



Report on the Food Law Enforcement Services

Rhondda Cynon Taf County Borough
Council
11th – 15th April 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, 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.

Agency audits assess local authorities' conformance against the Feed and Food Law Enforcement Standard. "The Standard", which was published by the Agency as part of the Framework Agreement on Official Feed and Food Controls by Local Authorities (amended April 2010) is available on the Agency's website at: www.food.gov.uk/enforcement/enforcework/frameagree

The main aim of the audit scheme is to maintain and improve consumer protection and confidence by ensuring that authorities are providing effective food and feed law enforcement services. The scheme also provides the opportunity to identify and disseminate good practice, and provides information to inform Agency policy on food safety, standards and feedingstuffs and can be found at: www.food.gov.uk/enforcement/auditandmonitoring

The report contains some statistical data, for example on the number of food establishment inspections carried out. The Agency's website contains enforcement activity data for all UK local authorities and can be found at: www.food.gov.uk/enforcement/auditandmonitoring

The report also contains an action plan, prepared by the authority, to address the audit findings.

For assistance, a glossary of technical terms used within the audit report can be found at Annex C.

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1 Introduction

- 1.1 This report records the results of an audit of food hygiene and food standards at Rhondda Cynon Taf County Borough Council under the headings of the FSA Feed and Food Law Enforcement Standard. It has been made publicly available on the Agency's website at www.food.gov.uk/enforcement/auditandmonitoring/auditreports

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 Rhondda Cynon Taf County Borough Council was undertaken under section 12(4) of the Act and Regulation 7 of the Regulations.
- 1.3 Regulation (EC) No. 882/2004 on official controls performed to ensure the verification of compliance with feed and food law, includes a requirement for competent authorities to carry out internal audits or to have external audits carried out. The purpose of these audits is to verify whether official controls relating to feed and food law are effectively implemented. To fulfil this requirement, the FSA, as the central competent authority for feed and food law in the UK has established external audit arrangements. In developing these, the Agency 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 Rhondda Cynon Taf'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 Elai,

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).

Tonypandy on 11th – 15th April 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 Agency 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 Agency's Framework Agreement with local authorities. The Framework Agreement can be found on the Agency's website at www.food.gov.uk/enforcement/enforcework/frameagree
- 1.8 The audit also reviewed the action taken by the authority in relation to the FSA focused audit of Local Authority Management of Interventions in Newly Registered Food Businesses undertaken in 2013.

Background

- 1.9 Rhondda Cynon Taf County Borough Council is a unitary authority in south-east Wales, which covers an area of 44,000 hectares and is the third largest local authority in Wales. It borders seven other local authority areas – Powys and Merthyr Tydfil to the north, Caerphilly to the east, Cardiff and the Vale of Glamorgan to the south and Bridgend and Neath - Port Talbot to the west.
- 1.10 Rhondda Cynon Taf is entirely inland and covers an area which stretches from Treherbert and Maerdy at the top of the Rhondda Valleys, to Penderyn in the Brecon Beacons National Park. The Heads of the Valleys road and the A470 link the top of the Cynon Valley to the large town of Pontypridd to the south at Taff's Well, close to the M4 Corridor, which passes through the south west of the County Borough near Talbot Green.
- 1.11 Rhondda Cynon Taf is a mixed urban and rural county borough with over 70 distinct towns and villages situated amongst areas of natural beauty.

The principal towns include Pontypridd, Talbot Green with Llantrisant and Aberdare.

- 1.12 According to the 2011 Census, Rhondda Cynon Taf has a population of 234,410 with 97.4% of the population being White. The population density was the eighth highest in Wales by mid 2014. 12.3% of the population speaks, reads, writes or understands Welsh; whilst the number of Welsh speakers is below the Wales average.
- 1.13 The economy is a broad mixture of activity without any dominant activity; although manufacturing, public administration, education and health sectors feature strongly.
- 1.14 Rhondda Cynon Taf contains indicators of deprivation mostly above the Wales average as determined by the 2014 Welsh Index of Multiple Deprivation; including three towns in the top twelve most deprived areas in Wales. The County Borough is, however, rated better than average with regards to access to services, physical environment and housing.
- 1.15 Food hygiene law enforcement was being carried out by officers in the authority's Food and Health and Safety team whilst food standards enforcement was being carried out by the Food Standards and Farm enforcement team. Both teams fall within the Public Health and Protection section of Community and Children's Services.
- 1.16 Officers and support staff responsible for food hygiene and food standards were based at Ty Elai, Dinas Isaf East, Williamstown, Tonypany CF40 1NY.
- 1.17 The authority reported that it had a 24 hour emergency out-of-hours service. The out-of-hours service was not tested as part of the audit.
- 1.18 At the beginning of 2015/16 there were around 1969 food establishments in Rhondda Cynon Taf with a slightly lower number of food establishments covered by the food standards discipline. In addition, there were 12 approved food establishments.
- 1.19 The authority had 10.95 full time equivalent (FTE) officers involved in the delivery of food hygiene in 2015/16. In respect of food standards, the authority reported 4.85 FTE officers.

- 1.20 The authority provides officers with opportunities for continuous professional development in their field of work. A training budget was available and this was being maintained year on year.
- 1.21 The annual budget for the food services was £477,510 in 2015 / 16. This represented a slight increase on the 2014/15 expenditure.
- 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 1847 food establishments in Rhondda Cynon Taf were available to the public on the National Food Hygiene Rating Scheme website.

2 Executive Summary

- 2.1 The audit examined Rhondda Cynon Taf County Borough 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 Environmental Health, Trading Standards and Community Safety had overall responsibility for the delivery of food law enforcement services. The food hygiene service was delivered within the Food and Health & Safety team whilst food standards enforcement was being carried out by the Food Standards and Farm enforcement team. Both teams fall within the Public Health and Protection section of Community and Children's Services Directorate.
- 2.3 The service plan developed by the authority was largely in accordance with FSA guidance. The authority had reviewed its performance against the previous year's performance and a number of variations in achieving the targets were identified and explained. However, an estimate of the resources required to deliver the services against those available was not available and auditors discussed the benefit of ensuring variances relating to new food standards establishment interventions are identified in the service plan and that improvements include actions to address the variance in achieving the target for new food hygiene businesses. The use of detailed impact assessment information for different elements of service delivery in order to influence the magnitude of resource reductions was identified as an area of good practice.
- 2.4 The authority had arrangements in place to ensure effective service delivery by appropriately authorised officers which require amendment to ensure officers are authorised under all required legislation. In general, officers had been authorised in accordance with their qualifications, training and experience. The provision of access to several portals of information for food hygiene and food standards officers was identified as an area of good practice.

- 2.5 A documented work procedure had been developed to ensure the accuracy of the authority's food establishment database. Audit checks identified that although food establishment information was mostly up to date, improvements are required with regards to the accuracy of some enforcement data. The authority had been able to provide Local Authority Enforcement Monitoring System (LAEMS) returns to the FSA.
- 2.6 Record and database checks confirmed that the food hygiene service had prioritised inspections of higher-risk and specialist businesses whilst some lower risk establishments were not being inspected at the required frequency as required by the Food Law Code of Practice and centrally issued guidance. The development of guidance to officers to assist in prioritising programmed and new business interventions was identified as an area of good practice. The food standards service had an approach where high risk establishments had been prioritised for inspection. A number of medium and lower risk establishments were overdue a food standards intervention.
- 2.7 Inspection records did not always demonstrate that a thorough assessment of business compliance had taken place during food standards inspections. Food Standards Interventions had not generally been undertaken in accordance with the Code of Practice. Risk rating revisits and follow up action was being carried out as required for food hygiene. However, in relation to food standards, auditors could not confirm that consistent follow-up actions were being taken in accordance with the Code of Practice.
- 2.8 Food hygiene inspection records and reports were being adequately maintained by the authority; in accordance with the Food Law Code of Practice. Food standards reports contained some of the information required however, they would benefit from improvement to ensure that they include all of the information required by the Food Law Code of Practice.
- 2.9 Food and food establishment complaints, food incident interventions and investigation of food related infectious disease had generally taken place in accordance with the Food Law Code of Practice. However, food sampling interventions had not always been undertaken in accordance with the food law code of practice.

