



Updated Action Plan for Denbighshire County Council

Audit Date: 15th – 19th July 2013

1<sup>st</sup> Follow-Up Visit Date: 25th – 26th January 2017

Audit Visit Date: 30th September – 2nd October 2025

#### Status Key

|       |                  |
|-------|------------------|
| Blue  | Completed        |
| Green | Good Progress    |
| Amber | Limited Progress |
| Red   | No Progress      |

| TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)  | STATUS | PREVIOUSLY OUTSTANDING  | PROGRESS To DATE   | OUTSTANDING  |
|---|--------|---|--|--|
| 3.18 (i) Ensure that future Food Law Enforcement Service Plans are developed in accordance with the Service Planning Guidance in the Framework Agreement. In particular, a robust analysis of the resources required against those available, and plans to address any shortfalls identified should be included. [The Standard – 3.1] | Blue   | Ensure that a Service Delivery plan is developed in accordance with the service planning guidance. This must identify the programme of food hygiene and standards inspections by risk category in accordance with Annex 5 of the Food Law Code of Practice, the estimated number of revisits, likely number of infectious disease and food incident investigations, the financial allocation with breakdown of costs and an estimate of the resources required for each aspect of service delivery. There must also be an analysis of the overall staffing resource available against the total staffing resource required to deliver the service in full and where relevant plans to address any shortfall identified. | Latest service plan contains the required information.       | Completed.   |
| 3.18 (ii) Address any variance in meeting the service delivery plan in subsequent service plans. [The Standard-3.3]   | Green  | Ensure the review of the previous year's performance included in the service plan   | Review only covers some of the obligations on the authority. | Ensure the review covers all of the LA's obligations including |

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|   |      | clearly identifies and explains any variances and includes them in the areas for improvement going forward. |   | reactive work and sampling. Ensure all variances are identified and explained and are covered addressed as areas for improvement. |
| 4.6 (i) Ensure all documented policies and procedures are reviewed at regular intervals and whenever there are changes to legislation or centrally issued guidance. [The Standard – 4.1]  | Blue | Complete the review of the Enforcement Policy.  | Corporate Enforcement Policy has been reviewed and updated. | Completed.  |
| 4.6 (ii) Extend its document control system to include food standards and feed enforcement activities. [The Standard – 4.2]   | Blue | Completed.  |   |   |
| 5.19 (i) Review and amend the scheme of delegation to ensure all relevant legislation is included and up to date. [The Standard – 5.1]  | Blue | Completed.  |   |   |
| 5.19 (ii) Ensure that all officers carrying out official controls are appropriately authorised and review, amend and implement its documented procedure for the authorisation of officers to:<br><br>a) Specify the designation of the authorising officer; | Blue | Completed.  |   |   |

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| <p>(b) Specify that unauthorised officers are prohibited from carrying out any activities for which authorisation is required by the Codes of Practice.</p> <p>(c) Ensure officers' competencies are assessed and recorded in accordance with the authorisation procedure.</p> <p>[The Standard – 5.1]</p> |      |            |  |  |
| <p>5.19(iii) Review and update the 'Assessment of Competence' matrix to include all relevant legislation and regulatory sanctions. [The Standard – 5.1]</p>  | Blue | Completed. |  |  |
| <p>5.19 (iv) Review officer authorisations to ensure they are consistent with their qualifications, training, experience and the relevant Code of Practice. [The Standard – 5.3]</p>   | Blue | Completed. |  |  |
| <p>5.19 (v) Ensure that authorised officers receive the training required to be competent to deliver the technical aspects of the work in which they will be involved, in accordance with the Codes of Practice. [The Standard - 5.4]</p>  | Blue | Completed. |  |  |
| <p>5.19 (vi) Notify the Food Standards Agency of staff who were authorised under the Food and Environment Protection Act 1985 but are no longer</p>  | Blue | Completed. |  |  |

