Action Plan for Gwynedd Council (Excluding Feed Service*)

Audit Date: 22nd – 26th February 2016

Follow-Up Visit Date: 28th February 2018 - 1st March 2018

(*) The service relating to animal feedingstuffs was not included in the original audit. A new regional feed delivery model was introduced in Wales from April 2015.

Status Key

| Completed | | | |
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| Good Progress | | | |
| Limited Progress | | | |
| No Action Taken | | | |

| TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH) | STATUS | PLANNED IMPROVEMENTS | PROGRESS TO DATE | OUTSTANDING |
|--|--------|--|--|--|
| 3.20 (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 and an explanation provided for any variances identified in the service review. [The Standard – 3.1] | | Full audit of the service plan. Ensure that the Service Plan for 2017/18 conforms with the service planning advice and the framework plan. | Service Plan for 2017/18 largely drafted in accordance with the Service Planning Guidance. | Commitments for the interventions programmes for Category E food hygiene and Category C food standards must be in accordance with the Food Law Code of Practice. Where there is carry over from the previous year this should be reflected in the interventions programme. The cost allocation for legal action should be provided. A breakdown of the resource demand should be provided along with the overall comparison between available and required resource; in accordance with the Service Planning Guidance. |

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| 3.20 (ii) Ensure the performance review based on the previous years' Service Plan is submitted for approval to the relevant member forum or senior officer. [The Standard – 3.2] | | | Incorporated in Service Plan for 2017/18. Approved only by Senior Public Protection Manager who has not been delegated in writing for this task. | Ensure Service Plan review is submitted for approval at the correct level within the authority, in accordance with the Standard. |
| 5.10 (i) Review and amend its authorisations to ensure officers are appropriately authorised under all relevant legislation and ensure officer competency assessments are documented. [The Standard – 5.1] | | | New templates for recording individual authorisation competencies have been introduced. Officers' authorisations have been amended. | Authorisations require further review to ensure all required legislation is included. |
| 5.10 (ii) Ensure officers with specialist knowledge are appointed to have lead responsibility for food hygiene and food standards legislation. [The Standard – 5.2] | | Formalise a programme for establishing the competency of the lead officer based on specialised training, training within the Council and experience in the field. We have identified training that meets the needs, and the officer will be attending courses as and when they become available. | The appointed lead officer for the service has developed further skills and knowledge through experience in food hygiene and food standards practice and enforcement, including attending / conducting audits under the supervision of other officers. | Completed. |

| TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH) | STATUS | PLANNED IMPROVEMENTS | PROGRESS TO DATE | OUTSTANDING |
|--|--------|--|--|--|
| 5.10 (iii) Ensure an appropriate number of authorised officers are appointed to deliver food hygiene and food standards official controls in accordance with the Food Law Code of Practice. [The Standard – 5.3] | | As a part of Gwynedd Councils' programme of cuts, the Welfare Unit (Food Safety) lost one food environmental health officer, and one health and safety officer. Our intention is to make the best use of the Service Plan to raise the matter with the Members. In the meantime, we will make the best use of the staff resource available, and continue to prioritise the work based on risk. | The Council has increased food safety officers' qualifications, so that they can participate in all of the food safety work that is required of the Council. The level of authorisations have been appropriately restricted where relevant. However, there was a shortfall of 0.55 FTE at the start of the year and further cuts have been applied, increasing the shortfall of appropriately authorised officers to 0.95 FTE. | The authority should ensure an appropriate number of authorised officers are appointed. |
| 5.10 (iv) Ensure all authorised officers meet the training requirements set out in the Food Law Code of Practice; including training in HACCP. [The Standard – 5.4] | | Three officers who are subject to the recommendation are receiving HACCP enforcement training, as and when relevant training becomes available. | Whilst attempts have been made to access a suitable 3-day HACCP course for enforcement officers. Not enough training capacity has become available to train all relevant officers. | The authority should ensure that officers who require it, should be provided with suitable HACCP training. The authority should consider the availability of training from all possible sources. |

| TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH) | STATUS | PLANNED IMPROVEMENTS | PROGRESS TO DATE | OUTSTANDING |
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| 5.10 (v) Maintain records of relevant academic or other qualifications for authorised food hygiene officers. [The Standard – 5.5] | | An officer has accepted a request to provide records. | Records are now available for all officers. | Completed. |
| 7.26 (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] | Due date: 1/1/19 | In an attempt to meet the requirements, the Unit has adopted new working arrangements – to undertake inspections with a joint assessment of food hygiene and food standards compliance. Additionally, the Unit will be trialling the use of tablets by officers out in the field to record work. Through this, we hope to establish a more effective way of working by making the best use of the officers' time. | Total number of overdue premises reduced. Priority being given to higher risk premises. Both significant numbers of higher and lower risk premises are overdue. | Ensure all businesses receive an appropriate intervention at the correct frequency. |

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| 7.26 (ii) Carry out food hygiene interventions / inspections in accordance with the Food Law Code of Practice, centrally issued guidance, and its procedures [The Standard – 7.2] | | A new member of staff has been appointed, with the hope that they will receive recognition as an environmental health practitioner in the near future. Despite this, we forsee that the service will find it difficult to fully meet the guidance requirements due to lack of resources. We will be monitoring the officers' work to ensure the appropriate standards. | Risk rating consistently reflecting confidence in management and alterations to risk ratings being carried out in accordance with procedure. Some evidence of correct application of registration and approval of establishments. | Ensure registration forms are date stamped and the process of conditional approval are correctly undertaken in accordance with the Food Law Code of Practice and centrally issued guidance. |

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| 7.26 (iii) Fully assess the compliance of establishments in its area to the legally prescribed standards. [The Standard -7.3] | Due date: 1/4/20 | Referring to the previous response, the Authority is keen to ensure that officers can assess food hygiene and standards compliance when visiting food establishments. To that effect, there is a training programme in place. The programme is partly dependent on receiving specialised training by an external provider. We will be monitoring officers' work to ensure the appropriate standards. | Improvements in relation to assessments of compliance; in particular, for HACCP, cross contamination, and food safety management systems in approved establishments. | Ensure thorough assessments consistently undertaken in relation to in coming ID marks and imported foods. |
| 7.26 (iv) Ensure that the documented procedures are reviewed and amended in relation to local procedures for AES and specific database instructions for recording approved establishments. [The Standard -7.4] | | | Work arrangements for recording Approved establishments have been amended. AES procedure also amended. | Completed. |

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| 7.26 (v) Ensure that observations made and data obtained in the course of a food hygiene inspection are recorded in a timely manner to prevent loss of relevant information. [The Standard – 7.5] | | Inspection of the arrangements to ensure that monitoring of records and officers is effective. | Improvements in relation to officers' observations; in particular, for scale of operations and assessments of HACCP, cross contamination, and food safety management systems in approved establishments. | Ensure records consistently reflect thorough assessment in relation to incoming ID marks and imported foods. Ensure any AES records are maintained in accordance with the procedure. |
| 7.46 (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] | | Lack of resource is likely to affect our performance. It is expected that specialised training in food standards will enable the Unit's members to participate in the work more effectively. We will be using the Service Plan to raise the issue with Members. In the meantime, we will make the best use of the staff resource available, and will continue to prioritise based on risk. | Total number of overdue premises reduced. Priority being given to higher risk premises. A few high risk and significant numbers of medium and lower risk premises are overdue. | Ensure all businesses receive an appropriate intervention at the correct frequency. |

