficient details recorded on old style forms. In six cases, there was evidence available to demonstrate that visits had been unannounced, with the remaining two files containing insufficient evidence. Auditors discussed that the introduction of the new forms had significantly improved the level of information recorded by officers.
- 7.35 In general, sufficient detail was recorded to show that a thorough assessment of food standards requirements had taken place in cases where new forms had been used. In all but one case auditors were able to establish the type of activity undertaken and that where relevant officers had made an assessment of Quality Management Systems in relation to food standards. In the remaining case, insufficient information had been recorded on establishment files.
- 7.36 Auditors were able to confirm that officers had captured the size, scale and scope of the business in one case, whilst in the remaining cases insufficient information had been recorded to demonstrate the size or scale of the operations carried out.
- 7.37 In cases which had been subject to previous interventions, in general, evidence was available to confirm that appropriate follow-up action had been taken where contraventions had been identified. However, in one case auditors were unable to verify that the authority had escalated

enforcement action where recurring issues had been identified due to insufficient details being recorded on the file.

- 7.38 In respect of the most recent inspections, auditors were able to verify that appropriate action had been taken in light of inspection findings. Where records indicated that follow-up action was required; evidence was available to confirm this had taken place in all cases.
- 7.39 In all cases, risk ratings had been incorrectly applied in accordance with the Food Law Code of Practice as considerations were not solely based on food standards.
- 7.40 The authority had not documented its approach to undertaking AES. However, the authority reported undertaking an AES and 10 files were selected for examination.
- 7.41 On review of the files selected, auditors established that the activity reported was not an AES in accordance with the Food Law Code of Practice as the files related to a mail-shot sent to food businesses in relation to a sampling programme.

Recommendations

- 7.42 The authority should:
- (i) Ensure that food standards interventions/inspections are carried out at the minimum frequency specified by the Food Law Code of Practice. [The Standard -7.1]
 - (ii) Carry out food standards interventions/inspections in accordance with the Food Law Code of Practice and centrally issued guidance to include using an appropriate risk rating scheme. [The Standard - 7.2]
 - (iii) Assess the compliance of establishments in its area to the legally prescribed standards. [The Standard – 7.3]
 - (iv) Amend its interventions procedures to provide guidance on which establishments are eligible for inclusion in an Alternative Enforcement Strategies and the process to follow should a decision be made to use this type of intervention. [The Standard 7.4].
 - (v) Ensure that observations made and/or data obtained in the course of a food standards intervention/inspection are recorded in a timely manner to prevent the loss of relevant information. [The Standard – 7.5]

Verification Visit to Food Establishment

- 7.43 A verification visit was made to one food establishment with the authorised officer of the authority who had carried out the most recent food standards inspection. The main objective of this 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.
- 7.44 The officer was able to demonstrate their knowledge of the business and provide auditors with an assurance that assessments of food standards requirements had taken place as part of the inspection. Auditors

discussed the importance of checking the Primary Authority status of establishments prior to interventions being undertaken.

8 Food and Food Establishments Complaints

8.1 The authority had developed separate procedures for food hygiene and food standards complaints and service requests which outlined the criteria for investigations. The food hygiene procedure was based on a template produced by the Welsh Heads of Environmental Health (WHeEH) Food Safety Expert Panel and the food standards procedure formed part of the quality manual system.

8.2 The content of both procedures was generally in accordance with the Food Law Code of Practice and centrally issued guidance. However, the local procedure for food hygiene did not cover local arrangements for dealing with complaints regarding the condition of establishments. Auditors discussed the benefit of reviewing and updating procedures to include these arrangements.

Food Hygiene

8.3 An examination of the records relating to seven food hygiene complaints received by the authority was undertaken. Auditors established that all complaints had been actioned in a timely manner and within the target response times set out in the database.

8.4 Auditors were able to establish that appropriate action had been taken based on the findings of investigation in all but two cases. Insufficient evidence was available to demonstrate that the two complaints, relating to unregistered food premises, had been followed up after the initial actions.

8.5 Where relevant, evidence was available to show that complainants had been informed of the outcome of the investigation in all but two cases.

Food Standards

8.6 An examination of the records relating to seven food standards complaints received by the authority was undertaken. Auditors established that all complaints had been thoroughly investigated and where necessary appropriate follow up action taken.

8.7 In five cases complaints had been investigated within the timescales set out in the local procedures. In three cases, evidence was not available

to demonstrate that the outcome of the investigation had been communicated to the complainant in line with the local procedure.

Recommendations

8.8 The authority should:

- (i) Amend the food hygiene complaints procedure to include local arrangements for dealing with complaints regarding the condition of premises. [The Standard - 8.1]
- (ii) Ensure that food hygiene and food standards complaints or service requests are actioned in accordance with the requirements set out in local procedures. [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 its Enforcement Policy and its Service Plan.
- 9.2 Auditors were advised that food law enforcement officers had been provided with passwords to enable them to access the Primary Authority website.
- 9.3 Primary and Home Authority considerations had been included in some other work procedures, for example food complaints, incidents, food standards interventions and food hygiene sampling procedures.
- 9.4 Although the authority had no Primary Authority agreements in place, auditors were able to verify that, in its capacity as an enforcing authority, it generally had regard to Primary Authority guidance and followed up matters of concern with Primary Authorities, as appropriate.
- 9.5 The authority had no formal Home Authority agreements in place but was a point of contact for many manufacturers as the originating authority. Records examined during the audit demonstrated that accurate and timely advice had been provided to businesses, and that it had responded appropriately to requests for information from other local authorities.

