



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

Wrexham County Borough Council  
6<sup>th</sup> – 10<sup>th</sup> February 2017

## Foreword

Audits of local authority food and feed law enforcement services are part of the Food Standards Agency's (FSA) arrangements to improve consumer protection and confidence in relation to food and feed. These arrangements recognise that the enforcement of UK food and feed law relating to food safety, hygiene, composition, labelling, imported food and feedingstuffs is largely the responsibility of local authorities. These local authority regulatory functions are principally delivered through their Environmental Health and Trading Standards Services.

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

Agency audits assess local authorities' conformance against the Feed and Food Law Enforcement Standard. "The Standard", which was published by the Agency as part of the Framework Agreement on Official Feed and Food Controls by Local Authorities (amended April 2010) is available on the Agency's website at: [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 establishment inspections carried out. The Agency's website contains enforcement activity data for all UK local authorities and can be found at: [www.food.gov.uk/enforcement/auditandmonitoring](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 and food standards at Wrexham County Borough Council under the headings of the FSA Feed and Food Law Enforcement Standard. It has been made publicly available on the Agency's website at [www.food.gov.uk/enforcement/auditandmonitoring/auditreports](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 services at Wrexham County Borough Council was undertaken under section 12(4) of the Act and Regulation 7 of the Regulations.
- 1.3 Regulation (EC) No. 882/2004 on official controls performed to ensure the verification of compliance with feed and food law, includes a requirement for competent authorities to carry out internal audits or to have external audits carried out. The purpose of these audits is to verify whether official controls relating to feed and food law are effectively implemented. To fulfil this requirement, the FSA, as the central competent authority for feed and food law in the UK has established external audit arrangements. In developing these, the Agency has taken account of the European Commission guidance on how such audits should be conducted.<sup>1</sup>
- 1.4 The authority was audited as part of a three year programme of full audits of the 22 local authorities in Wales.

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

- 1.5 The audit covered Wrexham County Borough Council's arrangements for the delivery of food hygiene and food standards enforcement services. The on-site element of the audit took place at the authority's

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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).

offices at Ruthin Road Office, Ruthin Road, Wrexham, LL13 7TN on 6<sup>th</sup> – 10<sup>th</sup> February 2017, and included verification visits at food businesses to assess the effectiveness of official controls implemented by the authority, and more specifically, the checks carried out by the authority's officers, to verify food business operator (FBO) compliance with legislative requirements.

- 1.6 The audit also afforded the opportunity for discussion with officers involved in food law enforcement with the aim of exploring key issues and gaining opinions to inform Agency policy.
- 1.7 The audit assessed the authority's conformance against "The Standard". The Standard was adopted by the FSA Board on 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)
- 1.8 The audit also reviewed the action taken by the authority in relation to an FSA focused audit undertaken in 2015 - Audit of Local Authority Delivery of Official Controls on Milk and Dairy Products in Approved Dairy Establishments.

### ***Background***

- 1.9 Wrexham County Borough Council is a unitary authority in North-East Wales, which covers an area of 50,500 hectares. It borders three other Welsh local authority areas – Powys to the south, Denbighshire to the North-West and Flintshire to the North. Two English local authorities, Shropshire and Cheshire are situated to the East.
- 1.10 Wrexham is situated between the Welsh mountains and the lower Dee Valley alongside the border with England. It covers an area which runs from Llanarmon Dyffryn Ceiriog in the South-West, Chirk in the South, Rhosllanerchrugog in the West, Wrexham in the center of the County, Rosset in the North and Worth in the West.
- 1.10 Wrexham County Borough Council is mostly a rural county with Wrexham being the main administrative and commercial area.

- 1.11 According to the 2011 Census, Wrexham had a population of 134,844. The population density was the fourteenth highest in Wales. Approximately 97% of the population identified themselves as White, whilst the number of Welsh speakers was approximately 12.9%.
- 1.12 Wrexham is the third largest retail centre in Wales. The economy consists of the food service sector, accommodation and manufacturing and whilst heavy industry has declined new sectors have taken their place.
- 1.13 Wrexham County Borough Council contains indicators of deprivation below the Wales average as determined by the 2014 Welsh Index of Multiple Deprivation. However, the county is, rated lower than average with regards to community safety and housing.
- 1.14 Food hygiene and food standards law enforcement was being carried out by officers in the authority's Food and Farming Team within the Public Protection Department.
- 1.15 Officers and support staff responsible for food hygiene and food standards were based at the Planning and Environment Department, Ruthin Road, Wrexham, LL13 7TU.
- 1.16 The authority reported that it had a guaranteed emergency out-of-hours service. The out-of-hours service was not tested as part of the audit.
- 1.17 At the beginning of 2016/17 there were 1307 food establishments in Wrexham County Borough Council, of which 23 were approved food establishments.
- 1.18 The authority had 6.2 full time equivalent (FTE) officers involved in the delivery of food hygiene and food standards.
- 1.19 The authority provided officers with opportunities for continuous professional development in their field of work. The operational budget was sufficient to cover training needs and is used where a need has been demonstrated.
- 1.20 The annual budget for food law enforcement and associated activities was £267,168 in 2016/17.

- 1.21 The authority had been participating in the National Food Hygiene Rating Scheme which was launched in Wales in October 2010. At the time of writing, the food hygiene ratings of 1061 food establishments in Wrexham County Borough Council were available to the public on the National Food Hygiene Rating Scheme website.



## 2 Executive Summary

- 2.1 The audit examined Wrexham County Borough Council's arrangements for the delivery of official food controls. This included reality checks at food establishments to assess the effectiveness of official controls and more specifically, the checks carried out by the authority's officers, to verify food business operator (FBO) compliance with legislative requirements. The scope of the audit also included an assessment of the authority's overall organization and management, and the internal monitoring of food law enforcement activities.
- 2.2 The Head of Environment and Planning had overall responsibility for the delivery of food hygiene and food standards services within Public Protection Department. Day to day management was the responsibility of the Lead Food Officer & the Principal Trading Standards Manager.
- 2.3 The authority had well established service planning arrangements in place together with systems for reviewing performance. Service planning documents contained some but not all the information set out in the Service Planning Guidance in the Framework Agreement including the requirements to plan work in accordance with the Food Law Code of Practice and to estimate the resources required to deliver the services.
- 2.4 Arrangements were in place to ensure effective service delivery by appropriately authorised, competent officers who had been authorised in accordance with their qualifications, training and experience. Capacity issues had been identified and the authority would benefit from ensuring a sufficient number of authorised officers are appointed to deliver the work detailed within the service plan and in accordance with the Food Law Code of Practice.
- 2.5 The authority had systems in place to ensure business continuity and minimise damage by preventing or reducing the impact of security incidents. Audit checks confirmed that both the food hygiene and food standards database was accurate and the authority had been able to provide electronic Local Authority Enforcement Monitoring System (LAEMS) returns.

- 2.6 Record and database checks confirmed that both food hygiene and food standards services had prioritised inspections of higher-risk businesses and approved establishments whilst some establishments, mostly lower risk, were not being inspected at the frequencies required by the Food Law Code of Practice and centrally issued guidance.
- 2.7 Inspection records demonstrated that a thorough assessment of business compliance had taken place during most food hygiene inspections and for high risk food standards where updated inspection forms were in use. However, in some cases, including medium and low-risk food standards inspections and for some aspects of food hygiene inspection; insufficient information was available in some aspects of intervention records to demonstrate that a thorough assessment had been undertaken by officers in accordance with the Food Law Code of Practice. In general, risk rating, revisits and follow up action was being carried out as required for both food hygiene and food standards interventions; with occasional exceptions.
- 2.8 In general, food hygiene inspection records and reports were being adequately maintained by the authority with only minor omissions. Food standards reports would benefit from a review to ensure that they contain all the information required by the Food Law Code of Practice.
- 2.9 Food and food establishment complaints, food sampling interventions, food incidents and notifications of high risk food related infectious disease had generally taken place in accordance with the Food Law Code of Practice.
- 2.10 The authority had been proactive in providing advice and guidance to food businesses. Initiatives had also taken place to promote food hygiene and food standards.
- 2.11 The authority had used a wide range of enforcement tools to secure improved business compliance with food legislation. Where enforcement action had been taken it was appropriate, however, in some cases had not been undertaken in accordance with the Enforcement Policy, Food Law Code of Practice and official guidance.
- 2.12 There was evidence of internal monitoring of both food hygiene and food standards matters. The scope and detail of the internal monitoring

activity would benefit from being expanded to include additional areas of service delivery.

2.13 Auditors established that significant progress had been made in implementing requirements following the 2014 focused audit of official hygiene controls at Dairy establishments. The outstanding requirements have been absorbed into the recommendations of this report.