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| 7.46 (ii) Carry out food standards interventions / inspections including alternative enforcement strategies and registration of establishments in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard - 7.2] | | | Risk ratings consistently reflecting nature of operations and inspection findings. No AES scheme in operation at the time of assessment. | Completed. |
| 7.46 (iii) Assess the compliance of establishments in its area to the legally prescribed standards. [The Standard – 7.3] | | | Some improvements in relation to assessments of compliance. | Ensure thorough assessments consistently undertaken in relation to composition, labelling and traceability. |
| 7.46 (iv) Amend the AES procedures to provide guidance on who should undertake and review information collected during an alternative enforcement strategy [The Standard 7.4]. | | | The procedure has been amended. | Completed. |
| 7.46 (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] | | | Introduction of new inspection record forms. All inspection records present and size and scale of business operations captured. Improvements in relation to officers' observations on assessment of compliance found on some files. | Ensure records consistently reflect thorough assessment in relation to composition, labelling and traceability |

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| 8.8 (i) Amend its complaints procedure to include information on target response times that have been agreed for food standards complaints. [The Standard - 8.1] | | | Complaints procedure has been amended. | Completed. |
| 8.8 (ii) Ensure that complaints received are investigated in accordance with local procedures to include target response times, taking of appropriate action and informing complainant of the outcome of completed investigations. [The Standard – 8.2] | | | Complaints consistently contain information on the nature and extent of each investigation. All responded to on time and complainant informed in each case. | Completed. |
| 9.6 (i) Ensure it liaises with the Primary, Home or Originating authorities in relation to offences identified during interventions and unsatisfactory samples. [The Standard – 9.1, 9.4 & 9.6] | | | No relevant examples included in selected interventions, so remains partially untested. However, a primary authority was not contacted in relation to an unsatisfactory sample. | Ensure, unsatisfactory sample results and offences identified during interventions are brought to the attention of other relevant authorities. |
| 11.4 (i) Ensure food hygiene and risk rating data and due inspection dates for food hygiene and food standards are correctly entered and accurately maintained on the authority's database. [The Standard – 11.1] | | Need to formalise the procedure and establish a timetable for running reports. | New process for handling premises that have ceased trading. Some improvements to risk rating and due date errors. | Ensure risk rating elements relating to significant risk and vulnerable group / food type scores are consistently applied and due date errors are further reduced. |

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| 12.10 (i) Amend and implement its documented sampling policy to include out of hours sampling and shellfish bed sampling arrangements and ensure its sampling programme includes details in relation to shellfish bed sampling. [The Standard – 12.4] | | Need to establish arrangements for accessing the office out of hours. | Sampling policy & programme have been amended. | Completed. |
| 12.10 (ii) Amend its procedures to include the procurement or purchase of solid/frozen and liquid/bulk food for both microbiological examination and food standards analysis. With respect to microbiological examination, amend its procedure to include shellfish bed sampling and the formal notification of sampling results. [The Standard – 12.5] | | Need to establish arrangements for sampling bulky foods. | Sampling procedures have been amended. | Completed. |

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| 12.10 (iii) Take appropriate action in accordance with its Enforcement Policy where sample results are not considered to be satisfactory. [The Standard – 12.7] | | Need to refine the arrangements further – every officer in the Unit is participating in food standards sampling programme this year. This is to ensure that they have knowledge of sampling arrangements, of assessing results and of the follow-up actions as a result of receiving confirmation that a sample does not meet statutory requirements. | Improvements in following up unsatisfactory microbiological samples and the timely follow up of unsatisfactory food standards samples. | Ensure unsatisfactory microbiological samples are correctly notified to the registered food business operator. Ensure appropriate enforcement action is undertaken in relation to unsatisfactory food standards samples. |
| 13.11 (i) Amend the procedure for investigation of sporadic cases of food related infectious disease to ensure that all notifications are investigated in accordance with centrally issued guidance and ensure that the procedure is fully implemented. [The Standard -13.2] | | We intend on monitoring the percentage of cases that fall below the amended arrangements to ensure compliance. | Outbreak and infectious disease procedures amended and all notifications subject to appropriate investigation. | Completed. |

