

ANNEX A

Action Plan for Monmouthshire County Council
Audit Date: 20-22 February and 4-5 March 2013

Follow-Up Visit Date: 20 August 2015

Status Key

	Completed
	Good Progress
	Limited Progress
	No Action Taken

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	STATUS	PLANNED IMPROVEMENTS	PROGRESS TO DATE	OUTSTANDING ACTIONS
<p>3.16(i) Ensure that future Food Law Enforcement Service Plans are developed in full accordance with the Service Planning Guidance in the Framework Agreement. In particular, an analysis of the resources required against those available should be included. [The Standard – 3.1]</p>		<p>Future service plans (from 2014-15) will include:</p> <ul style="list-style-type: none"> • A description of the Authority’s approach to ensuring that Food Standards interventions are undertaken at least at minimum frequencies required by their risk ratings. • An estimate of the resources required to deliver all aspects of the service set out in the plan. • We will consult other authorities through DPPW and WWhoEHG and Food safety technical panel and liaise with FSAW in an effort to identify good practice methodology and promote consistency in approach in estimating the resources required. 	<p>Some improvements in 2015-16 service plan.</p>	<p>Ensure the service plan includes an analysis of the resources required to deliver each part of the service.</p> <p>Revised date for completion: 30/04/16</p>

4.7(i) Review all documented work procedures at regular intervals to ensure they accurately reflect how the food law enforcement service is delivered in practice, including the primary authority considerations. [The Standard – 4.1]		Any procedures that have not been reviewed within the past 12 months will be reviewed. Relevant Primary Authority considerations will be added to appropriate procedures.	Procedures reviewed.	Completed
5.16(i) Review the Scheme of Delegation to include the power to detain imported foods. [The Standard – 5.1]		Auditors advise that the authority’s scheme of delegation should be updated to cover the detention of imported foods. However, The Chief Officer R&C has delegated authority “to exercise the Council’s functions under legislation relating to food and drugs, food hygiene,...”. Specific references can be updated when the council scheme is next revised. Food Law Enforcement Officers are authorised under Official Feed and Food Controls (Wales) Regulations 2009.	Scheme of delegation revised.	Completed
5.16(ii) Review and update officer authorisations as necessary to ensure all officers are appropriately authorised under current legislation in accordance with their qualifications, training and competencies. [The Standard - 5.1 and 5.3]		The one officer not authorised under FEPA has now been authorised. Since the audit was completed, our three Commercial Services Officers have been awarded the Food Standards Module of the Higher Certificate in Food premises Inspection from the University of Birmingham. The officer involved in routine (proactive) sampling will continue to be restricted to situations where no formal action would be taken following sampling.	FSA advised of all officers currently employed by the authority that require FEPA authorisation. CSO food standards qualifications completed.	Completed

<p>5.16(iii) Maintain records of relevant academic or other qualifications, training and experience of each authorised officer and appropriate support staff in accordance with the Food Law Code of Practice. [The Standard – 5.5]</p>		<p>The service’s central training records and records of qualifications have already been updated and all officer competencies will continue to be assessed on an annual basis and that assessment recorded.</p>	<p>Training records maintained by authority.</p>	<p>Completed</p>
<p><u>Food Hygiene</u> 7.23(i) Ensure that food premises interventions/inspections are carried out at the minimum frequency specified by the Food Law Code of Practice. [The Standard -7.1]</p>		<p>We have undertaken extensive work to ensure that food hygiene interventions are undertaken at the frequencies required by the COP. We employ management tools to ensure that happens and for some time have had targets (monitored fortnightly and reported quarterly) to ensure inspections take place within 28 days of their scheduled date (98% achieved in 2012-13). We will continue to aim for these high standards of service delivery. (We identify additional actions in relation to Standards inspections elsewhere.)</p>	<p>Inspections being carried out at correct frequencies.</p>	<p>Completed</p>
<p>7.23(ii) Carry out 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]</p>		<p>We will continue to seek to meet the requirements of the COP in relation to inspections, interventions, enforcement and recording of information: in particular to strengthen this we will:</p> <ul style="list-style-type: none"> • Undertake a review of files via a random sample and utilise the findings of the audit to identify and implement any necessary improvements to current delivery. <p>We will review files for all approved establishments against the COP.</p>	<p>Improvements to inspections and approvals.</p>	<p>Ensure further improvements to interventions. These should include improvements in assessments of compliance and decisions to revisit; as well as the assessment of AES information for possible further action. Further,</p>

