



Report on the Food Law Enforcement Services

Shared Regulatory Services
15th – 23rd March 2017

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:

https://signin.riams.org/files/display_inline/45532

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:

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

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:

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

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.

Contents

1	Introduction	4
	Reason for the Audit.....	4
	Scope of the Audit	4
	Background	5
2	Executive Summary	9
	Audit Findings	14
3	Organisation and Management.....	14
4	Review and Updating of Documented Policies and Procedures	18
5	Authorised Officers	19
6	Facilities and Equipment.....	21
7	Food Establishments Interventions and Inspections	22
	Food Hygiene	22
	Port Health	28
	Food Standards.....	29
8	Food, and Food Establishments Complaints	34
	Food Hygiene	34
	Food Standards.....	34
9	Primary Authority Scheme and Home Authority Principle	36
10	Advice to Business	37
11	Food Establishments Database	38
12	Food Inspection and Sampling	40
	Food Hygiene	40
	Food Standards.....	41
13.	Control and Investigation of Outbreaks and Food Related Infectious Disease	43
14	Food Safety Incidents	45
15	Enforcement	46
16	Records and Interventions/Inspections Reports	51
	Food Hygiene	51
	Food Standards.....	52
17	Complaints about the Service	54
18	Liaison with Other Organisations	55
19	Internal Monitoring	57
20	Third Party or Peer Review	59
21	Food Safety and Standards Promotion	60
<u>Annexes</u>		
	Action Plan for Shared Regulatory Services.....	62
	Audit Approach/Methodology	75
	Glossary	80

1 Introduction

- 1.1 This report records the results of an audit of food hygiene and food standards at the Shared Regulatory Services of Bridgend, Cardiff and the Vale of Glamorgan Councils under the headings of the FSA Feed and Food Law Enforcement Standard. It has been made publicly available on the Agency's website at <https://www.food.gov.uk/other/local-authority-audits-2010-2017-wales>

Reason for the Audit

- 1.2 The power to set standards, monitor and audit local authority food and feed law enforcement services was conferred on the FSA by the Food Standards Act 1999 and the Official Feed and Food Controls (Wales) Regulations 2009. The audit of the food services at Shared Regulatory Services 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 and 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 service 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 Shared Regulatory Services' arrangements for the delivery of food hygiene and food standards enforcement services. The on-site element of the audit took place at the services' offices at the Civic

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).

Office, Holton Road, Barry, CF63 4RU between 15th – 23rd March 2017 and included verification visits at food businesses to assess the effectiveness of official controls implemented by the service, and more specifically, the checks carried out by the services' 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 services' conformance against "The Standard". The Standard was adopted by the FSA Board on 21st September 2000 (It 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 https://signin.riams.org/files/display_inline/45532
- 1.8 The audit also reviewed the action taken by the services in relation to two previous FSA audits – the full audit of Bridgend County Borough Council's food services undertaken in 2013 and the Shellfish Traceability and Authenticity exercise undertaken at Cardiff Council in 2014.

Background

- 1.9 Shared Regulatory Services (SRS) is a collaborative service formed between Bridgend, Cardiff and the Vale of Glamorgan Councils on 1st May 2015. The new Service delivers an integrated service under a single management structure for Trading Standards, Environmental Health and Licensing functions with shared governance arrangements. This is a significant transformational change involving the merger of the relevant regulatory functions of the three local authorities. This includes the food hygiene and food standards services.
- 1.10 The services cover the areas of Bridgend, Cardiff and Vale of Glamorgan unitary authorities in south-east Wales. There are borders with four other local authority areas – Neath-Port Talbot to the north-west, Rhondda-Cynon-Taf and Caerphilly to the north and Newport to the east.
- 1.11 The remainder of the border is made up of the coastline which runs from the Wentloog area in the east, past the Rhymney River estuary, the

mouths of the Taf and Ely rivers at Cardiff Bay, Lavernock Point, Barry Docks, Whitmore Bay, along the Bristol Channel to Nash Point before tracking the south-west coast past Dunraven Bay, the Ogmore estuary and Porthcawl towards the Kenfig sand dunes. The area includes Flat Holm and Sully Islands, and the river valleys of the Ogmore, Llynfi and Garw.

- 1.12 The area is both rural and urban. The City of Cardiff and towns of Bridgend and Barry are the main administrative and commercial centres, with many other towns and villages situated amongst areas of natural beauty; including the coastal attractions of Porthcawl, Ogmore, Southerndown, Llantwit Major, Barry Island and Penarth.
- 1.13 According to the 2011 Census, the authorities making up the SRS area had a combined population of 588,836 and this was estimated to have exceeded 625,000 during 2015. The population density is the highest in Wales. Approximately 90% of the population was White, whilst the number of Welsh speakers was, on average, 10.5% of the population; amongst the lowest levels in Wales.
- 1.14 Cardiff is the commercial, financial and administrative centre of Wales and its population rises by 70,000 commuters and visitors each day. The night-time economy can attract over 40,000 people and sometimes more than 100,000 when the city's Millennium Stadium hosts international events. The economy of the region also includes tourism, and agriculture. The population increases significantly due to tourism in the summer months and the main tourist centres outside of Cardiff are Porthcawl and Barry Island. There are also three ports at Cardiff Docks, Barry Docks and Cardiff International Airport requiring the inspection of vessels under both food safety and international health regulations. The importation of food of animal origin from outside of the European Community does not currently take place, however, food not of animal origin is imported at Cardiff.
- 1.15 Cardiff contains overall indicators of deprivation worse than the Wales averages as determined by the 2014 Welsh Index of Multiple Deprivation and Bridgend is similar to the Wales averages, whilst the Vale of Glamorgan is better than the Wales averages for overall indicators of deprivation. However, Cardiff is rated similar to the Wales average with regards to employment and better than average with regards to access to

services. Bridgend is more deprived than average with regards to employment, health and education but better than average with regards to access to services, community safety, the physical environment and housing. The Vale of Glamorgan is rated similar to the Wales average with regards to community safety and the physical environment.

- 1.16 Food hygiene law enforcement was being carried out by officers in the area Food and Port Health Teams in Commercial Services and also in the Industry and Major Investigations Teams within Enterprise and Specialist Services. Food standards law enforcement was being carried out by officers in the Trading Standards team in Commercial Services and also in the Industry and Major Investigations Teams within Enterprise and Specialist Services.
- 1.17 Officers and support staff responsible for food hygiene and food standards were based at the Civic Offices, Angel Street, Bridgend, Civic Offices, Holton Road, Barry, and at Cardiff County Hall, Atlantic Wharf, Cardiff.
- 1.18 The service reported that it had a guaranteed 24 hour emergency out-of-hours service. The out-of-hours service was not tested as part of the audit.
- 1.19 At the beginning of 2015/16 there were around 6000 food establishments in the SRS region, of which 13 were approved food establishments.
- 1.20 The authority had just over 41 full time equivalent (FTE) officers involved in the delivery of food hygiene and food standards with contractors being used to cover absences.
- 1.21 The authority provided officers with opportunities for continuous professional development in their field of work. A training budget was available across the whole service and this was being maintained year on year.
- 1.22 The annual budget for food law enforcement and associated activities was not specified in the service plan but a figure of £ 3,520,442 was provided for the entirety of the teams involved in food. However as those teams undertake other work, this figure does not reflect the allocation to food only. As this was the first year of the service, no trend was available.
- 1.23 The service 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 4999 food establishments in the region were available to the public on the National Food Hygiene Rating Scheme website.

2 Executive Summary

- 2.1 The audit examined Shared Regulatory Services' 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 Service's officers, to verify food business operator (FBO) compliance with legislative requirements. The scope of the audit also included an assessment of the Service's overall organisation and management, and the internal monitoring of food law enforcement activities.
- 2.2 Shared Regulatory Services (SRS) is a collaborative service formed between Bridgend, Cardiff and the Vale of Glamorgan unitary authorities on 1st May 2015. The new Service delivers an integrated service under a single management structure for Trading Standards, Environmental Health and Licensing functions with shared governance arrangements. This includes the food hygiene and food standards services. The service aims to realise benefits from the merger, including improved resilience and enhanced joint working practices.
- 2.3 The Head of Shared Regulatory Services had overall responsibility for the delivery of food hygiene and food standards services within Shared Regulatory Services. Operational Managers had responsibility for specific service areas and day to day management was the responsibility of the various Team Managers.
- 2.4 The Service had service planning arrangements in place together with systems for on-going monitoring, reviewing and reporting performance. Service planning documents contained some but not all the information set out in the Service Planning Guidance in the Framework Agreement including the requirements to plan work in accordance with the Food Law Code of Practice and to estimate the resources required to deliver the services.
- 2.5 Arrangements were in place to ensure effective service delivery by appropriately authorised, competent officers. Officers had mostly been authorised in accordance with their qualifications, training and experience, however, the need to review authorisations to ensure all officers are authorised in accordance with their qualifications was identified. Additionally, the Service had identified capacity issues and would benefit

from ensuring a sufficient number of authorised officers are employed to deliver the work detailed within the service plan and in accordance with the Food Law Code of Practice.

