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# **Report on the Food and Feed Law Enforcement Services**

The City and County of Swansea  
3<sup>rd</sup> – 7<sup>th</sup> November 2014

## 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 and Feed Law Enforcement Service. The assessment includes consideration of the systems and procedures in place for interventions at food and feed businesses, food and feed sampling, internal management, control and investigation of outbreaks and food related infectious disease, advice to business, enforcement, food and feed safety promotion. It should be acknowledged that there may be considerable diversity in the way and manner in which authorities provide their food enforcement services reflecting local needs and priorities.

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

[www.food.gov.uk/enforcement/enforcework/frameagree](http://www.food.gov.uk/enforcement/enforcework/frameagree)

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

[www.food.gov.uk/enforcement/auditandmonitoring](http://www.food.gov.uk/enforcement/auditandmonitoring)

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

[www.food.gov.uk/enforcement/auditandmonitoring](http://www.food.gov.uk/enforcement/auditandmonitoring)

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

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

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## **1 Introduction**

- 1.1 This report records the results of an audit of food hygiene, food standards and feedingstuffs at The City and County of Swansea under the headings of the FSA Feed and Food Law Enforcement Standard. It has been made publicly available on the Agency's website at [www.food.gov.uk/enforcement/auditandmonitoring/auditreports](http://www.food.gov.uk/enforcement/auditandmonitoring/auditreports)

### ***Reason for the Audit***

- 1.2 The power to set standards, monitor and audit local authority food and feed law enforcement services was conferred on the FSA by the Food Standards Act 1999 and the Official Feed and Food Controls (Wales) Regulations 2009. The audit of the food and feed services at The City and County of Swansea were undertaken under section 12(4) of the Act and Regulation 7 of the Regulations.
- 1.3 Regulation (EC) No. 882/2004 on official controls performed to ensure the verification of compliance with feed and food law, includes a requirement for competent authorities to carry out internal audits or to have external audits carried out. The purpose of these audits is to verify whether official controls relating to feed and food law are effectively implemented. To fulfil this requirement, the FSA, as the central competent authority for feed and food law in the UK has established external audit arrangements. In developing these, the Agency has taken account of the European Commission guidance on how such audits should be conducted.<sup>1</sup>
- 1.4 The authority was audited as part of a three year programme (2013 – 2016) of full audits of the 22 local authorities in Wales.

### ***Scope of the Audit***

- 1.5 The audit covered The City and County of Swansea's arrangements for the delivery of food hygiene, food standards and feed law enforcement

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<sup>1</sup> 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).

services. The on-site element of the audit took place at the authority's offices at The Guildhall, Swansea on 3<sup>rd</sup> – 7<sup>th</sup> November 2014, and included verification visits at food and feed businesses to assess the effectiveness of official controls implemented by the authority, and more specifically, the checks carried out by the authority's officers, to verify food and feed business operator (FBO/FeBO) compliance with legislative requirements.

- 1.6 The audit also afforded the opportunity for discussion with officers involved in food and feed law enforcement with the aim of exploring key issues and gaining opinions to inform Agency policy.
- 1.7 The audit assessed the authority's conformance against "The Standard". The Standard was adopted by the FSA Board on 21<sup>st</sup> September 2000 (and was subject to its fifth amendment in April 2010), and forms part of the Agency's Framework Agreement with local authorities. The Framework Agreement can be found on the Agency's website at [www.food.gov.uk/enforcement/enforcework/frameagree](http://www.food.gov.uk/enforcement/enforcework/frameagree)

### ***Background***

- 1.8 The City and County of Swansea is a unitary authority in south Wales. Covering an area of 378 square kilometers (146 square miles), about 2% of the area of Wales. It borders three other local authority areas – Swansea Port Health Authority, Carmarthenshire and Neath-Port Talbot.
- 1.9 With a coastline of great natural diversity forming two thirds of the County's boundary, Swansea covers an area which runs from Briton Ferry along Swansea Bay in the south, around the Gower Peninsula and along the Loughor River in the North-West. It includes the Lliw Valley and parts of the Tawe and Dulais valleys. Approximately 66% of Swansea is rural and 34% urban. In the north, the Lliw Uplands present an open moorland feature; the Gower Peninsula in the west, a rural landscape with contrasting coasts and a collection of small villages. The urban and suburban areas occupy the centre stretching from Swansea to Gorseinon and Pontarddulais and the coastal strip around Swansea Bay which is no more than 2 miles in width.

- 1.10 Swansea is the second largest City in Wales and is the regional centre in south west Wales for shopping, entertainment and leisure activities. The area is a significant tourist destination, with a variety of award-winning beaches. Swansea has a busy Marina with over 1,000 moorings and there is a small local airport situated nearby, on the Gower Peninsula. As a centre of learning, Swansea is home to Swansea University, Swansea Metropolitan University, University of Wales Trinity St. David and Gower College Swansea, supporting around 20,000 full-time students. Developments such as the National Swimming Pool, the National Waterfront Museum, Castle Quays, Swansea Vale and the SA1 Waterfront are all examples of the ongoing investment and development in Swansea. The 20,000 seat Liberty stadium is home to the Ospreys regional rugby team and premier ship Swansea City football team. It is also a conference and event centre.
- 1.11 Agriculture forms an important part of the economy of the area. There are approximately 300 farms within the authority, with a combination of single and mixed species of livestock.
- 1.12 The latest estimate of the population of the City and County of Swansea stands at 240,300 (mid - 2013 ONS). Swansea has the second highest population of the 22 Welsh Unitary Authorities, with a population density of 633 people per sq. km. representing almost 8% of the total population of Wales (3,082,400). There are an estimated 104,200 households, with an average household size of 2.26 (Welsh Government 2012). 78% of the population were born in Wales and 11.4% aged three or over are able to speak Welsh (Census 2011). The latest official estimates suggest a non-white ethnic population of around 14,300 - 6.0% of Swansea's total population (2011 Census).
- 1.13 The City and County of Swansea contains some areas with high levels of deprivation as determined by the 2011 Welsh Index of Multiple Deprivation.
- 1.14 Food and feed law enforcement was being carried out by officers in the authority's Housing and Public Protection service unit. The Food and Safety Team of the Licensing and Food and Safety Division enforced food hygiene legislation whilst the Trading Standards Division enforced food standards and animal feedingstuffs legislation.

- 1.15 Officers and support staff responsible for food hygiene, food standards and feed were based at The Guildhall, Swansea, SA1 4PE. Services were available between 8.30 am to 5.00 pm Monday – Thursday and 8.30 am to 4.30 pm Friday.
- 1.16 The authority reported in its Food Law Enforcement Service Plan (the Service Plan) that it had an out-of-hours service providing access to a qualified food officer. The out-of-hours service was not tested as part of the audit.
- 1.17 In 2013/14 there were approximately 2,132 food establishments and 301 feed establishments in Swansea. In addition there were 13 approved food establishments but no approved feed premises.
- 1.18 The Service Plan stated that the authority had 11.9 full time equivalent (FTE) officers involved in the delivery of food hygiene official controls and 1 FTE officer delivering official feed controls. It was not clear from the documentation available what resources were available for food standards official controls although the authority had reported in its 2013/14 LAEMS return that it had 4 FTE professional staff and 0.5 FTE administrators.
- 1.19 The annual budget for the food and safety team was £553,600 in 2014/15. This represented an increase on the 2013/14 spend which was £538,561 although it was not clear what proportion of this budget was allocated to food enforcement. Expenditure on feed official controls was reported as £33,000 plus £8,000 for database management and £5,000 for sampling and procurement. Trading Standards expenditure was reported as £712,800 (net) but it was not clear what proportion of this was allocated to food standards.
- 1.20 The authority had piloted the introduction of the ‘Scores on the Doors’ Scheme in Wales and had later migrated to the FSA’s National Food Hygiene Rating Scheme which was launched in Wales in October 2010. The scheme was enhanced in partnership with Welsh Government to ensure mandatory display of ratings from late November 2013. At the time of the audit, the food hygiene ratings of 1,363 food establishments in Swansea were available to the public on the National Food Hygiene Rating Scheme website.



## 2 Executive Summary

- 2.1 The audit examined The City and County of Swansea Council's arrangements for the delivery of official food and feed controls. This included reality checks at establishments to assess the effectiveness of official controls and, more specifically, the checks carried out by the authority's officers, to verify food and feed business operator (FBO) compliance with legislative requirements. The scope of the audit also included an assessment of the authority's overall organisation and management, and the internal monitoring of food law enforcement activities.
- 2.2 The authority had developed a Food Law Enforcement Service Plan for 2014/15 which, in respect of food hygiene was largely in line with FSA guidance. In respect of food standards the Plan required further development to ensure the inclusion of all the required information. A separate Feed Service Plan was in place.
- 2.3 The authority demonstrated its commitment to working closely with food and feed businesses to assist them in achieving compliance with the law. Advice was provided during inspections, in correspondence and on the telephone. Information was also available on the authority's website.
- 2.4 Audit findings confirmed that although the authority was able to demonstrate that it had adopted a risk based approach, food hygiene interventions, especially in relation to new businesses and lower risk establishments, were not always being carried out at the minimum frequencies and within the timeframes specified in the Food Law Code of Practice. In addition, where contraventions had been identified, enforcement action had not always been escalated in a timely manner.
- 2.5 A work procedure had been developed to ensure the accuracy of the authority's food establishment database. Audit checks confirmed that the database was generally accurate and in respect of food hygiene, the authority had been able to provide a timely and accurate 2013/14 Local Authority Enforcement Monitoring System (LAEMS) return to

the Agency. The authority had identified problems was the accuracy of its food standards return to the FSA and was implementing the actions identified to secure the necessary improvements.

- 2.6 The authority had provided annual feed returns to the FSA and auditors noted the ongoing work to improve the accuracy of the authority's feed database.
- 2.7 Food hygiene inspection records were generally satisfactory. However, food standards and feed inspection records required improvement to enable the authority to demonstrate that thorough assessments of business compliance had been carried out.
- 2.8 Information provided to businesses following food hygiene inspections was timely and comprehensive. However the need for more comprehensive information in respect of food standards and feed was identified.
- 2.9 Other interventions were generally taking place in accordance with the relevant Code of Practice.
- 2.10 The authority's Trading Standards and Food and Safety teams had a quality system in place that was registered to ISO 9001:2008. The system was subject to 3rd party audit twice annually. The authority had effective arrangements in place for quantitative internal monitoring of its food and feed interventions programmes and generally, qualitative internal monitoring of food hygiene activities was taking place. However qualitative internal monitoring of food standards and feed activities required further development.
- 2.11 The authority was committed and fully engaged in planning to deliver feed official controls on a regional basis. These plans, being overseen by the Wales Heads of Trading Standards, will ensure individual local authorities meet their obligations and that a risk based approach to feed is adopted across Wales.
- 2.12 Two areas of good practice were identified during the audit. The first related to the approach the authority had taken to secure compliance with food hygiene legislation at establishments rated 0 under the Food Hygiene Rating Scheme. The other to the innovative approach

the authority had taken to raise business awareness of new food information requirements.

## **2.13 The Authority's Strengths**

### **Food Hygiene Complaints**

The authority was able to demonstrate that it had robust arrangements in place for responding to complaints about food and food establishments. Complaints had been effectively investigated and appropriate follow-up action had taken place.

### **Advice to Business**

The authority was able to demonstrate that it had been proactive, providing assistance to businesses to help them comply with food hygiene, food standards and feed legislation.

### **Enhanced Scrutiny and Support - 0 Rated Establishments**

Where food establishments had been given a rating of 0 under the Food Hygiene Rating Scheme, officers had been required to identify the most appropriate interventions to secure improved compliance. These were agreed with the lead officer. This enhanced scrutiny and support continued until the contraventions had been addressed by the business concerned and was identified as an area of good practice.

### **Food Establishments Database**

The authority had maintained its database of food establishments and was able to provide accurate information on its food hygiene activities to the FSA.

### **Liaison with Other Organisations**

The authority had effective arrangements in place to liaise with neighbouring authorities and other organisations to facilitate consistent enforcement of food hygiene, food standards and feed legislation.