- 2.10 The authority had been proactive in providing advice and guidance to food businesses and undertaking promotional activity in its area. This included the provision of funded food hygiene training. The use of social media to promote the Food Hygiene Rating Scheme and to publicise food alerts was identified as an area of good practice.
- 2.11 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 in relation to food standards.
- 2.12 Significant progress had been made in implementing requirements following the 2013 focused audit - Local Authority Management of Interventions in Newly Registered Food Businesses. The outstanding requirements have been absorbed into the recommendations of this report.

2.13 The Authority's Strengths

Food Hygiene Interventions / Inspections Reports

Intervention / inspection reports provided to food business operators contained all the information required by the Codes of Practice.

Food Standards Complaints and Service Requests

The authority had responded to food standards complaints and service requests in accordance with their procedures and centrally issued guidance, taking appropriate action in response to the findings of investigations.

Advice to businesses

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

Control and Investigation of Food Related Infectious Disease

The authority was able to demonstrate that notifications of infectious disease had been appropriately investigated.

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.

Liaison

The authority had arrangements in place to liaise with other bodies and its arrangements to pilot a new database with other local authorities and collaborate with internal colleagues on food procurement were positive steps to ensure consistent service delivery and take a lead on food hygiene standards through purchasing power.

Food Standards Prosecutions and Simple Cautions

The authority was able to demonstrate that food standards prosecutions and simple cautions had been undertaken in accordance with relevant codes of practice, centrally issued and official guidance.

2.14 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 qualifications, training and experience.

Food Standards Intervention Frequencies

The authority had not carried out food standards and interventions at the minimum frequencies required by the relevant Codes of Practice. Interventions carried out at the minimum frequency ensure that risks associated with food businesses are identified and followed up in a timely manner.

Food Standards Establishment Interventions and Inspections

Information captured by officers during interventions was not always sufficiently detailed to demonstrate that thorough assessments of business compliance had been undertaken for all key aspects.

Food Standards Intervention / Inspection Reports

Food standards intervention / inspection reports provided to food business operators did not contain all the information required by the Codes of Practice.

Audit Findings

3 Organisation and Management

Strategic Framework, Policy and Service Planning

- 3.1 Food law enforcement was overseen by the appointed Cabinet Member. The authority's Constitution set out its decision making arrangements. Under the Constitution, decisions on most operational matters had been delegated to the Group Director Community and Children's Services.
- 3.2 A 'Feed & Food Service Plan 2015-2016' ('the Service Plan') had been developed by the authority. There was evidence that the Service Plan had been approved by the Service Director for Public Health & Protection.
- 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, the organisational structure and the scope of the service. The times of operation, service delivery points and aims and objectives of the service were clearly set out.
- 3.4 The annual LAEMS return indicated that there were approximately 1969 food hygiene establishments in Rhondda Cynon Taf and 1891 food standards establishments.
- 3.5 The profiles of businesses in Rhondda Cynon Taf for food hygiene and food standards were provided by establishment type. The number of planned interventions due in 2015 / 16 were provided by risk rating.
- 3.6 In respect of food hygiene the following information was provided in the Service Plan:

Inspection type	Risk band	2013/14	2014/15	2015/16
Food Safety	A	21	17	16
	B	247	200	194
	C	522	540	533
	D	140	145	131
	E	157	165	169
	Unrated	17	29	38
	Total	1084	1096	1081
Approved premises		12	12	12

- 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 enforcement activity; both in accordance with the Food Law Code of Practice.
- 3.9 Although, it is reported elsewhere in the service plan, the above table would benefit from inclusion of expected number of new businesses requiring intervention during the year.

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

Food Standards	A	32	38	54
	B	543	569	568
	C	309	132	74
	Unrated	55	71	43

3.11 The targets and priorities for food standards included a commitment to deliver all inspections / interventions due at high risk establishments and where possible at medium risk establishments. Low risk establishments would receive another type of intervention.

3.12 Although, it is reported elsewhere in the service plan, the above table would benefit from inclusion of expected number of new businesses requiring intervention during the year.

3.13 The authority's priorities and intervention-targets as set out in the Service Plan, were risk based.

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

FTE posts	Food Law Code of Practice Minimum Qualification	2012/13	2013/14	2014/15	2015/16
Food and Health & Safety Manager	BSc (Hons)/MSc Degree in Environmental Health	0.6	0.6	0.6	0.6
Senior EHO	BSc (Hons)/MSc Degree in Environmental Health	1.1	1.1	1.1	1.1
EHO	BSc (Hons)/MSc Degree in Environmental Health	6.7	7.4	7.4	6.85

Senior Technical Officer	Higher or Ordinary Certificate in Food Premises Inspection	0.9	1.7	1.7	0.7
Technical Officer	Higher or Ordinary Certificate in Food Premises Inspection	0	0	0	0
Senior Technical Assistant	Not stipulated	1	1	1	1
Technical Assistant	Not stipulated	0.7	0.7	0.7	0.7
Food Stds & Farm Enforcement Manager	Diploma in Consumer Affairs and Trading (DCATS) Standards or equivalent	1	1	1	1
TSO	DCATS or equivalent	2.75	2.75	2.75	2.75
Senior FTO	DCATS or equivalent	1	1	1	1
FTO	Not stipulated	2	2	2	1
Animal Health Officer	DCATS or equivalent	2	2	2	2
Admin Support	Not stipulated	1	1	1	1

- 3.15 The authority had not indicated the likely demand for each aspect of food service delivery, or made a comparison of the resources required to deliver the full range of food official controls against those available.
- 3.16 The Service Plan included information on the authority's Enforcement Policy and its approach to staff development, and the necessity to undertake many programmed inspections out-of-hours had been emphasised.
- 3.17 The authority supported businesses through its commitment to following the Primary Authority Scheme and the Home Authority Principle. This

statement would benefit from an amendment to reflect the impact on the authority of being an originating authority to each of its manufacturing establishments. The Service Plan also highlighted other approaches it would use to ensure businesses were well informed of their legal obligations.

- 3.18 Arrangements for internal monitoring or *'quality assessment'* were set-out in the Service Plan and included monitoring the number and quality of inspections and inspection reports and enforcement actions.
- 3.19 The overall costs of providing food law enforcement services had been provided in the Service Plan including the trend in growth or reduction and a breakdown of the non-fixed costs such as staffing, travel and subsistence, equipment including investment in IT and a reference to the departmental financial provision for legal action.
- 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 and the latest review was included in the service plan.
- 3.21 Some variations in achieving the targets set-out in the previous Service Plan were identified in the 2015 / 16 Service Plan, however, the variance in achieving new, medium and lower risk food standards establishment interventions had not been identified as a variance.
- 3.22 The authority had incorporated a number of areas for improvement in its 2015 / 16 Service Plan, based on its review against last year's plan, however, the improvements did not address the variance in new business inspection by the food hygiene service.
- 3.23 The authority had recently emerged from a programme of resource reductions and its food services were considered for reduction in common with other services within Public Health and Protection.

Good Practice – Assessment of the impact of resource reductions

Senior officers of the service were able to influence the magnitude of reductions by providing the decision makers with detailed impact assessment information for different elements of service delivery.