- 2.6 A documented work procedure had been developed to ensure the accuracy of the Service's food establishments' database. Audit checks identified that although food establishment information was mostly up to date, improvements are required in relation to the accuracy of risk rating data and due dates for both food hygiene and food standards and also enforcement data for food hygiene. The Service was midway through introducing a new database as part of a collaboration project to procure new Public Protection software for adoption by local authorities across Wales in order to improve consistency and value for money. The Service had been able to provide Local Authority Enforcement Monitoring System (LAEMS) returns to the FSA.
- 2.7 Record and database checks confirmed that the food hygiene service had prioritised inspections of higher-risk businesses and approved establishments whilst some establishments, mostly lower risk, were not being inspected at the frequencies required by the Food Law Code of Practice and centrally issued guidance. Food standards inspections in establishments known to be high risk had generally been delivered in accordance with the Food Law Code of Practice and centrally issued guidance whilst some medium and low risk establishments were not being inspected at the frequencies required by the Food Law Code of Practice and centrally issued guidance. However, a significant number of establishments required a primary inspection to ensure they were properly included in the food standards intervention programme.
- 2.8 Inspection records demonstrated that a thorough assessment of business compliance had taken place during most food hygiene inspections and for food standards where updated inspection forms were in use. However, in some cases, including most food standards inspections and for some approved establishments; insufficient information was available in some aspects of intervention records to demonstrate that a thorough assessment had been undertaken by officers in accordance with the Food Law Code of Practice.
- 2.9 Revisits and most follow up action was being carried out as required for both food hygiene and food standards interventions; with some exceptions

relating to follow up of food hygiene issues. Most food standards interventions were being risk rated in accordance with the Food Law Code of Practice but this was not always the case, due to a non-food specific rating system being used. Whilst food hygiene risk ratings were generally in accordance with inspection findings, particularly for approved establishments, some ratings were not consistent.

- 2.10 Food hygiene and food standards inspection records and 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. The need to improve the retention of food standards records and reports was also identified.
- 2.11 Food standards sampling interventions, notifications of food related infectious disease and food incident interventions had taken place in accordance with the Food Law Code of Practice. However, not all food and food establishment complaints or food hygiene samples had been appropriately investigated or appropriate records maintained.
- 2.12 The Service had been proactive in providing advice and guidance to food businesses. Initiatives had also taken place to promote food hygiene and food standards.
- 2.13 Where formal enforcement action had been taken it had been appropriate in the circumstances. However, in a number of cases where enforcement action was an option, decisions had been taken not to proceed in accordance with the Compliance and Enforcement Policy but the reasons had not been documented. In some cases the appropriate processes had not been followed as required by the Food Law Code of Practice and official guidance.
- 2.14 There was some evidence of internal monitoring of food hygiene and food standards services. Full implementation of the authority's internal monitoring procedures will assist in securing the necessary improvements.
- 2.15 Significant progress had been made in implementing requirements following a full food audit of Bridgend Council in 2013, a follow up of that audit in 2015 and a focussed shellfish traceability and authenticity

exercise in Cardiff Council during 2014. The outstanding requirements have been absorbed into the recommendations of this report.

2.16 The Service's Strengths

Advice to businesses

The Service 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 Service's investigation of outbreaks and notifications of infectious disease included areas of good practice. Records of food related infectious disease demonstrated that appropriate investigations had consistently been carried out.

Incidents

The Service 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 robust arrangements in place to liaise with neighbouring local authorities and other appropriate bodies to facilitate consistent enforcement.

Food Safety and Standards Promotion

The Service had delivered a number of initiatives with the aim of promoting food hygiene and standards. The Service demonstrated good practice in using a Media and Promotion Plan to co-ordinate its promotional activity.

2.17 The Service's Key Areas for Improvement

Authorised Officers

The Service should ensure it appoints the required number of officers in accordance with the staff resource assessment required in the service plan.

Food Establishments' Database

The Service's database included errors with regards to risk ratings and due inspection dates for both food hygiene and food standards inspection

programmes including a significant number of establishments requiring a primary food standards inspection.

Food Hygiene and Food Standards Intervention Frequencies

The Service had not carried out food hygiene and food standards interventions at the minimum frequencies required by the Food Law Code 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 Interventions and Inspections, Records and Reports

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. Intervention / inspection reports provided to food business operators did not always contain all the information required by the Food Law Code of Practice and had not always been retained.

Audit Findings

3 Organisation and Management

Strategic Framework, Policy and Service Planning

- 3.1 Food law enforcement was overseen by the Shared Regulatory Services Joint Committee on behalf of each of Bridgend, Cardiff and the Vale of Glamorgan councils. The service's Joint Working Agreement set out its decision-making arrangements. Under the Joint Working Agreement, decisions on most operational matters had been delegated to the Head of Shared Regulatory Services.
- 3.2 A 'Food and Feed Law Service Plan 2016/17' ('the Service Plan') had been developed by the service along with a separate Port Health Service Plan 2016/17 and the higher level SRS Business Plan 2016/17. There was evidence that the Service Plan had been approved by the Shared Regulatory Services Joint Committee.
- 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 Service, the scope of the service and organisational structure chart for the Public Protection department. The times of operation, service delivery points and aims and objectives of the service were clearly set out.
- 3.4 The service plan indicated that there were 5876 food establishments in SRS.
- 3.5 The profile of businesses in SRS were provided by establishment type for food hygiene and food standards. The number of planned interventions due in 2016 / 17 was provided by risk rating.
- 3.6 In respect of food hygiene the following information was provided in the Service Plan:

Risk Category	Interventions due (including any backlog)		
	Bridgend	Cardiff	Vale of Glamorgan
A	6	80	14
B	73	234	66
C	413	893	358
D	101	580	111
E	138	525	225
Unrated (existing)	47	39	31
New businesses identified in the year	Est 159	Est 650	Est 159
Total	937	3001	964

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 risk category A & B establishments but only 80% of category C establishments.

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

3.9 The number of revisits previously undertaken had also been identified and the Plan would benefit from estimating the number of such revisits expected in the coming year.

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

Risk Category	Interventions due (including any backlog)		
	Bridgend	Cardiff	Vale of Glamorgan
High	9	114	6
Medium	204	764	362
Low	306	661	312

3.11 The targets and priorities for food standards were unclear in relation to obligations under the Food Law Code of Practice. Auditors were advised that there was a commitment to deliver all inspections / interventions due at high risk establishments and within new businesses. The Service Plan would benefit from documenting this commitment and to also document the commitments with regards to medium and low risk establishments in relation to the obligations under the Food Law Code of Practice.

- 3.12 The number of revisits had not been identified and the Plan would benefit from estimating the number of such revisits expected in the coming year.
- 3.13 The Service's priorities and intervention-targets as set out in the Service Plan for food hygiene were risk based.
- 3.14 The resources available to deliver food law enforcement services were detailed in the Service Plan as 35.5 full time equivalent officers (FTEs) for food hygiene and 5.88 FTE for food standards. The FTE for administrative support staff had not been provided. A breakdown was provided of the different levels of officers available by qualification.
- 3.15 The Service had indicated the likely demand, based on previous years, for all aspects of food service delivery except for requests for advice and port health interventions. However, no estimates were provided for the resources required for each aspect of food service delivery. Further, an overall assessment of the resources required to deliver the full range of food official controls against those available had not been provided.
- 3.16 The Service Plan included information on the Service's Enforcement Policy and its approach to staff development. The necessity to undertake work on weekends and out-of-hours had been clearly stated.
- 3.17 The Plan confirmed that the service had entered into three Primary Authority arrangements but the Service Plan did not identify the obligations under the Home Authority principle including its commitments to support locally based manufacturers and other regulators as an Originating Authority.
- 3.18 Arrangements for internal monitoring or 'quality assessment' of the food hygiene service were set-out in the Service Plan which would benefit from expansion to include the arrangements for quantitative monitoring assessments.
- 3.19 The overall costs of providing food law enforcement services had been provided in the Service Plan including a breakdown of some non-fixed costs such as staffing, travel and subsistence and sampling. Further information with regards to the trend in growth or reduction of the budget, should be provided in future plans in accordance with the Service Planning Guidance.

- 3.20 The Service Plan set out how the Service's performance in delivering food official controls would be reviewed against the previous year's plan and information on the latest review was included in the service plan. It was noted that the review did not cover all service targets including the number of new businesses inspected for food standards and the timeliness of responses to service requests.
- 3.21 Variations in achieving the targets set-out in the previous Service Plan were identified throughout the 2016 / 17 Service Plan. Variances for the food hygiene new business interventions and medium and low risk food standards interventions had not been explained as required by the service planning guidance.
- 3.22 The Service had incorporated a number of areas for improvement in its 2016 / 17 Service Plan but these did not address the provision of resources so as to fully resolve the root cause of each variance.

Recommendations

- 3.23 The Service should:
- (i) Ensure future Service Plans for food hygiene and food standards are developed in accordance with the Service Planning Guidance in the Framework Agreement. In particular, an estimate of the resources required to deliver the services against those available should be provided. [The Standard – 3.1]
 - (ii) Ensure the annual performance review includes all information on the previous year's performance against the food service plan and any specified performance targets, standards and outcomes. [The Standard – 3.2]
 - (iii) Ensure all variances in meeting the food service plan is addressed in its subsequent plan. [The Standard – 3.3]

4 Review and Updating of Documented Policies and Procedures

- 4.1 A document control procedure had been developed for the food hygiene and food standards services. The procedure included control over the production, approval, review, updating and storage of policies, procedures and associated documents.
- 4.2 Documents were stored electronically and were protected from unauthorised access. Hard copies of these documents were also available to provide access in the event of computer failure.
- 4.3 Managers were responsible for developing 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. Parts of the service had previously had access to legislation and guidance through the information portals and the service was considering providing officers with access to a legal services portal in the future.
- 4.5 Documents had been subject to review in line with the procedures.