### **Food Safety and Standards Promotion**

The authority had participated in a number of initiatives with the aim of promoting food safety and standards and had been particularly innovative in promoting changes to food labelling requirements. This was identified as an area of good practice.

## **2.14 The Authority's Key Areas for Improvement**

### **Service Planning – Food Standards**

The authority should ensure that in respect of food standards, future Service Plans include all the information set out in the Service Plan Guidance in the Framework Agreement.

### **Officer authorisations**

The authority should document its authorisation procedure and ensure officers are authorised following an assessment of their qualifications, training and experience. Officers should be authorised under all relevant key statutes.

### **Food Hygiene, Food Standards and Feed Intervention Frequencies**

The authority was not able to demonstrate that it was carrying out food hygiene, food standards or feed interventions at the minimum frequencies required by the Codes of Practice. Interventions carried out at the minimum frequency ensure that risks associated with food and feed businesses are identified and followed up in a timely manner.

### **Food Standards and Feed Inspections**

The level of detail captured on inspection forms was not sufficient to demonstrate that a thorough assessment of compliance with food standards and feed requirements had taken place.

### **Food Standards and Feed Records and Interventions/Inspections Reports**

Intervention/inspection reports provided to businesses did not contain all the information required by the Codes of Practice.

### **Enforcement**

The need to ensure more timely escalation of action to deal with food hygiene contraventions was identified.

## **Audit Findings**

### **3 Organisation and Management**

#### *Strategic Framework, Policy and Service Planning*

- 3.1 The City and County of Swansea Council operates a Cabinet system of local government and has a number of Scrutiny Committees which act as a 'critical friend' to the Cabinet and other decision makers in order to promote better services, policies and decisions.
- 3.2 The authority's Constitution set out its decision making arrangements. Under the Constitution, decisions on certain specific matters had been delegated to officers.
- 3.3 The authority had developed a Food Law Enforcement Service Plan for 2014/15 which set out arrangements for the delivery of food hygiene and food standards services. Auditors noted that whilst the Plan contained most of the required information in respect of food hygiene, it required further development to ensure the required information relating to food standards is provided. A separate Feed Service Plan, based on an all Wales template, had also been developed.
- 3.4 The Food Law Enforcement Service Plan had been approved by the Head of Public Protection whilst the Feed Plan was awaiting approval. At the time of the audit, neither of the Plans were publically available on the authority's website.
- 3.5 A number of other service planning documents were in place including the Public Protection Business Plan 2014/15 and the Trading Standards Activity Analysis.
- 3.6 Information included in the Food Law Enforcement Service Plan included a profile of the authority, the organisational structure, the scope of the service and service demands. The times of operation, service delivery points and aims and objectives of the service were clearly set out.
- 3.7 The Service Plan included information on the authority's Enforcement Policy, its arrangements for dealing with emergencies out-of-office hours,

staff development, food sampling, infectious disease control, enforcement activities and responding to food incidents.

- 3.8 The officer resource available for the delivery of the food hygiene service was included in the Service Plan. This information was not provided for food standards:
- 3.9 On 1 April 2014 there were 2,123 food establishments on the authority's food establishment database, the majority of which were restaurants, cafes, canteens, small retailers, and takeaways. In addition there were 13 establishments approved under product specific legislation, with six being approved for fish/shellfish (including three purification premises) and five preparing meat products.
- 3.10 In addition to the approved establishments there were several other major food manufacturing establishments including a sandwich manufacturer, ice cream producer, an establishment manufacturing microwave pasta/rice dishes, two large hospitals with cook chill/freeze facilities a Premiership Football Stadium and a local brewery.
- 3.11 The significant demands placed on the authority to support the local shellfish industry were highlighted in the Service Plan together with the specialist knowledge and skills required by officers to regulate the diverse range of food establishments in its area.
- 3.12 The number, type and food hygiene risk profile of establishments in the authority's area were detailed in the Service Plan.

### **Food Establishment Risk Profile – Food Hygiene**

<b>Risk category</b>	<b>2012/13</b>	<b>2013/14</b>	<b>2014/15</b>
<b>A</b>	8	12	6
<b>B</b>	119	171	144
<b>C</b>	945	769	800
<b>D</b>	257	279	321
<b>E</b>	675	688	720
<b>Unrated</b>	117	229	141
<b>Total</b>	<b>2121</b>	<b>2148</b>	<b>2123</b>

The high turnover of food businesses had been identified as a particular challenge in the S

- 3.13 The authority had indicated the likely demand for, and estimated the resources required to deliver the range of food hygiene activities set out in its Service Plan. When compared with the resources available a shortfall of 3.9 full time equivalent (FTE) officers had been identified. This information was not available for food standards activities.
- 3.14 In view of the resource shortfall, work had been prioritised in the Plan to make the best use of the resources available. In 2014/15 the Food and Safety Team was committed to:
- Inspecting all 612 category A, B and C establishments due for inspection;
  - Carrying out all necessary enforcement work;
  - Prioritising new businesses and ensuring the highest risk ones e.g. those carrying out sous-vide, vacuum packing receive appropriate advice and /or inspection;
  - Undertaking reactive work using a risk-based approach, ensuring the most significant public health risks are fully investigated.
- 3.15 Subject to sufficient officer capacity, a commitment was provided to inspect new businesses (estimated at 200) and any outstanding D and E rated establishments (719 establishments).
- 3.16 An estimate of the number of revisits - 150 for enforcement purposes and 130 requested under the statutory Food Hygiene Rating Scheme, was provided.
- 3.17 The authority reported a high turnover of food businesses in its area and acknowledged the challenges this presented in the Service Plan. In the previous year 253 establishments had been closed on its database and 141 new businesses had been added. Some 225 new businesses had been inspected and risk rated during the same period.
- 3.18 In respect of food standards inspections, the Service Plan stated that they would be carried out in accordance with the Food Law Code of Practice. However, neither the risk profile nor the number of food standards interventions due was provided. Further, an estimate of the required number of revisits that would be required had not been provided.

- 3.19 The authority's approach to the investigation of food complaints was outlined in the Service Plan and an estimate provided of the number expected to be received during the year and the resources required to deal with them. Seasonal fluctuation in the number of complaints was reported with complaints peaking during the Summer months.
- 3.20 Formal Home Authority agreements were in place with nine food businesses for food standards. Whilst formal agreements were not in place, officers had regard to the Home Authority Principle in respect of food hygiene. At the time of the audit the authority did not have any Primary Authority Partnerships.
- 3.21 Arrangements for internal monitoring '*quality assessment*' were set out in the Service Plan. Both the food hygiene and food standards services were within the scope of the Department's ISO 9001:2008 registration. Internal monitoring was carried out as part of that process. The quality system included officer appraisals, consideration of enforcement action and compliance with work procedures. Work procedures for the authority's food hygiene service had been recently reviewed to ensure they were consistent with those developed by the Wales Food Safety Expert Panel.
- 3.22 The salary budget for the Food and Safety team was provided in the Service Plan together with the total net budget which included costs for health and safety and licensing work. More detailed information is required in future Service Plans on the costs specifically of providing the food hygiene service which accords with the Service Planning Guidance in the Framework Agreement. The costs associated with providing the Authority's food standards service had not been included in the Service Plan.
- 3.23 The Service Plan set out how the authority's performance in delivering food hygiene enforcement services would be reviewed. However, this information was not provided in the Service Plan for Food Standards. For food hygiene the arrangements included review at the end of each year as part of the next years' Service Plan and quarterly performance monitoring against a number of performance indicators. Performance against performance indicator PP2Q –*The percentage of high risk businesses that were liable to a programmed inspection that were*



*inspected for food hygiene* was reported quarterly on the authority's public website and discussed at Directorate Management Meetings.

- 3.24 A review of 2013/14 performance for food hygiene had been included in the 2014/15 Service Plan. Variations in achieving the targets set out in the previous Service Plan were identified, including failure to carry out the required interventions at category D and E rated establishments. The Service Plan stated that "where capacity exists, the highest risk new businesses and category D and E premises will be inspected in 2014/15, with the remaining premises being inspected in 2015/16 depending on resources. An alternative enforcement strategy will be introduced for category E premises due for Inspection in 2014/15"
- 3.25 The authority had included a comprehensive list of areas for improvement in its 2014/15 Service Plan which included:-
- "Continue with the Food Hygiene Rating Scheme and the implementation of the mandatory scheme;
  - Implement the new requirements of the Food Hygiene Rating Scheme from November 2014 and start the migration work;
  - Continue improvements with the Civica database to produce accurate data for the LAEMS return and improve systems for joint working between teams;
  - Continue to review and implement as necessary the recommendations contained within the *E. coli* report;
  - Review the *E. coli* action plan every 12 months;
  - Implement any new guidance/legislation introduced by the FSA;
  - To continue work to improve consistency between officers on food hygiene inspections, including regular consistency exercises;
  - Utilise the FSS Net database once the Carmarthen PH laboratory is online;
  - Increase the use of social media, for example twitter to promote food hygiene and the food hygiene rating scheme;
  - Updating the website;
  - Develop an alternative enforcement strategy for category E premises due for inspection;
  - Train additional officers within the team to provide additional cover to deal with infectious diseases;

- Assess new businesses that came onto the database in 2014/15 to allow prioritisation of inspections in 2015/16 and meet the requirements of the performance indicator”

3.26 A review of the previous years’ performance and identification of areas for improvement had not been included in the Service Plan in respect of food standards.

**Feed**

3.27 The authority had developed and was implementing an Animal Feed Law Enforcement Service Plan 2014/15 (the Feed Plan) which contained almost all of the information set out in the Service Planning Guidance in the Framework Agreement. Future Plans would benefit by inclusion of the risk profile of feed establishments and an estimate of the number of revisits that will be required.

3.28 The Feed Plan included the profile of the feed establishments in the authority’s area by activity type and the number of interventions planned.

<b>Premises type</b>	<b>Number</b>	<b>Planned Interventions</b>
Arable Farms	1	1
Livestock Farms	279	85
Manufacturers/Producers	0	0
Seller/Distributor of Co-Products	6	2
Importers	0	0
Distributors/Transporters	1	1
Stores	0	0
Retailers	14	5
<b>Total</b>	<b>301</b>	<b>94</b>

3.29 In respect of complaints/service requests, the Feed Plan stated that based on historical information, a low number were expected and that the service is resourced to deal with complaints using appropriately qualified officers.

- 3.30 Budgetary provision for sampling had been made and a commitment to participate in both national and regional sampling exercises was provided. In 2014/15 the authority planned to take five feed samples.
- 3.31 Arrangements for liaison with other organisations on feed matters were set out and the lead feed officer planned to continue to represent the authority on the recently established Wales Regional Lead Feed Officer Group.
- 3.32 The authority's financial allocation for feed was identified in the Feed Plan which was consistent with the previous year. In respect of officer resource, three officers were available to deliver feed official controls in addition to other duties. The estimated resource allocated specifically to feed was 1 full time equivalent (FTE) officer.
- 3.33 The feed service was included within the scope of the Department's registration to ISO 9001:2008 and arrangements for internal monitoring were in place as part of that quality system.
- 3.34 A performance review had been carried out as part of the service planning process which confirmed that the performance targets for the previous year had been met. Planned improvements included improving the accuracy of the feed establishment database and participation in the new Wales Feed Delivery Model from April 2015.
- 3.35 Auditors acknowledged that in future, the authority's planned arrangements for feed would be included within the scope of the new All Wales Animal Feed Service Delivery Plan and a commitment had been provided by the authority to participate in the new service planning arrangements.

***Recommendations***

3.36 The authority should:

- (i) Ensure future Food Law Enforcement Plans in respect of food standards are developed fully in accordance with the Service Planning Guidance in the Framework Agreement. [The Standard – 3.1]
- (ii) Carry out an annual food standards performance review for approval by the relevant member forum or, the relevant senior officer. [The Standard – 3.2]
- (ii) Address any variance in meeting planned arrangements for food standards in subsequent Service Plans. [The Standard – 3.3]

#### **4 Review and Updating of Documented Policies and Procedures**

- 4.1 The authority had put in place a document control procedure as part of its ISO 9000:2008 accreditation. Documented policies and procedures had been developed to support some of the food and feed law enforcement activities carried out. These were available electronically for officers on a shared drive on the authority's intranet.
- 4.2 Lead officers were responsible for developing new procedures, updating existing procedures and ensuring the removal of superseded documents.
- 4.3 Auditors were able to verify that documented procedures had been discussed at team meetings including any required amendments and generally, they had been subject to regular review.
- 4.4 No superseded documents were found to be in place during the audit.