10 Advice to Business

10.1 The authority had been proactive in providing food hygiene and food standards advice to businesses. There was evidence that verbal and written advice had been provided during interventions and on request. The authority reported that 372 and 87 requests for information and advice had been received in the last year for the food hygiene and food standards service, respectively.

10.2 The authority provided limited advice for food businesses on its website in respect of both food hygiene and food standards. A number of business advice projects had also been undertaken, which included:

- Validation and verification training provided to 15 approved establishments;
- Representation by the food hygiene service at the Carmarthenshire Tourism Summit to provide advice to businesses involved with the tourist trade;
- Provision of advice to the authority's school procurement service on arrangements for procuring safe food;
- Food standards advisory visits at 21 food establishments;
- Provision of advice to the Salvation Army Food Waste initiative on the control of safe food in food banks linked to a national supermarket;
- Development of a Food Hygiene Guidance pack for childcare settings / after school clubs / holiday clubs / childminders etc.;
- Provision of a mailshot to 131 businesses on use of food colourings; and,
- Development of vendor approval arrangements to ensure safe food procurement for organisers of festivals within the county.

11 Food Establishments Database

- 11.1 The authority had documented procedures for the maintenance of the food hygiene and food standards databases. Auditors were advised that the database was maintained up to date using information from food business operators, service requests, officer knowledge / observations, and other council departments.
- 11.2 Auditors randomly selected 10 food establishments located in the authority's area from the internet. All had been included on the authority's database and in its food inspection programmes. However, a risk rating had been applied by the food standards service to one establishment without the benefit of an inspection and another establishment did not have a date of next intervention.
- 11.3 Analysis of the database showed some errors relating to a small number of food hygiene risk ratings and 82 due inspection dates for food hygiene. 12 of these had due dates longer than should have been allocated. A number of establishments had been provided with a risk rating by the food standards service without the benefit of an inspection. Further, it was not possible to differentiate between establishments on the database that had received a food standards intervention and those that had received a food intervention activity. This presents a challenge to accurately manage the programme of due food standards interventions. Some of the database anomalies had the potential to affect the annual enforcement monitoring return to the FSA and FHRS ratings available on the FSA's website and in food establishments.
- 11.4 During the audit of enforcement files, it was identified that a food business had been subject to a voluntary closure agreement, but this activity had not been entered onto the database. This had the potential to affect the annual enforcement monitoring return to the FSA.

Recommendations

11.5 The authority should:

- (i) Ensure food hygiene and risk rating data and due inspection dates are correctly entered and accurately maintained on the authority's database. Also, ensure that only those establishments that have received a food standards inspection are recorded and rated as such on the database.
[The Standard – 11.1]

12 Food Inspection and Sampling

- 12.1 The authority's Service Plan contained aims and objectives that made specific reference to the monitoring and sampling of food and shellfish beds to verify compliance with statutory requirements. The programme included an estimate of the number of samples that would be taken in 2016/17.
- 12.2 Separate policies relating to food standards and food hygiene sampling activities had also been developed. In respect of both services, auditors discussed the benefit of providing further details on out of hours sampling and developing the food standards sampling policy to include information on the notification of results to the Primary Authority and Home/Originating Authority. It would also benefit from providing further details on its policy in relation to the verification monitoring of food, special investigations and imported food.
- 12.3 Programmes for the microbiological examination and chemical analysis of food that had regard to national and regional priorities had been developed and implemented. Auditors discussed the benefit of including details of the number of samples to be taken for specific products per month for its microbiological sampling plan. In addition to funding its own sampling programme, the authority had benefited from FSA grant funding for food standards samples.
- 12.4 Procedures had been developed for the microbiological sampling of foods, which were partially in accordance with the Food Law Code of Practice and official guidance. However, auditors discussed the benefit of the authority providing details relating to local arrangements for sampling within this procedure. Auditors noted that information relating to the specific equipment required to sample, the authority's storage and transport arrangements, information relating to the authority's arrangements for hot/cold, solid/frozen and liquid bulk foodstuff sampling and the authority's arrangements relating to continuity of evidence had not been specified. Further, details relating to shellfish sampling was not available. Auditors discussed the benefit of providing guidance to officers on the documentation required for the submission of samples. Auditors noted that a procedure for food standards sampling had not been documented by the authority.

- 12.5 The authority had appointed a Public Analyst for carrying out analysis of food and had a formal agreement in place with Public Health Wales for the microbiological examination of food. The laboratories were on the recognised list of UK designated Official Laboratories.