5 Authorised Officers

- 5.1 The Service's Scheme of Delegation of Powers to Officers, contained within the Joint Working Agreement provided the Head of Shared Regulatory Services with delegated powers to execute all duties relating to both the food hygiene and food standards services. This included the delegated authority to authorise other officers and to authorise legal action in conjunction with the Head of Legal Services for the relevant authority.
- 5.2 A documented procedure had been developed for the authorisation of food hygiene and food standards officers based on their qualifications and experience.
- 5.3 Lead officers for food hygiene, food 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 Service Plan stated that resources had prevented the Service from planning its intervention programmes in accordance with the minimum statutory standards laid out in the Food Law Code of Practice. It aimed to achieve only 80% of high risk category C food hygiene interventions and only high risk and new food standards interventions. Resources had also been identified as the reason for failing to undertake the planned programme of medium and low risk food hygiene interventions. Further, there were a significant number of overdue interventions identified during an analysis of the database, including a large number of unrated food standards establishments. This operational backlog that will add to the resource burden. The Service should ensure it appoints the required number of officers in accordance with the staff resource assessment required in the Service Plan.
- 5.5 The Service has systems in place to identify officer training needs including individual training needs assessments and internal monitoring activities. The Service 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 Service is able to fund training from the whole SRS budget where a need has been demonstrated.

- 5.6 An examination of the authorisation, qualification and training records of 10 officers involved in the delivery of official food controls was undertaken. The arrangements for maintaining training records had recently been amended to ensure records were being maintained by the authority for officers on the Council's computer folders.
- 5.7 Six officers had been authorised in accordance with evidence of their qualifications, training and experience. The remaining four officers had been given powers which they did not require in practice and were not qualified to exercise. Authorisations had been signed by an officer with the delegated authority and included all of the key legislation required for the delivery of the range of official food controls.
- 5.8 Academic and other relevant qualifications were available for all but one officer and there was evidence for all but two officers that they had received the minimum 10 hours of CPD required by the Food Law Code of Practice and the authority's own policies in keeping with their duties. Further, all officers had received the necessary training to deliver the technical aspects of the work for which they are involved.

Recommendations

- 5.9 The Service should
- (i) Ensure an appropriate number of authorised officers are appointed to deliver food hygiene and food standards official controls in accordance with the Food Law Code of Practice. Ensure the level of authorisation of officers is consistent with qualifications, training and experience in all cases. [The Standard – 5.3]
 - (ii) Ensure all authorised officers meet the training requirements set out in the Food Law Code of Practice. [The Standard – 5.4]
 - (iii) Maintain records of all relevant training and experience for authorised officers. [The Standard – 5.5]

6 Facilities and Equipment

- 6.1 The authority had the necessary facilities and equipment required for the effective delivery of food hygiene and food standards services, which were appropriately stored and accessible to relevant officers.
- 6.2 A Calibration and Maintenance of Equipment Procedure had been developed. This detailed the arrangements for ensuring that equipment was properly stored and maintained and that thermometers were properly identified, assessed for accuracy and withdrawn from use when found to be faulty. The procedure made reference to testing including in use checks, together with action to be taken where tolerances were exceeded. The tolerances being applied were in accordance with centrally issued guidance.
- 6.3 Officers had been supplied with thermometers, which were being calibrated against each other or the reference thermometer whilst in use and calibrated in a laboratory at least annually. Records relating to calibration were being maintained by the authority.
- 6.4 An examination of records relating to the latest calibration checks confirmed that all were within acceptable tolerances in accordance with the authority's procedure and with regard to centrally issued guidance.
- 6.5 The authority's food databases were capable of providing the information required by the FSA.
- 6.6 The food databases, 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 2015/2016 the authority reported through LAEMS that of the 6065 food businesses within its area 76.63% of food establishments due to be inspected had been inspected. All category A establishments due had received an inspection. Furthermore, 87.57% of food businesses were 'broadly compliant' with food hygiene legislation. This was a slight decrease from 88.17% in the previous year.
- 7.2 The Service provided data prior to the audit which confirmed there were 5934 food businesses on the authority's food hygiene establishment database. 156 establishments were recognised by the Service as being unrated. Information provided during the audit indicated that the Service had adopted a mostly risk-based approach to managing its food hygiene intervention programme. At the time of the audit, 653 establishments were overdue for intervention in accordance with the code of practice; of which 194 were classed as higher risk (Category C) and 459 were classed as lower risk.
- 7.3 The Service had developed documented procedures aimed at establishing a uniform approach to carrying out food hygiene interventions. Procedures were also in place for interventions at approved establishments. An examination of these procedures confirmed that all were generally in accordance with the requirements of the Food Law Code of Practice and relevant centrally issued guidance. Auditors discussed the benefit of including details regarding specific information in relation to red flagging. Further, the Service would benefit from including details in relation to the notification of Primary, Home or Originating authorities following the conclusion of interventions.
- 7.4 A food hygiene inspection aide-memoire had been developed by the Service to assist officers with inspecting food establishments and to ensure that a thorough record of visits was recorded on file. Auditors noted that the aide-memoire would benefit from a section relating to checks for inland imported foods.
- 7.5 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 cases, two category C rated establishments had been overdue an intervention by between two and five months. The Food Law Code of Practice requires that interventions take place within 28 days of their due date.

- 7.6 Inspection records were available and legible for all food establishments audited and in nine cases, sufficient information had been captured to enable auditors to verify the size, scale and scope of the business operations. In the remaining case, insufficient evidence had been documented in relation to the scale of an operation undertaken at a particular food establishment.
- 7.7 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 in all but one case. In the remaining case, auditors noted that an overall assessment of the effectiveness of the HACCP system had been made but all aspects of the establishment's HACCP had not been fully considered.
- 7.8 In all but one case, auditors were able to confirm that officers had fully retained the core elements of the business' HACCP plan on file. In the remaining case, omissions related to the level of detail recorded at a single process step.
- 7.9 In all cases, inspection records confirmed that officers had undertaken an appropriate assessment of the effectiveness of cross contamination controls in accordance with centrally issued guidance.
- 7.10 Auditors were able to confirm that, in all relevant cases, information on food hygiene training undertaken by employees had been captured by officers and in all but one case, discussions with food handlers responsible for monitoring and undertaking corrective actions at critical control points had been documented. In the remaining case, although members of staff had been spoken to, auditors were unable to verify whether discussions had occurred with a food handler.
- 7.11 Where appropriate, supplier and customer information in relation to traceability was recorded in all cases and in all but one case an assessment of imported foods being handled had been made. However,

auditors were unable to confirm in all cases whether the Health / Identification marks of incoming goods had been considered.

- 7.12 Auditors were able to confirm that appropriate action had taken place to follow up matters identified during previous interventions in all but one case. In the remaining case, limited information was available on the record to demonstrate that the source of the problem had been adequately addressed and documented.
- 7.13 The risk ratings applied to establishments were consistent with the inspection findings in eight cases. However, in one remaining case, auditors noted that, information on the file relating to follow up activity, was not consistent with the “broadly compliant” risk rating awarded. In the other case, auditors noted that the, issues identified by the officer did not reflect the establishment’s compliance with hygiene procedures or confidence in management/control procedures score.
- 7.14 Auditors where able to confirm that appropriate action had been taken in light of the most recent inspection findings in all but two cases. In one of the remaining cases, auditors were unable to confirm whether appropriate action had been taken with regards to controls at Critical Control Points. In the other case, no evidence of a revisit was available where this was indicated as necessary.
- 7.15 The Service informed the FSA prior to the audit that there were 17 approved establishments in its area, of which the records relating to six were examined.
- 7.16 Two of the establishments were approved by Bridgend Council and information on the process of approval has been reported in that authority’s full audit report. Of the remaining four establishments, in two cases, auditors were able to confirm that the respective authority had followed the appropriate process of issuing approvals to establishments. Of the remaining cases, it was noted that the approval process took place before the creation of the combined service in both cases. In one of these cases, auditors noted that conditional approval had exceeded the statutory six month period and in the other case, full approval had been granted whilst the establishments HACCP had not been fully validated.
- 7.17 In all but two cases, the authority had not stipulated any arrangements, conditions or derogation in relation to the full approval of the

establishment. In one of the remaining cases, auditors were unable to verify whether arrangements were in place, as the notification was not available, whilst in the other case the authority had specified a condition which limited the approved establishment to sourcing raw ingredients from a co-located cutting plant.

- 7.18 Auditors were able to confirm in four out of six cases that recent inspections at the establishment had been undertaken at the frequency required by the Food Law Code of Practice by correctly authorised officers. In the remaining cases, two C rated establishments had been subject to an intervention between three and eight months after its due date. The Food Law Code of Practice requires that interventions take place within 28 days of their due date.
- 7.19 Inspection records were available and legible for the six 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 in five cases. In the remaining case, this information had not been captured by the officer on the inspection aide-memoir.
- 7.20 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 in two cases. In three cases, insufficient information regarding product specific requirements had been documented and in one case, a single element of an establishment's production steps had not been assessed.
- 7.21 Auditors were able to confirm that officers had assessed the use of health marks and commercial documents by the business in two cases. Additionally, in four applicable cases, auditors were unable to verify that identification / health marks of raw materials had been adequately assessed.
- 7.22 Auditors were able to confirm that in five cases, an adequate assessment of training and discussions with food handlers other than the food business operator had taken place. In the remaining case, insufficient

evidence had been documented to allow auditors to verify that these checks had taken place.