				improvements to the capture of recall arrangements on approval files is also required. Revised date for completion: 22/02/16
7.23(iii) Take appropriate action on any non-compliance found, in accordance with the authority's Enforcement Policy. [The Standard -7.3]		Bring the findings of the audit and this action plan to the attention of all staff.	Appropriate action taken.	Completed
7.23(iv) Set up, maintain and implement documented procedures for the range of interventions/inspections it carries out. [The Standard – 7.4]		We will review, with officers, our policies and procedures with a view to ensuring compliance with the Standard in relation to matters such as capturing information during inspections, undertaking revisits, taking action in relation to non-compliances.	Improvement to interventions procedure.	Completed
7.23(v) Store contemporaneous records of interventions in such a way that they are retrievable. [The Standard – 7.5]		As part of our on-going transition to a totally paperless recording system, we will utilise the findings of the audit to inform our recording and retrieval arrangements, including updating procedures and staff guidance where appropriate.	Records now retrievable.	Completed
<u>Food Standards</u> 7.36(i) Ensure that food premises interventions and inspections are carried out at the frequency specified by the Food Law Code of Practice. [The Standard -7.1]		We will review our approach to ensure that Food Standards interventions are undertaken at least at minimum frequencies required by their risk ratings (not only food hygiene intervals)	Inspections being carried out at correct frequencies.	Completed

7.36(ii) Carry out inspections / interventions at food establishments in accordance with relevant legislation, the Food Law Code of Practice and Practice Guidance, including the use of appropriate inspection forms. [The Standard -7.2]		<p>We will review our application of food standards risk ratings to include benchmarking and peer review with the Greater Gwent Food Group.</p> <p>We will establish documented monitoring arrangements for food standards risk ratings.</p>	Improvements in risk rating.	<p>Ensure further improvements to interventions with regards to decisions to revisit.</p> <p>Revised date for completion: 22/02/16</p>
7.36(iii) Set up, maintain and implement documented procedures for the range of interventions/inspections it carries out. [The Standard -7.4]		We will develop a procedure for food standards alternative enforcement.	Improvement to interventions procedure.	Completed
7.36(iv) Record observations and data obtained from interventions in a timely manner to prevent its loss and ensure contemporaneous records are legible and retrievable. [The Standard – 7.5]		<p>We will review procedures and issue further guidance for staff on the recording and storage of details required by the Standard along with advice on enforcement and revisit approaches and the use of aide memoirs and product specific inspection forms.</p> <p>We will review all policies and procedures not reviewed within the past 12 months</p>	Records now retrievable.	<p>Ensure further improvements to intervention records. These should include improvements in assessments of compliance.</p> <p>Revised date for completion: 22/02/16</p>
<p><u>Food and food establishments complaints</u></p> <p>8.11(i) Review and update the documented policy and procedure to include guidance for officers on target response times. [The Standard – 8.1]</p>		We have corporate policies in relation to standard response times. In relation to communicable disease control matters, officers follow the national guidance issued under Notification Guidance for Laboratories Health Protection (Notification) (Wales) Regulations 2010 (formerly expert Rules). In other cases we expect officers to use professional judgement in	Response target time allocated automatically.	Completed

		determining the urgency of any particular matter that comes to their attention. We will review guidance.		
8.11(ii) Investigate complaints received in accordance with the Food Law Code of Practice, centrally issued guidance and its own policy and procedures. [The Standard – 8.2]		We will review our policies and procedures in relation to complaints to check that guidance is clear on matters having wider food safety considerations.	Investigations improved.	Improve complaint investigation records. Revised date for completion: 22/02/16
12.12(i) Ensure the documented sampling programme includes reference to national sampling priorities. [The Standard - 12.4]		Future service plans will make specific reference to the FSA’s national priorities with regards sampling.	National sampling priorities included in programme.	Completed
12.2(ii) Maintain up to date, accurate sampling records in a retrievable form. [The Standard – 16.1]		We note the observations of FSA auditors on this point and will remind all officers of the requirements of the Standard.	Sampling records up to date, accurate and retrievable.	Completed
12.2(iii) Ensure appropriate action is taken on unsatisfactory food sampling results. [The Standard - 12.7]		We note the observations of FSA auditors on this point and will remind all officers of the requirements of the Standard.	Appropriate action taken.	Completed
13.6(i) Ensure the procedure for dealing with sporadic cases of food-related infections out of office hours is properly documented and that the procedure accounts for the inspection of implicated food premises. [The Standard – 13.2]		The authority has one procedure – the same out of hours as in hours which we will clarify. We will review our procedures and guidelines covering these matters including updating contact details and the inspection of implicated premises.	Procedure partially amended.	Completed
15.11(i) The authority should ensure its Enforcement Policy is suitably maintained. [The Standard- 15.1]		The Authority’s Food Law Enforcement Policy will be amended to take account of new powers in relation to Remedial Action Notices and to	Policy maintained in accordance	Completed