## 2.14 **The Authority's Strengths**

### **High Risk Food Standards Interventions**

The capture of information in high risk establishments demonstrated that thorough assessments of business compliance with requirements had consistently taken place.

### **Food Hygiene Inspection Reports**

Food hygiene inspection reports provided to food business operators where available on establishment files, contained all the information required by the Food Law Code of Practice and had been sent to the business within prescribed timeframes.

### **Food Hygiene Complaints**

The authority was able to evidence that it had consistently taken appropriate action in response to food hygiene complaints.

### **Advice to businesses**

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

### **Incidents**

The authority was able to demonstrate that it had initiated and responded to notifications of incidents in a timely and effective manner, investigating and sharing information with the FSA and other authorities.

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

The Service had delivered a number of initiatives with the aim of promoting food hygiene and standards.

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

### **Authorised Officers**

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

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

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

## **Audit Findings**

### **3 Organisation and Management**

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

- 3.1 Food law enforcement was overseen by the appointed Lead Member for Environment and Planning. The authority's Constitution set out its decision making arrangements. Under the Constitution, decisions on most operational matters had been delegated to the Head of Environment and Planning and to the Service Manager for Public Protection.
- 3.2 A 'Food Service Plan 2016-2017 ('the Service Plan') had been developed by the authority. There was evidence that the Service Plan had been approved by the Lead Member and Head of Service.
- 3.3 The Service Plan contained most of the information set out in the Service Planning Guidance in the Framework Agreement, including a profile of the authority, the scope of the service and organisational structure chart for the Public Protection department. The times of operation, service delivery points and aims and objectives of the service were clearly set out.
- 3.4 The service plan indicated that there were approximately 1307 food establishments in Wrexham.
- 3.5 The profiles of businesses in Wrexham for food hygiene and food standards were provided by establishment type. This information would benefit from stating the number of approved establishments within the area. The number of planned interventions due in 2016 / 17 was provided by risk rating.
- 3.6 In respect of food hygiene the following information was provided in the Service Plan:

<b>Risk Category</b>	<b>Inspections Due</b>	<b>Inspections Planned</b>
<b>A</b>	0	0
<b>B</b>	32	32
<b>C</b>	236	224
<b>D</b>	110	88
<b>E</b>	100	80
<b>Unrated</b>	5	5
<b>Total</b>	<b>483</b>	<b>429</b>

- 3.7 The targets and priorities for food hygiene had been identified in the Service Plan. These included a commitment to deliver all inspections / interventions due at risk category A & B establishments and 95% of category C establishments.
- 3.8 In respect of lower-risk establishments, the Service Plan stated that, where resources allow, 80% would receive either an inspection or would be subject to alternative intervention activity.
- 3.9 The commitments for high risk category C rated establishments and lower risk establishments fall short of that required by the Food Law Code of Practice.
- 3.10 The above table would benefit from revision to reflect the number of new businesses expected within the year and the number of expected revisits.
- 3.11 The following information was provided in respect of food standards:

<b>Risk Category</b>	<b>No of Premises</b>	<b>Inspections Due</b>	<b>Inspections Planned</b>
<b>A – High</b>	25	25	25
<b>B – Medium</b>	367	174	140
<b>Unrated</b>	18	18	18
<b>Total</b>	<b>410</b>	<b>217</b>	<b>183</b>

- 3.12 The targets and priorities for food standards included a commitment to deliver all inspections / interventions due at high risk establishments, 80% of medium risk establishments; whilst no commitment was made for low risk establishments. The commitments for medium and low risk establishments fall short of that required by the Food Law Code of Practice.

- 3.13 The above table would benefit from revision to more accurately reflect the number of new businesses expected within the year, the expected number of revisits and the number of low risk businesses requiring a non-inspection based alternative intervention during the year.
- 3.14 The authority's priorities and intervention-targets as set out in the Service Plan, were risk based.
- 3.15 The resources available to deliver food law enforcement services were detailed in the Service Plan as 5 full time officers for food hygiene and 1.2 full time equivalent (FTE) officers for food standards. No figure was provided for administrative staff. A breakdown was provided of the different levels of officers available.
- 3.16 The authority had indicated the likely demand, based on previous years, for all aspects of food service delivery but no estimates were provided for the resources required. Further, an overall assessment of the resources required to deliver the full range of food official controls against those available had not been provided.
- 3.17 The Service Plan included information on the authority's Enforcement Policy and its approach to staff development. In addition it emphasised the necessity to undertake programmed inspections out-of-hours.
- 3.18 The authority confirmed it had entered into three Primary Authority and 20 Home Authority arrangements with businesses, whilst also recognising its commitments to support nine locally based manufacturers and other regulators as an Originating Authority under the Home Authority principle.
- 3.19 Arrangements for internal monitoring or '*quality assessment*' of the food hygiene service were not set-out in the Service Plan and it would benefit from inclusion of a brief description of the internal monitoring arrangements for the food services.
- 3.20 The overall costs of providing food law enforcement services had been provided in the Service Plan including a breakdown of some non-fixed costs such as staffing, equipment including investment in IT and travel and subsistence. Further information with regards to the trend in growth or reduction of the budget, a reference to the departmental financial

provision for legal action and the budget for sampling should be provided in accordance with the Service Planning Guidance.

- 3.21 The Service Plan set out how the authority's performance in delivering food official controls would be reviewed against the previous year's plan and information on the latest review was included in the service plan. It was noted that the review did not cover all targets contained within the service plan including food standards interventions in new businesses and timeliness of responses to service requests and infectious disease notifications.
- 3.22 Variations in achieving the targets set-out in the previous Service Plan were identified throughout the 2016 / 17 Service Plan and these would benefit from being collated in a dedicated section as part of the service review. Variances for the lower risk food hygiene interventions, new businesses and food hygiene samples had not been identified or explained as required by the service planning guidance.
- 3.23 The authority had incorporated a number of areas for improvement in its 2016 / 17 Service Plan, but for all variances, these did not address areas where variances had occurred.

***Recommendations***

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



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

- 4.1 A document control procedure had been developed for the food hygiene and food standards services. The procedure, which had been documented, included control over the production, approval, review, updating and storage of policies, procedures and associated documents.
- 4.2 Documents were stored electronically and protected from unauthorised access. Hard copies of these documents were also available in the event of computer failure.
- 4.3 The Lead Officer was responsible for developing and approving documents as well as ensuring they are subject to review, where necessary and according to specified intervals. Permissions to make changes to the list of documents or to individual documents are restricted to nominated individuals. Those nominated individuals were also responsible for ensuring the removal of superseded documents.
- 4.4 Auditors were able to verify that officers had access to policies and procedures, legislation and centrally issued guidance either physically, electronically or where applicable on the internet. The Food and Farming Team also had access to legislation and guidance updates through the Food and Farming Compliance bulletins.
- 4.5 Some documents had been subject to review in line with the procedures, however, the authority had produced an improvement plan indicating where policies and procedures were in need of review or updating.

#### ***Recommendations***

- 4.6 The authority should:
- (i) Ensure that the policies and procedures are updated with current information and references and are reviewed at regular intervals in accordance with document control procedures. [The Standard – 4.1 & 4.2]

## **5 Authorised Officers**

- 5.1 The authority's Scheme of Delegation of Powers to Officers, contained within the authority's Constitution, provided both the Head of Environment and Planning and the Service Manager for Public Protection with delegated powers to execute all duties relating to both the food hygiene and food standards services. This includes the delegated authority to authorise other officers and to authorise legal action in conjunction with the Head of Corporate and Customer Services.
- 5.2 A documented procedure had been developed for the authorisation of food hygiene and food standards officers based on their qualifications and experience.
- 5.3 Lead officers for food hygiene, food standards and communicable disease had been appointed, all of whom had the requisite qualifications, training and were able to demonstrate appropriate knowledge.
- 5.4 The authority had identified in its Service Plan that resources had restricted its ability to undertake low risk food hygiene interventions and that increasing service demands had prevented medium risk food standards interventions from being completed. Further, auditors were advised that resources had prevented the authority from planning its intervention programmes in accordance with the minimum statutory standards laid out in the Food Law Code of Practice and had led to the curtailment of the previous year's food hygiene sampling programme. The authority advised that the restructure of the food services into a single Food and Farming Team offered the opportunity to make better use of resources by combining medium and low risk food standards interventions with food hygiene interventions. However, the service had suffered from a reduction in the number of both food hygiene and food standards full time equivalent officers available to work within the new service. The authority should ensure it appoints the required number of officers in accordance with the staff resource assessment required in the Service Plan.
- 5.5 The authority had systems in place to identify officer training needs including individual training needs assessments and internal monitoring activities. The authority was providing a combination of in-house and externally provided training and making good use of the opportunities afforded by the FSA's local authority training programme. All officers

were required to achieve 10 hours of continual professional development (CPD) in accordance with the Codes of Practice. The authority is able to fund training where a need has been demonstrated.