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| employed by the authority. [The Standard – 18.1]  |       |  |  |  |
| 5.19 (vii) Appoint a sufficient number of authorised officers to carry out the work set out in the service delivery plan. (The Standard -5.3)   | Amber | Sufficient number of officers to be appointed in accordance with analysis of resources included within service plan. | Number of officers required has been assessed.   | Sufficient number of officers to be appointed in accordance with analysis of resources included within service plan. |
| 6.15 (i) Ensure that equipment is properly maintained and calibrated. To support this task, maintain and implement the documented procedure for maintenance and calibration including records of calibration and other checks. [The Standard - 6.2] | Blue  | Completed  |  |  |
| 6.15 (ii) Operate the premises database and take any necessary action to ensure reliable, food standards information can be provided to the FSA. [The Standard- 6.3]  | Blue  | Complete upload of reliable annual enforcement monitoring data to FSA.   | Last survey completed with reliable food standards data.   | Completed.   |
| 7.24 (i) Ensure that premises hygiene interventions/inspections are carried out at the minimum frequency specified by the Food Law Code of Practice. [The Standard -7.1]  | Amber | Ensure premises inspected at minimum frequencies.  | Interventions being targeted at high risk and unrated premises but medium and low risk premises backlog is not being tackled and there is no plan to re-align with the Code. | Ensure premises inspected at minimum frequencies.  |
| 7.24 (ii) Identify and prioritise for inspection all establishments that have been risk rated without the benefit of an   | Blue  | Ensure risk ratings consistent with findings, record made of decision to reduce ratings and                          | Risk ratings consistent with findings, whilst no   | Completed.   |

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| inspection, partial inspection or audit; carry out hygiene interventions/inspections, and approve establishments in accordance with the relevant legislation, the Food Law Code of Practice and centrally issued guidance. [The Standard -7.2] |       | revisits conducted in a timely manner where appropriate. Ensure all businesses subject to AES are eligible.         | reductions included in the file checks.<br><br>Revisits conducted in a timely manner where appropriate.<br><br>AES procedure states premises that are eligible. Not in use currently |   |
| 7.24 (iii) Assess the compliance of establishments in its area to the legally prescribed standards; and take appropriate action on any non-compliance found, in accordance with the authority's Enforcement Policy. [The Standard -7.3]        | Blue  | Improve consistency of assessment of imported food and identification marks, HACCP and cross contamination.         | Assessments of imported food and identification marks, HACCP and cross contamination undertaken.   | Completed.  |
| 7.24(iv) Fully implement documented procedures for the range of interventions/inspections it carries out. [The Standard – 7.4]   | Blue  | Completed.  |  |   |
| 7.24(v) Ensure observations made in the course of an intervention/inspection are recorded in a timely manner to prevent loss of relevant information. [The Standard –7.5]  | Blue  | Improve consistency of inspection records of imported food and identification marks, HACCP and cross contamination. | Digital forms captured details of imported food, ID marks, HACCP and Cross contamination.  | Completed.  |
| 7.40 (i) Ensure that food standards interventions are carried out at a frequency not less than that determined   | Amber | Ensure premises inspected at minimum frequencies.   | Interventions being targeted at high risk and unrated premises   | Ensure premises inspected at minimum frequencies. |

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| under the intervention rating scheme set out in the Food Law Code of Practice. [The Standard -7.1]  |       |   | but medium and low risk premises backlog is not being tackled and there is no plan to re-align with the Code. |   |
| 7.40 (ii) Identify and prioritise for inspection all establishments that have been risk rated without the benefit of an inspection, partial inspection or audit; carry out food standards interventions/inspections in- accordance with relevant legislation, Codes of Practice, and centrally issued guidance. [The Standard -7.2] | Blue  | Ensure all inspections unannounced or where decision made to announce an inspection, a record of reason made on establishment file. | Interventions unannounced. Digital forms include field for capturing reasons for appointment.                 | Completed   |
| 7.40 (iii) Assess the compliance of establishments and systems to the legally prescribed standards. {The Standard -7.3]   | Green | Improve consistency of assessment of compliance, traceability and withdrawal and recall procedures.                                 | Some interventions were correctly assessed.   | Ensure assessments consistently include supplier and customer information, compliance, traceability and withdrawal and recall procedures. |
| 7.40 (iv) Set up, maintain and implement documented procedures for the range of interventions it carries out. [The Standard -7.4]   | Blue  | Completed.  |   |   |
| 7.40 (v) Ensure that officers' contemporaneous records of interventions are stored in such a way that they are retrievable. [The Standard -7.5]   | Green | Improve inspection records of supplier and customer details, compliance, traceability and withdrawal and recall procedures.         | Some intervention records contain all required information.   | Ensure all inspection records contain supplier and customer details, assessments of compliance with traceability and                      |