- 7.23 In all cases the risk ratings that had been applied to approved establishments were consistent with the inspection findings.
- 7.24 The Service had developed an Alternative Food Safety Intervention procedure which detailed its approach to both category D and E rated premises in accordance with the requirements of the Food Law Code of Practice. Auditors discussed the benefit of including its approach to businesses that do not respond to AES self-assessment questionnaires in E rated establishments.
- 7.25 Prior to the audit the authority provided a list of AES activity that had been undertaken. A total of 10 files were selected for examination.
- 7.26 In all cases, evidence was available to show that an initial primary inspection to conduct a risk rating assessment had been undertaken by an appropriately qualified officer. All selected premises had been rated as category E and were eligible for AES.
- 7.27 A combination of either a self-assessment postal questionnaires or a site visit to gather information were used as an AES in all cases examined. All interventions were recorded as AES activity on the authority's database and evidence was available to demonstrate that information used for the purposes of AES had either been collected or reviewed on receipt by an appropriately authorised and qualified officer.
- 7.28 In nine cases, auditors noted that there were no significant changes documented in business activity requiring further action of the authority. In the remaining case, auditors were unable to verify that where a self-assessment indicated that the food business operator and activities had changed, whether the establishment had been identified as requiring an intervention.
- 7.29 In five out of 10 AES interventions, auditors were able to confirm that they had been undertaken in line with the frequencies prescribed within the Food Law Code of Practice. In the remaining cases, auditors noted that interventions had occurred between two months and eight months after their due date.

Recommendations

- 7.30 The Service should:
- (i) Ensure that food hygiene interventions/inspections are carried out at the minimum frequency specified by the Food Law Code of Practice. [The Standard -7.1]
 - (ii) Carry out food hygiene interventions / inspections and approve and register establishments in accordance with the Food Law Code of Practice, centrally issued guidance and its procedures. In particular, ensure that, where applicable, intervention risk rating is undertaken consistently and the alternative enforcement scheme is carried out 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 and take appropriate action on any non-compliance found, in accordance with its enforcement policy. [The Standard -7.3]
 - (iv) Ensure that the documented procedures for interventions are reviewed to include reference to the local arrangements for red flagging, timescales for revisits and a direction to officers as to whether to take samples. Additionally, amend the Alternative Food Safety Intervention Procedure, to advise on action to be taken with unresponsive businesses. [The Standard 7.4]
 - (v) Ensure that observations made and/or data obtained in the course of a food hygiene intervention/inspection are recorded in a timely manner to prevent the loss of relevant information. [The Standard – 7.5]

Verification Visits to Food Establishments

- 7.31 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.

- 7.32 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.

Port Health

- 7.33 Specialist officers within the Food and Port Health teams were responsible for the inspection of vessels / aircraft docking /landing at the Ports of Cardiff and Barry and Cardiff Airport and issuing sanitation certificates.
- 7.34 The Service had set up a comprehensive procedure for the administration of sanitation certificates in accordance with the International Health Regulations 2005. The authority was undertaking imported food checks on food not of animal origin through advance submission and review of vessel manifests.
- 7.35 Nine vessel files were checked comprising of two sanitation checks and seven boarding checks.
- 7.36 In relation to Ship Sanitation inspections, auditors were unable to verify in both cases, that the authority had fully undertaken an intervention in accordance with centrally issued guidance. Further, auditors were unable to verify that on discovery of a significant issue on a ship registered in a third country, whether the FSA had been notified of the issue in order to liaise with competent authorities in the relevant country.
- 7.37 In relation to boarding checks, auditors were able to confirm that these had been conducted in accordance with centrally issued guidance in all but one case. In the remaining case, where a Sanitation Control certificate had been issued, auditors noted that the certificate had not been completed in line with the authority's procedure.
- 7.38 In all cases, there was evidence that the reports of interventions had been communicated to the Master. However auditors were unable to verify in all but two cases whether the purpose of the inspection had been clearly

communicated. Further, reports did not consistently provide all provisions as required by centrally issued guidance, specifically the build date of the ship, samples taken by the officer and the officer's designation.

- 7.39 Auditors were unable to verify that a report had been provided to both the owner of the ship or the shipping company and /or home authority in all cases.

Recommendations

- 7.40 The Service should:
- (i) Carry out ship inspections in accordance with the Food Law Code of Practice, centrally issued guidance and its procedures. In particular, ensure that, inspection reports and ship exemption certificates are completed in line with its procedures. [The Standard – 7.2]
 - (ii) Fully assess the compliance of establishments in its area to the legally prescribed standards. [The Standard -7.3]

Food Standards

- 7.41 In 2015/16 the Service had reported through LAEMS that 46.9% of A-C rated food businesses due to be inspected had been inspected. This was a decrease of 22.1% from 69% in the previous year.
- 7.42 Data provided prior to the audit confirmed there were 6887 food businesses on the authority's food standards establishment database. 766 of these establishments were recognised by the Service as being unrated whilst 1251 of these establishments were identified as low risk, with a category C rating but had not received an inspection based rating. A further 311 premises had been placed outside of the programme. It was recognised that many of these unrated establishments or those outside of the programme required an inspection in accordance with the Food Law Code of Practice. There were also a total of 804 food establishments that were overdue a food standards intervention, of which, 4 were high risk, 372 were medium-risk and 428 were low-risk. Whilst it was recognised that the authority was attempting to implement a risk based approach to

interventions, auditors were unable to conclude that this was currently being achieved.

- 7.43 The Service had developed a food standards inspection and revisit procedure which set out its approach to existing food establishments. Auditors discussed that the procedure would benefit from review to include specific details in relation to the local arrangements for recording significant breaches and the timescales for follow-up, details around announced / unannounced inspections and the approach to dealing with new food business inspections.
- 7.44 The procedures included a selection of template documents and aides memoir that covered manufacturing premises, hygiene officer's hazard spotting checklists and a report of an inspection form. Auditors discussed that template documents would benefit from a specific template for food standards interventions in non-manufacturing premises to assist officers in undertaking a full scope inspection in accordance with the Food Law Code of Practice. The template forms used contained sufficient fields to facilitate the capture of observations made and/or data obtained in undertaking a full scope assessment of business compliance with requirements relevant to food standards.
- 7.45 Ten food standards interventions were selected for audit. Audit checks were undertaken on records held on the Service's database and in hardcopy for the food establishments reported to have been subject to food standards inspections.
- 7.46 Records relating to the latest inspection were retrievable in eight cases, in the remaining two cases, relating to interventions in manufacturing establishments, no inspection record was available despite a visit date and risk rating being applied to the establishment. Of the remaining eight cases, auditors were able to confirm that interventions had been undertaken at the correct frequency in one case. In six of the remaining cases no previous risk rating data was available in accordance with Annex 5 of the Food Law Code of Practice and as such, an assessment could not be made. In the final case, the last intervention at a medium risk establishment was overdue by 3 months.
- 7.47 In the eight cases where latest inspection records were retrievable, these were legible and officer's observations had been captured using a range

of different forms and aide-memoires. One inspection record was recorded on the current food standards inspection aide-memoire whilst the remaining inspections pre-dated the latest procedure and were recorded on a range of different forms from each individual partner local authority.

- 7.48 Auditors were able to confirm that officers had captured the size, scale and scope of the business in four cases, whilst in the remaining four cases insufficient information was recorded to demonstrate the size or scale of the operations carried out. In all cases auditors were able to establish the type of activity undertaken.
- 7.49 Auditors noted that in the one case where the new procedural template forms had been used, sufficient detail was recorded to show that a thorough assessment of food standards requirements had taken place. Auditors discussed that the new procedure and accompanying template forms would assist in achieving compliance in these areas moving forward. In all remaining cases further information was required to demonstrate full assessments in accordance with the Food Law Code of Practice had been undertaken by officers.
- 7.50 In cases which were subject to previous interventions and enforcement action, evidence was available to confirm that appropriate action had been taken to assess the current standards of compliance during the most recent intervention.
- 7.51 In six cases, risk ratings applied were consistent with the officer's findings and in accordance with the Food Law Code of Practice. In the remaining two cases food establishments had been risk rated using a non-food specific scheme which was not in accordance with the Food Law Code of Practice. In a separate case auditors noted that a risk rating score had not been recalculated by the database and as such was displaying incorrectly.
- 7.52 In respect of the most recent inspections, auditors were able to verify that appropriate action had been taken in light of inspection findings and where records indicated that follow-up action was required, evidence was available to confirm this had taken place.
- 7.53 Auditors were able to confirm that, in all cases, interventions were carried out on an unannounced basis.

7.54 Information provided prior to the audit suggested that the authority was operating an Alternative Enforcement Strategy for low risk establishments. Ten files were selected for audit, auditors established that all files were coded as inspections and were based on visits undertaken for food hygiene or were new business assessments. It was established that the authority was not operating an Alternative Enforcement Strategy in accordance with the Food Law Code of Practice. Auditors noted that insufficient information was being gathered to justify application or revision of a risk rating. However, contrary to the Food Law Code of Practice, risk ratings were being allocated following these visits by an officer other than the inspecting officer.

Recommendations

- 7.55 The Service 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 [The Standard – 7.3]
 - (iv) Review, amend and implement the food standards inspection procedure to include information related to the recording of significant breaches, timeframes for follow-up action and the approach to dealing with new business inspections to ensure the procedure is in accordance with the Food Law Code of Practice and centrally issued guidance. [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

- 7.56 Verification visits were undertaken at two food establishments with the authorised officer of the authority who had carried out the most recent food standards inspection. The main objective of the 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.
- 7.57 Officers were able to demonstrate their knowledge of the businesses and provide auditors with an assurance that assessments of food standards controls had taken place as part of the inspections in both cases.