Food Hygiene

- 12.6 Audit checks of records relating to five samples submitted for microbiological examination were undertaken, all of which had been notified as being satisfactory. The authority reported no unsatisfactory results in the two years prior to the audit. All samples had been procured by appropriately trained and authorised officers and results were available on food establishment files.
- 12.7 In all cases, businesses had been informed of results.

Food Standards

- 12.8 An examination of the records relating to 10 unsatisfactory food standards samples was undertaken. Auditors were able to confirm in all cases that samples had been appropriately procured by trained and authorised officers and the results were available on food establishment files.
- 12.9 Auditors were able to confirm that sampling had been appropriately undertaken in accordance with the Food Law Code of Practice in six cases. In the remaining cases, there was insufficient evidence to enable auditors to confirm that appropriate follow-up action had taken place. Where this was applicable, the owner, importer or manufacturer had been informed in writing of the unsatisfactory results. Auditors were able to confirm that, where applicable, liaison with the Primary, Home or Originating Authority had taken place in all but one case.

Recommendations

12.10 The authority should:

- (i) Amend and implement its sampling policy for the microbiological examination and chemical analysis of food in accordance with the Food Law Code of Practice and centrally issued guidance. In particular, in respect of both services, further details in respect of out of hours sampling should be included. The food standards sampling policy should include information on the notification of results to the Primary Authority and Home/Originating Authority and the policy with regards to the verification monitoring of food, special investigations and imported food. [The Standard – 12.4]
- (ii) Amend and implement its sampling programme for the microbiological examination of food to include specific details of the number of foods to be sampled. [The Standard – 12.4]
- (iii) Amend and implement its documented procedure for microbiological sampling of foods to include information on the specific equipment required to sample, the authority's storage and transport arrangements, information relating to the authority's arrangements for hot/cold, solid/frozen and liquid bulk foodstuff sampling and the authority's arrangements relating to continuity of evidence in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 12.5]
- (iv) Document and implement a procedure for the chemical analysis sampling of foods in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 12.5]
- (v) Take all appropriate action in accordance with its Enforcement Policy where sample results are not considered to be satisfactory. [The Standard – 12.7]

13 Control and Investigation of Outbreaks and Food Related Infectious Disease

- 13.1 The authority had identified a lead officer for communicable disease along with other designated officers to assist in the investigation and assessment of notifications received by the authority.
- 13.2 The Wales Outbreak Plan, containing information on the management of communicable disease outbreaks, had been approved for adoption by a senior officer of the authority. The plan had been produced by a multi-agency group, including Public Health Wales and Welsh Government. Auditors noted that the plan did not include contact details for neighbouring local authorities and other agencies that have a role in the control of outbreaks.
- 13.3 A procedure for investigating sporadic cases of food related infectious disease notifications had been produced by the authority, which was supplemented by a range of pathogen specific advisory leaflets and investigation questionnaires. Auditors discussed that the procedure would benefit from review to include further information in relation to follow-up action for non-returned postal questionnaires and investigation of cases of *Campylobacter*.
- 13.4 The authority had informal arrangements in place to respond to notifications of food related infectious disease received outside normal working hours involving contact with an appropriately qualified officer on a good-will basis. The arrangements were not tested as part of the audit.
- 13.5 Notifications relating to eight sporadic cases of food related infectious diseases were selected for audit. In two cases, relating to *Campylobacter* notifications, auditors established that they had not been routinely investigated by the authority. However, a letter containing advice had been issued to the cases. Auditors were advised that the authority was currently working on addressing this issue through the development of an online questionnaire.
- 13.6 In five of the remaining six cases, questionnaires were available and completed which confirmed that officers had interviewed infected persons and that mostly thorough and timely investigations had been carried out in accordance with the authority's procedures. In one case, auditors identified limited evidence being recorded where deviation was

made from procedures, such as, asymptomatic household contacts refusing to provide screening samples and non-follow-up of implicated premises where other risk factors were present.

- 13.7 In the remaining case, relating to a high-risk infection, a completed questionnaire was not available but there was evidence available to demonstrate the authority had contacted the case in writing. The details of follow-up action were not recorded following receipt of a response.
- 13.8 The authority reported that no foodborne outbreaks had occurred in the two years prior to the audit.
- 13.9 Where available, records relating to the control and investigation of food related infectious disease were being retained by the authority for at least six years.

Recommendation

- 13.10 The authority should:
- (i) Amend its Outbreak Plan to include local contacts and details of neighbouring authorities and other agencies that have a role in the control of outbreaks. [The Standard -13.1]
 - (ii) Amend the procedure for investigation of sporadic cases of food related infectious disease to ensure that all notifications, including Campylobacter, are investigated in accordance with centrally issued guidance. Ensure that the procedure is fully implemented to include investigation of and follow-up of all notifications. [The Standard -13.2]

14 Food Safety Incidents

- 14.1 The authority had developed a food hygiene policy and food standards procedure for dealing with incidents and food alerts, which included food alerts arising from within its area.
- 14.2 Auditors were able to verify that a sample of five recent food alerts for action notified to the authority by the FSA had been received and actioned in accordance with the instructions.
- 14.3 Auditors were able to verify that the authority was aware of the requirement to notify the FSA of any serious localised and non-localised food hazards arising locally and had recently done so when this was required.
- 14.4 Action taken by the authority had been documented and correspondence, including officer e-mails relating to food alerts, had generally been maintained.