Recommendations

3.24 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. Also, ensure variances relating to new, medium and lower risk food standards establishment interventions are identified in the service plan and the improvements include actions to address the variance in achieving the target for new food hygiene businesses. [The Standard – 3.1]

4 Review and Updating of Documented Policies and Procedures

- 4.1 The authority had developed separate documented operational procedures on document control for the food hygiene and food standards services with the latter forming part of an accredited quality manual. The procedures included control over the production, approval, review, updating and storage of policies, procedures and associated documents.
- 4.2 Documents were stored electronically on the specified computer hard drives, protected from unauthorised access.
- 4.3 Managers were responsible for developing, reviewing and approving documents as well as ensuring they are subject to review, according to specified intervals but also as appropriate to any necessary changes. Permissions to make changes to the list of documents or individual documents are 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 either physically, electronically or where applicable on the internet.

Good Practice – Availability of technical advice

Food hygiene and food standards officers were provided with access to several portals of information that were maintained in an up-to-date manner. These included information on legislation and enforcement from online portals.

- 4.5 Most documents had been subject to review in line with the procedures, however, the authority's authorisation procedure was in need of updating.

Recommendations

4.6 The authority should:

- (i) Ensure that the authorisation procedure 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 of Powers to Officers provided the Group Director for Community and Children's Services with delegated powers in respect of all powers of entry and execution of duties relating to the food hygiene and food standards services. This includes the delegated authority to authorise other officers and to authorise legal action. These powers had been further delegated to the Service Director for Public Health and Protection.
- 5.2 A documented procedure had been developed for the authorisation of officers based on their qualifications and experience. However, the process for assessing qualifications, experience and competency had not been detailed in the procedure.
- 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 has systems in place to identify officer training needs including the Investors in People annual training needs assessments and internal monitoring activities. There are documented staff development plans and for both services the authority was providing a combination of in-house and externally provided training and making good use of the opportunities afforded by the FSA local authority training programme. All officers were required to achieve 10 hours of continual professional development (CPD) in accordance with the Codes of Practice. The authority carries a budget with which to deliver the required training programmes.
- 5.5 An examination of the qualification and training records of six officers involved in the delivery of official food hygiene controls and four officers involved in delivery of official food standards controls was undertaken. Records were being maintained by the authority for officers on hardcopy files.
- 5.6 All but two officers had been authorised in accordance with their qualifications, training and experience; one from each service. Officer authorisations were all up to date and with key legislation required for the delivery of the range of official food controls. However, a number of statutes that require specific authorisation had been omitted. Further,

the authority had authorised officers under the Food and Environment Protection Act 1985 for which the FSA is responsible for issuing authorisations.

- 5.7 All officers had received the minimum 10 hours of CPD required by the Codes of Practice and the authority's own policies. Further, all officers had received the necessary training to deliver the technical aspects of the work for which they are involved.

Recommendations

- 5.8 The authority should:
- (i) Review and amend its authorisations to ensure officers are appropriately authorised under all relevant legislation; and amend its procedure for the authorisation of officers to include details of the process for assessing officer competency, and ensure these assessments are documented. [The Standard – 5.1]

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 Separate procedures for the maintenance of equipment had been developed for the food hygiene and food standards services. The food hygiene procedure included calibration and detailed the arrangements for ensuring that equipment, such as thermometers were properly identified, assessed for accuracy and withdrawn from use when found to be faulty. The procedure made reference to testing including in house checks, together with action to be taken where tolerances were exceeded, in accordance with centrally issued guidance.
- 6.3 Officers had been supplied with thermometers, which were being calibrated using a calibrated reference thermometer. The equipment allocated to officers was 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 were within acceptable tolerances in accordance with the centrally issued guidance.
- 6.5 The authority's food databases were capable of providing the information required by the FSA. A number of checks were carried out during the audit which confirmed that databases were operated in such a way to enable accurate reports to be generated.
- 6.6 The food database, together with other electronic documents used in connection with food law enforcement services were subject to regular back-up to prevent the loss of data.
- 6.7 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 were also in place and any issues were discussed during team meetings in order to achieve consistency.

7 Food Establishments Interventions and Inspections

Food Hygiene

- 7.1 In 2014/2015 the authority reported through LAEMS that of the 1,969 food businesses within its area all but two category A-E rated food establishments due to be inspected had been inspected. Furthermore, 89% of food businesses were 'broadly compliant' with food hygiene legislation. This represented an improvement in broad compliance of approximately 2% from 87% reported as 'broadly compliant' 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 interventions programme. The authority reported that all establishments had received an intervention within 28 days of being due in line with the Food Law Code of Practice.

Good Practice – Procedure for prioritising new business and programmed food hygiene interventions

A new procedure to help officers prioritise programmed and new businesses had been developed, providing guidance to officers on priorities in accordance with the risk and likely risk of each premises.

- 7.3 The authority had developed documented procedures aimed at establishing a uniform approach to carrying out food hygiene interventions and revisits. Procedures were also in place for interventions at approved establishments. An examination of these procedures confirmed that all made reference to relevant legislation, had been subject to recent review, and were generally in accordance with the requirements of the Food Law Code of Practice and relevant centrally issued guidance.
- 7.4 Whilst the procedures contained reference to officers checking for red flags on establishment files before an inspection, information on the circumstances in which red flagging is appropriate and the method of red flagging after an inspection was not available. The procedure would benefit from being reviewed to include red flagging arrangements. Auditors discussed the benefit of the authority making reference to the

guidance produced by FSA Wales in collaboration with WHOEH Food Safety Expert Panel relating to red flagging establishments of concern.

- 7.5 In relation to the procedure for interventions at approved establishments auditors discussed that the appendix documents would benefit from being updated to ensure the relevant court details were completed where required. In addition, the procedure made reference to a 14 working day target for inspection reports to be sent contrary to the Food Hygiene Rating Scheme guidelines which detail 14 calendar days (to include bank holidays / weekends).
- 7.6 A food hygiene inspection aide-memoire had been developed by the authority to assist officers with inspecting food establishments and to ensure that a thorough record of visits was recorded on file.
- 7.7 During the audit, an examination of records relating to 10 food establishments was undertaken. Auditors confirmed that, in recent years, all but two establishments had been inspected at the frequencies required by the Food Law Code of Practice. However, in the remaining two cases low risk establishments had been overdue an intervention by one year or more. The Food Law Code of Practice requires that interventions take place within 28 days of their due date.
- 7.8 Inspection records were available and legible for the 10 food establishments audited and sufficient information had been captured to enable auditors to verify that officers had considered the size, scale and scope of the business operations. Where appropriate, supplier and customer information in relation to traceability was also recorded in all cases.
- 7.9 In all cases, the level of detail recorded on aide-memoires was appropriate to verify that thorough assessments of business compliance with requirements relating to Hazard Analysis Critical Control Point (HACCP) had taken place.
- 7.10 Auditors were able to confirm that, overall, an adequate assessment of training and discussions with food handlers other than the food business operator had taken place, where appropriate. There was evidence available in three cases to demonstrate that consideration had been given to imported foods. However auditors were unable to confirm

officers had undertaken checks on health / I.D. marks to verify the source of foods.

- 7.11 In all cases inspection records confirmed that officers had undertaken an appropriate assessment of the effectiveness of cross contamination controls in accordance with current guidance.
- 7.12 The risk ratings applied to establishments were consistent with the inspection findings in all cases. However, an analysis of the whole database identified some officer errors relating to a small number of food hygiene risk ratings.
- 7.13 Where revisits had been required, records confirmed that these had taken place within the timescales specified in the authority's revisit procedure.
- 7.14 The authority informed the FSA prior to the audit that there were 12 approved establishments in its area, of which the records relating to 10 were examined.
- 7.15 In eight files auditors were able to confirm that the authority had followed the appropriate process of issuing approvals to establishments. In the remaining two files auditors identified that establishments had been granted full approval on a single inspection despite the addition of a new process step to their operational activity.
- 7.16 Auditors were able to confirm in all cases that recent inspections at all establishments had been undertaken at the frequency required by the Food Law Code of Practice by correctly authorised officers.
- 7.17 In general, information captured on aide-memoires 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. However, in one case insufficient information regarding the assessment of critical control points had been documented by the officer. Auditors noted that the authority had recently introduced a new aide memoir to its procedure for use moving forward.
- 7.18 Auditors were able to confirm that officers had assessed the use of health marks and commercial documents by the businesses in seven

cases. Likewise, in eight 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 observations whether these checks had taken place.