		reflect Primary Authority matters.	with Code of Practice.	
15.11(ii) Set up, maintain and implement documented procedures for follow up and enforcement actions in accordance with the Food Law Code of Practice and official guidance. [The Standard- 15.2]		All procedures are being reviewed on an ongoing basis, as described elsewhere, and will be amended as appropriate to reflect Primary Authority considerations.	Partial prosecution procedure developed.	Provide a revised prosecution procedure. Revised date for completion: 22/02/16.
15.11(iii) Ensure that food law enforcement is carried out in accordance with the Food Law Code of Practice, centrally issued guidance and the authority's own documented procedures and Enforcement Policy. [The Standard -15.2, 15.3 and 15.4]		<p>We will review our prosecution procedure to ensure greater clarity and document the approach.</p> <p>We will bring the findings of the audit to the attention of all officers to ensure that we are able to learn any appropriate lessons emerging from the audit. We will continue to undertake regular internal monitoring;</p>	Some improvements to Hygiene Improvement Notices and Prosecutions.	<p>Provide details of the local magistrate's court with HINs and retain proof of service. Implementation of voluntary closures and simple cautions not conducted during this review.</p> <p>Revised date for completion: 22/02/16</p>
16.11(i) Maintain up to date, accurate records in a retrievable form on all relevant food establishments and imported food in accordance with the Food Law Code of Practice and centrally issued guidance. These records should include reports of all interventions/inspections, the determination of compliance with legal		<p>The detailed findings of the audit will be brought to the attention of all officers.</p> <p>As stated elsewhere we will review guidance on recording and storage of information.</p>	Significant improvements to records for approved establishments and improvements to food hygiene and	Ensure food standards reports include timescales for compliance and distinguish clearly between legal requirements and recommendations.

requirements made by the officer and details of action taken. [The Standard – 16.1]			standards inspections reports.	Revised date for completion: 22/02/16
17.3(i) Ensure a record is made of all complaints received and of all actions taken in response to those complaints. [The Standard – 17.3]		We will review the Authority’s approach to actioning and recording complaints, to include clarity on the distinction between “service requests” and “complaints”.	Database code created to allow for recording of cases.	Service complaints not assessed during this review. Revised date for completion: 22/02/16
19.8(i) Fully implement the internal monitoring procedure across all food hygiene and food standards activities. [The Standard – 19.1]		We will review (and revise as appropriate) our monitoring of food standards activities in light of the findings of the audit.	Improvements to monitoring of inspections.	Qualitative internal monitoring is currently being limited to planned interventions and in some cases, has failed to identify shortcomings in service delivery. Qualitative internal monitoring should be extended to include complaints, infectious diseases, sampling activity, food alerts and authorisations. Revised date for completion: 22/02/16

19.8(ii) Ensure records of all internal monitoring activities are made and kept for at least two years. [The Standard - 19.3]		We note the comments of the auditors in relation to our monitoring of food hygiene activities. We also note that auditors suggest that increased details be kept of the qualitative monitoring already undertaken.	Records of internal monitoring is currently being maintained for planned interventions.	Records should be maintained for the full range of monitoring. Revised date for completion: 22/02/16
21.4(i) Maintain records of its food safety and standards promotions. [The Standard – 21.2]		Records are kept and we will maintain more comprehensive records in future, stored at a central point, electronically.	Records of promotions kept.	Completed

Summary

Total Recommendations	28
Completed	17
Good Progress	9
Limited Progress	2
No action	0
Total Outstanding	11