## **5 Authorisations & Training**

- 5.1 The authority's Constitution delegated food and feed law enforcement powers to the Director of Place. The Constitution also stated that the Director of Place had the authority to authorise other officers of the authority to exercise all relevant powers.
- 5.2 The authority had a scheme of delegation which specified the individual statutory instruments under which officers could be authorised. Auditors were able to verify that officers delivering food hygiene, food standards and feedingstuffs official controls had been authorised by the Director of Place.
- 5.3 The authority had not documented its authorisation procedure and was unable to demonstrate that it had authorised its officers based on their competencies. At the time of the audit, auditors were advised that progress had been made in documenting competency assessments which were to be rolled out to all officers. The food standards and feed service had also prepared a draft authorisation procedure based on the Welsh Heads of Trading Standards (WHoTS) model which it intended to implement when the new Wales Feed Service Delivery Model was introduced in 2015.
- 5.4 The authority had appointed lead food hygiene, food standards and animal feedingstuffs officers, all of whom had the necessary specialist knowledge.
- 5.5 The authority reported in its 2013/14 returns to the FSA that it employed 11.10 full time equivalent (FTE) professional officers for food hygiene, four FTEs for food standards and one FTE for feedingstuffs.
- 5.6 Auditors examined the authorisations and training records of four officers carrying out food hygiene official controls, two food standards officers and three officers who carried out food standards and feedingstuffs official controls. These record checks included the lead officers for each service area.
- 5.7 The authorisation levels and duties of the four officers delivering food hygiene official controls were consistent with their qualifications, training and experience. Officer qualification and training records were being

maintained by the authority in accordance with the requirements of the Food Law Code of Practice.

- 5.8 The authorisation levels and duties of three of the five officers delivering food standards official controls were consistent with their qualifications, training and experience. The qualification and training records of the remaining two food standards officers could not be located by the authority. Officer qualification and training records, where available, were held by individual officers not by the authority, contrary to the Food Law Code of Practice.
- 5.9 The FSA had authorised 19 of the authority's officers under the Food and Environmental Protection Act 1984.
- 5.10 Officers carrying out food hygiene and food standards official controls had not been authorised under some key legislation including the Official Feed and Food Control (Wales) Regulations 2009, the European Communities Act 1972, the Trade in Animal and Related Products Regulations 2011, the Animal By-Products (Wales) Regulations 2011 and the Specified Products from China (Restriction on First Placing on the Market)(Wales) Regulations 2008.
- 5.11 All seven officers whose training records were available had received ten hours CPD.

## **Recommendations**

5.12 The authority should:

- (i) Set up, maintain and implement a documented procedure for the authorisation of officers based on their competence. Review and if necessary amend the authorisations and duties of the two food standards officers unable to demonstrate that they have the required qualifications or have attended training consistent with their duties. Review and amend the authorisations of food hygiene, food standards and feed officers to ensure that all relevant legislation is included. [The Standard – 5.1]
- (ii) Maintain records of food standards and feed officer qualifications, training and experience in accordance with the Codes of Practice. [The Standard – 5.5]



## **6 Facilities & equipment**

- 6.1 The authority had all the necessary facilities and equipment for undertaking food hygiene, food standards and feed sampling. Equipment was appropriately stored and accessible to relevant officers.
- 6.2 A procedure for the calibration of temperature monitoring equipment had been developed. This procedure detailed the arrangements for ensuring that equipment could be properly identified, assessed for accuracy and withdrawn from use when found to be faulty. The procedure made reference to testing frequencies and tolerances together with action to be taken where tolerances were exceeded.
- 6.3 Officers had been supplied with infra-red and probe thermometers, which were being calibrated using a reference thermometer and calibration test caps. The equipment allocated to officers was calibrated 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 an infra-red thermometer had exceeded the acceptable tolerance prescribed in the authority's procedure but the equipment was marked as acceptable and remained in use. This thermometer was withdrawn from use when this was identified during the audit.
- 6.5 Chilled and frozen storage equipment was available and records indicated regular temperature checks were being carried out.
- 6.6 The authority had a food and feed establishment database where key information relating to food and feed official controls was logged and stored. This was supplemented with hard copy files and information held electronically on shared drives.
- 6.7 Back-up systems were in place for electronic databases and systems were in place to minimise the risk of corruption or loss of information. There were also security measures in place to prevent access and amendment by unauthorised persons.

- 6.8 In respect of food hygiene, the database was tested and found to be capable of providing accurate information for the FSA's annual Local Authority Enforcement Monitoring System (LAEMS) return.
- 6.9 In respect of animal feed and food standards the database was capable of providing the required information for the LAEMS and annual feed returns. However, the 2013/14 food standards return on LAEMS was not accurate. The implementation of the FSA's risk rating scheme in annex 5 of the Food Law Code of Practice which commenced in September 2014 should ensure the accuracy of future returns. Notwithstanding this, the lead officer was closely managing the food standards interventions programme to ensure interventions were carried out to programme.

### **Recommendations**

- 6.10 The authority should:
- (i) Ensure that equipment is removed from service when found to have exceeded tolerances identified in the authority's procedure [The Standard – 6.2]

## **7 Food and Feedingstuffs Establishments Interventions and Inspections**

### ***Food Hygiene***

- 7.1 In 2013/14 the authority reported through LAEMS that it had inspected 100% of high risk food businesses that were liable to a programmed inspection and 68.34% of category A-E food businesses due to be inspected had been inspected. Further, 89% of food businesses were reported as being 'broadly compliant' with food hygiene law (excluding unrated businesses and those outside the scope of the risk rating scheme). This represented an improvement of approximately 5% from 83.8% reported as 'broadly compliant' in the previous year.
- 7.2 The authority had developed documented procedures aimed at establishing a consistent approach to carrying out food hygiene official controls, including revisits and the approval of product specific establishments. An examination of these procedures confirmed that all made reference to relevant legislation, had been subject to recent review, and were in accordance with the requirements of the Food Law Code of Practice and relevant centrally issued guidance. Further development of the procedures to ensure officers recorded the rationale for partial inspections was recommended. Although the procedure stated that planned interventions may be undertaken outside the planned programme, the benefit of including the requirement for timely intervention when new risks are identified was discussed.
- 7.3 A separate procedure for red-flagging had been developed and discussed in team meetings, however, it was noted that information on the specific criteria for red-flagging records had not been set-out. Auditors discussed the benefits of including details of the criteria for red-flagging significant issues or matters that require review at future interventions on premises records and noted that this was the subject of on-going work by the Wales Food Safety Expert Panel.
- 7.4 Information supplied by the authority prior to the on-site audit indicated that there were a total of 808 establishments overdue an intervention by more than 28 days, of which 64 had been categorised as higher-risk. The authority had identified a further 141 unrated establishments that had not been inspected in the previous year. All of the higher-risk

establishments had been due an intervention within a period of 5 months preceding the audit.

- 7.5 The remainder of the establishments that had been identified as being overdue an intervention were lower-risk, one of which had been risk rated as category D in 2008 and one Category E establishment previously inspected in 2002. Nevertheless, the data supplied by the authority demonstrated that it had adopted a risk-based approach to managing its food hygiene interventions programme.
- 7.6 Food hygiene intervention aides-memoire had been developed by the authority to assist officers in their inspections of food businesses. An interventions summary form had also been developed for providing business operators with information at the conclusion of each intervention.
- 7.7 During the audit an examination of records relating to 10 food establishments was undertaken. All but one establishment had been registered in accordance with the Food Law Code of Practice and centrally issued guidance.
- 7.8 Three of the 10 establishments had been inspected at the frequencies required by the Food Law Code of Practice. Of those which had not, five were higher risk, i.e. one category A, three category B and one category C rated. The remainder were lower risk, i.e. category D and E rated. The higher risk establishments had all been inspected within a period of between one month and seven months after their due dates. The lower risk establishments were overdue for inspection by one month and two and a half years. The Food Law Code of Practice requires that interventions take place within 28 days of their due date. New businesses should be prioritised for inspection based on potential risk and those with a higher potential risk should be inspected within 28 days of starting to trade.
- 7.9 Inspection records were available and generally legible in the 10 food establishment files audited. In all but one case the information recorded by officers on inspection aide-memoires was sufficient to demonstrate that a comprehensive assessment of business compliance with Hazard Analysis Critical Control Point (HACCP) had been undertaken. In one case, the Critical Control Points had not been recorded.

- 7.10 Auditors were able to confirm that an adequate assessment of hygiene training of food handlers had taken place in all but one case, and where appropriate, information relating to discussions between officers and individuals other than food business operators, had been captured on aide-memoires. Details of suppliers and product recall arrangements were also generally being recorded, although specific checks on traceability had only been recorded in three out of 10 cases. No checks had been recorded for the inland control of imported foods.
- 7.11 In all cases, where the food activities involved the handling of both raw and ready to eat foods, the inspection records confirmed that an appropriate assessment of the effectiveness of cross contamination controls had taken place.
- 7.12 The risk ratings applied to food establishments were consistent with the information on inspection records and reports in five cases. However, in four cases the risk rating scores applied in respect of business compliance did not reflect the seriousness of the contraventions reported in the inspection letters or have regard to compliance history. In another case there was insufficient information on the record to confirm the extent of food handling activities at the establishment. In all five cases where risk ratings did not appear consistent with the inspection records or reports, auditors were advised that the ratings were correct and the inspection records or reports did not reflect the inspection findings.
- 7.13 The authority's procedure on revisits stated that establishments not broadly compliant with hygiene legislation would be subject to a revisit to ensure compliance. Guidance was provided for officers on the expected timescales for revisits.
- 7.14 In the 10 cases examined, the authority had identified that revisits were required and records were available to confirm that they had been undertaken within the specified timescales.
- 7.15 In cases where auditors identified the need for follow-up action to address significant issues and/or serious, on-going contraventions, it was noted that in three cases escalation of enforcement had not taken place in accordance with the Public Protection Compliance and Enforcement Policy. In another two cases, auditors were advised that

escalation was not required as other action had been taken and the records did not reflect the findings at the conclusion of the inspections.

- 7.16 Matters of concern had been red-flagged by officers following the most recent inspection in all relevant cases. However, in two cases, relevant issues identified at previous inspections had not been appropriately red-flagged.
- 7.17 The authority had a documented procedure for approving businesses which included the approach to undertaking interventions at approved establishments.
- 7.18 An examination of nine approved establishment files confirmed that all had been properly approved and a comprehensive aide-memoire had been used to capture information during inspections.
- 7.19 Auditors were able to verify from the information available that all nine approved establishments had been inspected by a suitably qualified and experienced officer. Further, all but one had been inspected at the required frequencies. The exception was an establishment where the most recent inspection was two months overdue.
- 7.20 Inspections of approved establishments had generally been comprehensive. However, in one case, the most recent inspection record did not include an assessment of food handler training. In six cases, no assessment of the traceability of individual products carrying official identification marks had been undertaken and in four of those cases, no assessment had been recorded of the system of traceability for incoming products.
- 7.21 All but one establishment had been correctly risk rated. However, where, on the basis of the information available, the correct risk rating had not been applied, the establishment would have been subject to more frequent intervention than required by the Food Law Code of Practice. In the three cases where risk ratings had been reduced following inspection, the reason for revising the ratings had not been recorded contrary to the Food Law Code of Practice.

7.22 Appropriate follow-up action to secure compliance at approved establishments had been taken and in general, file records were well organised and comprehensive.

7.23 An Alternative Enforcement Strategy (AES) had not been introduced for maintaining surveillance of Category E establishments although plans were in place to do so.