- 7.19 In all cases the risk ratings that had been applied to approved establishments were consistent with the inspection findings.
- 7.20 The authority's food interventions procedure and service plan detailed when an Alternative Enforcement Strategy (AES) could be used for lower risk premises, this included an example self-assessment questionnaire as an appendix. However, the procedure did not include specific details in relation to local operational procedure and the process of checking completed AES forms. The procedure would benefit from being updated to include localised procedures in relation to the process of undertaking AES and alternating low risk D rated premises with official controls and non-official controls in accordance with the FLCOP.
- 7.21 Prior to the audit the authority provided a list of AES activity that had been undertaken in low risk premises. 10 files were selected for audit. In three cases, auditors established that D rated premises in the selected files were being alternated with official controls and non-official controls and as such were not strictly AES.
- 7.22 In the remaining seven cases, auditors were able to establish in two files that the AES activity had been reviewed by an appropriately qualified officer in line with local procedures and the FLCOP. In the remaining cases no evidence was available to suggest that the activity had been approved.
- 7.23 In one case, evidence on file suggested that a risk rating against a premise had changed during the AES process with no record of a primary inspection being undertaken.
- 7.24 Auditors identified five cases where follow-up action may have been required in light of the information recorded on the AES questionnaire. Of these, two cases contained sufficient notes to demonstrate that appropriate action had been taken. The remaining cases contained insufficient information to demonstrate what action had been taken and

in one case significant changes to the business operation had been recorded with no follow up action instigated for two years.

Recommendations

- 7.25 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) Ensure that, where applicable, approval of premises, intervention risk rating and AES 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; particularly, in relation to checks on the provenance of imported food and checks on health / ID marks. [The Standard -7.3]
 - (iv) Ensure that the documented procedures for interventions are reviewed to include reference to the local arrangements for red flagging. Amend the approved premises procedure to include reference to the correct timescales for reports. Review and amend the AES procedure to include specific details on check undertaken by appropriately qualified officers. [The Standard 7.4]

Verification Visits to Food Establishments

- 7.26 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.

7.27 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 food business operators.

Food Standards

7.28 In 2014/15 the authority had reported through LAEMS that 92.5% of A-C rated food businesses due to be inspected had been inspected. This represented an increase of 6.64% from 85.86% in the year 2013/14.

7.29 There were 1935 food businesses on the authority's food standards establishment database at the time of the audit. There were a total of 68 food establishments overdue a food standards intervention at the time of the audit, of which, 59 were medium-risk, and 9 were low-risk. No high-risk rated establishments were overdue an intervention at the time of the audit.

7.30 The authority had developed a food standards inspection procedure which was mainly in accordance with the Food Law Code of Practice. Auditors discussed the benefits of including guidance for officers on the process of inspection.

7.31 A food Standards Inspection Report form, which also served as a report of visit had been developed by the authority for use by officers in recording inspection findings in most cases. However, the form did not contain 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. However, the Authority had been trialling the use of two food standards inspection aides-memoir; one for manufactures/large processors and one for use in non-manufacturing establishments.

7.32 During the audit an examination was carried out of records held on the authority's database and in hardcopy for 10 food establishments reported to have been subject to food standards inspections.

- 7.33 The file histories for seven establishments confirmed that in recent years, five had been inspected at the frequencies required by the Food Law Code of Practice. However, one medium risk establishment had been subject to an intervention five months after its due date whilst in the remaining low risk establishment, auditors were unable to establish the date of the establishment's previous intervention, and therefore determine whether or not it had received its most recent intervention in line with the frequencies specified in the Code. The Food Law Code of Practice requires that interventions take place within 28 days of their due date.
- 7.34 Records of inspection observations relating to the latest inspection were retrievable and legible in all cases examined. In three cases, officers observations had been captured using the authorities recently introduced food standards inspection aides-memoir.
- 7.35 Auditors noted that records did not generally reflect in sufficient detail the scope and depth of observations made and/or data obtained in the course of an inspection, contrary to the Code of Practice. Therefore, auditors were unable to confirm that officers had considered the size and scale of food operations, or that a thorough assessment of food standards requirements had taken place.
- 7.36 In five cases which were subject to previous interventions, auditors were unable to verify that appropriate enforcement action had taken place in four cases. In these cases, insufficient establishment records were available to allow auditors to verify whether recurring issues were being adequately escalated.
- 7.37 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 six cases. In three cases, there were insufficient records available to allow auditors to verify that appropriate follow up had been undertaken whilst in the remaining case auditors where unable to verify that the planned follow up was timely.
- 7.38 The authority was using the intervention rating scheme in Annex 5 of the Food Law Code of Practice for determining food standards intervention frequencies. In seven cases, risk ratings were consistent with the information that was available on inspection records. In two cases there

were insufficient records available to justify the risks to consumers and/or the activities score applied by the officer. In the remaining case, the compliance score did not reflect the nature of the contraventions identified.

- 7.39 Auditors were able to confirm in two announced cases, the notification of the intention to undertake an intervention was appropriate. Auditors were unable to verify in the remaining cases whether interventions had been unannounced in line with requirements in the Food Law Code of Practice.
- 7.40 The authority had documented its approach to the undertaking of AES interventions. It is recommended that further guidance is provided to ensure that it is clear which establishments are eligible for inclusion in the strategy.
- 7.41 The authority reported undertaking an AES scheme and 10 files were selected for examination
- 7.42 Of the 10 files selected, auditors were able to confirm that four had been subject to a primary inspection, had been risk rated appropriately and were eligible for an AES intervention in accordance with the Food Law Code of Practice. In the remaining cases, auditors were unable to verify that the establishment had received a primary inspection by a qualified and authorised officer in accordance with the code.
- 7.43 Auditors were able to confirm that in all cases, the AES had been delivered at the correct frequency. However, there were insufficient records for the way in which the AES was carried out and auditors were unable to confirm whether there were any circumstances which would have triggered a primary inspection. Further, auditors were unable to verify that a suitably authorised officer had reviewed the file when the AES involved information gathering by a non-qualified office.

Recommendations

- 7.44 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. [The Standard - 7.2]
 - (iii) Assess the compliance of establishments in its area to the legally prescribed standards and take appropriate action in accordance with its Enforcement Policy. [The Standard – 7.3]
 - (iv) Amend its interventions procedures to provide guidance on the process of inspection and details on which establishments are eligible for inclusion in an alternative enforcement strategy [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

- 7.45 Verification visits were made to two food establishments with an authorised officer of the authority who had carried out the most recent food standards inspection. The main objective of these visits 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.
- 7.46 Despite the absence of sufficiently detailed records in one case, officers were able to demonstrate their knowledge of the business and provide

auditors with an assurance that assessments of food standards controls had taken place as part of the inspections.

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. The content of both procedures was in accordance with the Food Law Code of Practice and centrally issued guidance.
- 8.2 The procedure for food standards contained specific detail in relation to timescales for responding to complaints. However, auditors established that the timescales for food hygiene complaints were generated by the authority's database software. The procedure in relation to food hygiene complaints would benefit from review to ensure that officers are aware of the correct timescales required when responding to complaints.

Food Hygiene

- 8.3 An examination of the records relating to 10 food hygiene complaints received by the authority was undertaken. Auditors established that all but one complaint had been actioned in a timely manner and within the target response times set out in the database. In the remaining case the first response to a complaint was outside of the required timescale and therefore not actioned in line with the local procedure.
- 8.4 In general, all complaints had been investigated in accordance with the authority's procedure and evidence was available to demonstrate that appropriate investigations had been carried out and the complainant had been provided with an initial response without unnecessary delay. Where applicable, complainants had been notified of the results of the investigation in all cases.
- 8.5 In all complaints where the complainant's details had been provided to the authority, evidence was available to show that they had been informed of the outcome of the investigation.