8 Food and Food Establishments Complaints

- 8.1 The Service had developed separate procedures for food hygiene and food standards which outlined the criteria for investigations and were in accordance with the Food Law Code of Practice and centrally issued guidance.

Food Hygiene

- 8.2 An examination of the records relating to 10 food hygiene complaints received by the Service was undertaken. Auditors established that all complaints had been actioned in a timely manner and within the target response times set out in the database.
- 8.3 Auditors were able to establish that, an appropriate investigation had taken place in all but one case. In the remaining case, auditors were unable to fully confirm the officer's rationale for failing to visit or undertake further action at the establishment subject to the complaint. Also, in all but one case, auditors were able to confirm that appropriate action had been taken based on the findings of the investigation. In the remaining case, auditors were unable to find evidence of a revisit to check on an establishment's ongoing compliance with statutory requirements.
- 8.4 Evidence was available to show that complainants had been informed of the outcome of the investigation in all but one case.

Food Standards

- 8.5 An examination of the records relating to 10 food standards complaints received by the Service was undertaken. In eight cases auditors established that complaints had been thoroughly investigated. However, in two cases information relating to the complaint investigation was not retrievable. Furthermore, auditors identified that in seven cases, where necessary, appropriate follow up action had been taken. The remaining cases related to the above missing records along with another case where follow-up action taken in relation to a complaint was not recorded where a premise had temporarily closed during the investigation.
- 8.6 In five cases complaints had been investigated within a timely manner and evidence was available to demonstrate that the outcome of the investigation had been communicated to the complainant. The remaining

cases related to records not being retrievable and initial contact with the complainant being outside of the timescales set by the Service's own procedure.

Recommendations

- 8.7 The Service should:
- (i) Ensure that food hygiene and food standards complaints or service requests are investigated in accordance with the Food Law Code of Practice, centrally issued guidance and the Service's procedure. [The Standard 8.2]

9 Primary Authority Scheme and Home Authority Principle

- 9.1 The Service's commitment to the Primary Authority Scheme and Home Authority Principle was set-out in its Service Plan, Enforcement Policy and Primary Authority procedure.
- 9.2 Auditors were advised that food law enforcement officers had been provided with passwords to enable them to access the Primary Authority website.
- 9.3 Primary and Home authority considerations had been included in some other work procedures, for example, food hygiene interventions procedures, sampling policy & procedure, incidents procedures and complaints procedures.
- 9.4 The Service had 13 Primary Authority agreements in place and auditors were able to verify that, in its capacity as an enforcing authority, it had regard to Primary Authority guidance but had not always followed up matters of concern with primary authorities as appropriate.
- 9.5 The Service had no formal Home Authority arrangements in place but remained responsible for many manufacturers / distributors as an originating authority. Records examined during the audit demonstrated that accurate and timely advice had been provided to businesses, and that it had responded appropriately to requests for information from other local authorities.

Recommendations

- 9.6 The Service should:
- (i) Ensure it liaises with the Primary authorities in relation to offences identified from unsatisfactory food hygiene sample results. [The Standard – 9.1]

10 Advice to Business

10.1 The Service 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 and also by visit if the business had not yet opened.

10.2 Information was also available on the Service's website to assist local businesses in relation to food services, as follows:

Advice on starting new food business,
Food Complaints
Food Standards inspections,
Allergy advice and guidance,
Food Hygiene Inspections,
Food Hygiene advice visits,
Food Safety Management including advice on own compliance packs
and FSM systems,
Food Premises Approval,
Food Premises Registration,
Event Catering with various advice leaflets,
Food Sampling,
Food Hygiene Training Courses,
Healthy Options Award Scheme,
Investigation of Food Poisoning & Food Borne Disease with leaflets,
Links to Public Health Wales,
Links to Business Companion for food standards law advice,
Links to food hygiene law.

10.3 In addition, a number of projects to advise businesses had been undertaken:

- Listeria advice mailshots to care establishments,
- Mailshots to home caterers and other catering establishments on FHRS new rules,
- E.coli advice letter sent to 570 high risk category A-C premises,
- New business leaflet developed that includes advice on registration, FHRS & allergen requirements.

11 Food Establishments Database

- 11.1 The Service has a documented procedure 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, local district knowledge / observations and for part of the service, other Council departments.
- 11.2 Auditors selected 10 food establishments located in the region from the Internet. All but one of those still trading had been included on the authority's database. All those on the database had been included in the food inspection programmes.
- 11.3 Analysis of the food standards database showed errors relating to intervention risk ratings and due inspection dates, some of which will be addressed with migration to the new database. Some establishments had been visited and risk rated by an officer other than the inspecting officer following limited inspection activity whilst being coded as a full scope inspection on the database. Further, 1251 establishments were identified with a category C low risk rating without any other evidence of an associated inspecting officer, a risk profile or the last date of inspection. Analysis of the food hygiene database showed some errors relating to a small number of food hygiene risk ratings and a significant number of due intervention dates for lower risk food hygiene establishments. Some of the database anomalies had the potential to affect the annual enforcement monitoring return to the FSA.
- 11.4 Audits of enforcement actions indicated the use of more than one database code for voluntary surrenders. This had the potential to affect the annual enforcement monitoring return to the FSA.

Recommendations

11.5 The Service should:

- (i) Ensure risk rating data, due inspection dates for both food hygiene and food standards and food hygiene enforcement data are correctly entered and accurately maintained on the Service's database. Also ensure that only those establishments that have received a food standards inspection are rated as such on the database whilst only those subject to an alternative intervention are coded accordingly. [The Standard – 11.1]

Fully implement its documented procedures for ensuring its database is accurate, reliable and up to date at all times. [The Standard – 11.2]
- (ii)

12 Food Inspection and Sampling

- 12.1 The 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 Programmes for the microbiological examination and chemical analysis of food had been developed and implemented. Both had regard to national and regional priorities and included an estimate of the number of samples that would be taken in 2016/17. In addition to funding its own sampling programme, the Service had benefited from FSA grant funding for food standards samples.
- 12.3 A combined policy / procedure had been developed by the Service for the microbiological analysis of food by the food hygiene service. Auditors identified that the document would benefit from review to include information relating to out of hours arrangements, information relating to imported food sampling and details on the different methods of sampling. Auditors also discussed that the procedure would benefit from further information relating to local arrangements for the use of data loggers in recording temperature control of samples.
- 12.4 A procedure had been developed by the Service for the chemical analysis of foods within the food standards service. However, auditors identified that the procedure would benefit from review to include information relating to out-of-hours arrangements, information relating to imported food sampling, details on the different methods of sampling, equipment required to undertake sampling and detail on how the procedure links with the food alert procedure.
- 12.5 The Service had appointed a Public Analyst for carrying out chemical analyses of food and had a formal agreement in place with Public Health Wales for the microbiological examination of food. The laboratories were both on the recognised list of UK designated Official Laboratories.

Food Hygiene

- 12.6 Audit checks of records relating to 10 samples submitted for microbiological examination were undertaken; of which seven had been notified as being unsatisfactory, two as borderline and one as satisfactory.

- 12.7 In four cases auditors noted that appropriate action had been taken by the Service. In the remaining cases, evidence of appropriate follow-up action was not available.
- 12.8 Auditors were able to confirm that businesses had been informed of the result in all but two cases. Also in two cases, auditors were unable to verify that a business's Primary Authority had been informed.

Food Standards

- 12.9 An examination of the records relating to 10 satisfactory food standards samples was undertaken. Auditors were able to confirm in all cases that samples had been appropriately procured by trained and authorised officers. Sample results were available in nine cases; in the remaining file no certificate of analysis or result notification could be located.
- 12.10 Auditors were able to confirm that sampling had been appropriately undertaken and where relevant appropriately follow-up in accordance with the Food Law Code of Practice in all cases.
- 12.11 Furthermore, in all cases evidence was available to show that relevant parties had been notified of results and that Primary, Home or Originating authority considerations had been undertaken.

Recommendations

12.12 The Service should:

- (i) Review and 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. [The Standard – 12.4]
- (ii) Review and amend its documented procedures for microbiological sampling and chemical analysis of foods in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 12.5]
- (iii) Ensure that businesses are informed of unsatisfactory food hygiene sample results in accordance with its documented policy and procedure. [The Standards – 12.6]
- (iv) Take appropriate action in accordance with its Enforcement Policy where food hygiene 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 Service 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 A procedure for investigating and managing outbreaks of communicable disease was provided.

Good Practice – Procedure for investigation and management of outbreaks of communicable disease

This procedure included criteria for triggering an outbreak, template documents and a link to the Wales Outbreak Plan, along with an additional procedure for cases of food poisoning.

The Wales Outbreak Plan had been produced by a multi-agency group, including Public Health Wales and Welsh Government. Auditors noted that the plan had been localised to include relevant contact details for neighbouring local authorities and other agencies that have a role in the control of outbreaks.

- 13.3 A procedure for the notification and investigation of sporadic cases of communicable disease was also provided, containing the process for administering and investigating notifications, the storage and protection of records and including reference to centrally issued guidance along with an additional procedure for cases of food poisoning. A suite of nine organism specific advice leaflets had also been produced and were issued to all cases of notification.