***Recommendations***

7.24 The authority should:

(i) Ensure that food establishment interventions / inspections are carried out at the minimum frequency set out in the Food Law Code of Practice. [The Standard -7.1]

(ii) Carry out interventions/inspections in accordance with the Food Law Code of Practice, centrally issued guidance, and its own policies and procedures. [The Standard – 7.2]

(iii) Assess the compliance of establishments in its area to the legally prescribed standards; and take appropriate action on any non-compliance found, in accordance with the authority's Enforcement Policy. [The Standard -7.3]

(iv) Further develop its procedures in relation to partial inspections and bringing forward inspections. [The Standard – 7.4]

*Verification Visits to Food Establishments*

7.25 During the audit, verification visits were made to two food establishments with authorised officers of the authority who had carried out the most recent 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.

7.26 The officers were knowledgeable about the businesses and demonstrated an appropriate understanding of the food safety risks

associated with the activities at each premises. The officers demonstrated that they had carried out a detailed inspection, appropriately assessed compliance with legal requirements and centrally issued guidance, and were offering helpful advice to the food business operators.

- 7.27 On one of the inspections the officer was able to demonstrate that immediate informal action had been taken to deal with cross-contamination risks. However, this had not been clearly recorded on the aide-memoire or inspection report. The benefits of clearly recording decisions were discussed.
- 7.28 On the other visit, despite a thorough inspection taking place and the key issues identified, the risk rating applied did not reflect the inspection findings. Consequently a revisit had not been carried out. This meant that contraventions identified during the inspection had not been followed up.

### ***Food Standards***

- 7.29 In 2013/14 the authority had reported through LAEMS that there were 1,604 establishments on its food standards database. The risk rating profile of which comprised; 17 category A, 1,396 category B, 190 category C and one unrated establishment. Auditors noted that there was a significant variation between the reported data and that held on the authority's database at the time of the audit.
- 7.30 Since the submission of its most recent LAEMS return, the authority had transferred the establishment risk ratings on its database from the Association of Chief Trading Standards Officers (ACTSO) risk assessment scheme to the risk rating scheme in Annex 5 of the Food Law Code of Practice. The migration of data between these risk rating schemes had resulted in a change to the overall establishment profile; which the authority advised, had provided a more accurate reflection of the food standards risk ratings of businesses in its area.
- 7.31 The authority had recently developed a documented Food Standards Inspection Protocol, which contained comprehensive information on the process to be followed by officers when undertaking full scope food



standards inspections. A documented work instruction had also been produced that set-out what information obtained in the course of an inspection should be captured by officers on inspection report forms and the database. An examination of these documents confirmed that their content had regard to the requirements of the Food Law Code of Practice.

- 7.32 Whilst there was a protocol in place for food standards inspections, the authority had not documented its approach to the other types of official control interventions undertaken by officers, including partial inspections and audits. Further, there was no procedure covering the arrangements for enforcement revisits, but it was noted that a code had been created on the database for recording significant breaches. When applied, this code schedules a date and reminder for the revisit to take place.
- 7.33 A post inspection report form, which also served as a report of visit was being used by officers for recording inspection findings. However, the form did not contain sufficient fields to facilitate the capture of observations made in the course of a full scope assessment of compliance with food standards requirements.
- 7.34 An examination was carried out of records held on the database and hardcopy files relating to 10 food establishments selected for audit. Records indicated that the food business operators for two of these had changed within the two months prior to the audit, and that the establishments were awaiting a food standards intervention.
- 7.35 The inspection histories confirmed that in recent years all establishments had been subject to inspections at intervals of between one and two years. Although these businesses had been inspected on a programmed basis, the breakdown of risk rating scores that had been previously applied was not available. Therefore, auditors were unable to verify that the correct risk rating categories had been allocated to establishments or that the frequency of inspections was in accordance with the Food Law Code of Practice.
- 7.36 Inspection reports were available for seven of the eight food establishments. Whilst reports provided an overall indication of the aspects of food standards law that had been considered by officers, information captured on report forms was limited to exception reporting.

As a result, records did not contain an appropriate level of detail to confirm the extent and nature of the food operations; or to demonstrate that an adequate assessment of compliance with legal provisions relating to quality systems, traceability, compositional standards, product packaging and labelling had been undertaken, as appropriate.

- 7.37 In respect of two establishments, inspection records indicated that enforcement revisits were required to check that 'significant breaches' identified had been remedied. There was evidence available in both cases to confirm that timely revisits had taken place and that contraventions had been appropriately addressed.
- 7.38 A New Business Procedure had recently been developed in conjunction with the Food and Safety Team, which contained information on the approach to managing food standards interventions at new businesses. The procedure specifically detailed arrangements for setting up and closing establishments on the database and for creating service requests for new business advice.
- 7.39 The authority was able to provide evidence that following the identification of new food businesses, food business operators had been provided with a range of verbal and written food standards advice to assist them in complying with statutory requirements. Auditors advised the authority of the importance of ensuring that information supplied in connection with registration is used for determining the priority of new business inspections.
- 7.40 An examination of records relating to 10 food establishments reported to have been subject to an AES was undertaken. The records indicated that in most instances establishments had been subject to an official control intervention as opposed to an AES.

### ***Recommendations***

7.41 The authority should:

- (i) Risk rate food establishments in accordance with the requirements of the Food Law Code of Practice and ensure interventions/inspections are carried out at a frequency, which is not less than that determined under the intervention rating scheme set-out in the Food Law Code of Practice. [The Standard -7.1]
- (ii) Carry out Alternative Enforcement Strategies (AES) 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 legally prescribed standards. [The Standard - 7.3]
- (iv) Set-up, maintain and implement documented procedures for the full range of interventions it carries out. [The Standard – 7.4]
- (v) Ensure observations made in the course of an inspection are recorded in a timely manner to prevent loss of relevant information. [The Standards – 7.5]

### *Verification Visit to a Food Establishment*

7.42 During the audit, a verification visit was made to a food establishment with an authorised officer of the authority who had carried out the most recent food standards inspection. The main objective of the visit was to consider the effectiveness of the authority's assessment of food business compliance with food standards requirements.

7.43 The officer was knowledgeable about the business and demonstrated that relevant food standards controls had been considered during the inspection. Compliance with applicable statutory requirements had been properly assessed.

## **Feed**

- 7.44 In its 2013/14 feed return to the FSA the authority reported that it had 301 feed establishments in its area. The authority also reported that 85 category A-C feed businesses had been inspected and 148 had been subject to another type of intervention from a range which included sampling and educational visits.
- 7.45 The majority of feed businesses registered by the authority were livestock farms, along with a small number of retailers and food businesses selling co-products / waste food.
- 7.46 The authority had developed a detailed Feed Controls procedure. This procedure prescribed the preparation, activity and follow-up associated with inspections and favoured unannounced inspections in accordance with the Feed Law Enforcement Code of Practice. The lead officer advised auditors that the authority was intending to adopt a new feed inspection procedure and a number of aides-memoire based on those developed by the Wales Heads of Trading Standards (WHoTS) when the new Wales feed delivery model commences on 1 April 2015.
- 7.47 The records relating to 10 feed establishments were examined. Eight of these were farms, two were co-product establishments. Feed registration forms were available in four cases.
- 7.48 The authority had experienced difficulties following a database upgrade which limited the ability of officers to enter a complete feed risk assessment. As a result, the authority advised that none of the risk ratings were reliable. The authority further advised that work to remedy the database issue was ongoing and a new activity code for feed interventions was being introduced which would facilitate more accurate reporting and internal monitoring in the future.
- 7.49 An accurate assessment of the frequency of interventions was difficult due to the database limitations. However, the authority advised that intervention frequencies was led by the frequency of animal health interventions.
- 7.50 Five of the ten most recent interventions had been followed up with reports left with the feed business operators at the time of the inspection

or sent to the business following the inspection. Inspection reports had not been provided to the remaining five establishments.

- 7.51 File checks and verification visits carried out by auditors provided evidence that the authority was carrying out some assessment of compliance. Only one of the records audited had indicated any non-compliance at the last inspection, and that had been followed up in accordance with the Feed Law Code of Practice.
- 7.52 All available contemporaneous inspection records were legible and retrievable. Generally, observations made in the course of an inspection had been recorded in a timely manner to prevent the loss of relevant information. However, the authority had not documented the nature and extent of the feed checks it had carried out in six cases. The remaining cases included examples of inadequate information on the products checked for compliance with compositional or labelling requirements, assessment of the adequacy of pest control arrangements and full details of feed establishments supplied by the business. The size and scale of feed operations, type of activity and information about suppliers had not been consistently recorded.
- 7.53 The authority operated an Alternative Enforcement Strategy (AES) for feed business establishments which was in the process of being reviewed. Although there was no documented policy or procedure, the authority advised auditors that the intention of the strategy was to use a variety of interventions, including desktop assessment, sampling visits and full inspections, to maintain enforcement activity at low risk and unregistered feed establishments.
- 7.54 The records of ten reported AES interventions were checked. Three were found not to relate to feed interventions and a further two had not previously been rated low risk and so were not eligible to be included in an AES.
- 7.55 One of the remaining five AES interventions included a sample. However, despite the sample result being unsatisfactory, the authority had not carried out any follow-up activity. Another of the remaining five establishments had been risk-rated for the first time after being sent a postal questionnaire that had not been returned which is contrary to the Feed Law Enforcement Code of Practice. The remaining three

establishments had not previously been subject to an inspection, partial inspection or audit, making them ineligible for inclusion in an AES. The inspection history of one of these establishments was not available.

### **Recommendations**

- 7.56 The authority should:
- (i) Carry out feed interventions at a frequency which is not less than that required in the Feed Law Enforcement Code of Practice. [The Standard – 7.1]
  - (ii) Carry out interventions, risk rate and approve or register feed establishments in accordance with the Feed Law Enforcement Code of Practice. [The Standard – 7.2]
  - (iii) Assess the compliance of establishments and systems in its area to the legally prescribed standards. Take appropriate action on any feed non-compliances identified, in accordance with its enforcement policy. [The Standard – 7.3]
  - (iv) Set up, maintain and implement a documented procedure for its Alternative Enforcement Strategy. [The Standard – 7.4]
  - (v) Ensure that observations made in the course of feed interventions are recorded in a timely manner to prevent the loss of relevant information. [The Standard – 7.5]

### *Verification Visits to Feed Establishment*

- 7.57 During the audit, verification visits were made to two feed establishments with authorised officers of the authority who had carried out the most recent feed interventions. The main objective of the visits was to consider the effectiveness of the authority's assessment of food business compliance with feed law requirements.

- 7.58 The officers were knowledgeable about the businesses and demonstrated an appropriate understanding of the risks. They had carried out thorough inspections and had generally assessed compliance with legal requirements and centrally issued guidance. They had also offered helpful advice to the feed business operators. However one of the visits had been carried out by an officer who had not been trained in HACCP at the time the visit was carried out. As a consequence the compliance of a seasonal annex II operation that had been taking place was not assessed. However, the officer had since received feed HACCP training and was intending to assess HACCP compliance at the next planned visit, if necessary. No annex II operations were being carried out at the time of the verification visit.
- 7.59 The findings of previous interventions, detailed on the records held on file, reflected the conditions observed at the establishment, and where it had been required, there was evidence that appropriate follow-up action had been undertaken.

## **8 Food, Feed and Food Establishments Complaints**

- 8.1 The authority had developed a Food Complaints Procedure the purpose of which was to provide a documented and uniform approach to receiving and responding to food/feedingstuffs complaints. The procedure included referral arrangements to inland authorities and Primary/Home/Originating authorities and to complaints about food establishments and imported food.
- 8.2 The procedure indicated a target response time of two days for complaints. However, this was not consistent with the longer first response time targets programmed into the authority's database. Auditors were advised that, in practice, the response times on the database were being observed.
- 8.3 The authority had developed a Consumer Advice Service Food Complaints Procedure which set out basic call handling procedures and a procedure 'Complaints About Food' for the benefit of investigating officers. It included arrangements for referral to inland authorities and Primary/ Home/ Originating authorities and made reference to complaints about food premises but not imported food.

### ***Food Hygiene***

- 8.4 Ten food hygiene complaint files were examined. All complaints had been responded to within the target response times and investigated in accordance with the Food Law Code of Practice and the authority's own procedure. Appropriate follow-up action had been taken by the authority in all cases.