Food Standards

- 8.6 An examination of the records relating to ten food standards complaints received by the authority was undertaken. Auditors established that all complaints had been actioned in a timely manner.
- 8.7 In all cases complaints had been investigated in accordance with the authority's procedure and relevant centrally issued guidance and where the complainant's details had been provided to the authority, there was evidence that they had been informed of the outcome of the investigation.

Recommendations

- 8.8 The authority should:
- (i) Amend the relevant procedure to include target response times for food hygiene complaints or service requests. [The Standard - 8.1]
 - (ii) Ensure that food hygiene complaints or service requests are actioned within the timescales 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 Home authority considerations had been included in some other work procedures, for example food complaints 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 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 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 advice had been provided during interventions, as well as on request, both in writing and over the phone. This includes 32 food safety management coaching sessions since January 2015. Over 300 requests for information and advice per year were estimated for the food hygiene service in the service plan along with approximately 185 for the food standards service.
- 10.2 A range of information was available on the authority's website to assist local businesses, which included advice on:
- Approvals and registrations;
 - Setting-up a new food businesses;
 - Food hygiene inspections;
 - The Food Hygiene Rating Scheme (FHRS)
 - Food regulations;
 - Food complaints;
 - Imported food;
 - Food poisoning and food borne infectious diseases;
 - Food sampling;
 - Food safety training.
- 10.3 The authority had also provided links to the Trading Standards Wales and Chartered Trading Standards Institute on its website for business advice on a comprehensive range of food standards issues.
- 10.4 The authority had also delivered Level 2 food hygiene training to 47 food handlers from 24 local businesses using grant funding from the FSA. All candidates passed the examination.

11 Food Establishments Database

- 11.1 The authority has documented procedures for the maintenance of the food hygiene and food standards databases. Information to update the databases is gathered from food business operators, inspection activity, licensing and planning applications, database reports, online business directories, media / advertisements, local district knowledge, other council departments and members of the public.
- 11.2 Auditors randomly selected 10 food establishments located in the authority's area from the Internet. All but two of the food establishments that remained trading had been included on the authority's database and in the food inspection programmes.
- 11.3 Audit of enforcement action files indicated the existence of more than one database code for voluntary closures. This had the potential to affect the annual enforcement monitoring return to the FSA.

Recommendations

- 11.4 The authority should:
- (i) Fully implement its documented procedures for ensuring its database is accurate, reliable and up to date including ensuring information on enforcement actions is correct at all times. [The Standard – 11.2]

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 to verify compliance with statutory requirements.
- 12.2 Separate policies relating to food standards and food hygiene sampling activities had also been developed. In respect of food hygiene, auditors discussed the benefit of providing further details in respect of out of hours sampling whilst both policies would benefit from further development with respect to sampling foods in different states and its policy with regards to foods imported from third countries.
- 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. 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 generally in accordance with the Food Law Code of Practice and official guidance. However, information relating to the specific equipment required to sample and the authority's storage and transport arrangements had been omitted. Auditors discussed the benefit of providing guidance with regards to the documentation required for the submission of samples and notifying relevant parties of analysis results.
- 12.5 A separate procedure had also been developed for the sampling of foods in relation to chemical analysis which were generally in accordance with the Food Law Code of Practice. The procedure would benefit from including details in relation to the procurement and purchase of samples and the documentation required for the submission of samples and notifying relevant parties of analysis results. During the audit, the authority made a commitment to provide further guidance to officers in relation to the follow up of unsatisfactory sample results.
- 12.6 The authority had appointed a Public Analyst for carrying out analyses of food and had a formal agreement in place with Public Health Wales for

the microbiological analysis of food. The laboratories were both on the recognised list of UK designated Official Laboratories.

Food Hygiene

- 12.7 Audit checks of records relating to 10 samples submitted for microbiological examination were undertaken, of which three had been notified as being unsatisfactory by the authority but were subsequently judged to be borderline results whilst one was subsequently found to be satisfactory due to an incorrect criteria applied by the laboratory. All samples had been procured by an appropriately trained and authorised officer and results were available on food establishment files.
- 12.8 In the three applicable cases, businesses had been informed of borderline results, but evidence of appropriate follow-up action in relation to these cases was not available.

Food Standards

- 12.9 An examination of the records relating to 10 food standards samples was undertaken, of which seven related to unsatisfactory results. All samples had been appropriately procured by trained and authorised officers and auditors were able to confirm that sample results were available on food establishment files in nine out 10 samples examined.
- 12.10 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, relating to unsatisfactory samples, there was insufficient evidence to enable auditors to confirm that follow-up action had taken place. The owner, importer or manufacturer had been informed in writing of the unsatisfactory results in two cases however auditors were able to confirm that where applicable, liaison with the Primary, Home or Originating authority had taken place in all cases.

Recommendations

12.11 The authority should:

- (i) Amend 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 and implement the changes. [The Standard – 12.4]
- (ii) Amend its documented procedure for microbiological sampling of foods to include information relating to the specific equipment required to sample and the authority's storage and transport arrangements, in accordance with the Food Law Code of Practice and centrally issued guidance and implement the changes. [The Standard – 12.5]
- (iii) Amend and implement its documented procedure for the chemical analysis sampling of foods to include information relating to procurement and purchase of samples, which accords with the Food Law Code of Practice and centrally issued guidance. [The Standard – 12.5]
- (iv) Take 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 investigation and assessment of notifications received by the authority.
- 13.2 The Wales Outbreak Plan, containing information on the management of communicable disease outbreaks in Wales, 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.
- 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.
- 13.4 The authority had formal arrangements in place to respond to notifications of food related infectious diseases received outside normal working hours involving contact with an appropriately qualified officer. The arrangements were not tested as part of the audit.
- 13.5 Notifications relating to eight sporadic cases of food related infectious diseases and one outbreak were selected for audit. Completed questionnaires were available in all but one case, which confirmed that officers had interviewed infected persons and that thorough and timely investigations had been carried out in accordance with the authority's procedures and target response times.
- 13.6 In the remaining case, a questionnaire for a sporadic case of *Campylobacter* had not been completed due a response not being received. However, auditors established that appropriate and timely contact had been made and follow up action taken in line with the authority's procedure prior to the case being closed.
- 13.7 The authority reported one outbreak in the two years prior to the audit. Auditors established that this outbreak had been a cross boundary outbreak occurring in a neighbouring authority. However, detailed evidence was available to demonstrate that a thorough investigation had been undertaken for cases within the authority area. The authority also

had representation on relevant outbreak control meetings in line with the local procedure.

- 13.8 Records relating to the control and investigation of food related infectious disease were being retained by the authority for at least six years.

14 Food Safety Incidents

- 14.1 The authority had developed a policy and procedures for dealing with incidents and food alerts and which also referred to the issue of food alerts arising from within the area.
- 14.2 Auditors were able to verify that a sample of five recent food alerts for action notified to the Authority by the Agency had been received and actioned as appropriate in accordance with the instructions issued by the FSA.
- 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 been maintained.