15 Enforcement

- 15.1 The authority had developed a general enforcement policy in 2009 which applied to food hygiene and food standards services. An operational enforcement policy had also been developed for food standards. Amendments to the general enforcement policy had been made in 2012 but auditors were advised that this version was not in use. There was no evidence that either policy had been appropriately approved. Further, the policy had not been published on the authority's website.
- 15.2 The 2009 policy advocated a graduated approach to enforcement and was generally in accordance with Food Law Code of Practice and other official guidance. The policy provided criteria for informal action, statutory notices, other formal actions, issuing simple cautions and taking prosecutions. The policy made reference to the Primary and Home Authority schemes.
- 15.3 The authority's approach to dealing with non-compliance at establishments where it was the food business operator had not been documented in the policy.
- 15.4 Procedures for the withdrawal or suspension of approvals had been documented in the approved premises procedure and was in accordance with the Food Law Code of Practice.
- 15.5 Several enforcement procedures had been developed for the food hygiene and food standards services which detailed the enforcement actions available.
- 15.6 The authority's food hygiene enforcement procedures included procedures for Hygiene Improvement Notices (HIN), Emergency Hygiene Prohibition Notices (HEPN), Prohibition Notices and Orders, Remedial Action Notices (RANs), Simple Cautions, prosecutions, voluntary surrenders and voluntary closure agreements. The hygiene procedures were based on the All Wales Food Safety Expert Panel templates and were generally in accordance with the Food Law Code of Practice. The authority did not have a procedure for inland enforcement of imported food.

- 15.7 Auditors discussed the benefit of reviewing the HIN and RANs procedures to include instructions on the local approach to the method and record of service, checks on compliance and the use of appropriate templates.
- 15.8 The authority had developed a procedure for the detention, seizure and certification of unsafe food for the food hygiene service. The food standards service had recently developed a procedure for the seizure and detention of unsafe food. These procedures were generally in accordance with the Food Law Code of Practice, but would benefit from further development to include detail on the process to be followed, the use of associated template notices and documents and the local arrangements for bringing foods before a Justice of the Peace and the destruction and disposal of food.
- 15.9 An examination of database records indicated that there were no establishments with a '0' food hygiene rating at the time of the audit. Prior to the audit, the authority had not reported any cases where establishments had been subject to voluntary or formal closure.
- 15.10 The authority reported in pre-audit information that the following formal enforcement actions had been taken in the two years prior to the audit:
- 50 Hygiene Improvement Notices (HINs);
 - 2 Remedial Action Notices (RANs);
 - 5 Food Detention Notices;
 - 4 Certifications of food as unsafe;
 - 1 Food seizure;
 - 2 Voluntary surrenders of food;
 - 2 Simple Cautions;
 - 2 prosecution decisions
- 15.11 The records relating to 10 HINs were selected for audit. In all cases, evidence was available to demonstrate the HINs had been served on the correct person and the contravention had been clearly detailed along with an appropriate timescale for achieving compliance. In general, the relevant legislative requirements had been accurately cited on the HINs. However, in one case the specific legislative reference had not been provided.

- 15.12 In general, evidence was available to demonstrate that a HIN had been an appropriate course of action. However, in three cases there was insufficient evidence to demonstrate that a graduated approach to enforcement had been taken, in accordance with the enforcement policy. Auditors noted that information on the right to appeal was included on all HINs. However, the name and address of the local court had not been included contrary to the Food Law Code of Practice.
- 15.13 In eight cases, auditors were able to establish that timely checks on compliance and appropriate follow-up action had taken place and in five cases, letters confirming compliance had been sent to the food business operator in accordance with the authority's procedure. In five cases, true copies of the notice, signed by the officer were available and in three cases evidence of method of service was available.
- 15.14 Audit checks were undertaken of records relating to two RANs which confirmed that the decision to serve a RAN was appropriate. In one case, a written agreement to voluntarily close an establishment was accepted on the same day, indicating that the service of the RAN was not in accordance with the Food Law Code of Practice.
- 15.15 In all cases, auditors were able to confirm that notices had been signed by the officer witnessing the contravention, were clear and specified the nature of the breach. However, records were not available to confirm that the recipients had been provided with contact details for the local law court in the event of appeal.
- 15.16 In one case, auditors were able to verify that there was evidence of service. However, auditors were unable to verify that the RAN had been served on the correct food business operator due to lack of registration details on the establishment file. In the other case, auditors were able to verify that the notice had been addressed to the correct food business operator but evidence of service was not available.
- 15.17 There was evidence that timely checks on compliance had been carried out and that the notices had been withdrawn in accordance with the Food Law Code of Practice.
- 15.18 In four of the five cases where foods had been detained, auditors were able to confirm that detention had been an appropriate course of action

to prevent the food from entering the human food chain pending further investigation by the authority. In the remaining case, the detention notice was not available for examination.