### ***Food Standards***

- 8.5 Nine food standards complaint files were examined. Six of these contained details of the complainant, the food and linked food establishments. Auditors noted that three complainants had remained anonymous. Appropriate investigations and follow-up action had been carried out in four of the nine cases. There were inadequate records on file that investigations were completed or followed up in the remaining five cases. The outcome of investigations had been confirmed with food business operators in two of the five cases where confirmation was appropriate. Complainants had been informed of the outcome of



complaint investigations in three cases whilst in a further three cases this was not possible as the complaints had been made anonymously.

***Feed***

- 8.6 An examination was undertaken of the records relating to the two service requests received by the authority in the two years prior to the audit. Detailed records of the responses provided by officers were available, and auditors were able to verify that timely and appropriate action had been taken in both cases.

***Recommendations***

- 8.7 The authority should:
- (i) Amend its food standards complaint procedure to include reference to complaints about food originating in other EU and third countries. [The Standard – 8.1]
  - (ii) Investigate food standards complaints in accordance with the Food Law Code of Practice, centrally issued guidance and the authority’s policies and procedures and take appropriate action in response to food standards complaints in accordance with its Enforcement Policy. [The Standard – 8.2 and 8.3]

## **9 Primary Authority Scheme and Home Authority Principle**

- 9.1 The authority had set out its commitment to the Primary Authority Scheme and Home Authority Principle in its Food Law Enforcement Service Plan. A number of key officers had attended Primary Authority training and auditors were able to verify that officers had access to the Primary Authority website.
- 9.2 Generally, Home Authority and Primary Authority issues had been considered in the development of work procedures.
- 9.3 Although the authority had no Primary Authority agreements in place, auditors were able to verify that, in its capacity as an enforcing authority, the authority had regard to Primary Authority guidance and followed up matters of concern with Primary Authorities as appropriate.
- 9.4 The authority had formal Home Authority Agreements in place with 11 local food businesses for food standards. Records examined during the audit demonstrated that the authority was providing accurate and timely advice to businesses and had responded appropriately to requests for information from other local authorities.

## **10 Advice to Businesses**

- 10.1 The authority set out its commitment to supporting local food businesses and building positive working relationships with them in its Food Law Enforcement Service Plan.
- 10.2 An extensive range of food hygiene, food standards and feed information was available for businesses on the authority's website and officers had been proactive in providing advice to businesses during inspections as well as on request.
- 10.3 A booklet 'Starting a New Food Business' had been developed by the authority which contained advice for prospective food business operators on a range of food safety and food standards issues. This was also available electronically on the authority's website.
- 10.4 The authority had participated in a Local Produce Markets Project – 'Forward with Food' in which links had been developed with traders at local farmers markets across the authority's area to provide advice on food safety and food standards issues.
- 10.5 Technical advice had been provided to businesses in respect of which it acted as a Home Authority and targeted mailshots had been provided to relevant food businesses on issues such as food allergens and the control of cross contamination. There was evidence that the authority had been proactive, regularly using social media to promote food safety and food standards information.
- 10.6 The authority had benefited from FSA grant funding to assist businesses in developing their food safety management systems and had facilitated training courses in languages other than English for Chinese, Bengali and Turkish food handlers.
- 10.7 Business requests for information had been logged on the authority's food establishment database.

## **11 Food and Feed Establishments Database**

- 11.1 The authority operated an electronic food and feed establishment database. A dedicated systems administrator was responsible for setting up new users on the system, creating passwords, setting security levels and delivering basic user training. A detailed training manual had been developed to ensure the system was used consistently by food and feed enforcement officers.
- 11.2 The ability to set up new establishments on the database was restricted to key administrators as was the ability to close establishments. This assisted in maintaining the accuracy of the database.
- 11.3 The food establishment database was used to generate the authority's LAEMS return and information held on the database informed the authority's annual feed return to the FSA.
- 11.4 A New Business Procedure provided details of the methods used to keep the food establishment databases up to date and accurate. These included routine checks of planning and licensing applications, following up enquiries from potential new businesses and using information obtained during officer visits.
- 11.5 A Feed Database Management Procedure had been developed to establish a uniform approach to management of the authority's feed establishment database. The procedure would benefit by including the means by which new feed establishments are identified by the authority for inclusion on the database.
- 11.6 Auditors randomly identified nine food establishments located in the authority's area from an Internet search. All had been included on the food establishment database and had been subject to food hygiene and food standards interventions where appropriate.
- 11.7 Auditors acknowledged on-going work by the authority to ensure the accuracy of its feed establishment database which was not tested during the audit.

***Recommendation***

11.8 The authority should:

- (i) Review and amend its Feed Database Management Procedure to include the arrangements in place for ensuring the accuracy of its feed establishment database and continue to review the database to ensure its accuracy. [The Standard – 11.1 and 11.2]

## **12 Food and Feed Inspection and Sampling**

- 12.1 The authority's policy on food and feedingstuffs sampling was set out in its Food Law Enforcement Plan and Animal Feedingstuffs Law Enforcement Service Plan.
- 12.2 The policy stated that sampling would be planned and co-ordinated having regard to national sampling priorities. Other factors that the authority had regard to when drawing up sampling plans were also included such as complaints, local manufacturers, local co-product producers and imported food /feed from third countries. A commitment to participate in both national and regional sampling programmes e.g. Welsh Food Microbiological Forum surveys, was provided together with an estimate of the number of samples that would be taken and the available budget. In respect of unsatisfactory samples, the policy provided a commitment to liaise with the Primary or Home Authority.
- 12.2 A procedure for the sampling of food for microbiological analysis had been developed to provide officers with a guide on how and when samples should be taken. The stated intention of the procedure was to 'establish a uniform approach to sampling visits'. Information was also contained within the procedure on taking formal and informal samples. A comprehensive list of sampling equipment was attached as an appendix.
- 12.3 The sampling procedure was supplemented by other official sampling guidance documents, specifically CEFAS protocols for official control monitoring of classified shellfish production areas. Auditors were able to verify that the sampling policy and procedure had been developed in accordance with the Food Law Code of Practice and relevant official guidance.
- 12.4 A Trading Standards Procedure for Sampling and Post Procurement had been developed that comprised a flow diagram outlining the process for taking samples. The procedure had not been updated to reflect the authority's current sampling practices and did not contain key information in respect of sampling methodology, the equipment required or the arrangements for storage and transportation of samples.
- 12.5 Whilst the authority had not developed a feed sampling procedure, auditors were advised that officers had regard to the FSA's guidance

when carrying out both feedingstuffs and food standards sampling activities.

- 12.6 Sampling programmes for food hygiene (including shellfish beds), food standards and feedingstuffs had been produced. The programmes reflected the sampling priorities detailed in the authority's policy and were consistent with regional sampling plans. Auditors noted that the authority had made use of FSA funding to participate in food sampling projects.
- 12.7 The authority had appointed a Public and Agricultural Analyst for carrying out examination of food and feed samples, and had an agreement with Public Health Wales (PHW) for the microbiological analysis of food. However, the Public Protection Committee minute of appointment omitted reference to the Agricultural Analyst. Auditors acknowledged that in practice, the same Analyst was examining food and feed samples. The appointed laboratories were on the recognised list of UK designated Official Laboratories.
- 12.8 During the audit, records of 10 food hygiene samples submitted for microbiological analyses were examined. Details of the samples obtained and the results of analysis were available in all cases. The results of eight samples had been reported as borderline and two were unsatisfactory.
- 12.9 Appropriate action had been taken to investigate the cause of five borderline samples and both unsatisfactory samples. The remaining three borderline results had not been followed up in accordance with the authority's procedure. In one of these cases the reason for not carrying out follow-up had been documented.
- 12.10 Evidence was not available to verify that the Primary, Home or Originating Authorities had been notified of sampling results in the four relevant cases.
- 12.11 Five food standards sample records were selected for examination. All samples had been taken in accordance with the sampling programme and the results were available on file in all cases.

- 12.12 Four samples results were reported to be satisfactory whilst the remaining sample result was unsatisfactory.
- 12.13 The authority was unable to demonstrate appropriate follow-up action in the case of the unsatisfactory sample result. Although the Home Authority had been informed of the presence of undeclared sulphites in the food and subsequently removed the affected batch from the market locally, the matter had not been reported to the FSA, contrary to the Food Law Code of Practice.
- 12.14 Five feed sample records were selected for examination. The results of four were satisfactory whilst the remaining sample result had not been received from the Public Analyst, although it had been submitted eight months previously. All feed samples had been taken in accordance with the sampling programme and the results were available on file in each case with the exception of the unreported result. Auditors advised officers to contact the laboratory for the outstanding result as a matter of priority.
- 12.15 The authority was able to demonstrate appropriate follow-up action in all cases where results had been reported.
- 12.16 Audit checks confirmed that all microbiological, food standards and feed samples had been taken by appropriately trained and authorised officers.



***Recommendations***

12.17 The authority should:

- (i) Set-up, maintain and implement a documented feed sampling procedure and review and amend its food standards sampling procedure ensuring they i) include arrangements for the procurement or purchase of samples, continuity of evidence and the prevention of deterioration or damage to samples whilst under its control and ii) accord with any centrally issued or relevant guidance, and the Codes of Practice. [The Standard –12.5]
- (ii) Take appropriate action in accordance with its own procedure where microbiological sample results are borderline. [The Standard – 12.7]
- (iii) Ensure an Agricultural Analyst is appropriately appointed to carry out examination and analyses of feed samples. [The Standard – 12.8]

### **13 Control and Investigation of Outbreaks and Food Related Infectious Disease**

- 13.1 The authority had identified a Lead Officer for Communicable Disease who had attended the Wales Lead Officer Communicable Disease Training Programme.
- 13.2 An Outbreak Control Plan had been developed in consultation with relevant stakeholders. The plan was based on a template that had been produced by a multi-agency group, including Public Health Wales and Welsh Government.
- 13.3 The authority had arrangements in place for responding to cases of food poisoning and food-borne infectious disease out-of-office hours.
- 13.4 A procedure for investigating sporadic cases of foodborne disease had been produced by the authority supported by a range of advisory leaflets and questionnaires. Separate procedures for investigating norovirus outbreaks and suspected cases of food poisoning had also been developed.
- 13.5 Notifications relating to four outbreaks and six sporadic cases of food related infectious diseases were selected for audit. Auditors were able to verify from the records available that thorough and timely investigations had been carried out by competent officers. However, in one case, an investigation had not been deemed necessary as the matter was identified as a case of blood poisoning which had been notified in error. The file record indicated that it was a case of food poisoning identified through a blood sample. No further explanation had been recorded of the basis of the decision not to investigate.
- 13.6 In all cases, appropriate follow-up action had been taken where this had been identified as necessary. Auditors noted that in one case, following an outbreak found to have arisen from a specific food business, most likely as a result of undercooking chicken livers, the risk rating of that establishment had not been revised, either during or after the conclusion of the outbreak investigation.

***Recommendation***

13.7 The authority should:

- (i) Ensure that its procedure for the investigation of foodborne disease is implemented in all cases. [The Standard -13.2]

## **14 Feed and Food Safety Incidents**

- 14.1 The authority had developed a Food Alerts and Incidents Procedure which set out how officers should deal with Food Incidents, Food Alerts for Action, Product Withdrawal Information Notices, and Product Recall Information Notices issued by the FSA, including those received outside office hours. The Procedure included arrangements for notifying the FSA of food incidents arising locally and made reference to the Rapid Alert System for Food and Feed (RASFF).
- 14.2 Implementation of the Procedure was the responsibility of the Team Leaders.
- 14.3 Auditors noted that the authority routinely used social media to enhance local publicity in response to food incidents.
- 14.4 Auditors examined records in respect of eight food alerts for action issued by the FSA during the previous year. All had been received electronically by the authority and provided with an appropriate response.
- 14.5 Action taken by the authority had been documented and correspondence, including officer e-mails, had been maintained and were easily retrievable.
- 14.6 Auditors were able to verify from records held by the FSA that the authority was aware of the requirement to notify the FSA of any potential incidents or hazards arising locally. However, during the audit an unsatisfactory food standards sampling result was identified which constituted a non-localised food hazard and whilst, the home authority had been notified, this should have also been notified to the FSA.
- 14.7 Effective arrangements were in place for liaison between food safety and food standards officers in appropriate cases.