- 5.6 An examination of the qualification and training records of seven officers involved in the delivery of official food hygiene controls and three officers involved in delivery of official food standards controls was undertaken. Records were being maintained by the authority for officers on the Council's file plan and on hardcopy files; respectively.
- 5.7 All officers had been authorised in accordance with evidence of their qualifications, training and experience. Authorisations had been signed by an officer with the delegated authority and included all of the key legislation required for the delivery of the range of official food controls. However, the authority had authorised officers under the Food and Environment Protection Act 1985 for which the FSA is responsible for issuing authorisations.
- 5.8 Academic and other relevant qualifications were available for all officers and all had received the minimum 10 hours of CPD required by the Food Law Code of Practice and the authority's own policies in keeping with their duties. Further, all officers had received the necessary training to deliver the technical aspects of the work for which they are involved.

### **Recommendations**

- 5.9 The authority should
- (i) Ensure an appropriate number of authorised officers are appointed to deliver food hygiene and food standards official controls in accordance with the Food Law Code of Practice. [The Standard – 5.3]

## **6 Facilities and Equipment**

- 6.1 The authority had all of the necessary facilities and equipment required for the effective delivery of food hygiene and food standards services, which were appropriately stored and accessible to relevant officers.
- 6.2 An Equipment Maintenance Procedure had been developed which detailed the arrangements for ensuring that equipment was properly stored and maintained and that thermometers were properly identified, assessed for accuracy and withdrawn from use when found to be faulty. The procedure made reference to testing including in use checks, together with action to be taken where tolerances were exceeded. The tolerances being applied were in accordance with centrally issued guidance.
- 6.3 Officers had been supplied with thermometers, which were being calibrated against each other whilst in use and calibrated in a laboratory at least annually. Records relating to calibration were being maintained by the authority.
- 6.4 An examination of records relating to the latest calibration checks confirmed that all were within acceptable tolerances in accordance with the authority's procedure and with regard to centrally issued guidance.
- 6.5 The authority's food databases were capable of providing the information required by the FSA.
- 6.6 The food database, together with other electronic documents used in connection with food law enforcement services were subject to regular back-up to prevent the loss of data.
- 6.7 The authority had systems in place to ensure business continuity and minimise damage by preventing or reducing the impact of security incidents. In respect of food law enforcement services, officers had been provided with individual passwords and access for entering and deleting data had been restricted on an individual basis. Data input protocols were also in place and any issues were discussed during team meetings in order to achieve consistency.

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

### ***Food Hygiene***

- 7.1 In 2015/2016 the authority reported through LAEMS that of the 1251 food businesses within its area 85.22% of category A-E rated food establishments due to be inspected had been inspected. Furthermore, approximately 99% of food businesses were 'broadly compliant' with food hygiene law (excluding unrated businesses and those outside the scope of the risk rating scheme). This represented an improvement in broad compliance of approximately 1% from 98% of businesses reported as 'broadly compliant' in the previous year.
- 7.2 Information provided before and during the audit indicated that the authority had adopted a risk-based approach to managing its food hygiene intervention programme. The authority indicated prior to the audit that 251 establishments were overdue for inspection in accordance with the food law code of practice, 83 of these related to high risk businesses.
- 7.3 The authority had developed a documented procedure aimed at establishing a uniform approach to carrying out food hygiene interventions. An examination of this procedure confirmed that it has been generally developed in accordance with the requirements of the Food Law Code of Practice and relevant centrally issued guidance. Where improvements are required the authority, through its Improvement Plan, has made a commitment to review the procedure in accordance with the Food Law Code of Practice within a specified timeframe.
- 7.4 In relation to any revised intervention procedure, auditors discussed the benefit of ensuring that it includes details relating to the Food Safety Expert Panel (FSEP) advice regarding the timeliness of re-visits to establishments that are non-compliant with legal requirements. Additionally, auditors discussed the benefit of including local arrangements for enabling red-flagging by officers and to provide further information to officers in relation to whether to take samples. Home and/or Originating authority considerations, including notification to these bodies following the conclusion of interventions, should also be considered for inclusion.

- 7.5 The authority did not have a procedure for the process of approving establishments handling products of animal origin or undertaking intervention at such establishments and would benefit from developing one in accordance with the requirements of the Food Law Code of Practice.
- 7.6 A food hygiene inspection aide-memoire had been developed by the authority to assist officers with inspecting food establishments and to ensure that a thorough record of visits was recorded on file.
- 7.7 During the audit, an examination of records relating to 10 food establishments was undertaken. Auditors confirmed that, in recent years, six out of 10 establishments had been inspected at the frequencies required by the Food Law Code of Practice. In the remaining cases, all relating to category C rated establishments, interventions had been conducted between two and five months after their due date. The Food Law Code of Practice requires that interventions take place within 28 days of their due date and in one case, although auditors noted that an acceptable justification for the delay had been provided by the authority, the reason for the deviation had not been recorded on the establishment file.
- 7.8 Inspection records were available and legible for the 10 food establishments audited and sufficient information had been captured to enable auditors, in all cases, to verify the size, scale and scope of the business operations had been considered.
- 7.9 In all cases, the level of detail recorded on aide-memoires was appropriate to verify that thorough assessments of business compliance with requirements relating to Hazard Analysis Critical Control Point (HACCP) had taken place.
- 7.10 In two of the cases, auditors were able to confirm that officers had fully retained the core elements of an establishments HACCP plan on file. In the remaining cases, the level of detail had not been fully recorded by officers for all stages of an establishment's food activity.
- 7.11 In six of the 10 cases, inspection records confirmed that officers had undertaken an appropriate assessment of the effectiveness of cross contamination controls in accordance with current guidance. In the remaining cases, there was insufficient documented information on the

inspection record to allow auditors to verify that the officer had fully considered all aspects of cross contamination control.

- 7.12 Auditors were able to confirm that in all but one case information on hygiene training undertaken by employees had been captured by officers and in two out of 10 cases, auditors were able to verify that discussions with food handlers responsible for monitoring and undertaking corrective actions at critical control points had been documented. In the remaining cases, insufficient evidence was available.
- 7.13 In all but one case, where appropriate, supplier and customer information in relation to traceability had been recorded by officers. Further, evidence was available in eight cases to demonstrate that consideration had been given to imported foods. Auditors were however unable to confirm officers had undertaken checks on health / I.D. marks to verify the source of foods in all cases.
- 7.14 The risk ratings applied to establishments were consistent with the inspection findings in all but two cases. In the remaining cases, one related to an input error for a significant risk score whilst in the other, a Confidence in Management score appeared to have been incorrectly applied to the establishment based on the compliance history of the premises.
- 7.15 In relation to previously identified issues, auditors were able to confirm that appropriate follow up action had taken place in all cases. In relation to issues identified during the most recent inspection, these had been adequately followed up in 8 cases. In one of the remaining cases, auditors were unable to verify whether a revisit had addressed all significant non-compliance identified whilst in the other case auditors were unable to verify that an issue relating to a business's FSMS required follow up. However, where records indicated that follow-up action was required, auditors were able to confirm this had taken place in a timely manner.
- 7.16 The authority informed the FSA prior to the audit that there were 24 approved establishments in its area, of which the records relating to 10 were examined.

- 7.17 In nine cases, auditors were able to confirm that the authority had followed the appropriate process of issuing approvals to establishments. In the remaining case, auditors identified that an establishment had been granted full approval on a single inspection contrary to centrally issued guidance and whilst auditors were able to confirm that the decision was the correct course of action in relation to the specific circumstances of the case, this deviation had not been documented on the establishment file.
- 7.18 In six out of 10 cases, auditors were able to confirm that recent inspections at establishments had been undertaken at the frequency required by the Food Law Code of Practice. In the remaining cases, four high-risk establishments (C rated establishments) had been subject to an intervention between two and four months after their due date. Whilst the authority had provided an adequate explanation for not meeting the inspection frequency in one of these cases – this justification had not been retained on the establishment file. The Food Law Code of Practice requires that interventions take place within 28 days of their due date.
- 7.19 Inspection records were available and legible for the 10 food establishments audited and sufficient information had been captured to enable auditors to verify that officers had considered the size, scale and scope of the business operations.
- 7.20 In general, information captured on aide-memoires during the most recent inspections of approved establishments was sufficient to confirm that full scope inspections had taken place, and that officers had undertaken thorough assessments of business compliance with food hygiene requirements. However, in three cases information regarding the assessment of critical control points (CCP) had not been fully documented by the officer across all stages of the businesses activity.
- 7.21 Auditors were able to confirm that officers had assessed the use of health marks and commercial documents by the businesses in eight out of 10 applicable cases. Likewise, auditors were able to verify that I.D / health marks of raw materials had been adequately assessed in six out of nine applicable cases. In the remaining cases auditors were unable to verify from the officers observations whether these checks had taken place.