- 15.19 Where notices were available, auditors were able to confirm that the details of foods to be detained were clearly specified and that in the one applicable case a withdrawal notice had been served in accordance with the Food Law Code of Practice. In three of the four cases, the arrangements to ensure the security of the food was satisfactory. In the remaining case, the notice did not specify the location where the food was to remain for the purpose of detention.
- 15.20 In the four cases where food had been certified as failing to meet the food safety requirements, auditors were able to confirm that this was the correct course of action and following certification, foods had been seized in one case and voluntarily surrendered in two cases. In the remaining case, the information available on the establishment file was insufficient to determine the process for dealing with the food or the outcome.
- 15.21 In respect of the food that had been seized, auditors were able to confirm that seizure was appropriate, had been confirmed in writing and the foods had been dealt with by the Justice of the Peace as soon as was reasonably practicable.
- 15.22 In the two cases where food was voluntarily surrendered, the action taken had been appropriate. In one of the cases, receipts had been provided for the destruction of the food which had been signed by the officer and counter signed by the person surrendering the food. In the other case, although a written undertaking by the food business operator was available, auditors were unable to confirm that the receipt had been signed by the officer and did not specify the time, place and method of destruction of the food.
- 15.23 Records were examined relating to the withdrawal of approval for the production and handling of products of animal origin at one establishment. Auditors were able to confirm that withdrawal had been the correct course of action, and the food business operator and FSA had been notified in writing of the authority's decision. Further, auditors were able to verify that the notice correctly specified the reasons for the withdrawal and the matters necessary to satisfy the requirements of the

notice. The notice contained the necessary details required for a food business operator to appeal the decision.

- 15.24 The authority had developed template forms to be used in the compilation of Simple Caution and prosecution case files. During the audit, a documented procedure for use in conjunction with the template forms had been developed, which was in accordance with the Food Law Code of Practice.
- 15.25 In the two years prior to the audit, the authority had issued two Simple Cautions for food standards offences and two prosecutions; one for food hygiene and one for food standards offences.
- 15.26 Auditors were able to confirm that the prosecutions had been an appropriate course of action. However, auditors were unable to verify that the authority had documented its decisions with regards to its Enforcement Policy or relevant elements of the Code of Crown Prosecutors. Auditors advised of the need to ensure that designated roles, in accordance with the Criminal Procedure and Investigations Act 1996, are clearly documented on prosecution files and that officers with the necessary delegated authority perform these roles.
- 15.27 In respect of the two Simple Cautions issued for food standards offences, auditors were able to confirm that they had been properly administered by suitably authorised officers. However, witness statements were not available in either case and there was no evidence that the decision to issue a Simple Caution had been made following consideration of the enforcement policy.

Recommendations

15.28 The authority should:

- (i) Review and amend its enforcement policy to include details of its arrangements for ensuring compliance with food hygiene and food standards requirements in establishments where it is the food business operator and ensure it is approved by the appropriate member forum. [The Standard – 15.1]
- (ii) Include in its enforcement procedures for Remedial Action Notices, Hygiene Improvement Notices, Hygiene Emergency Prohibition Notices, voluntary closures and detention of food, details of local arrangements, specifically; method and record of service, checks on compliance, and the use of approved templates. It should also include in its Seizure and Detention procedure details of local arrangements, specifically; the use and requirement of associated notices and documents and the local arrangements for bringing foods before a justice of the peace and the destruction and disposal of food. [The Standard - 15.2]
- (iii) Set up documented enforcement procedure for follow-up and enforcement actions for imported food in accordance with the Food Law Code of Practice and official guidance. [The Standard -15.2]
- (iv) Ensure that food law enforcement is carried out in accordance with its procedures, the Food Law Code of Practice, official guidance and centrally issued guidance. [The Standard – 15.2 & 15.3]
- (v) Ensure its Enforcement Policy is fully implemented and all decisions on enforcement action are documented and are made following consideration of the enforcement policy. Document the reasons for any departure from the criteria set-out in the Enforcement Policy. [The Standard – 15.1 & 15.4]

16 Records and Interventions/Inspections Reports

Food Hygiene

- 16.1 Food business records, including registration forms, inspection aides-memoire, post inspection visit report forms and correspondence were being stored by the authority on its electronic food establishment database. Details of the date and type of intervention undertaken at food establishments, as well as the risk rating profiles and food hygiene ratings, were also maintained on the system. Information relating to food establishments selected for audit was provided by the authority in hard copy and through access to the database. In respect of the nine establishment files audited, information relating to the last three inspections was available and records were being retained for six years, where relevant.
- 16.2 Food registration forms were available on file for three out of the nine establishments audited for food hygiene. One of the three registration forms had been stamped with the date of receipt in accordance with the local procedure.
- 16.3 In five of the nine cases, auditors were able to confirm that officers had retained the core elements of a business HACCP plan on file. In the remaining cases, there was insufficient evidence to demonstrate that the officers had retained all the relevant critical control points (CCP) on aides-memoire or elsewhere on the file record.
- 16.4 In all cases, approved establishment files would benefit from a review against Annex 10 of the Food Law Practice Guidance to ensure all required information is available, retrievable and up to date.
- 16.5 In all but one case, officers had left 'report of a visit' forms following inspections and had issued inspection letters to communicate findings to food businesses. Inspection letters 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.
- 16.6 In eight out of nine cases the authority had provided the information required to be provided to food business operators under Annex 6 of the

Food Law Code of Practice. In the remaining case, auditors were unable to verify that all the required information had been provided to the business e.g. documents examined, samples taken, officer signature and name in capitals.