***Recommendation***

14.8 The authority should:

- (i) Notify the FSA of any wider food safety problem in accordance with the Food Law Code of Practice. [The Standard – 14.5]

## **15 Enforcement**

- 15.1 The authority had developed a Public Protection Compliance and Enforcement Policy that covered regulatory functions exercised by the Housing and Public Protection Service including the food hygiene and food standards services. There was no record to verify that the Policy had been appropriately approved and it had not been made available to the public and food businesses on the authority's website.
- 15.2 The policy was largely in accordance with the Food and Feed Law Codes of Practice, and official guidance, and made reference to statutes that define legal processes for undertaking criminal investigations. Whilst the procedure for food hygiene interventions included taking action in council operated establishments and the Food Law Enforcement Procedure contained criteria for the range of enforcement sanctions available for food hygiene offences, the Policy would benefit from inclusion of this information.
- 15.3 An Enforcement Procedure had been developed by the authority, which was included in its quality management system. This procedure provided guidance to officers responsible for undertaking food and feed law enforcement, on the actions, administrations and legal processes to be taken into account when considering enforcement action. In particular, details were provided on the arrangements for preparing a case file for recommending Simple Caution or Prosecution.
- 15.4 The authority had developed a separate Seizure, Detention, and Voluntary Surrender procedure for food found to be in contravention of food safety requirements. The procedure included certification under regulation 27 of the Food Hygiene (Wales) Regulations 2006 and was generally in accordance with the Food Law Code of Practice and centrally issued guidance.
- 15.5 The food hygiene service had also developed a Food Law Enforcement Procedure supplemented by separate procedures for the service of Hygiene Improvement Notices and Improvement Notices, Remedial Action Notices (RANs) and Prohibition Procedures (including voluntary closures) which were in accordance with the Food Law Code of Practice and centrally issued guidance.

- 15.6 Procedures had not been developed for the service of imported food and feed notices, food standards Improvement Notices, Feed Hygiene Improvement notices, Feed Hygiene Emergency Prohibition notices and voluntary action.
- 15.7 The following formal enforcement actions had been reported, in pre-audit documentation, as having been undertaken in the two years prior to the audit:
- 14 Hygiene Improvement Notices (HINs)
  - 1 Remedial Action Notice (RANs)
  - One Voluntary Surrender
  - One Detention Notice
  - Three Simple Cautions
  - Four Prosecutions
- 15.8 No formal enforcement had been undertaken in relation to feed during the previous two years.
- 15.9 Three cases had been identified, from the 10 food hygiene intervention file checks, where escalation of enforcement had not taken place in accordance with the Public Protection Compliance and Enforcement Policy. The reasons for departure from the criteria set out in the policy had not been documented.
- 15.10 Ten Hygiene Improvement Notices (HINs) and associated records were selected for audit. In all cases, the details of the contraventions identified and the measures to be taken to achieve compliance had been specified along with all other required information.
- 15.11 In most cases the service of HINs had been an appropriate course of action. However, in two cases, the authority acknowledged that the HINs could have been served sooner but it had not escalated its enforcement in accordance with its enforcement policy. In a third case, involving a long history of formal action and ongoing non-compliance by the same food business operator, a notice relating to food safety management had been withdrawn as a result of a temporary change of management. No further action was undertaken until a visit to the establishment three months later.

- 15.12 Two HINs had been served on the registered food business operator. In the remaining eight cases, the authority acknowledged that food business registration forms had not been updated. In three cases where businesses were operated by partnerships, the notice had not been served on all registered food business operators.
- 15.13 There had been a timely checks on compliance in only two cases whilst in five cases, the check had taken place outside of the five days specified in authority's procedure. In three cases, no record of a check on compliance was available. In all relevant cases where compliance had been achieved, this had been confirmed in writing to the food business operators.
- 15.14 Audit checks were undertaken of one Remedial Action Notice and associated records, which confirmed that the notice was an appropriate course of action, had been drafted, served and followed up in accordance with the Food Law Code of Practice and was correctly withdrawn following the completion of works.
- 15.15 Auditors examined the records of five voluntary closures which had been undertaken by the authority in the two years prior to the audit. In all cases auditors were able to verify that this had been an appropriate course of action, taken in accordance with the Food Law Code of Practice and centrally issued guidance. However, in four cases, there was no evidence that frequent checks had been carried out to ensure the terms of the agreement were being observed. In one of these four cases, there was no evidence that a check had been made until seven days after the agreement had been made.
- 15.16 In the two cases where foods had been detained or voluntarily surrendered the action taken had been appropriate and in accordance with the Food Law Code of Practice, centrally issued guidance and the authority's own procedure.
- 15.17 An examination of the three Simple Caution case files, two of which related to food hygiene and the other to food standards offences, confirmed that the action taken was necessary and that they had been appropriately administered and approved in accordance with official guidance.



15.18 Audit checks of the four Prosecution case files confirmed that in all cases the action taken had been appropriate and due regard had been given to the authority's Enforcement Policy and procedures.

***Recommendations***

15.19 The authority should:

- (i) Review and amend its Enforcement Policy to include criteria for the use of statutory notices. Ensure the Policy is approved by the relevant member forum or senior manager and implemented with regard to pursuing graduated enforcement in the event of significant and / or ongoing non-compliance. [The Standard – 15.1]
- (ii) Set-up, maintain and implement documented procedures for imported food and feed notices, food standards Improvement Notices, Feed Hygiene Improvement Notices, Feed Hygiene Emergency Prohibition Notices and voluntary action in accordance with the relevant Codes of Practice and centrally issued guidance. [The Standard – 15.2]
- (iii) Ensure that food hygiene 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 all decisions on enforcement action are made following consideration of the authority's enforcement policy. Document the reasons for any departure from the criteria set-out in the Enforcement Policy. [The Standard - 15.4]

## **16 Records and Interventions/Inspections Reports**

### ***Food Hygiene***

- 16.1 Food business records, including registration forms, inspection aide-memoires, post inspection report forms and correspondence were being stored by the authority on hard copy files and 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.
- 16.2 Information relating to food establishments selected for audit was easily accessible and all linked documents associated with the interventions carried out could be viewed. Where relevant, information relating to the last three interventions was available and records were being retained for six years.
- 16.3 Officers were using inspection letters to communicate findings to food businesses, which clearly differentiated between legal requirements and recommendations for good practice. These letters also detailed corrective actions and in most cases, timescales required to achieve compliance, as well as indicating any further follow-up action intended by the authority.
- 16.4 Post-inspection report forms and inspection letters contained details of the food business operator, inspection date, type of business, the specific food law under which the intervention was conducted, the areas inspected, name and designation of inspecting officer, documents examined, whether samples were taken and the authority's address and contact details of a senior officer in case of dispute.
- 16.5 In all cases the latest inspection letters had been sent to the business within 14 days from the date of the visit, as required by the authority's procedures.
- 16.6 Deviations from procedures were identified in relation to the escalation of action following interventions, sampling activity and communicable disease investigations. Reasons for these deviations had not been recorded.

***Recommendation***

- 16.7 The authority should:
- (i) Record, with reasons, deviations from set procedures. [The Standard – 16.1]

***Food Standards***

- 16.8 Food standards inspection report forms were being maintained by the authority on hard copy establishment files, as well as on the database. Information relating to intervention activity, including the date, type of intervention undertaken and risk rating category, was also being recorded on the database.
- 16.9 The most recent inspection report forms relating to seven of the eight relevant food establishments selected for audit were all retrievable and legible, and the authority was able to demonstrate that such records were being retained for six years.
- 16.10 Officers were using report forms to communicate inspection findings to food businesses operators. These forms contained some of the information required to be reported to food business operators following interventions, as specified in Annex 6 of the Food Law Code of Practice. Information that had not been provided on forms included, the name of the food business operator/s, key points discussed during the visit, a distinction between contraventions and recommendations for good practice, the action to be taken by the authority and timescales for achieving compliance. Further, the contact details of a senior officer in case of dispute had not been provided.
- 16.11 The authority was able to provide evidence that two high-risk food establishments had been provided with letters detailing the outcome of inspections. These contained additional information to that provided on the report forms.

16.12 Auditors were able to verify that information held on hard copy file records was consistent with that held on the food establishment database.

***Recommendation***

16.13 The authority should:

- (i) Ensure that food standards post inspection report forms provided to businesses following interventions/inspections contain all of the information required by the Food Law Code of Practice. [The Standard -16.1]

***Feed***

16.14 Inspection records and reports were being maintained in hard copy, on the feed establishment database or as a combination of both. Database and hard copy records were found to be up to date, accurate and consistent.

16.15 Farm visits were being recorded on a form, a copy of which was left with the business on completion of the inspection. Contemporaneous inspection records were available for the non-farm establishments checked.

16.16 Five reports had been left with feed business operators at the time of the most recent inspection or sent to the business following the inspection. Some of the information required by annex 6 of the Feed Law Code of Practice had been included in the reports. Information not consistently provided included the time of the inspection, the legislation under which the inspection had been carried out or the inspecting officer's name. Auditors noted that the new aide-memoire, once implemented, had the potential to resolve some of these issues.

16.17 Records were being kept for six years in accordance with the Framework Agreement.

***Recommendation***

16.18 The authority should:

- (i) Maintain up to date, accurate feed establishment records in a retrievable form. These records should include reports of all interventions / inspections, the determination of compliance with legal requirements made by the officer and details of action taken. The authority should also record, with reasons, deviations from set procedures. [The Standard – 16.1]

## **17 Complaints about the Service**

- 17.1 The authority had developed a Corporate Compliments, Concerns and 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 at stage one by the relevant Department and then, if the customer was not satisfied, by the Corporate Complaints Team on behalf of the Chief Executive.
- 17.3 Auditors were able to verify that there were effective arrangements in place within the service to respond to customer complaints and examples were provided of timely and thorough complaint investigations.
- 17.4 Auditors noted that whilst correspondence relating to complaints was being maintained, there was not a consistent method of logging stage one complaints on receipt to enable the authority to identify trends, accurately report activity and performance in meeting the 10 working day response target set out in its corporate procedure. It is a requirement of the Framework Agreement for a record to be made of all complaints received and action taken by the authority in response.

### ***Recommendations***

- 17.5 The authority should:
- (i) Record all complaints received together with the actions taken in response [The Standard -17.3]

## **18 Liaison with Other Organisations**

18.1 The authority had indicated in its Food Law Enforcement Service Plan that it had liaison arrangements in place with a number of external groups aimed at facilitating consistent enforcement. They included the following:

- Wales Heads of Environmental Health (WWhoEH);
- Wales Heads of Trading Standards (WWhoTS);
- Wales Food Safety Expert Panel;
- South West Wales Food Safety Task Group;
- Wales Food Hygiene Rating Scheme Steering Group;
- South West Wales Communicable Disease Group;
- Wales Food Standards and Agriculture Group;
- Wales Regional Lead Feed Officer Group;
- Glamorgan Food Group;
- Welsh Food Microbiological Forum (WFMF);
- Wales Heads of Environmental Health Communicable Disease (Task Group and Technical Panel)

18.2 Auditors were able to verify that liaison arrangements were in place with a wide range of other organisation including Public Health Wales, Welsh Water, Natural Resources Wales, South Wales Sea Fisheries, the Welsh Food Fraud Coordination Unit, Swansea Bay Port Health Authority, Centre for Environment, Fisheries and Aquaculture Science (CEFAS), and the Food Standards Agency.

18.3 Ongoing liaison arrangements were also in place with colleagues in the authority's Planning, Licensing and Building Control Services.

18.4 Work had been carried out with a neighbouring authority to explore opportunities for improved collaboration in the delivery of Trading Standards services. An action plan identifying shared objectives had been developed and was being implemented

## **19 Internal Monitoring**

19.1 Internal monitoring is important to ensure performance targets are met; services are being delivered in accordance with legislative requirements, centrally issued guidance and the authority's procedures. It also ensures consistency in service delivery.