- 7.22 Auditors were able to confirm that in all cases, an adequate assessment of staff training had taken place, where appropriate.
- 7.23 In all cases the risk ratings that had been applied to approved establishments were consistent with the inspection findings.
- 7.24 The authority did not have a documented procedure in relation to its approach to the undertaking of Alternative Enforcement Strategy interventions.
- 7.25 Prior to the audit the authority provided a list of AES activity that had been undertaken. A total of 10 files were selected for examination. On examination, auditors confirmed that five of the interventions provided had received a primary inspection on their most recent intervention and were therefore not strictly AES.
- 7.26 Of the five remaining files, evidence was available to show that an initial primary inspection to conduct a risk rating assessment had been undertaken by an appropriately qualified officer. All selected premises had been rated as category E and were eligible for AES.
- 7.27 Postal questionnaires were used as an AES in three cases and visits to gather information in two of the cases examined. All five interventions were recorded as AES on the database. In all cases, evidence was available to demonstrate that information used for the purposes of AES had either been collected or reviewed on receipt by an appropriately authorised and qualified officer. Further, auditors noted that there were no significant changes documented in business activity requiring further action of the authority.
- 7.28 In two out of five AES interventions, auditors were able to confirm that they had been undertaken in line with the frequencies prescribed within the Food Law Code of Practice. In the remaining cases, auditors noted that interventions had occurred approximately 2 months after their due date.

### ***Recommendations***

- 7.29 The authority should:
- (i) Ensure that food hygiene interventions/inspections are carried out at the minimum frequency specified by the Food Law Code of Practice. [The Standard – 7.1]
  - (ii) Carry out food hygiene interventions / inspections in accordance with the Food Law Code of Practice, centrally issued guidance and its procedures. In particular, ensure that, where applicable, intervention risk rating and revisits are undertaken consistently in accordance with the Food Law Code of Practice, centrally issued guidance, and local procedures. [The Standard – 7.2]
  - (iii) Fully assess the compliance of establishments in its area to the legally prescribed standards. [The Standard – 7.3]
  - (iv) Ensure that the documented procedures for interventions are reviewed to include reference to the local arrangements for red flagging, timescales for revisits and home/originating authority liaison arrangements. Additionally, develop an intervention procedure in accordance with the food law code or practice and centrally issued guidance for the approval of establishments and for its alternative enforcement strategy. [The Standard – 7.4]
  - (v) Ensure that observations made and/or data obtained in the course of a food hygiene intervention/inspection are recorded in a timely manner to prevent the loss of relevant information. [The Standard – 7.5]

### *Verification Visits to Food Establishments*

- 7.30 During the audit, verification visits were made to two food establishments with authorised officers of the authority who had carried out the last food hygiene inspections. The main objective of the visits was to consider the

effectiveness of the authority's assessment of food business compliance with food law requirements.

- 7.31 The officers were knowledgeable about the businesses and demonstrated an appropriate understanding of the food safety risks associated with the activities at each establishment. The officers demonstrated that they had carried out a detailed inspection and had appropriately assessed compliance with legal requirements and centrally issued guidance, and were offering helpful advice to the food business operators.

### ***Food Standards***

- 7.32 In 2015/16 the authority had reported through LAEMS that 62.75% of A-C rated food businesses due to be inspected had been inspected. This was a decrease of 11.25% from 74% in the previous year.
- 7.33 The authority provided data prior to the audit which confirmed there were 813 food businesses on the authority's food standards establishment database. There were a total of 220 food establishments overdue a food standards intervention, of which, 8 were high risk, 55 were medium-risk and 157 were low-risk. A further 287 premises had been placed outside of the programme despite some of the premises requiring an intervention in accordance with the Food law Code of practice. Despite this, auditors were able to confirm that, in general the authority was taking a risk based approach to managing its intervention programme.
- 7.34 The authority did not have a documented procedure in relation to food standards inspections, which had been previously identified by the authority and included in its improvement plan. Auditors were advised that there was an intention to develop a combined food hygiene and food standards intervention procedure to ensure that all interventions are undertaken in accordance with the Food Law Code of Practice.
- 7.35 The authority had developed a general food standards inspection aide memoir form along with a specific form for use in manufacturers and these were in use in use along with a report of visit form that had been developed by the authority for use by officers in recording inspection findings. The forms used were based on the WHOTS Food Standards and labelling group templates which have been agreed on an all Wales

basis. The forms in use contained sufficient fields to facilitate the capture of observations made and/or data obtained in undertaking a full scope assessment of business compliance with requirements relevant to food standards.

- 7.36 Ten food standards interventions were selected for audit. Audit checks were undertaken on records held on the authority's database and in hardcopy for food establishments reported to have been subject to food standards inspections.
- 7.37 In seven cases auditors were able to confirm that interventions had been undertaken at the correct frequency. In the remaining cases one related to a high risk establishment which was one month overdue and two related to medium risk establishments which were undertaken between two and four months beyond the date required by the Food Law Code of Practice.
- 7.38 Records relating to the latest inspection were retrievable, legible and officer's observations had been captured using the correct food standards inspection aides-memoir in all cases examined. In three cases relating to high risk establishments, auditors identified that officer observations had been completed to a very high standard and sufficient detail was recorded to show that a thorough assessment of food standards requirements had taken place. However, in the remaining seven cases the assessment of compliance section of the forms had not been consistently completed for all relevant topic areas and auditors discussed that further information was required to demonstrate full scope assessments in accordance with the Food Law Code of Practice.
- 7.39 Auditors were able to confirm that officer assessments of compliance with composition, presentation and labelling requirements had been undertaken in three high risk establishments selected. In the remaining cases, insufficient details were recorded to demonstrate that a full assessment of compliance had been completed due to limited information being recorded by officers.
- 7.40 In seven cases officers had undertaken an assessment of traceability requirements. However, the remaining files had insufficient information recorded to demonstrate whether an assessment had been undertaken.

In seven cases relevant information in relation to product recall / withdrawal arrangements had been recorded.

- 7.41 Auditors were able to confirm that in general, evidence was available to demonstrate that officers had made an assessment of Quality Management Systems in relation to food standards. However in one case no information was recorded to demonstrate if an assessment had been made by the officer.
- 7.42 Auditors were able to confirm that officers had captured the size, scale and scope of the business in eight cases, whilst in the remaining two cases insufficient information was recorded to demonstrate the size or scale of the operations carried out. In all cases auditors were able to establish the type of activity undertaken.
- 7.43 In cases which were subject to previous interventions, evidence was available to confirm that appropriate action had been taken.
- 7.44 In respect of the most recent inspections, auditors were able to verify that in general, appropriate action had been taken in light of inspection findings and where records indicated that follow-up action was required, evidence was available to confirm this had taken place. However, auditors discussed that in the files where limited information was recorded against assessments of compliance it was not possible to determine if any follow-up action would have been required and therefore no further assessment could be made.
- 7.45 In all but one case, risk ratings applied were consistent with the officers findings and in accordance with the Food Law Code of Practice. In the remaining case a risk rating score provided to a high risk establishment was not consistent with the findings reported resulting in the establishment being rated as high risk and an increased frequency of inspection being applied. The authority reviewed and rectified the risk rating assessment at the time of the audit.
- 7.46 Auditors were able to confirm in all but one case that interventions were carried out on an unannounced basis. However, in one case an appointment had been made by an officer due to recent refurbishment works being undertaken at the business, contrary to the Food law Code of Practice.

7.47 The authority reported that it was not currently using an alternative enforcement strategy for lower risk establishments due to all establishments being included within the annual inspection programme.

***Recommendations***

7.48 The authority should:

- (i) Ensure that food standards interventions/inspections are carried out at the minimum frequency specified by the Food Law Code of Practice. [The Standard – 7.1]
- (ii) Carry out food standards interventions/inspections in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 7.2]
- (iii) Assess the compliance of establishments in its area to the legally prescribed standards [The Standard – 7.3]
- (iv) Develop an intervention procedure in accordance with the food law code or practice and centrally issued guidance. [The Standard – 7.4].
- (v) Ensure that observations made and/or data obtained in the course of a food standards intervention/inspection are recorded in a timely manner to prevent the loss of relevant information. [The Standard – 7.5]

*Verification Visit to Food Establishment*

7.49 Verification visits were undertaken at two food establishments with the authorised officer of the authority who had carried out the most recent food standards inspection. The main objective of the visits was to consider the effectiveness of the authority's assessment of the systems within the business for ensuring that food meets the requirements of food standards law.

7.50 Officers were able to demonstrate their knowledge of the businesses and provide auditors with an assurance that assessments of food standards controls had taken place as part of the inspections in both cases.