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| 8.14 (i) Review and update the Complaints Procedure to provide guidance for officers on capturing key information. [The Standard – 8.1]   | Blue  | Completed.  |   |  |
| 8.14 (ii) Investigate complaints received in accordance with the Codes of Practice, centrally issued guidance and its own policy and procedures. [The Standard – 8.2]                     | Blue  | Completed   |   |  |
| 11.5 (i) Set up, maintain and implement a documented procedure to ensure that its food standards and feed premises databases are accurate, reliable and up to date. [The Standard - 11.2] | Blue  | Completed.  |   |  |
| 12.15 (ii) Review and update the documented sampling procedures in accordance with the relevant Codes of Practice and centrally issued guidance. [The Standard - 12.5]                    | Blue  | Completed   |   |  |
| 12.15(iii) Take appropriate action where sample results are not considered to be satisfactory. [The Standard - 12.7]  | Green | Ensure food business operators and other local authorities are consistently notified of unsatisfactory results where appropriate and appropriate action is taken to address the marketing of unsatisfactory food. | Some businesses were notified of unsatisfactory sample results. | Ensure food businesses and other local authorities are informed of unsatisfactory results and appropriate action is taken. |

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| 13.8 (i) Ensure the plan for controlling outbreaks of food related infectious disease is maintained and fully implemented. [The Standard – 13.1]                                 | Blue  | Completed.  |  |   |
| 13.8 (ii) Ensure the procedure for the investigation of confirmed or suspected cases of notifications of food related infectious disease is implemented. [The Standard – 13.2]   | Blue  | Ensure all notifications of cases of infectious disease deemed to be low-risk are fully investigated, including thorough completion of questionnaires, in accordance with the authority's procedure and relevant centrally issued guidance. | A new system for contacting and following up low-risk ID cases has been developed ensuring a smoother process and increasing response rates. | Completed.  |
| 13.8 (iii) Ensure all records relating to the control and investigation of outbreaks and food related infectious diseases are kept for at least six years. [The Standard-13.3]   | Blue  | Completed.  |  |   |
| 15.16 (i) Ensure its Enforcement Policy is maintained and fully implemented in accordance with the relevant Codes of Practice and other official guidance. [The Standard- 15.1]  | Blue  | Complete the development of enforcement policy, ensuring it contains considerations of the Primary Authority scheme.  | Enforcement Policy has been fully developed and supplemented by a Food Safety Enforcement Policy.  | Completed.  |
| 15.16 (ii) Set up, maintain and implement documented procedures for follow-up and enforcement action in relation to prosecutions, food standards and feed. [The Standard -15.2 ] | Blue  | Completed.  |  |   |
| 15.16 (iii) Ensure that food hygiene law enforcement is carried out in accordance with the Food Law Code of Practice,  | Green | Ensure proof of service of HINs is maintained, any extension is properly  | Proof of service and confirmation of compliance was not  | Ensure proof of service of HINs is consistently maintained, any |

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| <p>centrally issued guidance and the authority's own documented procedures. The reasons for any departures should be documented. [The Standard -15.3 &amp; 15.4]</p> |  | <p>administered, and compliance is confirmed in writing.</p> <p>With regard to any prohibition notice, ensure that Court details are provided to the business, there is a record of the granting of the Court Order and the request to lift the Notice or Order. Ensure appropriate monitoring of the closure is undertaken.</p> <p>Where food is seized or voluntarily surrendered (VS), there is a record of the presentation to a Court and of the destruction / disposal (including the time and place). Ensure the VS is recorded as such on the database.</p> <p>Ensure simple cautions are only issued in appropriate circumstances and in accordance with the Enforcement Policy and that</p> | <p>routinely being recorded, whilst no extensions had been granted.</p> <p>Court details were provided to the business on the prohibition notice and evidence of lifting the notice was available.</p> <p>All records relating to seizures and voluntary surrenders available on file as required.</p> <p>No simple cautions or prosecutions available within scope of this audit – untested.</p> | <p>extension is properly administered and compliance is confirmed in writing.</p> <p>Completed.</p> <p>Completed.</p> <p>Ensure simple cautions are only issued in</p> |
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|  |      | the decision is correctly taken on the basis of all of the available evidence in accordance with Ministry of Justice guidance. Ensure a copy of the approval of prosecutions by the prosecuting officer is available.                |   | appropriate circumstances and in accordance with the Enforcement Policy and that the decision is correctly taken on the basis of all of the available evidence in accordance with Ministry of Justice guidance. Ensure a copy of the approval of prosecutions by the prosecuting officer is available. |
| 16.6 (i) Maintain up to date records that include reports of all interventions/inspections, the determination of legal requirements made by authorised officers, details of action taken where non-compliance was identified, details of any enforcement action taken, results of any sampling, details of any complaints and action taken, and also relevant food and/or feed registration and approval information. Further, record with reasons any deviations from set procedures. [The Standard – 16.1] | Blue | Ensure a record of CCPs is available on file for each establishment in accordance with centrally issued guidance. Also ensure that timescales for compliance are consistently included for each contravention in inspection reports. | Records contained the relevant information required | Completed  |