Good Practice – Links to food establishments

The Service was actively monitoring links to food establishments and was working to characterise risk factors in linked food establishments to assist with the future identification of causes of food borne infectious disease.

Good Practice – Investigation and identification of Campylobacter clusters

The Service response to cases of Campylobacter and its application of surveillance is more likely to identify clusters of this food borne infectious disease, allowing the sources and the causes of those clusters to be addressed.

- 13.4 The Service had arrangements in place for responding to notifications of food related infectious disease 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 two outbreaks of suspected food poisoning and eight sporadic cases of food related infectious diseases were selected for audit. Thorough and timely investigations had been carried out in accordance with the Service's procedures and target response times by authorised officers who were suitably qualified and competent and records were easily retrievable. In relation to the outbreaks, auditors confirmed that the service was also represented on all appropriate incident management meetings.
- 13.6 Appropriate investigation and necessary follow-up actions were clearly recorded in accordance with the Food Law Code of Practice, centrally issued guidance and the Service's procedures. 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 Service had developed a food alerts procedure for dealing with incidents and food alerts which also referred to food incidents and alerts arising from within the area.
- 14.2 Auditors were able to verify that a sample of three recent food alerts for action notified to the Service 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 Service was aware of the requirement to notify the FSA of any serious localised and non-localised food hazards arising locally.
- 14.4 Action taken by the Service had been documented and correspondence, including officer e-mails relating to food alerts, had been maintained.

15 Enforcement

- 15.1 The Service had developed a Compliance and Enforcement Policy which had been updated and approved by the SRS Joint Committee. This was supplemented by a Food Safety Enforcement annex which had recently been approved. At the time of the audit the policy had not yet been published on the service's website but was available to the public and food businesses on request.
- 15.2 The policy and its annex advocated a graduated approach to enforcement and the content was in accordance with the Food Law Code of Practice and other official guidance. Some criteria for the taking of informal action, voluntary procedures, issuing Simple Cautions and bringing prosecutions were provided within the Policy whilst some criteria for the taking of informal action, the service of statutory notices and voluntary procedures were provided in the Annex. The Policy also referred to the Primary and Home Authority principles and set-out the approach to enforcement where the local authorities covered by the Service hold an interest.
- 15.3 Procedures for the withdrawal and suspension of approvals was contained within the approval intervention procedure. However, the arrangements for taking action in relation to non-compliant imported foods identified during inland checks had not been documented. The Service had adopted some documentation for officers to complete when compiling a file for prosecution or Simple Caution but no procedure for this process had been documented. The enforcement agreement checklist would benefit from amendment to include a section for the documentation of decisions against Compliance and Enforcement Policy criteria.
- 15.4 The Service had partially documented its procedures for the remaining enforcement actions within the food safety annex to its enforcement policy. The information that was included was in accordance with the Food Law Code of Practice, centrally issued guidance and applicable legislation. These procedures did not include information in relation to local arrangements for the drafting and service of the various statutory notices such as indicating which templates or method of service should be used. Further the procedure for Improvement Notices would benefit from updating to include details in respect of food information requirements, whilst the procedures for Remedial Action Notices (RANs)

and prohibition notices (including voluntary agreements) should include arrangements for monitoring compliance. The prohibition procedures should also include details of the process of applying to the local Magistrates' Courts for a Hygiene Emergency Prohibition Order or Prohibition Order. Detention, seizure, Regulation 27 certification and voluntary surrender procedures also required revision to include the local arrangements for bringing foods before a Justice of the Peace and the destruction and disposal of food.

15.5 During the audit, an examination of database records indicated 21 establishments had received a 0 (Urgent Improvement Necessary) rating under the Food Hygiene Rating Scheme (FHRS), 14 of which had either been subject to formal enforcement action or voluntary procedures to remedy the contraventions identified. Whilst the remaining seven establishments had been issued with written warning letters, formal enforcement action or voluntary procedures had not been instigated in accordance with the Compliance and Enforcement Policy. Where serious breaches of food law are identified, the Service should ensure a reasonable, proportionate and risk-based approach is taken to enforcement in accordance with the Compliance and Enforcement Policy and the Food Law Code of Practice. Departures from the policy should be exceptional and the reasons for any departure should be recorded.

15.6 The Service had reported that the following formal enforcement actions had been undertaken in the two years prior to the audit:

- 3 Revocation / withdrawal of approval;
- 115 Hygiene Improvement Notices (HINs);
- 22 Remedial Action Notices (RANs);
- 25 Fixed Penalty Notices for non-display of FHRS rating;
- 36 voluntary closures;
- 11 Food Detention Notices;
- 11 Food seizures;
- 11 Voluntary surrenders of food;
- 8 prosecution decisions

15.7 10 Hygiene Improvement Notices (HINs) and associated records were selected for audit. In all cases, the service of HINs had been an appropriate course of action, the details of the contraventions identified and the measures to be taken to achieve compliance had been specified.

- 15.8 There was evidence available to confirm the method of service for eight of the HINs. In one of these cases, the notice had been returned to the sender and therefore auditors were unable to verify whether the food business operator had received the notice. Auditors were unable to confirm that two of the HINs had been duly served, as proof of service was not available.
- 15.9 Further, in respect of seven cases where HINs had been served, auditors were able to verify that timely checks on compliance had taken place. In one case, establishment records did not contain sufficient information to demonstrate that a revisit to check compliance with the notice had been undertaken. Whilst there was evidence to confirm checks on compliance in the remaining two cases, these had taken place three weeks and four weeks following the expiration date. The reason for the delays had not been recorded.
- 15.10 Appropriate follow-up action had taken place in all but two cases. In one case, the notice had been confirmed as complied despite there still being statutory non-compliance for the same reasons. In the remaining case, although a check on compliance had occurred within five days of the expiry of the notice, auditors noted that the food business operator had been given an additional week to comply contrary to the Food Law Code of Practice. No reason was documented for this deviation.
- 15.11 In all but three cases where HINs had been complied with, a letter had been sent to the food business operator confirming compliance. In two of these cases, auditors were unable to locate evidence on the establishment file and in the third case, the letter had not been sent to the food business operator's central business address.
- 15.12 Audit checks of 10 RANs and associated records confirmed that in all cases, the notice had been served by an appropriately authorised officer who had witnessed the contravention. The action taken in each case was appropriate and the notice clearly specified the nature of the breach, the reason for service and measures to be taken to remedy the contravention. In all but one case, correct information on legislative requirements was provided. In that case an incorrect legal reference was specified.

- 15.13 There was evidence of proper service in one of the cases and auditors were able to verify that food business operators had been provided with the necessary information relating to appeal provisions in all cases. However, in one case the details of the local Court had not been provided.
- 15.14 In one case there was evidence that a timely check on compliance had been carried out but the notice remained in force following that check and no subsequent visit had taken place. In seven cases, the notices had been withdrawn in writing when compliance was achieved although in one case it was six months late and in another case, it was unclear whether the withdrawal was justified due to a lack of information on the file.
- 15.15 Auditors examined records of 10 voluntary closure agreements which had been instigated by the Service. In all but one case, auditors were able to verify that the circumstances had warranted voluntary closure and that agreements had been confirmed with the food business operator in writing. However, appropriate and timely checks to ensure the food businesses remained closed had not taken place in seven of the cases.
- 15.16 In 10 cases where food had been subject to a voluntary surrender, auditors were able to confirm that the action taken had been appropriate and in all but one case, the receipts for the voluntarily surrendered food had been signed by the officer and counter signed by the person surrendering the food. In the remaining case, the voluntary surrender agreement was not available.
- 15.17 In four cases, where foods had been destroyed on site, auditors were able to confirm the time and place of destruction in all cases. However, in three cases, details relating to how the food had been dealt with, i.e. disfigured or stained, to prevent it from re-entering the food chain had not been recorded.
- 15.18 In seven cases where foods were surrendered to the Service for destruction, there was no record of destruction.
- 15.19 Auditors examined case files relating to one food standards prosecution and six food hygiene prosecutions; all of which had been brought before the Courts. There had been no Simple Cautions issued by the service.

15.20 Prosecution had been the appropriate course of action in each case and they had generally been authorised by an officer with the appropriate delegated authority and taken without unnecessary delay. In all but two cases, records were available to verify due consideration had been given to the enforcement policy and in all but one case, records confirmed the Public Interest and Evidence tests were also considered. Where appropriate, schedules of sensitive and unused material had been compiled. However, the roles performed by certain officials in accordance with the Criminal Procedure and Investigation Act had not been documented in all cases.