## **8 Food and Food Establishments Complaints**

- 8.1 The authority had developed a procedure for food hygiene complaints and service requests which outlined the criteria for investigations. Auditors noted that the procedure would benefit from providing details in relation to dealing with complaints regarding the condition of premises and the timeframes for responding to complaints.
- 8.2 The authority had not produced a procedure for food standards complaints although the authority has made commitment to produce a combined procedure for both services in accordance with the Food Law Code of Practice in the near future.

### ***Food Hygiene***

- 8.3 An examination of the records relating to 10 food hygiene complaints received by the authority was undertaken. Auditors established that all complaints had been actioned in a timely manner.
- 8.4 Auditors were able to establish that in all cases, appropriate action had been taken based on the findings of investigation and evidence was available to show that complainants had been informed of the outcome of the investigation.

### ***Food Standards***

- 8.6 An examination of the records relating to 10 food standards complaints received by the authority was undertaken. Auditors established that all complaints had been thoroughly investigated and where necessary appropriate follow up action taken.
- 8.7 In all cases complaints had been investigated within a timely manner and in nine out of 10 cases, cases evidence was available to demonstrate that the outcome of the investigation had been communicated to the complainant.

***Recommendations***

- 8.8 The authority should:
- (i) Amend its food hygiene procedure to include local arrangements for dealing with complaints regarding the condition of premises and time frames for responding to complaints. Additionally, the authority should create and implement a food standards procedure in accordance with the Food Law Code of Practice and other centrally issued guidance. [The Standard – 8.1]
  - (ii) Ensure that food standards complaints or service requests are investigated in accordance with the relevant Code of Practices, centrally issued guidance and the Authority’s policies and procedures. [The Standard – 8.2]



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

- 9.1 The authority's commitment to the Primary Authority Scheme and Home Authority Principle was set-out in its Constitution, Enforcement Policies and its Service Plan.
- 9.2 Auditors were advised that food law enforcement officers had been provided with passwords to enable them to access the Primary Authority website.
- 9.3 Primary and Home authority considerations had been included in some other work procedures, for example food complaints, food alerts, food hygiene interventions and food hygiene sampling policy.
- 9.4 The authority had three Primary Authority agreements in place and auditors were able to verify that, in its capacity as an enforcing authority, it had regard to Primary Authority guidance and followed up matters of concern with Primary Authorities, as appropriate.
- 9.5 The authority had 20 Home Authority arrangements in place and remained responsible for nine manufacturers as an originating authority. Records examined during the audit demonstrated that accurate and timely advice had been provided to businesses, and that it had responded appropriately to requests for information from other local authorities.

## 10 Advice to Business

10.1 The authority had been proactive in providing food hygiene and food standards advice to businesses. There was evidence that advice had been provided during interventions, as well as on request, both in writing and over the phone and also by visit if the business has yet to open. The authority reported that 80 requests for information and advice were received during the previous year for the food hygiene service along with 48 for the food standards service.

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

- Advice on starting new food business,
- Safer food, better business
- Food Hygiene Inspections
- Food Hygiene Inspection Scores
- Food Premises Approval
- Food Premises Registration
- Food Hygiene Training Courses
- Healthy Options Award Scheme
- Investigation of Food Poisoning & Food Borne Disease with exclusion advice leaflet
- Links to Food Hygiene frequently asked questions, Post Pennington Reports and Action Plans and other organisations such as FSA, (including cross contamination guidance), CIEH, Foodlink.

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

- The Country of Origin of Certain Meats (Wales) Regulations 2015 advisory mailshot (letter and leaflet),
- Food Hygiene Rating (Promotion of Rating)(Wales) Regulations 2016 advisory letter and leaflet,
- Dietary supplements mailshot (letter and leaflet).

## 11 Food Establishments Database

- 11.1 The authority has a documented procedure for the maintenance of the food hygiene and food standards databases which required updating to reflect new working arrangements associated with adoption of a new database. Information to update the databases is gathered from food business operators, local district knowledge / observations, and other council departments.
- 11.2 Auditors randomly selected 10 food establishments located in the authority's area from the Internet. All those still trading had been included on the authority's database. All those on the database had been included in the food inspection programmes.

### ***Recommendations***

- 11.3 The authority should:
- (i) Review and update its database management procedure. [The Standard – 11.2]

## **12 Food Inspection and Sampling**

- 12.1 The authority's Service Plan contained aims and objectives that made specific reference to the monitoring and sampling of food to verify compliance with statutory requirements. The programme included an estimate of the number of samples that would be taken in 2016/17.
- 12.2 A combined policy relating to food standards and food hygiene sampling activities had been developed by the authority. The authority advised auditors that the policy had been identified as requiring a full review in order to ensure it was in accordance with the Food Law Code of Practice. Auditors discussed that the new policy should include specific information relating to primary authority arrangements, out of hours sampling, sampling of imported foods and the policy in relation to taking formal and informal samples.
- 12.3 Programmes for the microbiological examination and chemical analysis of food that had regard to national and regional priorities had been developed and implemented. In addition to funding its own sampling programme, the authority had benefited from FSA grant funding for food standards samples.
- 12.4 A procedure had been developed by the authority for the microbiological sampling of foods. However, the authority advised that the procedure required review to ensure it was in accordance with the Food Law Code of Practice and this had been identified in the authority's improvement plan. No procedure was in place in relation to the chemical analysis of foods within the food standards service. The authority advised that the new procedure would be a combined food standards and food hygiene sampling procedure. Auditors discussed that the new procedure should be developed in accordance with the Food Law Code of Practice and centrally issued guidance and to include specific information relation to local arrangements.
- 12.5 The authority had appointed a Public Analyst for carrying out chemical analyses of food and had a formal agreement in place with Public Health Wales for the microbiological examination of food. The laboratories were both on the recognised list of UK designated Official Laboratories.

## **Food Hygiene**

- 12.6 Audit checks of records relating to 10 samples submitted for microbiological examination were undertaken, of which seven were notified as being satisfactory and three as unsatisfactory. All samples had been procured by appropriately trained and authorised officers with results recorded on file along with evidence that businesses had been notified of results.
- 12.7 In all but one case auditors noted that appropriate action had been taken by the authority. In the remaining case no evidence of a follow-up sample being taken was recorded.

## **Food Standards**

- 12.8 An examination of the records relating to six satisfactory and four unsatisfactory food standards samples was undertaken. Auditors were able to confirm in all cases that samples had been appropriately procured by trained and authorised officers and that sample results were available on food establishment files.
- 12.9 Auditors were able to confirm that sampling had been appropriately undertaken in accordance with the Food Law Code of Practice in eight cases. In the remaining two cases, a delay was noted in informing the business of the results and no follow-up action was recorded against unsatisfactory results. The authority advised these delays related to a wider national operation which related to these specific samples.
- 12.10 The owner, importer or manufacturer had been informed in writing of the unsatisfactory results in all applicable cases and auditors were able to confirm that where applicable, liaison with the Primary, Home or Originating authority had taken.

***Recommendations***

12.11 The authority should:

- (i) Review, amend and implement its sampling policy for the microbiological examination and chemical analysis of food in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 12.4]
- (ii) Review, amend and implement its documented procedure for microbiological sampling and chemical analysis of foods in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 12.5]
- (iii) Carry out food hygiene and food standards sampling in accordance with its documented sampling policy, procedures and programme. [The Standard – 12.6]

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

- 13.1 The authority had identified a lead officer for communicable disease along with other designated officers to assist in investigation and assessment of notifications received by the authority.
- 13.2 The Wales Outbreak Plan, containing information on the management of communicable disease outbreaks in Wales, had been approved for adoption by a senior officer of the authority. The plan had been produced by a multi-agency group, including Public Health Wales and Welsh Government. Auditors noted that the plan had been localised to include relevant contact details for neighbouring local authorities and other agencies that have a role in the control of outbreaks.
- 13.3 A procedure for investigating sporadic cases of food related infectious disease was in place. However, the authority had identified within its improvement plan that the document required a full review to ensure it was in accordance with centrally issued guidance, this had been postponed pending the release of a new software system in April 2017. Auditor's discussed that the new procedure should be developed to ensure investigation and appropriate follow-up action for Campylobacter investigations is completed in line with centrally issued guidance. A suite of organism specific advice leaflets had also been produced and were issued to all cases of notification.
- 13.4 The authority had arrangements in place to respond to notifications of food related infectious disease received outside normal working hours involving contact with an appropriately qualified officer. The arrangements were not tested as part of the audit.
- 13.5 Notifications relating to seven sporadic cases of food related infectious diseases were selected for audit. Two files selected related to cases of Campylobacter notification and auditors established that these are investigated through the use of postal questionnaires and provision of advice leaflets. Auditors identified that a system was in place to ensure that returned questionnaires were reviewed by an authorised officer. However, it was identified that the authority does not routinely take follow-up action in cases where no response is received to the initial letter.