- 16.7 In all of the cases examined the latest inspection letters had been sent to businesses within 14 days from the date of the visit, as required by the authority's procedures and Food Hygiene Rating legislation. However, in one case, auditors were unable to verify that the inspection report had been sent to the food business' head office.

Recommendations

- 16.8 The authority should:
- (i) Maintain up to date accurate records of all food establishments in its area in accordance with the Food Law Code of Practice and centrally issued guidance. These records shall include reports of all interventions / inspections in accordance with Annex 6, details of infectious disease investigations and relevant registration information. The authority should also record, with reasons, any deviations from set procedure. [The Standard – 16.1]

Food Standards

- 16.9 The outcome of inspections was being reported to businesses using food standards inspection report forms. Report forms were being maintained electronically on the database and in hardcopy. Information relating to intervention activity, including the date, type of intervention undertaken and risk rating for the establishment was also recorded on the database.
- 16.10 In four cases, food business operators had been provided with report forms at the conclusion of their latest inspection. In the remaining four cases, report forms were not available. In two of these cases this had not been the case due to the interventions being undertaken prior to a procedural amendment requiring such action. In the other two high risk establishments, insufficient evidence was available on file to demonstrate that report forms had been provided. Auditors were

informed that copies of aides-memoire had been provided to the business operator. The information provided did not meet the requirements of the Food Law Code of Practice and an amendment was made to the local procedure to require inspection report forms to be left or sent to the relevant address in all cases.

- 16.11 Report forms provided and completed in line with the amended local procedure contained all of the information required by Annex 6 of the Food Law Code of Practice.
- 16.12 The authority was able to demonstrate that food standards records were being consistently maintained for at least six years.

Recommendations

- 16.13 The authority should:
- (i) Ensure that businesses are provided with reports following an intervention and that food standards inspection report forms provided following interventions/inspections contain all of the information required by Annex 6 of the Food Law Code of Practice. [The Standard – 16.1]

17 Complaints about the Service

- 17.1 The authority had developed a corporate complaints policy and a departmental policy which were available to the public and food businesses on its website.
- 17.2 Complaints were dealt with under a two-stage procedure, initially by the relevant service manager and then, if the customer was not satisfied by the Corporate Complaints Officer.
- 17.3 Four complaints against the food hygiene service had been received in the two years prior to the audit. These had been dealt with in accordance with the authority's policy.
- 17.4 Auditors noted that the details of a senior officer had been provided on food hygiene correspondence should businesses wish to complain following an inspection or other intervention.

18 Liaison with Other Organisations

18.1 The authority had liaison arrangements in place with a number of external groups aimed at ensuring efficient, effective and consistent enforcement. Auditors were able to confirm that the authority had been represented on the following forums for local authority regulatory services:

- West Wales Food and Agriculture Standards Liaison Group;
- South West Wales Food Safety Task Group;
- South West Wales Communicable Disease Task Group.

18.2 Arrangements were also in place to keep informed of the work of the following bodies and liaise with them as appropriate:-

- All Wales Food Safety Expert Panel;
- Welsh Food Microbiological Forum;
- Lead Officers Food Hygiene Rating Steering Group;
- Wales Heads of Environmental Health Group;
- Wales Communicable Disease Expert Panel;
- Consultant in Communicable Disease Control Proper Officer (CCDC) and infection control nurses of Public Health Wales (Welsh NHS);
- Wales Shellfish Liaison Group.

18.3 The authority also provided evidence of effective liaison arrangements with the following external organisations:

- Bury Inlet Management Advisory Group;
- Three Rivers Management Advisory Group;
- Welsh Government Fisheries;
- CEFAS;
- South West Wales Local Action Group;
- Welsh Food Fraud Coordination Unit;
- Food Standards Agency in Wales;
- Public Analyst.