Recommendations

15.21 The Service should:

- (i) Review, amend and implement its procedures for Hygiene Improvement Notices, Remedial Action Notices, Hygiene Emergency Prohibition Notices, voluntary closure agreements and detention, seizure, Regulation 27 certification and surrender to include details of local arrangements, specifically; drafting (including the use of approved templates), method and record of service. Procedures for Hygiene Improvement Notices, Remedial Action Notices Hygiene Emergency Prohibition Notices, voluntary closure agreements should be amended to include arrangements for monitoring compliance whilst prohibition procedures should also include local legal processes for applying for a Court Order. The procedures for detention, seizure, Regulation 27 certification and surrender should be amended to include local arrangement for condemnation and destruction or disposal of food. [The Standard - 15.2]
- (ii) Set up documented enforcement procedures for follow up and enforcement actions in relation to food information improvement notices, prosecutions, simple cautions and imported food in accordance with the Food Law Code of Practice and official guidance. [The Standard -15.2]
- (iii) Ensure that food law enforcement is carried out in accordance with its procedures, the Food Law Code of Practice, official guidance and centrally issued guidance. [The Standard – 15.2 & 15.3]
- (iv) Ensure its Compliance and Enforcement Policy is fully implemented and the reasons for any departure from the criteria set-out in the Policy are recorded. [The Standard – 15.1 & 15.4]

16 Records and Interventions/Inspections Reports

Food Hygiene

- 16.1 Food business records, including registration forms, inspection aides-memoire, post inspection visit report forms and correspondence were being stored by the Service 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 Service 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 the remaining case, an officer had requested that the business complete and return an establishment registration form during the most recent inspection. In four of these cases registration forms were date stamped in line with the local procedure.
- 16.3 With regards to approved establishment files, auditors were able to verify that the Service had retained the establishment's notification of full approval on file in five cases. In the remaining case, the authority was unable to retrieve the notification document.
- 16.4 In all cases, approved establishment files contained management and key contact names and contact details, copy of the establishment's emergency withdrawal/recall procedures, customer and supplier lists, product lists and HACCP documentation. The remainder of the information required in Annex 10 of the Food Law Practice Guidance, such as establishment synopsis 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.
- 16.5 The Service was providing 'a report of an inspection' notification post inspection, in addition to sending out inspection letters to communicate findings to food businesses. In seven cases, the post-inspection letters and the report of inspection collectively contained all the information required to be provided to food business operators under Annex 6 of the

Food Law Code of Practice. In one case, auditors noted that the business had not been provided a “report of intervention” and as such the post inspection letter did not contain information relating to the type of business inspected, areas inspected, documents examined and samples taken by the officer. In the remaining two cases, the distinction between legal requirements and recommendations was not clear.

- 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.

Recommendations

16.7 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 containing all of the information required by Annex 6 of the Food Law Code of Practice, the core elements of HACCP, the determination of compliance with legal requirements made by the authorised officer, details of action taken where non-compliance was identified, the details of any enforcement action taken and for approved establishments, the information required by Annex 10 of the Food Law Code of Practice. [The Standard – 16.1]

Food Standards

- 16.8 The authority had recently implemented a new procedure which required the outcome of inspections being reported to businesses using a food standards inspection report form. However, in all but one of the files checked, inspections had been carried out prior to the new procedure being implemented. Report forms were being maintained electronically on the database which included information relating to intervention activity, including the date, type of intervention undertaken and risk rating for the establishment. The above information was retrievable in all but two cases.

- 16.9 In five cases, food 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 in accordance with the food law code of practice.
- 16.10 Auditors recognised that the recently introduced Food Standards inspection report form contained all of the information required by Annex 6 of the Food Law Code of Practice; this was available in one file. However, the remaining files contained a range of different report forms and notes which did not consistently contain the all of the relevant information required.
- 16.11 The authority was unable to demonstrate that food standards records were being consistently maintained for at least six years. An issue was identified where establishments had been coded on the database as having received an intervention despite no records of inspection being available or retrievable.

Recommendations

- 16.12 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 containing all of the information required by Annex 6 of the Food Law Code of Practice, the determination of compliance with legal requirements made by the authorised officer, sampling results and complaints. The authority should also record, with reasons, any deviations from set procedure. [The Standard – 16.1]
 - (ii) Ensure records are kept for at least 6 years. [The Standard – 16.2]

17 Complaints about the Service

- 17.1 The Service had developed a corporate complaints policy which was 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 team and then, if the customer was not satisfied, by the Corporate Complaints Team.
- 17.3 Eight complaints against the food hygiene service had been received in the two years prior to the audit. These were all dealt with in accordance with policy.
- 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 Service 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:

- All Wales Food Safety Expert Panel,
- South East Wales Food Hygiene Task Group,
- South West Wales Food Hygiene Task Group,
- Glamorgan Food Group,
- Port Health Expert Panel,
- Communicable Disease Expert Panel,
- Communicable Disease Liaison Group,
- South East Wales Communicable Disease Task Group,
- South West Wales Communicable Disease Task Group,
- All Wales Food Standards and Labelling Group,
- Lead Officers Food Hygiene Rating Steering Group,
- Welsh Food Microbiological Forum,
- Wales Heads of Environmental Health Group;
- Wales Heads of Trading Standards Group;
- National Food Hygiene Focus Group.

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

- Food Standards and Labelling Enforcement Group,

18.3 The Service also stated in its service plan that it liaised with the following external organisations:

- Food Standards Agency; including operations division
- professional bodies such as the Chartered Institute of Environmental Health, the Royal Society of Health, the Royal Institute of Public Health and Hygiene, the Chartered Institute of Trading Standards; Public Health Wales, Care Standards Inspectorate for Wales.
- Regulatory Delivery (RD)
- other Council services such as Business Rates, Planning and Building Control to inspect and review applications, Procurement and Schools Service;

- PH Wales Environment Sub Group and the Infection Control Committee and the Cardiff Health Alliance;
- Maritime and Coastguard Agency and stakeholders at the port including port operators;
- Association of Port Health Authorities and the Ports Liaison Network;
- Welsh Government;
- Local Government Data Unit
- Cardiff International Airport and stakeholders at the airport including UK Border Force, airline operators, baggage handlers
- Public Health Wales including Consultants in Communicable Disease Control, microbiologists, laboratories at Llandough, Princess of Wales, Singleton and the Heath
- Hospitals
- Local Health Boards
- Animal and Plant Health Agency
- Centre for Radiation and Chemical & Environmental Hazards
- Crown and Magistrates Courts
- Public analyst laboratories, Minton Treharne and Davies, Cross Hands and Cardiff

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

19 Internal Monitoring

- 19.1 Internal monitoring is important to ensure performance targets are met, services are being delivered in accordance with legislative requirements, centrally issued guidance and the Service's procedures. It also ensures consistency in service delivery.
- 19.2 A number of key performance indicators had been identified for both food hygiene and food standards work. Quantitative internal monitoring arrangements were in place to monitor performance against the targets, which had been set-out in the service plan. Further monitoring of the progress of intervention programmes is monitored monthly by the Team Managers.
- 19.3 A documented internal monitoring procedure had been developed for the full range of food hygiene and food standards work.
- 19.4 The Team Managers were responsible for internal monitoring of the food enforcement services at an operational level.
- 19.5 Auditors were able to verify that some qualitative internal monitoring had been undertaken across the service including record checks.
- 19.6 Records maintained, in accordance with the procedure, were able to confirm the nature and extent of the monitoring activity. This included accompanied inspections and intervention file record checks for both food hygiene and food standards and food hygiene service requests.
- 19.7 Team meetings were also conducted to feedback and share information on the validation of both the quantity and quality of work.
- 19.8 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.
- 19.9 The records relating to internal monitoring that were available, were being maintained by managers for at least two years.

19.10 In 2016 the Service was subject to an internal audit which reported in September. This identified some areas to focus on but did not address full compliance with the requirements of the Food Law Code of Practice. The results were incorporated into both service planning and internal monitoring processes by the Service.

Recommendation

19.11 The Service should:

(i) Fully implement its documented internal monitoring procedures to include food standards interventions undertaken by all teams, port health interventions, infectious disease investigations, incidents, food standards service requests, AES, and sampling follow ups. [The Standard – 19.1]

(ii) For both food hygiene and food standards services, 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 authorities making up the service, in common with the other 21 local authorities in Wales, had submitted information in respect of two FSA focused audits - Response of Local Government in Wales to the Recommendations of the Public Inquiry into the September 2005 Outbreak of *E. coli* O157 in South Wales and Local Authority Management of Interventions in Newly Registered Food Businesses. The partner authorities were not audited individually as part of this programme. These focused audit reports are available at:
www.food.gov.uk/enforcement/auditandmonitoring
- 20.2 Each of the three authority's arrangements for responding to emergencies out-of-office hours were tested by the FSA in March 2014. An appropriate response was received.
- 20.3 In March 2013, Bridgend Council was the subject of a full food audit by the Food Standards Agency. A report and action plan was produced and published. The action plan was updated in August 2015 following a follow up visit. In March 2014 Cardiff Council was audited as part of a focussed shellfish traceability and authenticity exercise. Where matters remained outstanding from both of these audits, they have been absorbed into the recommendations within this report.
- 20.4 The Environmental Health functions of the authorities making up the service, 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.
- 20.5 The Service also participated in the European Commission Directorate General for Food and Health and Safety's 'Audit in the United Kingdom to evaluate the food safety control systems in place governing the production and placing on the market of fishery products'.

21 Food Safety and Standards Promotion

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

- promotion of the Service's advisory services,
- promotion of the food hygiene rating scheme including the new requirements,
- attendance at Cardiff Food & Drink festival,
- provision of SRS food safety event,
- delivery of food hygiene training,
- production and circulation of the Food and Safety newsletter,
- advice leaflets for students on food and communicable diseases.

Good Practice – Media and Promotion plan

The Service had devised a Media and Promotion Plan to co-ordinate its promotional activity.

21.2 The information available on the authority's website to promote food hygiene and food standards to consumers and other stakeholders Included:

- Advice on starting new food business,
- Food Complaints,
- Food Standards inspections,
- Allergy advice and guidance,
- Food Hygiene Inspections,
- Food Hygiene advice visits,
- Food Safety Management including advice on its own compliance packs and FSM systems,
- Food Premises Approval,
- Food Premises Registration,
- Event Catering with various advice leaflets,
- Food Sampling,
- Food Hygiene Training Courses,
- Healthy Options Award Scheme,
- Investigation of Food Poisoning & Food Borne Disease with leaflets for different agents of infection,
- Links to Public Health Wales,
- Links to Business Companion for food standards law advice,

- Links to food hygiene law.