- 13.6 In all of the remaining cases, questionnaires were available and completed which confirmed that officers had interviewed infected persons and that thorough and timely investigations had been carried out in accordance with the authority's procedures and target response times.
- 13.7 The authority reported one foodborne outbreak that had occurred in the two years prior to the audit. Auditors confirmed that this related to an E.coli 0157 outbreak affecting the North Wales region. Auditors confirmed that all relevant investigations were undertaken and that the authority had representation on all appropriate incident management meetings.
- 13.8 Records relating to the control and investigation of food related infectious disease were being retained by the authority for at least six years.

***Recommendation***

- 13.9 The authority should:
- (i) Review the procedure for investigation of sporadic cases of food related infectious disease to ensure that all notifications, including Campylobacter, are investigated in accordance with centrally issued guidance. Ensure that the procedure is fully implemented to include investigation of and follow-up of all notifications. [The Standard – 13.2]



## **14 Food Safety Incidents**

- 14.1 The authority had developed a food alerts procedure for dealing with incidents and food alerts which also referred to food incidents and alerts arising from within the area. The procedure was in need of review and minor updating in relation to posts as identified by the authority in its improvement plan.
- 14.2 Auditors were able to verify that a sample of five recent food alerts for action notified to the Authority by the Agency had been received and actioned as appropriate in accordance with the instructions issued by the FSA.
- 14.3 Auditors were able to verify that the Authority was aware of the requirement to notify the FSA of any serious localised and non-localised food hazards arising locally.
- 14.4 Action taken by the authority had been documented and correspondence, including officer e-mails relating to food alerts, had, in general, been maintained.

## **15 Enforcement**

- 15.1 The authority had developed a Public Protection Service enforcement policy which had recently been updated and approved by the appropriate member forum. This was supplemented by the Food Safety Enforcement Policy / Procedure which had recently been submitted for approval. The policy was available to the public and businesses upon request.
- 15.2 The enforcement policies advocated a graduated approach to enforcement and taken together, were generally in accordance with Food Law Code of Practice and other official guidance. They provided criteria for the taking of informal action, the service of various statutory notices, other formal actions, issuing simple cautions and taking prosecutions and made reference to the Primary and Home Authority schemes.
- 15.3 The taking of action in council operated establishments was not addressed in the policies.
- 15.4 Procedures for the withdrawal or suspension of approvals or the taking of action in relation to imported food had not yet been documented.
- 15.5 The authority had developed an enforcement procedure which detailed the authority's expectations with regards to certain enforcement actions; these included procedures for Hygiene Improvement Notices (HIN), Remedial Action Notices (RANs), Emergency Hygiene Prohibition Notices (HEPN) & Voluntary Closure, Prohibition Notices and Orders, Seizure, detention and voluntary surrenders, simple cautions & prosecutions. These procedures were generally in accordance with the Food Law Code of Practice, centrally issued guidance and applicable legislation. However, auditors discussed the benefit of reviewing the Hygiene Improvement Notice and the Remedial Action Notice procedure to include local arrangements for the drafting and service of notices and the RAN procedure to specifically include details regarding checks on compliance. Further, auditors noted that the Emergency Hygiene Prohibition Notices (HEPN) & Voluntary Closure procedure and the Seizure, detention and voluntary surrender procedure would benefit from details of the authority's local arrangements. Additionally, the authority

would benefit from developing a procedure for the service of Improvement Notices (INs) under the Food Safety Act 1990.

- 15.6 The authority had provided its approach for the commencement of prosecutions and simple cautions in its Enforcement Policy. Auditors discussed the benefit of developing a procedure for these enforcement actions which directs officers as to how to compile a case file, including local arrangements for the progression of a case, having regard to Criminal Procedure and Investigations Act (CPIA) roles and responsibilities. Further, auditors advised that the authority's enforcement checklist be amended to include a section for the documentation of enforcement policy considerations.
- 15.7 An examination of database records, indicated that there were no zero rated establishments requiring formal enforcement action to remedy the problems identified. No cases of closure of establishments were notified prior to the audit.
- 15.8 The following formal enforcement actions had been reported, in pre-audit documentation, as having been undertaken in the two years prior to the audit:
- 3 Hygiene Improvement Notices (HINs);
  - 1 Improvement Notice;
  - 1 Remedial Action Notice;
  - 1 Certification of food as unsafe;
  - 1 Food seizure;
  - 1 Voluntary Surrender of food;
  - 1 Simple Caution;
  - 1 Prosecution.
- 15.9 Three HINs, one IN and associated records were selected for examination during the audit. In all cases, true copies of the notice were provided which had been signed by the officer witnessing the contravention. Further evidence was available to demonstrate that the notice had been served on the correct person and the details of the contravention were clearly detailed along with a suitable timescale for compliance. The correct legislation had been cited in relation to contraventions in all cases.

- 15.10 In all cases, evidence was available to demonstrate that the HINs or INs had been an appropriate course of action and that notices contained the relevant appeals information. Further, appropriate follow-up action had taken place and letters confirming compliance had been sent to the FBO in all cases.
- 15.11 Audit checks of one RAN and associated records was undertaken, which confirmed that the action taken had been appropriate in relation to the specific circumstances of the cases involved. The notice had been signed by the officer witnessing the contravention, was clear and specified the nature of the breach. Furthermore, records were available to confirm that the recipient had been provided with the address of the court of law in the event of appeal. Auditors noted that an incorrect legislative reference had however been provided on the notice.
- 15.12 Evidence of proper service and timely checks on compliance had been carried out and auditors noted that the RAN still remains in force.
- 15.13 In one case where food had been certified as unsafe, auditors were able to confirm that this was the correct course of action and following certification, the food had been seized in accordance with the Food Law Code of Practice.
- 15.14 In relation to the subsequent seizure of the above food, auditors were able to confirm that the seizure was appropriate, had been confirmed in writing and the foods had been dealt with by the Justice of the Peace. However, auditors identified some minor omissions in relation to officers not detailing the reason for the timescale in bringing the food before a magistrate and not detailing the actual date / time of destruction on the relevant receipt documentation.
- 15.15 In one case where food was subject to voluntarily surrender and subsequent destruction, the action taken had been appropriate and in accordance with the Food law Code of Practice.
- 15.16 In the two years prior to the audit, the authority had issued one simple cautions and one prosecution relating to food standards offences.
- 15.17 In relation to the prosecution undertaken by the food standards service, auditors were able to confirm that it had been an appropriate course of action. However, auditors were unable to verify that the authority had

documented its decisions with regards to its Enforcement Policy. Auditors also discussed the need to ensure that designated roles in accordance with the Criminal Procedure and Investigations Act 1996 and all disclosed material were recorded as required by centrally issued guidance.

- 15.18 With respect to the Simple Caution administered by the authority, auditors were able to confirm that it had been administered by appropriately authorised officers. However a witness statement was unavailable to support the decision to issue the simple caution and auditors were unable to verify that the authority had documented its decisions with regards to its Enforcement Policy. Further, a record of the admission of the offence signed by the suspect was not available on the file.

### ***Recommendations***

15.19 The authority should:

- (i) Review and amend its enforcement policies to include details of its arrangements for ensuring compliance with food hygiene and food standards requirements in establishments where it is the food business operator and the food safety enforcement policy is approved by the appropriate member forum. [The Standard – 15.1]
- (ii) Review, amend and implement its Hygiene Improvement Notices, Remedial Action Notices, Hygiene Emergency Prohibition Notices and Voluntary Closures, simple cautions and prosecutions to include details of local arrangements; in particular, the method and record of service, the use of approved templates, checks on compliance, arrangements for bringing unsafe food or prohibition decisions before a Court of Law, and the process of compiling and approving files for decisions on prosecution / simple cautions. [The Standard – 15.2]
- (iii) Set up documented enforcement procedures for follow up and enforcement actions in relation to Improvement Notices, approved establishments and imported food in accordance with the Food Law Code of Practice and official guidance. [The Standard – 15.2]
- (iv) Ensure that food hygiene and food standards enforcement including RANs, destruction of food, prosecutions and Simple Cautions are carried out in accordance with the Food Law Code of Practice, centrally issued and official guidance and local procedures. [The Standard – 15.2 & 15.3]
- (v) Ensure all decisions on enforcement action are made following consideration of the authority's enforcement policy and are documented accordingly. [The Standard – 15.4]

## 16 Records and Interventions/Inspections Reports

### *Food Hygiene*

- 16.1 Food business records, including registration forms, inspection aide-memoires, post inspection visit report forms and correspondence were available in hard copy. Details of the date and types of intervention undertaken at food establishments, as well as the risk profiles and food hygiene ratings, were stored on an electronic food establishments database. In all cases, where relevant, information relating to the last three inspections was available and records were being retained for six years.
- 16.2 Food registration forms were available on file in eight out of 10 cases in relation to food hygiene intervention files and in three of these cases registration forms were date stamped. Auditors noted however that the authority has recently introduced a new procedure in relation to this area.
- 16.3 In all cases, establishment files for approved premises would benefit from a minor review against the documents required by Annex 10 of the Food Law Practice Guidance to ensure that all required information is available, retrievable and up to date.
- 16.4 In all cases, auditors were able to confirm that officers had left 'Food Safety Inspection Report' notifications post inspection in addition to sending out inspection letters to communicate findings to food businesses at their trading address. Further, inspection letters clearly differentiated between legal requirements and recommendations for good practice. These letters also detailed corrective actions and the timescales required to achieve compliance, as well as indicating any further follow-up action intended by the authority.
- 16.5 The combination of a "Food Safety Inspection Report" and a post-inspection letter amounted to the authority providing all information required to be provided to food business operators under Annex 6 of the Food Law Code of Practice. Further in six cases, auditors were able to verify that the inspection report had been sent to the establishments head office or other relevant authorities. In two cases, auditors were unable to verify that inspection reports had been sent to the premises head office as registration forms were not available and in the other two

cases, auditors were unable to verify whether the businesses head office had been informed.