15 Enforcement

- 15.1 The authority had developed a Corporate Enforcement Policy that covered regulatory functions exercised by the food hygiene and food standards services. The Policy was approved by Cabinet whilst amendments were approved by the Service Director for Public Health and Protection. The Policy was made available to the public and businesses on the authority's website.
- 15.2 The 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 the taking of informal action, statutory notices, other formal actions, simple cautions and prosecution action and made reference to the Primary and Home Authority schemes.
- 15.3 The taking of action in council operated establishments was not addressed in the policy, however, arrangements were included in the food law enforcement procedure.
- 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 Separate enforcement procedures had been developed for the food hygiene and food standards services for most enforcement actions. Auditors noted that no procedure was available for the inland control of imported food.
- 15.6 The authority had developed a separate procedure for food standards with respect to prosecutions and the administration of simple cautions. A procedure was available to cover the relevant enforcement notices used by the food standards team. However, auditors discussed the benefit of the authority developing a local procedure for voluntary surrenders with respect to Food Standards.
- 15.7 The authority's food hygiene Enforcement Procedure contained reference to a number of enforcement options; these 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 the undertaking of voluntary closures. The procedure was based on the All Wales Expert Panel templates and generally in accordance with the requirements of the Food Law Code of Practice. However, auditors discussed the benefit of reviewing the Hygiene Improvement Notices (HIN), Remedial Action Notices (RANs) and Voluntary Surrenders sections in order to provide localised instructions in relation to the method and record of service, checks on compliance, the local arrangements for the destruction and disposal of food and the use of approved templates. Furthermore, in the case of RANs auditors discussed the benefit of amending the procedure to omit those premises that are not eligible for detention notices served under the food hygiene regulations.

- 15.8 With respect to the prosecution procedure for the food hygiene service, auditors discussed the need to clearly document its process for instigating prosecution proceedings and administering simple cautions. Auditors were advised that the food hygiene service followed the procedures within the food standards quality manual however no reference was made to this within the local procedure.
- 15.9 An examination of database records, indicated that all of the establishments which had fulfilled the health risk conditions requiring closure, had been remedied through appropriate enforcement action without the need to escalate further. In addition, there were four zero rated establishments, two of which had been subject to formal enforcement action to remedy the problems identified. The remaining two had not been subject to formal enforcement action in accordance with the enforcement policy. Where serious hygiene contraventions are identified, auditors advised of the need to document decisions in accordance with its Enforcement Policy.
- 15.10 The authority demonstrated a commitment to using both informal and some formal enforcement sanctions to secure compliance with food hygiene and standards legislation and had reported in pre-audit documentation that the following formal enforcement actions had been taken in the two years prior to the audit:

- 86 Hygiene Improvement Notices (HINs);
- 3 Remedial Action Notices;
- 5 Fixed Penalty Notices for display of FHRs rating;
- 6 Voluntary Closures;
- 5 Voluntary surrenders of food;
- 3 simple cautions;
- 16 prosecution decisions

- 15.11 Ten Hygiene Improvement Notices (HINs) and associated records were selected for audit. In all cases, the service of HINs had been the appropriate course of action, the details of the contraventions identified and the measures to be taken to achieve compliance had been specified. Auditors noted that appeal information was available on the notice in eight cases. However, two of these cases did not contain local court details in accordance with the Food Law Code of Practice. The remaining cases related to either administrative errors on documents or true copies not being available on file.
- 15.12 In seven cases, auditors were able to verify that a timely check on compliance had been undertaken on expiry of the notice. However, in the remaining cases records did not contain sufficient information to demonstrate that a timely check on compliance had been undertaken in line with local procedures. Auditors were advised that these cases were due to officers leaving the authority after the notices had been served.
- 15.13 Audit checks were undertaken of three RANs and associated records, which confirmed that the action taken had been appropriate in relation to the specific circumstances of the cases involved. However, auditors noted that in one case the notice was served two weeks after the officer discovering that the Food Business Operator was non-compliant with food hygiene regulations.
- 15.14 In all cases, auditors were able to verify that there was proper evidence of service but auditors were unable to verify that Food Business Operators had been provided with the necessary information relating to their appeal provisions.
- 15.17 There was evidence that timely checks on compliance had been carried out in one case. In one of the remaining cases, records indicated that the notice had been withdrawn one month following its service; however,

there were no records of any checks in the interim period. In the remaining case, where the notice was still in force, auditors were unable to verify that checks were made in a timely manner following the service of the notice and since the establishment's last follow up visit.

- 15.16 Auditors examined the records of six voluntary closures which had been undertaken by the authority in the two years prior to the audit. In all cases auditors were able to verify that the issue of a voluntary closure was a suitable course of action. Also in all cases, regular checks on compliance, to verify that the voluntary closure was being complied with, had been carried out in accordance with the relevant procedure.
- 15.17 In the five cases where food had been subject to a voluntary surrender, the action taken had been appropriate and in accordance with the Food Law Code of Practice. In all cases, receipts had been provided for the voluntary surrendered food for destruction which had been signed by the officer and counter signed by the person surrendering the food. In all cases, auditors discussed the need to ensure that the time, place and method of destruction is documented and a record of destruction is retained by the authority.
- 15.18 The authority had administered three Simple Cautions and successfully prosecuted 11 businesses for food standards offences in the two years prior to the audit. Further, three businesses had been successfully prosecuted for food hygiene offences in the same period. In all cases, Simple Cautions and Prosecutions had been an appropriate course of action in the circumstances, and had been taken or administered in accordance with its enforcement policy and centrally issued guidance.

Recommendations

15.19 The authority should:

- (i) Review, amend and implement its documented enforcement procedures for hygiene improvement notices, remedial action notices and detention notices to include local process information. Document its procedures for undertaking enforcement in relation to the inland control of imported food, simple cautions and prosecutions with respect to Food Hygiene and its detention and seizure procedure with respect to Food Standards. Furthermore, the procedure in relation to Hygiene Improvement Notices should be amended to ensure that appropriate appeal and court details are included on document templates. [The Standard - 15.2]
- (ii) Ensure that food hygiene enforcement including Remedial Action Notices, Hygiene Improvement Notices and voluntary surrenders are carried out in accordance with the Food Law Code of Practice, centrally issued and official guidance and local procedures. [The Standard – 15.2 & 15.3]
- (iii) Ensure all decisions on enforcement action are documented and are made following consideration of the authority's enforcement policy. Document the reasons for any departure from the criteria set-out in the Enforcement Policy. [The Standard - 15.4]

16 Records and Interventions/Inspections Reports

Food Hygiene

- 16.1 Food business records, including registration forms, inspection aide-memoires, post inspection visit report forms and correspondence were being stored by the authority on its electronic food establishment database. Details of the date and types of intervention undertaken at food establishments, as well as the risk 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. Where relevant, information relating to the last three inspections was available and records were being retained for six years.
- 16.2 Food registration forms were available on file in nine out of 10 cases in relation to food hygiene intervention files and in eight of these cases registration forms were date stamped in line with the local procedure.
- 16.3 In all cases, approved establishment files contained a synopsis, HACCP documentation, notification document and establishment layout plans. The remainder of the information required in Annex 10 of the Food Law Practice Guidance was mostly available with the exception of some minor information in isolated cases. Establishment files for approved premises would benefit from a review against the documents required by Annex 10 to ensure that all required information is available, retrievable and up to date in all cases.
- 16.4 Officers were leaving 'report of a visit' notifications post inspection in addition to sending out 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 the timescales required to achieve compliance, as well as indicating any further follow-up action intended by the authority.
- 16.5 Post-inspection letters contained all the information required to be provided to food business operators under Annex 6 of the Food Law Code of Practice.

- 16.6 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.

Food Standards

- 16.7 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 undertaking and risk rating for the establishment was also recorded on the database.
- 16.8 All business operators of the establishments selected for audit had been provided with report forms at the conclusion of the most recent inspection at their trading address. However, in one case, auditors were unable to verify that a copy of the inspection report had been sent to the establishments registered address.
- 16.9 Report forms contained some of the information required by Annex 6 of the Food Law Code of Practice. However, key information not consistently provided included: the type of establishment visited, areas inspected, documents examined and samples taken, the key points discussed during the inspection, a distinction between legal requirements and recommendations of good practice, timescales for achieving compliance and the action to be taken by the authority. Further, the specific food law under which the inspection was conducted and the contact details of a senior officer were not provided on the inspection report form.
- 16.10 The authority was unable to demonstrate that food standards records were being consistently maintained for at least six years.