19.2 The authority's Trading Standards and Food and Safety teams had a quality system in place that was registered to ISO 9001:2008. The system was subject to 3<sup>rd</sup> party audit twice annually. The scope of the system included work procedures, officer appraisals, delegations and enforcement.

### *Quantitative Internal Monitoring*

19.3 Internal Monitoring Procedures for food and feedingstuffs enforcement had been developed which outlined the measures to be taken to ensure performance targets were met.

19.4 Auditors were able to verify that the Internal Monitoring Procedures were being implemented in respect of quantitative monitoring of official controls, and systems were in place for the production and consideration of management information to monitor the:

- Number of programmed inspections completed/outstanding
- Response times and unallocated service requests
- Number of samples taken
- Number of new food establishments added to the database
- Number and type of enforcement notices served
- Number of revisits carried out

19.5 Performance indicators were in place and progress in meeting targets was being closely monitored by managers. There was evidence that where shortfalls in performance had been identified, managers had taken appropriate action.

19.6 Some Key Performance Indicators (KPIs) were reported quarterly to the authority's Senior Management Team on a corporate performance management database.



### *Qualitative Internal Monitoring*

- 19.7 The scope of the Internal Monitoring Procedures included the measures taken to assess qualitative aspects of service delivery. In practice, internal monitoring focused on inspections. Extending internal monitoring to the full range of interventions performed and all enforcement activities will enable the authority to meet the requirements of the Framework Agreement.
- 19.8 Auditors were able to verify that the lead officer had accompanied officers on inspections to confirm the satisfactory performance of official controls. Record and database had also been carried out.
- 19.9 One-to-one work reviews were being carried out with officers to provide feedback from internal monitoring, review enforcement decisions and on-going cases. An area of good practice was identified whereby officers had been required to discuss and agree with the lead officer, action they were taking to improve standards at food establishments which had been given a food hygiene rating of 0. This included formal enforcement action. This enhanced scrutiny and support continued until significant issues had been addressed by the business concerned.
- 19.10 Officers had attended training provided by the FSA and in-house to ensure the consistent application of food hygiene risk ratings in accordance with Annex 5 of the Food Law Code of Practice.
- 19.11 Regular team meetings had taken place which provided a forum for officers to discuss consistency issues.
- 19.12 In respect of food standards and feed the authority acknowledged that qualitative internal monitoring had been identified as an area for development. In practice there was some evidence of qualitative internal monitoring of food standards work, where the manager reviewed officer interventions records and evidence prior to warning letters being issued, approving Prosecutions and Simple Cautions.
- 19.13 Managers and the systems administrator routinely monitored the authority's food and feed establishment database to ensure the accuracy and timeliness of data entries.

19.14 The need to maintain records relating to internal monitoring for 2 years in accordance with the Food Law Code of Practice was discussed.

### **Good Practice - 0 Rated Establishments**

Where food establishments had been given a rating of 0 under the Food Hygiene Rating Scheme, officers had been required to identify the most appropriate interventions to secure improved compliance. These were agreed with the lead officer. This enhanced scrutiny and support continued until the contraventions had been addressed by the business concerned.

### ***Recommendations***

19.15 The authority should:

- (i) Fully implement its internal monitoring procedures for food hygiene, food standards and feed and verify its conformance with the Standard, relevant legislation, the Codes of Practice, relevant centrally issued guidance and its own documented policies and procedures. [The Standard – 19.1 and 19.2]
- (ii) Maintain records of internal monitoring for at least 2 years [The Standard – 19.3]

## 20 Third Party or Peer Review

- 20.1 The authority had been subject to a number of FSA audits in the previous four years, including a 2010 audit, Local Authority Assessment of Regulation (EC) No 852/2004 on the Hygiene of Foodstuffs in Food Business Establishments and a focused Shellfish Traceability audit in 2014. The outstanding actions from these audits have been incorporated into the action plan to address recommendations of this audit.
- 20.2 In January 2014 the authority, in common with the other 21 local authorities in Wales, had submitted information in respect of two FSA focused audits - Response of Local Government in Wales to the Recommendations of the Public Inquiry into the September 2005 Outbreak of E. coli O157 in South Wales and Local Authority Management of Interventions in Newly Registered Food Businesses in Wales. These had informed the FSA's July 2014 report to Minister for Health and Social Services, Food and Feed Law Enforcement in Wales.
- 20.3 The authority's food and feed services had been subject to a 3<sup>rd</sup> party audit as part of its ISO 9001:2008 accreditation in August 2014. No major non conformities had been identified.
- 20.4 In 2013/14 the Wales Audit Office had carried out a review of the provision of Environmental Health Services in Wales which included food hygiene and the investigation of food related infectious disease. Their report Delivering with Less—the Impact on Environmental Health Services and Citizens was published in October 2014.

## **21 Food and Feed Safety and Standards Promotion**

- 21.1 The authority had delivered a number of initiatives with the aim of promoting food safety. Activities included:
- Promoting the National Food Hygiene Rating Scheme;
  - Promoting and participation in National Food Safety Week.
- 21.2 A link had been provided on the authority's website for consumers to access information on food safety in the home. This included advice on food allergies and intolerances, using leftovers safety, barbecue safety, food poisoning, cooking turkey, sprouting seeds safety advice, preparing and cooking food safely.
- 21.3 The authority's website also contained information for consumers on food complaints, including a Food Complaints Guidance leaflet.
- 21.4 Social media had been routinely used to raise awareness of food safety and food standards matters including food recall notices and food alerts.
- 21.5 There was evidence that safe food handling practices and hand hygiene had been routinely discussed with cases during infectious disease investigations.
- 21.6 The lead officer for food standards and feed had attended consumer education events disseminating information on the work of the Trading Standards team including work in connection with food standards and feed.
- 21.7 The authority had been innovative in promoting changes to food labelling requirements, mailing local printing companies to advise them of the impending changes. They in turn were then able to inform local food business of the new requirements so that relevant information e.g. allergen information, could be included on menus.
- 21.8 Records of promotional activities were being maintained by the lead officers.

### **Good Practice – Raising Awareness of New Food Labelling Requirements**

The authority had provided information to local printers to assist them in raising food business awareness of impending changes to food labelling requirements. This ensured that when new menus and banners were printed locally, they included the required information about allergens.

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**Action Plan for The City and County of Swansea Council**  
**Audit Date: 3rd – 7th November 2014**

**N.B.** Actions arising from the audit in relation to animal feeding stuffs have not been included because a new regional feed delivery model was introduced in Wales from April 2015.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.36 (i) Ensure future Food Law Enforcement Plans in respect of <b>food standards</b> are developed fully in accordance with the Service Planning Guidance in the Framework Agreement. [The Standard – 3.1]	<b>July 2017</b>	The authority will address the matters identified in the next draft of the Service Plan.	The authority has reviewed and is updating its service delivery plan in accordance with the Service Planning Guidance in the Framework Agreement.
3.36 (ii) Carry out an annual <b>food standards</b> performance review for approval by the relevant member forum or, the relevant senior officer. [The Standard – 3.2]	<b>April 2017</b>	An annual food standards performance review will be carried out and submitted to the relevant senior officer for approval.	The authority conducted a performance review of food law enforcement for the period 16/17. Improvements identified will be included in the authority's subsequent service plan.
3.36 (iii) Address any variance in meeting planned arrangements for <b>food standards</b> in subsequent Service Plans. [The Standard – 3.3]	<b>April 2017</b>	Any variance in meeting planned arrangements will be set out and addressed in future service plans	Quarterly reviews are carried out to identify any variance in meeting planned arrangements for food standards.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>5.12 (i) Set up, maintain and implement a documented procedure for the authorisation of officers based on their competence. Review and if necessary amend the authorisations and duties of the two <b>food standards</b> officers unable to demonstrate that they have the required qualifications or have attended training consistent with their duties. Review and amend the <b>authorisations</b> of food hygiene, <b>food standards</b> and feed officers to ensure that all relevant legislation is included. [The Standard – 5.1]</p>	<p>April 2017</p>	<p>A documented procedure for the authorisation of officers based on their competencies will be implemented in accordance with the relevant Codes of Practice (COP) and guidance</p> <p>A review of the scheme of delegation and authorisation documents will be undertaken to ensure that all relevant statutes are included.</p>	<p>The authorisations and duties of the 2 food standards officers have been reviewed and the duties assigned to them are consistent with qualification &amp; experience</p>
<p>5.12 (ii) Maintain records of <b>food standards</b> officer qualifications, training and experience in accordance with the Codes of Practice. [The Standard – 5.5]</p>	<p>April 2017</p>	<p>The authority requires individual officers to maintain records of their qualifications, training and experience in a central location.</p> <p>A reminder of this requirement will be issued to staff in team meetings and during one to one, supervision meetings</p> <p>Internal monitoring will be used to ensure compliance</p>	<p>Senior managers have access to the storage location and qualifications, training and experience are monitored including at one to one supervision meetings. Feed officers maintain additional records of qualification and competency which is securely stored electronically and shared with officers of other authorities.</p>

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
6.10 (i) Ensure that equipment is removed from service when found to have exceeded tolerances identified in the authority's procedure [The Standard – 6.2]	Completed	The authority will continue to ensure that equipment is removed from service when found to have exceeded tolerances identified in the procedure.	The defective equipment was removed from use when identified.
7.24 (i) Ensure that food establishment interventions / inspections are carried out at the minimum frequency set out in the Food Law Code of Practice. [The Standard -7.1]	December 2017	To ensure that establishments receive food hygiene inspections at the minimum frequency specified in the Food Law Code of Practice.	Aim to carry out interventions in accordance with the requirements of the Food Law Code of Practice with existing resources. Where there are insufficient resources to achieve this, the authority will take a risk based approach to managing the intervention programme. Progress with the intervention programme will be tracked through the internal monitoring and any shortfall will be documented in the Service Plan.
7.24 (ii) Carry out interventions/inspections in accordance with the Food Law Code of Practice, centrally issued guidance, and its own policies and procedures. [The Standard – 7.2]	April 2017	Aim to ensure that interventions / inspections are carried out in accordance with the Food law Code of Practice, centrally issued guidance, and Local Authority policies and procedures.	The findings of the audit were discussed and reviewed in team meetings to ensure the issues raised during the audit were addressed. Internal monitoring to ensure that policies and procedures are being correctly followed.



<b>TO ADDRESS RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
7.24 (iii) Assess the compliance of establishments in its area to the legally prescribed standards; and take appropriate action on any non-compliance found, in accordance with the authority's Enforcement Policy. [The Standard -7.3]	April 2017	To assess the compliance of establishments in the area to the legally prescribed standards and ensure that appropriate action is taken, in accordance with the authority's Enforcement Policy.	Ensure that officers make a correct assessment following inspections, the findings are documented and where necessary escalated in accordance with the enforcement policy. Work will be monitored through internal monitoring to ensure that appropriate action is being taken to address any non-compliances.
7.24 (iv) Further develop its procedures in relation to partial inspections and bringing forward inspections. [The Standard – 7.4]	April 2017	Partial inspections are no longer being carried out therefore the procedure does not require amendment. In relation to bringing forward inspections, amendments were made to the procedure during the audit.	Partial inspections no longer carried out, no further action required.
7.41 (i) Risk rate food establishments in accordance with the requirements of the Food Law Code of Practice and ensure interventions/inspections are carried out at a frequency, which is not less than that determined under the intervention rating scheme set-out in the Food Law Code of Practice. [The Standard -7.1]	December 2017	The Risk rating of food establishments for food standards shall be accordance with the requirements of the Food Law Code of Practice and the interventions /inspections will be carried out in accordance with the frequency set out in the COP.	The database risk profiling for food establishments has been changed to the Food Law Code of Practice scheme. Food standards interventions are now provided with a unique code and are clearly identifiable in terms of risk profile and inspection dates.