- 16.6 In all of the cases examined the latest inspection letters had been sent to businesses within 14 days from the date of the visit, as required by the authority's procedures and Food Hygiene Rating legislation.

***Recommendations***

- 16.7 The authority should:
- (i) Maintain up to date accurate records of all food establishments in its area in accordance with the Food Law Code of Practice and centrally issued guidance; including provision of reports of intervention to a business' head office. These records shall include food establishment registration forms. The authority should also record, with reasons, any deviations from set procedure. [The Standard – 16.1]

***Food Standards***

- 16.8 The outcome of inspections was being reported to businesses using food standards inspection report forms. Report forms were being maintained electronically on the database and in hardcopy. Information relating to intervention activity, including the date, type of intervention undertaken and risk rating for the establishment was also recorded on the database.
- 16.9 In all cases, food business operators of the establishments selected for audit had been provided with report forms at the conclusion of the most recent inspection at their trading address in accordance with the food law code of practice.
- 16.10 Food Standards inspection report forms contained some of the information required by Annex 6 of the Food Law Code of Practice and in some cases follow-up letters were sent to businesses containing further information as required. Auditors discussed that the report forms would benefit from review to include all of the information required by Annex 6, specifically; senior officer contact details, clear distinction between legal



requirements and recommendations, timescales for compliance, actions to be taken by food business operator and documents examined.

- 16.11 The authority was able to demonstrate that food standards records were being consistently maintained for at least six years.

***Recommendations***

- 16.12 The authority should:

- (i) Ensure that food standards intervention reports provided following interventions/inspections contain all of the information required by Annex 6 of the Food Law Code of Practice. [The Standard – 16.1]

## **17 Complaints about the Service**

- 17.1 The authority had developed a corporate complaints policy which was available to the public and food businesses on request.
- 17.2 Complaints were dealt with under a two stage procedure, initially directly by officers in the relevant service and then, if the customer was not satisfied, by the Corporate Complaints Team.
- 17.3 Although no formal complaints against the service had been received in the two years prior to the audit, auditors were able to verify that there are effective arrangements in place within the service to respond to, record and report outcomes of informal complaint investigations.
- 17.4 Auditors noted that the details of a senior officer was provided on food hygiene correspondence should businesses wish to complain following an inspection or other intervention.

## **18 Liaison with Other Organisations**

18.1 The authority had liaison arrangements in place with a number of external groups aimed at ensuring efficient, effective and consistent enforcement. Auditors were able to confirm that the authority had been represented on the following forums for local authority regulatory services:

- All Wales Food Safety Expert Panel;
- All Wales Food Standards and Labelling Group;
- North Wales Food and Communicable Disease Technical Panel
- Lead Officers Food Hygiene Rating Steering Group;

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

- Welsh Food Microbiological Forum;
- Wales Heads of Environmental Health Group;
- Wales Heads of Trading Standards Group;
- Wales Communicable Disease Expert Panel;
- Tascomi working group

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

- Welsh Food Fraud Coordination Unit;
- Consultant in Communicable Disease Control (CCDC) and infection control nurses of Public Health Wales (Welsh NHS);
- Dee Valley Water;
- Care and Social Services Inspectorate Wales (CSSIW);
- North Wales Police;
- Food Standards Agency in Wales;
- Public Analyst.

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

## **19 Internal Monitoring**

- 19.1 Internal monitoring is important to ensure performance targets are met, services are being delivered in accordance with legislative requirements, centrally issued guidance and the authority's procedures. It also ensures consistency in service delivery.
- 19.2 A number of key performance indicators had been identified for the food hygiene and standards services. Quantitative internal monitoring arrangements were in place to monitor performance against the targets, which had been set-out in the service plan. Performance was reported through the corporate performance monitoring system. Further monitoring of the progress of intervention programmes is monitored monthly by the Lead officer.
- 19.3 A documented internal monitoring procedure had been developed for the food hygiene and food standards services. The procedure would benefit from further development to include officer authorisations, approved establishments, food hygiene AES and food standards activities.
- 19.4 The Lead officer was responsible for internal monitoring of the food enforcement services at an operational level.
- 19.5 Auditors were able to verify that some qualitative internal monitoring had been undertaken across the service including record checks.
- 19.6 Records maintained, in accordance with the procedure, were able to confirm the nature and extent of the monitoring activity which included accompanied inspections. Auditors were able to verify that some qualitative monitoring has been undertaken across both services including accompanied inspections and intervention file record checks, Infectious disease notifications, registrations and enforcement notices.
- 19.7 Team meetings were also conducted to feedback and share information on the validation of both the quantity and quality of work.
- 19.8 Officers had attended training to ensure the consistent application of food hygiene risk ratings, in accordance with Annex 5 of the Food Law Code of Practice. It had also recently participated in a national consistency exercise co-ordinated by the FSA.

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

***Recommendation***

19.10 The authority should:

- (i) Revise its documented internal monitoring procedures for food hygiene to include officer authorisations, approved establishments, food hygiene AES and food standards activities. Fully implement the revised procedure. [The Standard – 19.1]
- (ii) For both food hygiene and food standards services, verify its conformance with the Standard, relevant legislation, the relevant Codes of Practice, centrally issued guidance and the authority's documented policies and procedures. [The Standard – 19.2]

## **20 Third Party or Peer Review**

- 20.1 In January 2014 the 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. The authority was not audited individually as part of this programme. These focused audit reports are available at:  
[www.food.gov.uk/enforcement/auditandmonitoring](http://www.food.gov.uk/enforcement/auditandmonitoring)
- 20.2 The authority's arrangements for responding to emergencies out-of-office hours were tested by the FSA in March 2014. An appropriate response was received.
- 20.3 In February 2015, the authority was audited as part of a focussed FSA audit of official hygiene controls at Dairy establishments. Where matters remained outstanding from this audit, they have been absorbed into the recommendations within this report.
- 20.4 The authority's Environmental Health functions, which included the food hygiene service and the investigation of food related infectious disease, had been subject to a review by the Wales Audit Office in 2013/14. The report's findings were reported to the head of service and the appropriate Lead Member.

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

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

- Promotion of the new requirements under the statutory food hygiene rating scheme,
- Promotion of the FSA's barbecue safety campaigns,
- Promotion of the FSA's Christmas campaigns,

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

- Food Hygiene Inspection Scores,
- Food Complaints,
- Investigation of Food Poisoning & Food Borne Disease with leaflets:
  - What is Campylobacter
  - What is E-Coli 0157?
  - What is Giardia Lamblia?
  - What is Salmonella?
  - What is Viral Gastroenteritis/Rotavirus?
  - What is Shigella Dysentery?
  - What is Cryptosporidium?
  - Advice to a family with a case
- Report a Food Hygiene Issue

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

### **Auditors:**

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**Action Plan for Wrexham County Borough Council****Audit Date: 6th – 10th February 2017****DATE : August 2017**

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
Colour Code	<b>Green – Recommendation has been Completed</b>		
	<b>Orange – Recommendation has been partially complete and is still work in progress</b>		
3.24 (i) Ensure future Service Plans for food hygiene and food standards are developed in accordance with the Service Planning Guidance in the Framework Agreement. In particular, an estimate of the resources required to deliver the services against those available should be provided. [The Standard – 3.1]	<b>Completed</b>	<b>The food service plan has now been written in accordance with Service Planning Guidance. The estimated of the number of resources has be incorporated into the Food Service Plan.</b>	<b>Food service plan has been completed and signed off by Head of Department.</b>