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| 15.20 (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 reference to the Primary and Home Authority Schemes. [The Standard – 15.1] | | The enforcement policy is in the process of being amended. The identified aspects will be addressed in the amended policy. | The authority has prepared an amended draft policy including the required changes. | Finalise and approve the amended draft enforcement policy. |
| 15.20 (ii) Amend its documented enforcement procedures for improvement notices, remedial action notices and detention and seizure in accordance with the Food Law Code of Practice and official guidance and document its procedure for undertaking simple cautions and prosecutions. [The Standard -15.2] | | Need to produce a prosecutions procedure for officers to follow. | Improvement notices procedure amended. Remedial action notices procedure amended. Detention and seizure procedures amended. Prosecution procedure amended. | |
| 15.20 (iii) Ensure that food hygiene enforcement including Remedial Action Notices and Hygiene Improvement Notices are carried out in accordance with the Food Law Code of Practice, centrally issued guidance and local procedures. [The Standard - 15.3] | | | Some improvements in use of hygiene improvement notices (HINs) in relation to service use of the notice checklist, setting suitable timescales and where appropriate, extending the timeframe for compliance. | Ensure records of service of HINs and RANs are consistently clear as to the method of service and meet legal requirements and that checks on compliance are consistently timely. |

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| | | | Some improvements in use of remedial action notices (RANs) in relation to the wording used, ensuring signature by witnessing officer and where appropriate, written confirmation of withdrawal. Some improvements in voluntary surrender processes; particularly with regards to capturing agreement of food businesses. Improvements in voluntary closure and prosecution processes. | Ensure voluntary surrender agreements include time and method of destruction and records of destruction of food include the method used. |

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|--|--------|--|--|---|
| 15.20 (iv) Ensure all decisions on enforcement action are made following consideration of its Enforcement Policy. The reasons for any departure from the criteria set out in the enforcement policy shall be documented. [The Standard - 15.4] | | The amended enforcement policy and the new prosecutions procedure will highlight the need to record and justify the reasoning for following enforcement actions. | Where required, enforcement escalated appropriately following food hygiene interventions and samples in accordance with Enforcement Policy. | Ensure enforcement is appropriately escalated following food standards interventions and samples. |
| 16.8 (i) Ensure that up to date food business registration forms are maintained and retrievable and that the contents of establishment files for approved premises are reviewed to ensure that they contain relevant documentation as required by Annex 10 of the Food Law Code of Practice. [The Standard – 16.1] | | Each file regarding approved establishments will be amended to ensure the correct information is available. | Registration forms available in all cases. All key information available on approved establishments forms. | Completed |
| 16.15 (i) Ensure that food business registration forms are maintained and retrievable, that businesses are provided with reports following an intervention / inspection and that food standards reports contain all the information required by Annex 6 of the Food Law Code of Practice. [The Standard – 16.1] | | | Registration forms available on food hygiene files. Reports correctly addressed and all contain most of the information required by Annex 6. | Ensure record of person seen and a clear distinction between legal requirements and recommendations are consistently included in reports. |

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| 16.15 (ii) Ensure that records of food standards interventions are kept for at least 6 years. [The Standard – 16.2] | | | Inspection records present in all cases and being maintained on files. | Completed. |
| 19.10 (i) Revise and fully implement documented internal monitoring procedures to improve the qualitative assessment of the full range of food hygiene and food standards activities. [The Standard – 19.1] | | Need to conduct a regular monitoring programme every one/two months for some aspects that don't fall under the Unit/Service's performance measures. | Procedures amended for monitoring of investigations into infectious diseases, unsatisfactory samples, AES and service requests. | |
| 19.10 (ii) For food hygiene and food standards, 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. [The Standard – 19.2] | | Need to improve performance monitoring specific to the Unit / not a part of the Service's corporate performance measures. Establish a specific timetable for running reports and assessing compliance. | Some evidence of recent internal monitoring including feedback to officers. | Ensure records of internal monitoring reflect full extent of monitoring activity including qualitative aspects of AES, service requests, infectious disease investigations, sample follow up investigations. |

Summary.

| Total | 34 |
|-------------------|----|
| Recommendations | |
| Completed | 14 |
| Good Progress | 14 |
| Limited Progress | 2 |
| No action | 2 |
| Not yet due | 2 |
| Total Outstanding | 20 |