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

Auditors:

Lead Auditor: **Craig Sewell**
Auditors: Owen Lewis
 Nathan Harvey
 Kayleigh Beynon

Food Standards Agency Wales
11th Floor
Southgate House
Wood Street
Cardiff
CF10 1EW

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

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

Audit Approach/Methodology

The audit was conducted using a variety of approaches and methodologies as follows:

(1) Examination of local authority policies and procedures

The following policies, procedures and linked documents were examined:

- Shared Regulatory Services Business Plan 2016/17
- Shared Regulatory Services – Port Health Service Plan 2016/17
- Shared Regulatory Services – Food and Feed Law Service Plan 2016/17
- Bridgend County Borough Council – Corporate Plan 2016 – 2020
- The City of Cardiff Council – Corporate Plan 2016 – 2018
- Vale of Glamorgan Council – Corporate Plan 2016 – 2020
- The Vale of Glamorgan Council – Food Law Enforcement Service Plan
- Shared Regulatory Services – Document Control Procedure
- Shared Regulatory Services – Authorisation of Officers Procedure
- Shared Regulatory Services – Authorisation Instruction Form
- Shared Regulatory Services – Calibration and Maintenance of Equipment Procedure
- Calibration and Maintenance of Equipment Procedure – CS/FS&PH/P011 – 13 February 2017
- Fridge/Freezer Temperature Monitoring Form
- Shared Regulatory Services – Data and Database Software Management Procedure
- Shared Regulatory Services – Application for Approval of a Food Business Establishment
- Shared Regulatory Services – Notice of Decision to Refuse to Grant Approval
- Shared Regulatory Services – Notice of Decision to Refuse to Grant Full Approval
- Shared Regulatory Services – Notice of Decision to Suspend the Approval
- Shared Regulatory Services – Notice of Decision to Withdraw Approval
- Shared Regulatory Services – Notification of Grant of Full Approval
- Shared Regulatory Services – Approved Premises Inspection Form
- Shared Regulatory Services – Food Hygiene Inspection Form
- Shared Regulatory Services – Specific Additional Inspection Form – Establishments Handling Shell Eggs
- Shared Regulatory Services – Inspection Form for the Specific Food Hygiene Requirements for Establishments Manufacturing Meat Products & Requiring Approval
- Shared Regulatory Services – Inspection Form – Purification and Dispatch Centres
- Shared Regulatory Services – Additional Form for Inspection of Premises Requiring Approval for Heat Treatment of Dairy Products
- Shared Regulatory Services – Supplementary Inspection Form – Establishments Handling/Manufacturing Egg Products

- Shared Regulatory Services – Inspection Form for the Specific Food Hygiene Requirements for Establishments Manufacturing Minced Meat, Meat Preparations & Mechanically Separated Meat and Requiring Approval
- Shared Regulatory Services – Inspection Form – Fishery Products Establishments (Fresh Fishery Products)
- Shared Regulatory Services – Inspection Form – Fishery Products Establishments (Frozen Fishery Products)
- Shared Regulatory Services – Inspection Form – Fishery Products Establishments (Mechanically Separated Fishery Products)
- Shared Regulatory Services – Inspection Form – Fishery Products Establishments (Processed Fishery Products)
- Shared Regulatory Services – Procedure for Premises Approved Under Product Specific Legislation (Food Safety)
- Shared Regulatory Services – Registration of a New Food Business Letter
- Shared Regulatory Services – FHRS Leaflet
- Shared Regulatory Services – Intervention Report Letter
- Shared Regulatory Services – FHRS Template for Sticker
- Shared Regulatory Services – Rejection of Appeal Letter
- Shared Regulatory Services – Rescore Request Letter
- Shared Regulatory Services – Template Letter for Incorrect Display of Rating
- Shared Regulatory Services – Template Letter for Non-Display of Rating
- Shared Regulatory Services – Fixed Penalty Notice Template
- Shared Regulatory Services – Procedure for Implementing the FHRS, Appeals and Requests for Rescores
- Shared Regulatory Services – Food Hygiene Inspection Form
- Shared Regulatory Services – Confirmation of Intervention
- Shared Regulatory Services – Incident Report Form (INC1)
- Shared Regulatory Services – Application for the Registration of a Food Business Establishment
- Shared Regulatory Services – Questionnaire for Verification Intervention
- Shared Regulatory Services – Verification Intervention Report
- Shared Regulatory Services – Food Intervention and Revisit Procedure
- Shared Regulatory Services – Food Standards Inspection Form
- Shared Regulatory Services – Instructions on adding Vale of Glamorgan Inspections to Flare (APP)
- Shared Regulatory Services – Alternative Food Safety Intervention Procedure for Low Risk Food Businesses
- Shared Regulatory Services – Information Gathering Form for D Rated Businesses
- Shared Regulatory Services – Information Gathering Visit – Advice Leaflet
- Shared Regulatory Services – Alternative Enforcement Questionnaire for Low Risk Registered Child-Minders
- Shared Regulatory Services – Alternative Enforcement Questionnaire for E Rated Food Businesses
- Shared Regulatory Services – Joint Port Health Procedure for Cardiff International Airport

- Shared Regulatory Services – Port Health Vessel Monitoring and Boarding Arrangements
- Shared Regulatory Services – Food Standards Inspection Sheet
- Shared Regulatory Services – Food Standards Inspection (Manufacturer) Sheet
- Shared Regulatory Services – Self-Assessment Inspection Questionnaire – Trading Standards
- Shared Regulatory Services – Food Standards Inspection Form
- Shared Regulatory Services – Food Standards Inspection and Re-Visit Procedure
- Shared Regulatory Services – Food Complaints Flow Chart
- Shared Regulatory Services – Food Complaints Leaflet
- Shared Regulatory Services – Food Complaint Receipt Form
- Shared Regulatory Services – 5x5x5 Information Intelligence Report (Form A)
- Shared Regulatory Services – Food Safety Complaints Policy and Procedure
- Shared Regulatory Services – Food Standards Complaint Procedure
- Shared Regulatory Services – Procedure for dealing with the Primary Authority Principle
- Shared Regulatory Services – Primary Authority Terms and Conditions
- Primary Authority – Summary of Partnership Arrangements between Anon Limited and The Vale of Glamorgan Council
- Shared Regulatory Services – Procedure for Business Advice and Fee Paying Visits
- Shared Regulatory Services – Management of Electronic Database Procedure
- Tascomi Public Protection Admin Role Profiles
- Shared Regulatory Services – Food Standards Sampling Plan 2016/18
- Shared Regulatory Services – Food Standards Sampling Procedure
- Shared Regulatory Services – Microbiology Food Sampling Plan until March 2017
- Shared Regulatory Services – Sampling Policy and Procedure
- Shared Regulatory Services – The Communicable Disease Outbreak Plan for Wales ('The Wales Outbreak Plan')
- Shared Regulatory Services – Procedure for the Notification and Investigation of Sporadic Cases of Communicable Disease
- Shared Regulatory Services – Procedure for the Investigation and Management of Outbreaks of Communicable Disease
- Wales Heads of Environmental Health Group – All Wales Communicable Disease Expert Panel – Good Practice Statement – Campylobacter Surveillance and Investigation
- Shared Regulatory Services – Pathogen Questionnaires
- Shared Regulatory Services – Food Incident Flow Diagram
- Shared Regulatory Services – Food Incident Report Form
- Shared Regulatory Services – Food Incident Procedure
- Shared Regulatory Services – Compliance and Enforcement Policy – February 2016
- Shared Regulatory Services – Compliance and Enforcement Policy – Annex 1: Food Safety Enforcement
- Shared Regulatory Services – Corporate Complaints and Compliments Procedure
- Vale of Glamorgan – Corporate Complaints Procedure

- Communicable Disease Expert Panel – Action Tracking Supplement
- Shared Regulatory Services – Internal monitoring Food Safety and Port Health Procedure
- Shared Regulatory Services – Internal Monitoring Food Standards Procedure
- Shared Regulatory Services – Approved Premises List
- Shared Regulatory Services – Food Hygiene Samples

(2) File and records reviews

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

- Shared Regulatory Services Joint Committee Minutes – 28 June 2016
- Shared Regulatory Services Joint Committee Minutes – 20 December 2016
- The Vale of Glamorgan Council – Appointment of Public and Agricultural Analysts
- Food and Port Health – Bridgend and Vale Training Programme 2016/17
- Food & Port Health – Cardiff Training Programme 2016/17
- Industry Training Programme 2016/17
- Trading Standards Training Programme 2016/17
- Communicable Disease Training Programme 2016/17
- Shared Regulatory Services – Tascomi Data Processing Agreement – Signed
- Officer authorisations and training records
- Calibration records
- General food establishment records
- Approved establishment files
- Food and food establishment complaint records
- Advisory and promotional materials provided to businesses and consumers
- Food sampling records
- Records of food related infectious disease notifications
- Food Incident records
- Informal and formal enforcement records
- Minutes of internal meetings and external liaison meetings
- Internal monitoring records
- Bridgend & Vale – Internal Audit Report

(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 establishment's 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:

- Operational Managers
- Team Managers
- Commercial Services Officers
- Enterprise & Specialist Services Officers

Opinions and views raised during officer interviews remain confidential and are not referred to directly within the report.

(5) On-site verification checks:

Verification visits were made with officers to 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.

ANNEX C

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.