<b>TO ADDRESS RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
7.41 (ii) Carry out Alternative Enforcement Strategies (AES) in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 7.2]	December 2017	This is being used as an alternative intervention strategy to ensure that food business operators have access to good quality information that they can then use to achieve compliance with relevant requirements. A sample number will be visited to determine the effectiveness of the strategy for consumer protection purposes. During each AES, an assessment will also be made as to whether the circumstances of the business have changed to the extent that it requires an inspection.	The Authority is looking to develop outcomes from AES to manage risk whilst making the most effective use of resources.
7.41 (iii) Assess the compliance of establishments in its area to legally prescribed standards. [The Standard - 7.3]	April 2017	<p>Ensure all establishments are assessed to legally prescribed standards.</p> <p>Requirements to be discussed with officers at team meetings, supervisions, appraisals and performance reviews.</p> <p>Internal monitoring will be undertaken to ensure compliance and a consistent approach by officers.</p>	<p>The authority has made a number of improvements in respect of this recommendation.</p> <ul style="list-style-type: none"> <li>- Implementation of improved record keeping/data capture.</li> <li>- Introduction of improvements in practices for carrying out food standards audits to improve compliance.</li> <li>- Introduction of consistency training for officers regarding the use of risk ratings.</li> <li>- Introduction of</li> </ul>

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
7.41 (iv) Set-up, maintain and implement documented procedures for the full range of interventions it carries out. [The Standard – 7.4]	June 2017	<p>The authority will ensure that documented procedures are in place for all interventions carried out. This will be documented in the service plan.</p> <p>Internal monitoring to be undertaken to ensure compliance and a consistent approach by officers.</p>	standardised aide memoirs for officers. Documented procedures are being developed and will be used to demonstrate consistent service delivery by all Officers. Any variation from documented procedures will be recorded to make clear the reason for any variation from those documented procedures.
7.41 (v) Ensure observations made in the course of an inspection are recorded in a timely manner to prevent loss of relevant information. [The Standards – 7.5]	April 2017	Improved procedures and documentation to be implemented to ensure officers accurately record details of inspections carried out. Standardised aide memoirs to be introduced to assist. Consideration will be given to the development of premises specific intervention forms. Requirements to be discussed with officers through team meetings, appraisals and performance reviews. Internal monitoring to be undertaken to ensure compliance.	Officers are required to record their observations promptly on the aide-memoires now introduced.

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
8.7 (i) Amend its food standards complaint procedure to include reference to complaints about food originating in other EU and third countries. [The Standard – 8.1]	June 2017	The authority will amend the food standards complaints procedure in line with the food & safety team procedure to include food complaints from EU and third countries (imported foods).	The authority has reviewed this in accordance with the food safety complaints procedure to ensure a consistent approach. Where there are variations from the procedure this will be documented and will detail the reason for the variation
8.7 (ii) Investigate food standards complaints in accordance with the Food Law Code of Practice, centrally issued guidance and the authority's policies and procedures and take appropriate action in response to food standards complaints in accordance with its Enforcement Policy. [The Standard – 8.2 and 8.3]	July 2017	<p>The authority will investigate food standards complaints in accordance with the Food Law COP, centrally issued guidance and its policies and procedures. Appropriate action will be taken in accordance with the Authority's Enforcement Policy.</p> <p>The requirements will be discussed with officers at team meetings, supervisions, appraisals and performance reviews.</p> <p>Internal monitoring will be carried out to verify compliance.</p>	The complaints procedure has been reviewed in accordance with the procedure followed by the Food and Safety Team to ensure a consistent approach. Where there are variations from the procedure this will be documented and will detail the reason for the variation

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
12.17 (i) Amend its food standards sampling procedure ensuring they i) include arrangements for the procurement or purchase of samples, continuity of evidence and the prevention of deterioration or damage to samples whilst under its control and ii) accord with any centrally issued or relevant guidance, and the Codes of Practice. [The Standard –12.5]	April 2017	The Authority will review the Food Standards and Feed Sampling Policy Procedure and amend as appropriate to comply with relevant guidance and COPs. Any amendments will be provided to relevant officers for implementation and routine internal monitoring will be undertaken to verify compliance.	All Officers reminded of the FSA guidance.
12.17 (ii) Take appropriate action in accordance with its own procedure where microbiological sample results are borderline. [The Standard – 12.7]	April 2017	Appropriate action will be taken in accordance with procedures where the sample results are borderline. Internal monitoring will be carried out to verify compliance.	The sampling procedures have been reviewed and staff reminded of what action to take in respect of borderline samples.
13.7 (i) Ensure that its procedure for the investigation of foodborne disease is implemented in all cases. [The Standard - 13.2]	April 2017	Where necessary we will ensure that the reasons for not investigating blood samples are fully documented. Internal monitoring will be carried out to verify compliance.	Staff reminded of requirements
14.8 (i) Notify the FSA of any wider food safety problem in accordance with the Food Law Code of Practice. [The Standard – 14.5]	April 2017	Reminder to be issued to staff to ensure that the FSA are notified of a wider food safety problem in accordance with the Food Law COP. Requirements to be discussed with officers at team meetings and progress meetings. Routine internal monitoring to be undertaken to verify compliance.	Actioned, authority to FSA notifications are being carried out in accordance with Regulations 178/2002, and the Food Law COP.

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
15.19 (i) Review and amend its Enforcement Policy to include criteria for the use of statutory notices. Ensure the Policy is approved by the relevant member forum or senior manager and implemented with regard to pursuing graduated enforcement in the event of significant and / or ongoing non-compliance. [The Standard – 15.1]	April 2017	Criteria for the use of statutory notices will be inserted into the Enforcement Policy as required by the Food Law Code of Practice and the revised Policy will be approved. Internal monitoring to be undertaken to ensure that procedures are being followed correctly or that variations are justified and properly recorded.	A review of the Enforcement policy and procedures has been completed. The policy is applied to all regulatory activities undertaken by Public Protection services and includes referral to a prosecution panel where decisions are made and recorded using the procedures contained within existing quality management guidelines.
15.19 (ii) Set-up, maintain and implement documented procedures for imported food and food standards Improvement Notices in accordance with the relevant Codes of Practice and centrally issued guidance. [The Standard – 15.2]	July 2017	Documented procedures to be implemented for imported food and food standards improvement notices in accordance with the relevant COPs and guidance.	These documents are currently being completed, and will be incorporated into the departmental Quality Management System..
15.19 (iii) Ensure that food hygiene 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]	April 2017	Food hygiene enforcement is being carried out in accordance with procedures, COP and relevant guidance.	Food Hygiene Enforcement Procedures are in place and are being fully implemented.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
15.19 (iv) Ensure all decisions on enforcement action are made following consideration of the authority's enforcement policy. Document the reasons for any departure from the criteria set-out in the Enforcement Policy. [The Standard - 15.4]	April 2017	Decisions on enforcement action are made by reference to the criteria set out in the enforcement policy and are documented on case files. Any departure from the policy will provide reasons to justify variation from the Policy	All enforcement action decisions are taken in accordance with the Enforcement Policy.
16.7 (i) Record, with reasons, deviations from set procedures. [The Standard – 16.1]	April 2017	Deviations from procedures detailing the reasoning/decision making to be accurately recorded. Internal monitoring will be carried out to verify compliance.	Officers are aware of the policy and the requirement for files to be assessed by reference to the policy. Any variation from the policy is recorded to state reasons for that variation
16.13 (i) Ensure that food standards post inspection report forms provided to businesses following interventions / inspections contain all of the information required by the Food Law Code of Practice. [The Standard -16.1]	April 2017	Ensure continued use of Food Standards Inspection Report form introduced which complies with Annex 6 COP requirements.	Standard forms for reporting and data capture have been introduced and will be attached to all inspection/intervention records.
17.5 (i) Record all complaints received together with the actions taken in response [The Standard -17.3]	April 2017	Service Managers to ensure a consistent method of logging stage one complaints is followed in accordance with the Authority's Corporate policy and procedures. [Stage 1, Stage 2] Stage 1 matters will be actioned by respective service managers. Internal monitoring will be carried out to verify compliance.	The Authority has in place a corporate complaints system where details of the complaint and action taken are recorded. Complaints of this nature relating to the delivery of food regulation can be retrieved from this system.

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
19.15 (i) Fully implement its internal monitoring procedures for food hygiene and food standards and verify its conformance with the Standard, relevant legislation, the Codes of Practice, relevant centrally issued guidance and its own documented policies and procedures. [The Standard – 19.1 and 19.2]	April 2017	Internal monitoring will be carried out to verify compliance.	Internal monitoring is being undertaken by 1:1 meetings, team meetings and outcomes provided to members of staff or to the team as appropriate to ensure consistency and quality.
19.15 (ii) Maintain records of internal monitoring for at least 2 years [The Standard – 19.3]	April 2017	Internal monitoring policy and procedures are in place. Internal monitoring of Food hygiene, Food Standards, and Feed will be documented and retained for at least 2 years.	The authority undertakes internal monitoring using the relevant policies and procedures included in the departmental Quality Management System.



## **ANNEX B**

### **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:

- Food Law Enforcement Service Plan and associated structure charts
- Business Planning Guidance & Template 2014/15
- Quality Procedures SP01: Quality Procedures
- City And County of Swansea Council Constitution 16/10/14
- Trading Standards Division: Scheme of delegation and authorisation
- Food and Safety Division: Scheme of Delegation and Authorisation to Sign and Serve Enforcement Notices
- Calibration Of Equipment Procedure
- Food Hygiene Inspection Procedure
- New Business Procedure
- Approved Premises Procedure
- Re-visit Procedure
- Food Hygiene Rating Scheme
- Food Complaints
- Food Sampling Policy
- Food Sampling Procedure
- Food standards sampling plan 2014/15
- Food standards sampling plan 2012/13
- Food standards sampling plan 2011/12
- The Communicable Disease Outbreak Plan For Wales
- Norovirus Outbreak Procedure
- Investigation Of Sporadic Cases Of Infectious Disease
- Investigation Of Suspected Cases Of Infectious Disease
- Food Alerts And Incidents: Food And Safety And Trading Standards
- Food Law Enforcement
- Procedure For Service Of Hygiene Improvement Notices / Improvement Notices
- Prohibition Procedures

- Procedure For The Service Of Remedial Action Notices
- Suspension And Withdrawal Of Approval For Product Specific Premises
- Enforcement Procedures: SP10 Enforcement Prosecutions and Simple Cautions
- Making a Comment, Complaint or Compliment leaflet
- Food & Safety Procedure: FS00 Internal Monitoring
- SGS Audit report for City and County of Swansea – Environment Department

**(2) File and records reviews**

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

- General food premises inspection files
- Approved establishment files
- Food and food premises complaint records
- Home Authority agreements
- Informal and formal enforcement records
- Officer authorisations, competency checklists and training records
- Internal monitoring records
- Calibration records
- Food Incident records
- Minutes of internal meetings and external liaison meetings
- Advisory & promotional materials provided to businesses and consumers

**(3) Review of Database records:**

A selection of database records was considered during the audit in order to:

- Review and assess the completeness of database records of food/ feed inspections, food/feed and food/feed premises 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 and feed premises databases
- Assess the capability of the system to generate food/feed 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/feed Control arrangements. The following officers were interviewed:

- Divisional Officer - Trading Standards
- Team Leader – Food and Safety
- Senior Trading Standards Officer
- Trading Standards Officers
- Environmental Health Officers, including officer with lead responsibility for communicable disease
- Food Hygiene Technical Officer

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 three local food establishments and two feed establishments. The purpose of these visits was to verify the outcome of the last inspections carried out by the local authority and to assess the extent to which enforcement activities and decisions met the requirements of relevant legislation, the relevant Codes of Practice and centrally issued guidance.

## Glossary

Approved premises	Food manufacturing premises 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"> <li>• Food Law Enforcement Standard</li> <li>• Service Planning Guidance</li> <li>• Monitoring Scheme</li> <li>• Audit Scheme</li> </ul> <p>The <b>Standard</b> and the <b>Service Planning Guidance</b> set out the Agency's expectations on the planning and delivery of food law enforcement.</p> <p>The <b>Monitoring Scheme</b> 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 <b>Audit Scheme</b> 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 premises according to risk and determines how frequently those premises should be inspected. For example, high risk hygiene premises 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	A group of professional representatives that



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health in Wales.