Recommendations

16.11 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 (including copies of food inspection reports), the determination of compliance with legal requirements made by the authorised officer, details of action taken where non-compliance was identified and details of any enforcement action taken. [The Standard – 16.1]
- (ii) Ensure that businesses, including their head offices, 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]
- (iii) Ensure that records are kept for at least 6 years. [The Standard – 16.2]

17 Complaints about the Service

- 17.1 The authority had developed both 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 Two complaints against the food hygiene service had been received in the two years prior to the audit. These were both dealt with in accordance with policy and were unfounded.
- 17.4 Auditors noted that the details of a senior officer was 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:

- WHoTS Food Standards and Labelling Enforcement Group;
- South East Wales Food Safety Task Group;
- Communicable Disease Liaison Group;
- Glamorgan Food Group;
- All Wales Food Safety Expert Panel;
- Lead Officers Food Hygiene Rating Steering Group;
- South East Wales Communicable Disease Task Group.

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

- Food Standards Agency in Wales;
- The Wales Food Fraud Co-ordination Unit;
- Public Health Wales Consultant in Communicable Disease Control (CCDC);
- Public Health Wales Communicable Disease Surveillance Centre (Wales);
- Public Analyst;
- Welsh Local Government Association,
- Local Government Regulation,
- Welsh Government;
- Welsh Water;
- Chartered Institute of Environmental Health;
- Trading Standards Institute;
- Better Regulation Delivery Office;
- DEFRA Egg Marketing Inspectorate;
- Police services;
- Trade bodies e.g. International Federation of Spirit Producers.

18.3 Auditors were able to verify that mechanisms were in place for effectively liaising with internal departments, including Planning and Building Control Services, Licensing, Education and Social Services.

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 records were kept on the corporate performance monitoring database and monitoring within this system was quarterly. 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 (based on the all Wales FSEP procedure) and food standards services.
- 19.4 The team managers 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 monitoring is being undertaken across both services including database checks, accompanied inspections and record checks. Records maintained, in accordance with the procedure, were able to confirm the nature and extent of the monitoring activity. The food standards procedure would benefit from further development to include activities such as AES and sampling follow ups before being fully implemented.
- 19.6 Regular team meetings and one to one meetings were also conducted to feedback and share information on the validation of both quantity and quality of work. The authority was able to demonstrate that officer progress in meeting performance targets, training and qualitative aspects of their work had been discussed in team meetings and during individual supervision meetings.
- 19.7 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. It had also recently participated in a national consistency exercise co-ordinated by the FSA.

19.8 The authority has also conducted customer surveys to gain external feedback on some aspects of service delivery.

19.9 The records relating to internal monitoring that were available, were being maintained by managers for at least two years.

Recommendation

19.10 The authority should:

- (i) For the food standards service, expand its procedures to verify its conformance with the Standard, relevant legislation, the relevant Codes of Practice, centrally issued guidance and the authority's documented policies and procedures. [The Standard – 19.2]

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. These focused audit reports are available at:
www.food.gov.uk/enforcement/auditandmonitoring
- 20.2 The outstanding actions arising out of the focussed audits were addressed during this audit and these all related to the Local Authority Management of Interventions in Newly Registered Food Businesses. A risk based approach to managing interventions in new businesses had now been documented and implemented. Where matters remained outstanding from the audit, they were absorbed into the recommendations within this report.
- 20.3 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.
- 20.4 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 report's findings were reported to the Corporate Management Team and the authority's Overview and Scrutiny Committee.

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 FSA's Chicken Challenge during Food Safety Week,
- talks to local licensed traders on FHRs in 4 formal sessions,
- use of social media to publicise FHRs ratings,
- use of social media to publicise food alerts,
- publicity for food prosecutions via the press.

Good Practice – Use of social media

The authority had used social media to promote the Food Hygiene Rating Scheme and to publicise food alerts.

21.2 Information on food hygiene and food standards services was available for consumers and businesses on the authority's website.

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

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Action Plan for Rhondda Cynon Taf County Borough Council**Audit Date: 11th – 15th April 2016**

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.24 (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. Also, ensure variances relating to new, medium and lower risk food standards establishment interventions are identified in the service plan and the improvements include actions to address the variance in achieving the target for new food hygiene businesses. [The Standard – 3.1]	Completed 7.12.16	Ensure Food Delivery Plan for 2016-17 includes the audit recommendations	Food Delivery Plan for 2016-17 prepared which addresses the recommendations from the audit.
4.6 (i) Ensure that the authorisation procedure 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]	31.3.17	Adopt revised Corporate Scheme of Delegation within the Department. Review the Department Officer Authorisation Procedure, as required, to implement the audit recommendations.	Corporate Scheme of Delegation Approved by Council. New Scheme of Delegation in place for Senior Management Team.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
5.8 (i) Review and amend its authorisations to ensure officers are appropriately authorised under all relevant legislation; and amend its procedure for the authorisation of officers to include details of the process for assessing officer competency, and ensure these assessments are documented. [The Standard – 5.1]	Completed 31.12. 16	Officer Authorisations to be reviewed to ensure compliance with the code of practice requirements. A Matrix will be developed to determine officer competence / qualification and what enforcement actions they are authorised to conduct to be adopted in line with the Food code practice guidance.	Authorisations reviewed following audit feedback. Additional EC legislation added to officer authorisations and have been signed by the Service Director in accordance with the Scheme of Delegation. Authorisations identify the level of food enforcement that may be conducted by that officer.
7.25 (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]	Completed 24.2.17	Review and amend the procedures. Circulate the amended procedure to the Food and Health & Safety Team to raise awareness	Procedure reviewed and amended as required. The amended procedure circulated to the Food and Health & Safety Team to raise awareness. Email sent to the staff reminding them of the contents of the COP
7.25 (ii) Ensure that, where applicable, approval of premises, intervention risk rating and AES are undertaken consistently in accordance with the Food Law Code of Practice, centrally issued guidance, and local procedures. [The Standard – 7.2]	Completed 24.2.17	Review and amend the procedures. Circulate the amended procedure to the Food and Health & Safety Team to raise awareness	Procedure reviewed and amended as required. The amended procedure circulated to the Food and Health & Safety Team to raise awareness. Email sent to the staff reminding them of the contents of the COP

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
7.25 (iii) Fully assess the compliance of establishments in its area to the legally prescribed standards; particularly, in relation to checks on the provenance of imported food and checks on health / ID marks. [The Standard -7.3]	Completed 24.2.17	Review and amend the procedures. Circulate the amended procedure to the Food and Health & Safety Team to raise awareness	Procedure reviewed and amended as required. The amended procedure circulated to the Food and Health & Safety Team to raise awareness Email sent to the staff reminding them of the contents of the COP
7.25 (iv) Ensure that the documented procedures for interventions are reviewed to include reference to the local arrangements for red flagging. Amend the approved premises procedure to include reference to the correct timescales for reports. Review and amend the AES procedure to include specific details on check undertaken by appropriately qualified officers. [The Standard 7.4]	31.3.17	Review and amended the procedure to reference 'red flagging'. Circulate the amended procedure to the Food Standards Team to raise awareness	Email sent to the staff reminding them of the contents of the COP
7.44 (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]	31.3.17	Review and amended the procedure. Circulate the amended procedure to the Food Standards Team to raise awareness.	Email sent to the staff reminding them of the contents of the COP