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| 16.12 (i) Maintain up to date records in retrievable form on all food establishments in its area in accordance with the Food Law Code of Practice and centrally issued guidance. These records shall include reports of all interventions/inspections, the determination of compliance with legal requirements made by the authorised officer, details of action taken where non-compliance was identified, and relevant food registration information. [The Standard -16.1] | <b>Green</b> | Ensure that inspection reports are consistently available and contain contact details for a senior officer, timescales for compliance and distinguished between legal requirements and recommendations. | Inspection reports were available, included senior officer contact details and distinguished between legal requirements and recommendations | Ensure Timescales for compliance are documented for food standards |
| 16.12 (ii) Ensure records are kept for at least 6 years. [The Standard - 16.2]   | <b>Blue</b>  | Ensure establishment records are available.   | Information available on electronic database.   | Completed.   |
| 19.13 (i) Further develop and fully implement the internal monitoring procedure for food hygiene and food standards to ensure all aspects of the Framework Agreement are covered. [The Standard – 19.1]  | <b>Blue</b>  | Further develop the procedure to include AES, responses to food alerts and incidents and cross reference to monitoring aspects of database management procedure.  | The procedure has been amended.   | Completed.   |
| 19.13 (ii) Verify conformance with the Standard, relevant legislation, the relevant Codes of Practice, relevant centrally issued guidance and the authority's own documented policies and procedures. [The Standard – 19.2]  | <b>Blue</b>  | Include internal monitoring of unsatisfactory sample files, complaints and service requests, AES, responses to alerts and incidents, enforcement actions.   | Whilst no AES being operated, sample files and reactive work being monitored.   | Completed.   |

## FHRS audit 2017/18 Action Plan for Denbighshire County Council

| RECOMMENDATION   | STATUS | OUTSTANDING  | PROGRESS TO DATE   | OUTSTANDING  |
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| Food Hygiene Rating Scheme audit actions relating to service planning.       | Blue   | To include commitments to deliver interventions and promote the FHRS scheme and include method of addressing new businesses. Also, to include details of due interventions, anticipated new businesses, unrated interventions and interventions carried forward from previous year in programme. | Service plan was updated to include this information.  | Completed.   |
| Food Hygiene Rating Scheme audit actions relating to authorised officers.    | Blue   | Ensure authorised officers have undertaken consistency training  | Officers have undertaken recent consistency training   | Completed  |
| Food Hygiene Rating Scheme audit actions relating to ratings and re-ratings. | Green  | To ensure ratings and re-rating undertaken correctly.  | Due dates and total scores correctly calculated.   | Ensure premises carrying a significant risk of contamination or survival of pathogens are consistently rated with regards to confidence in management. |
| Food Hygiene Rating Scheme audit actions relating to procedures.             | Blue   | To ensure procedures, including aide memoires and letter templates ensure compliance with Scheme requirements.   | Database procedures for back up now provided. Procedures, aide memoires and report letter templates amended. | Completed.   |
| RECOMMENDATION   | STATUS | OUTSTANDING  | PROGRESS TO DATE   | OUTSTANDING  |

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| Food Hygiene Rating Scheme audit actions relating to intervention reports. | Blue |  | Letter template amended to ensure full information on applying for re-rating including cost is provided to the FBO. | Completed  |
| Food Hygiene Rating Scheme audit actions relating to internal monitoring.  | Blue | Amend procedure to document amount and frequency of monitoring activity.<br>Monitor issue of safeguard information, due dates and correct total rating scores. | Procedure amended.<br>Safeguard information being issued, due dates and total scores all being monitored.           | Completed. |

Summary.

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| <b>Total Recommendations</b> | <b>45</b> |
| <b>Completed</b>             | <b>35</b> |
| <b>Good Progress</b>         | <b>7</b>  |
| <b>Limited Progress</b>      | <b>3</b>  |
| <b>No action</b>             | <b>0</b>  |
| <b>Untested</b>              | <b>0</b>  |
| <b>Total Outstanding</b>     | <b>10</b> |