18.4 Auditors were able to verify that mechanisms were in place for effectively liaising with internal departments.

19 Internal Monitoring

- 19.1 Internal monitoring is important to ensure performance targets are met, services are being delivered in accordance with legislative requirements, centrally issued guidance and the authority's procedures. It also ensures consistency in service delivery.
- 19.2 A number of key performance indicators had been identified for the food hygiene and standards services. Quantitative internal monitoring arrangements were in place to monitor performance against the targets, which had been set-out in the service plan. Performance had been reported quarterly through corporate performance monitoring. Further monitoring of the progress of intervention programmes occurred during one to one workload reviews and team meetings.
- 19.3 Separate documented internal monitoring procedures had been developed for the food hygiene and food standards services.
- 19.4 The principal, lead and senior officers were responsible for internal monitoring of the food enforcement services at an operational level.
- 19.5 Auditors were able to verify that some qualitative internal monitoring had been undertaken across the service including record checks.
- 19.6 In respect of food hygiene the need to extend the scope of the procedure to include database checks, officer authorisations and infectious disease notifications, and to specify minimum frequencies for all monitoring activities was discussed with managers. Records maintained, in accordance with the procedure confirmed the nature and extent of the monitoring activity which included accompanied inspections.
- 19.7 The food standards internal monitoring procedure included recent amendments in relation to monitoring officer authorisations, accompanied inspections and frequencies of monitoring activity. A record of internal monitoring had been made on the database, but no report was available and the records did not confirm the nature and extent of the monitoring activity. Further, the procedure had not been fully implemented.

- 19.8 Team meetings were also conducted to feedback and share information on the validation of quantity and quality of work. Food hygiene team meetings had not always been carried out in accordance with the frequency contained within the procedure.
- 19.9 Officers had attended training to ensure the consistent application of food hygiene risk ratings, in accordance with Annex 5 of the Food Law Code of Practice. Officers had also recently participated in a national consistency exercise co-ordinated by the FSA.
- 19.10 Available records relating to internal monitoring, were being maintained by managers for at least two years.

Recommendation

- 19.11 The authority should:
- (i) Revise its documented internal monitoring procedure for food hygiene to include checks on the accuracy of the database, checks on officer authorisations and checks on records of investigations into infectious disease notifications. Fully implement food hygiene and food standards procedures to ensure other service delivery activities in addition to inspection file records are also subject to internal monitoring. [The Standard – 19.1]
 - (ii) Verify its conformance with the Standard, relevant legislation, the Food Law Code of Practice, centrally issued guidance and the authority's documented policies and procedures for food hygiene and food standards. [The Standard – 19.2]
 - (iii) Ensure records are made of all food standards internal monitoring, including the nature and extent of the monitoring activity and that these are kept for at least two years. [The Standard – 19.3]

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 Newly Registered Food Businesses. The authority was not audited individually as part of this programme. These focused audit reports are available at:
<https://www.food.gov.uk/other/focused-audits>
- 20.2 The authority's arrangements for responding to emergencies out-of-office hours were tested by the FSA in March 2014. An appropriate response was received.
- 20.3 In July 2014, the authority was visited as part of the FSA's Shellfish Traceability and Authenticity Exercise in England and Wales. A follow up letter was sent to the authority containing 11 recommendations for improvements for the food hygiene and food standards services. Actions to address the recommendations had been reported to the Head of Service and the appropriate Executive Board Member. Completion of two of these actions were not tested during this audit whilst two were assessed as complete, five as partially complete and two had not been completed.
- 20.4 In November 2014, the authority was audited as part of a focused FSA audit of official hygiene controls at dairy establishments. An audit action plan was agreed which contained 26 recommendations for improvement for the food hygiene service. Actions to address the recommendations had been reported to the Head of Service and the appropriate Executive Board Member. Progress against six of these recommendations was not assessed during the audit. However, it was verified during the audit that eight recommendations had been completed, 10 partially completed and two remained outstanding.
- 20.5 The outstanding actions arising out of the focused audits were partially assessed during this audit and detailed information on progress with the required actions will be provided by separate communication. Those

matters remaining outstanding will be followed up at the same time as this audit and absorbed into one action plan at the follow up stage.

- 20.6 The authority's Environmental Health functions, which included the food hygiene service and the investigation of food related infectious disease, had been subject to a review by the Wales Audit Office in 2013/14. The findings had been reported to the Environmental & Public Protection Scrutiny Committee.

Recommendation

- 20.7 The authority should:
- (i) Implement effective remedial actions to address all non-conformances raised from the 2014 Shellfish Traceability and Authenticity Exercise and 2014 audit of official hygiene controls at dairy establishments. [The Standard – 20.2]

21 Food Safety and Standards Promotion

21.1 The authority had delivered a number of initiatives with the aim of promoting food hygiene and standards. Activities included:

- Promotion of the food hygiene rating scheme; particularly Valentine's Day and Christmas campaigns;
- Issuing press releases concerning prominent investigations;
- Promotion of barbecue safety, including an FSA Toolkit;
- Promotion of safe cooking of burgers;
- Promoting Allergens Awareness week;
- Provision of information on safe cooking of Christmas turkeys;
- Delivering educational talks to schools including, the promoting effective hand washing using UV light';
- Promoting Food Safety Week; and,
- Publicising a significant investigation into alcohol which was of national importance.

Good Practice – Use of social media

The authority had used social media to raise awareness of food hygiene and food standards initiatives.

21.2 Limited information was available on the authority's website to promote food hygiene and food standards to consumers and other stakeholders.

21.3 Records of promotional activities were being maintained by the lead officers.

Auditors:

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Action Plan for Carmarthenshire County Council
Audit Date: 21st – 25th November 2016

The local authority is in the process of completing an action plan to address the recommendations in this report.