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
7.44 (ii) Carry out food standards interventions/inspections in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard - 7.2]	Completed 15.4.16	WHoTS data capture forms being used by officers.	During the audit, the WHoTS produced data-capture forms were formally adopted. Food Standards officers have been advised to record more information rather than exception recording
7.44 (iii) Assess the compliance of establishments in its area to the legally prescribed standards and take appropriate action in accordance with its Enforcement Policy. [The Standard – 7.3]	Completed 15.4.16	Ensure compliance with Enforcement Policy	During the audit, an email was sent to staff to emphasise requirement. Internal Monitoring and supervision procedures ensure compliance. Monitoring has been carried out during the year to ensure compliance.
7.44 (iv) Amend its interventions procedures to provide guidance on the process of inspection and details on which establishments are eligible for inclusion in an alternative enforcement strategy [The Standard 7.4]	31.3.17	Prepare a specific procedure to provide guidance on the process of inspection. This will not be part of the ISO9001 procedures.	With reference to Part two of the recommendation, the AES procedure was amended during the week of the audit to reflect that appropriately qualified food officers shall assess AES activity carried out by lesser qualified food officers.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
7.44 (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]	Completed 15.4.16	Use WHoTS developed data capture forms.	During the audit, the WHoTS produced data-capture forms were formally adopted. Food Standards officers have been advised to record more information rather than exception recording
8.8 (i) Amend the relevant procedure to include target response times for food hygiene complaints or service requests. [The Standard - 8.1]	Completed 31.12.16	To review current response time and complaint categories in the FLARE/ APP system and incorporate them into the procedure	Current response time and complaint categories in the FLARE/ APP system have been reviewed and incorporated into the procedure. Email sent to staff to confirm they must have regard to the target response times set.
8.8 (ii) Ensure that food hygiene complaints or service requests are actioned within the timescales set out in local procedures. [The Standard 8.2]	Completed 31.12.16	To review current response time and complaint categories in the FLARE/ APP system and incorporate them into the procedure. Monitor compliance through workload supervision meetings with officers.	Current response time and complaint categories in the FLARE/ APP system have been reviewed and incorporated into the procedure. Email sent to staff to confirm they must have regard to the target response times set.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
11.4 (i) Fully implement its documented procedures for ensuring its database is accurate, reliable and up to date including ensuring information on enforcement actions is correct at all times. [The Standard – 11.2]	Completed 24.2.17	Ensure the existing procedure is fully implemented	Procedures in place to ensure compliance and monitoring arrangements enhanced to improve accuracy of the database.
12.11 (i) Amend 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 and implement the changes. [The Standard – 12.4]	Completed 24.2.17	Review and amend procedures. Circulate the amended procedure to the Food and Health & Safety Team to raise awareness	Procedure reviewed and amended as required. The amended procedure circulated to the Food and Health & Safety Team to raise awareness Email sent to the staff reminding them of the contents of the COP
12.11 (ii) Amend its documented procedure for microbiological sampling of foods to include information relating to the specific equipment required to sample and the authority's storage and transport arrangements, in accordance with the Food Law Code of Practice and centrally issued guidance and implement . [The Standard – 12.5]	Completed 24.2.17	Review and amend procedures. Circulate the amended procedure to the Food and Health & Safety Team to raise awareness	Audit findings discussed with Sampling Officer. Procedure reviewed and amended as required. The amended procedure circulated to the Food and Health & Safety Team to raise awareness .Email sent to the staff reminding them of the contents of the COP

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
12.11 (iii) Amend and implement its documented procedure for the chemical analysis sampling of foods to include information relating to procurement and purchase of samples, which accords with the Food Law Code of Practice and centrally issued guidance. [The Standard – 12.5]	Completed 31.12.16	Review and amend procedures. Circulate the amended procedure to the Food Standards Team to raise awareness	Procedure reviewed and amended as required. The amended procedure circulated to the Food Standards Team to raise awareness Email sent to the staff reminding them of the contents of the COP
12.11 (iv) Take appropriate action in accordance with its Enforcement Policy where sample results are not considered to be satisfactory. [The Standard – 12.7]	Completed 15.4.16	Ensure Internal Monitoring Procedures are followed to assess compliance with this recommendation.	During the audit, an email was sent to staff to emphasise requirement. Internal Monitoring and supervision procedures during the year have sought to ensure compliance.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>15.19 (i) Review, amend and implement its documented enforcement procedures for hygiene improvement notices, remedial action notices and detention notices to include local process information. Document its procedures for undertaking enforcement in relation to the inland control of imported food, simple cautions and prosecutions with respect to Food Hygiene and its detention and seizure procedure with respect to Food Standards. Furthermore, the procedure in relation to Hygiene Improvement Notices should be amended to ensure that appropriate appeal and court details are included on document templates. [The Standard - 15.2]</p>	<p>31.3.17</p>	<p>Prepare a specific procedure in relation to inland control of imported foods. Review and amend procedures. Circulate the amended procedure to the Food and Health & Safety Team, Food Standards Team and Central Support Team to raise awareness</p>	<p>All existing procedures reviewed and amended as required. The amended procedure circulated to the relevant Teams to raise awareness. Email sent to the staff reminding them of the contents of the COP and also discussed with Central Support Team</p>
<p>15.19 (ii) Ensure that food hygiene enforcement including Remedial Action Notices, Hygiene Improvement Notices and voluntary surrenders are carried out in accordance with the Food Law Code of Practice, centrally issued and official guidance and local procedures. [The Standard – 15.2 & 15.3]</p>	<p>Completed 24.2.17</p>	<p>Review and amend procedures. Circulate the amended procedure to the Food and Health & Safety Team to raise awareness</p>	<p>Procedure reviewed and amended as required. The amended procedure circulated to the Food and Health & Safety Team to raise awareness Email sent to the staff reminding them of the contents of the COP</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
15.19 (iii) Ensure all decisions on enforcement action are documented and are made following consideration of the authority's enforcement policy. Document the reasons for any departure from the criteria set-out in the Enforcement Policy. [The Standard - 15.4]	Completed 15.4.16	Officers to ensure rational for decision making is fully documented in premises history.	During the audit, an email was sent to staff to emphasise requirement. Internal Monitoring and supervision procedures ensure compliance.
16.11 (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 (including copies of food inspection reports), the determination of compliance with legal requirements made by the authorised officer, details of action taken where non-compliance was identified and details of any enforcement action taken. [The Standard – 16.1]	Completed 24.2.17	All Food Officers to be reminded of need to capture all information not just exception recording. Ensure WHOTS inspection forms are used.	During the audit, an email was sent to all Food officers advising them to record more information rather than exception recording. This information is being recorded on the WHoTS data capture forms and New Food Safety Inspection Report Forms. The forms are scanned onto the FLARE database record for the premises.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
16.11 (ii) Ensure that businesses, including their head offices, 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]	Completed 30.6.16	Improve procedure to ensure correct service of documents.	Instruction issued to Food officers in respect of reports being supplied to head office as well as local premises. New Food Safety Inspection Form which meets all requirements of Annex 6 printed and adopted in June 2016.
16.11 (iii) Ensure that records are kept for at least 6 years. [The Standard – 16.2]	Completed 30.4.16	Review of Document/ Record retention guidance for Central Support Team.	Document/ Record retention guidance for Central Support Team reviewed.
19.10 (i) For the food standards service, expand its procedures to verify its conformance with the Standard, relevant legislation, the relevant Codes of Practice, centrally issued guidance and the authority's documented policies and procedures. [The Standard – 19.2]	Completed 30.4.16	Review of existing procedures to address findings of the audit.	Procedures amended: <ul style="list-style-type: none"> • to include AES activity • to record team manager / senior officer monitoring for complaints and sampling activity

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:

- Rhondda Cynon Taf County Borough 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
- Rhondda Cynon Taf County Borough Council – Environmental Services Scrutiny Committee Agenda item 4 – 27 January 2014
- Rhondda Cynon Taf County Borough 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
- Rhondda Cynon Taf County Borough Council – Advice to Business
- Rhondda Cynon Taf County Borough 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
- Rhondda Cynon Taf County Borough 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:

- Food and Health & Safety Manager
- Senior Environmental Health Officer
- Environmental Health Officers, including officer with lead responsibility for communicable disease
- Senior Technical Assistant
- Trading Standards Manager
- Senior Food and Agricultural Standards Officer
- Senior Trading Standards Officer
- Trading Standards Officers including officer with lead responsibility for food standards

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 four 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 Agency 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.