The agreed action plan will be inserted in this section of the report in due course.

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:

- Carmarthenshire County Council – Feed & Food Service Plan, 2015 – 2016
- Public Health and Protection - Feed & Food Service Plan Approval, 2015 – 2016
- Public Health & Protection – 2015/16 Action Plan
- Carmarthenshire County Council – Environmental Services Scrutiny Committee Agenda item 4 – 27 January 2014
- Carmarthenshire County Council – Environmental Services Scrutiny Committee Agenda item 3 – 10 March 2014
- Document Control Procedure – Ref FH001, 19 February 2016
- Trading Standards Service - Quality Manual – Issue 5, May 2014
- Authorisation Procedure – AP1, May 2004
- The Constitution – Section 5, 19 August 2015 – General Scheme of Delegation of Executive and Non-Executive Functions to Officers
- Training Programme 2014-15 & 2015-16
- Calibration and Maintenance Procedure – Ref FH014, 2 March 2016
- Existing Protocols to Ensure Maintenance and Integrity of the Flare Premises Database
- Approved Premises Inspection Form
- Approved Premises Procedure – Ref FH011, 18 February 2016
- Food Hygiene Interventions Procedure – Ref FH003, 28 January 2016
- Food Hygiene Inspection Report Letter
- Food Hygiene Rating Procedure – Ref FH016, 10 March 2016
- Procedure For Dealing With Proposed Water Disconnections
- Inspection Report Form
- Food Standards Inspection Forms
- Food Complaints Policy – Ref FH009, 4 February 2016
- Food Complaints Procedure – Ref FH010, 4 February 2016
- Carmarthenshire County Council – Advice to Business
- Carmarthenshire County Council – Trading Standards Business Advice
- New Business Notification and Database Accuracy Procedure – Ref FH015, 3 March 2016
- Food Sampling Policy – Ref FH005, 11 February 2016
- Food Sampling Procedure – Ref FH006, 18 February 2016
- Food Safety Sampling Programme 2014/15 & 2015/16

- Food Standards Sampling Plan 2014/15 & 2015/16
- The Communicable Disease Outbreak Plan for Wales – ‘The Wales Outbreak Plan’ – April 2014
- Communicable Disease Investigation Procedure – Ref FH012, 19 February 2016
- Food Alerts and Incidents Policy – Ref FH007, 4 February 2016
- Food Alerts and Incidents Procedure – Ref FH008, 4 February 2016
- Corporate Enforcement Policy – August 2015
- Record of decision by Executive to adopt a revised version of Corporate Enforcement Policy – August 2015
- Approved Premises Procedure – Ref FH011, 18 February 2016
- Food Hygiene Revisits Procedure – Ref FH004, 28 January 2016
- Food Law Enforcement Procedure – Ref FH002, 11 February 2016
- Complaints and Concerns Policy – 6 February 2013
- Internal Monitoring Procedure – Ref FH013, 25 February 2016
- Carmarthenshire County Council – Food Standards Agency Focused Audit Findings – 14 May 2014

(2) File and records reviews

A number of local authority records were reviewed during the audit, including:

- General food establishment records
- Approved establishment files
- Food and food establishment complaint records
- Food sampling records
- Informal and formal enforcement records
- Officer authorisations and training records
- Internal monitoring records
- Calibration records
- Records of food related infectious disease notifications
- Food Incident records
- Minutes of internal meetings and external liaison meetings
- Advisory and promotional materials provided to businesses and consumers

(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 inspections, food and food establishment 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 establishments database.
- Assess the capability of the system to generate food 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 control arrangements. The following officers were interviewed:

- Principal Environmental Health Practitioner
- Environmental Health Practitioners, including officer with lead responsibility for communicable disease
- Lead Trading Standards Officer
- Trading Standards Officers

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 establishments. The purpose of these visits was to consider the effectiveness of the authority's assessment of food business compliance with relevant requirements.

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	<p>The Framework Agreement consists of:</p> <ul style="list-style-type: none"> • Food Law Enforcement Standard • Service Planning Guidance • Monitoring Scheme • Audit Scheme <p>The Standard and the Service Planning Guidance set out the Agency's expectations on the planning and delivery of food law enforcement.</p> <p>The Monitoring Scheme requires local authorities to submit quarterly returns to the FSA on their food enforcement activities i.e. numbers of inspections, samples and prosecutions.</p> <p>Under the Audit Scheme the Food Standards Agency will be conducting audits of the food law enforcement services of local authorities against the criteria set out in the Standard.</p>
Full Time Equivalents (FTE)	A figure which represents that part of an individual officer's time available to a particular role or set of duties. It reflects the fact that individuals may work part-time, or may have other responsibilities within the organisation not related to food enforcement.
HACCP	Hazard Analysis Critical Control Point – a food safety management system used within food businesses to identify points in the production process where it is critical for food safety that the Control measure is carried out correctly, thereby eliminating or reducing the hazard to a safe level.

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 (WHeEH)	A group of professional representatives that support and promote environmental and public health in Wales.