<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
3.24 (ii) Ensure the annual performance review includes all information on the previous year's performance against the food service plan and any specified performance targets, standards and outcomes. [The Standard – 3.1]	<b>Completed</b>	<b>Annual performance review has been included in the plan and a review of targets has been carried out.</b>	<b>Food service plan has been completed and signed off by Head of Department.</b>
3.24 (iii) Ensure all variances in meeting the food service plan is addressed in its subsequent plan. [The Standard – 3.3]	<b>Completed</b>	<b>All variances from the previous plan have been addressed in the plan. This has included providing an explanation for each one and identifying areas of improvement.</b>	<b>Food service plan has been completed and signed off by Head of Department.</b>
4.6 (i) Ensure that the policies and procedures are updated with current information and references and are reviewed at regular intervals in accordance with document control procedures. [The Standard – 4.1 & 4.2]	<b>End of Sept 2017</b>	<b>All procedures which are yet to be updated will be updated and reviewed as part as a rolling programme.</b>	<b>40% of procedures have already been updated. The remaining procedures will be addressed as part of this plan</b>

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
5.9 (i) Ensure an appropriate number of authorised officers are appointed to deliver food hygiene and food standards official controls in accordance with the Food Law Code of Practice. [The Standard – 5.3]	<b>Expected lead member sign off End of August 2017</b>	<p><b>The resource assessment in the service plan has been brought to the attention of the appointed Lead Member and is awaiting his approval.</b></p> <p><b>Officers are also being re-trained to carry out combined Food Hygiene and Food Standards Inspections.</b></p> <p><b>Revised procedures</b></p>	<p><b>Following implementation of new Public Protection restructure (June 2017) the team will be merged to combine Food Hygiene / Food standards / Feed and Animal Health. The new team structure will be reviewed over the next 12 months and a report will be produced. Any issues that are highlighted as a result will be addressed accordingly.</b></p>
7.29 (i) Ensure that food hygiene interventions/inspections are carried out at the minimum frequency specified by the Food Law Code of Practice. [The Standard -7.1]	<b>Expected Lead Member sign off of service plan End August 2017</b>	<p><b>Service planning will identify the programme of interventions in accordance with the Food Law Code of Practice and the resources required to achieve it. The resource assessment in the service plan has been brought to the attention of the appointed Lead Member and is awaiting his approval.</b></p> <p><b>Revised procedures, new working practices and new management arrangements are being implemented.</b></p>	<p><b>A period of regular monitoring will be carried out to review the effectiveness of the new team.</b></p>

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
<p>7.29 (ii) Carry out food hygiene interventions / inspections in accordance with the Food Law Code of Practice, centrally issued guidance and its procedures. In particular, ensure that, where applicable, intervention risk rating and revisits are undertaken consistently in accordance with the Food Law Code of Practice, centrally issued guidance, and local procedures. [The Standard – 7.2]</p>	<p><b>Completed</b></p>	<p><b>Officers have been advised to ensure that risk ratings have been applied correctly and that revisits have been carried out and recorded appropriately.</b></p>	<p><b>Completed</b> <b>Monitoring of risk ratings and revisits will be carried out via internal monitoring procedures</b></p>
<p>7.29 (iii) Fully assess the compliance of establishments in its area to the legally prescribed standards. [The Standard – 7.3]</p>	<p><b>Completed</b></p>	<p><b>Inspection reports have been revised &amp; and updated to reflect auditors comments during the week.</b></p> <p><b>Officers have been reminded to ensure that assessments of compliance are consistently thorough and recorded appropriately.</b></p>	<p><b>Completed</b> <b>Monitoring of assessments of compliance will be carried out via internal monitoring procedures.</b></p>

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
<p>7.29 (iv) Ensure that the documented procedures for interventions are reviewed to include reference to the local arrangements for red flagging, timescales for revisits and home/originating authority liaison arrangements. Additionally, develop an intervention procedure in accordance with the food law code or practice and centrally issued guidance for the approval of establishments and for its alternative enforcement strategy. [The Standard – 7.4]</p>	<p><b>End Sept 2017</b></p>	<p><b>New joint intervention procedure to be introduced.</b></p> <p><b>Procedure will include the need for red flagging, re-visits and notification of intervention outcome to Home/Originating/Primary Authority.</b></p> <p><b>New Approval Intervention procedure to be developed.</b></p> <p><b>New Alternative Enforcement Strategy procedure to be developed for food hygiene &amp; standards Inspections</b></p>	<p><b>Work in progress – Allocated to Officers</b></p> <p><b>Work in progress – Allocated to Officers</b></p> <p><b>Work in progress – Allocated to Officers</b></p>
<p>7.29 (v) Ensure that observations made and/or data obtained in the course of a food hygiene intervention/inspection are recorded in a timely manner to prevent the loss of relevant information. [The Standard – 7.5]</p>	<p><b>Completed</b></p>	<p><b>Inspection reports have been revised &amp; and updated to reflect auditors comments during the week. Inspection Reports now include recording of ID numbers &amp; Cross contamination controls</b></p> <p><b>Officers have been reminded to ensure that observations are appropriately recorded.</b></p>	<p><b>Completed</b></p> <p><b>Monitoring of observations and data will be carried out via internal monitoring procedures</b></p>

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
7.48 (i) Ensure that food standards interventions/inspections are carried out at the minimum frequency specified by the Food Law Code of Practice. [The Standard – 7.1]	<b>Expected Lead Member sign off of service plan End August 2017</b>	<b>Service planning will identify the programme of interventions in accordance with the Food Law Code of Practice and the resources required to achieve it. The resource assessment in the service plan has been brought to the attention of the appointed Lead Member and is awaiting his approval.</b>  <b>Revised procedures, new working practices and New management arrangements are being implemented.</b>	<b>A period of regular monitoring will be carried out to review the effectiveness of the new team.</b>
7.48 (ii) Carry out food standards interventions/inspections in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 7.2]	<b>Completed</b>	<b>Officers have been advised to ensure that risk ratings have been applied correctly and that inspections are carried out unannounced in accordance with the Code.</b>	<b>Completed.</b>  <b>Monitoring of inspection forms will take place as part of internal monitoring procedures.</b>
7.48 (iii) Assess the compliance of establishments in its area to the legally prescribed standards [The Standard – 7.3]	<b>Completed</b>	<b>Officers carrying out Food Standards Inspections have been advised that they must capture and record sufficient information to be able to fully assess compliance of the premises.</b>	<b>Completed.</b>  <b>Monitoring of inspection forms will take place as part of internal monitoring procedures.</b>

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
7.48 (iv) Develop an intervention procedure in accordance with the food law code or practice and centrally issued guidance. [The Standard – 7.4].	<b>Completed</b>	<b>New joint intervention procedure has been introduced.</b>	<b>Completed. Monitoring of interventions will take place as part of internal monitoring procedures.</b>
7.48 (v) Ensure that observations made and/or data obtained in the course of a food standards intervention/inspection are recorded in a timely manner to prevent the loss of relevant information. [The Standard – 7.5]	<b>Completed</b>	<b>New combined inspection proforma has been developed. Additional requirements and recommendations that were highlighted as part of the audit have been included. The form has now been designed for use with combined Food Hygiene &amp; Standards Inspections.</b>	<b>Officers have received training on the completion of the new forms.  Monitoring of inspection forms will take place as part of internal monitoring procedures.</b>
8.8 (i) Amend its food hygiene procedure to include local arrangements for dealing with complaints regarding the condition of premises and time frames for responding to complaints. Additionally, the authority should create and implement a food standards procedure in accordance with the Food Law Code of Practice and other centrally issued guidance. [The Standard – 8.1]	<b>End Sept 2017</b>	<b>New joint food hygiene &amp; food standards complaint procedure to be introduced.</b>	<b>Work in progress - Meetings have taken place between Lead Manager &amp; Specialist Officer to develop the procedure.</b>

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
8.8 (ii) Ensure that food standards complaints or service requests are investigated in accordance with the relevant Code of Practices, centrally issued guidance and the Authority's policies and procedures. [The Standard – 8.2]	<b>Completed</b>	<b>Officers have been advised that service users must be notified of the outcome of all investigations.</b>	<b>Completed. This will be monitored via internal monitoring procedures.</b>
11.3 (i) Review and update its database management procedure. [The Standard – 11.2]	<b>Completed</b>	<b>Management of database procedure has been updated and includes changes to the database being used and new working procedures.</b>	<b>Completed</b>
12.11 (i) Review, amend and implement its sampling policy for the microbiological examination and chemical analysis of food in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 12.4]	<b>Completed</b>	<b>Sampling policy has been reviewed and updated taking into account necessary changes.</b>  <b>A combined food standards and food hygiene sampling procedure has been developed.</b>	<b>Completed</b>
12.11 (ii) Review, amend and implement its documented procedure for microbiological sampling and chemical analysis of foods in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 12.5]	<b>Completed</b>	<b>Sampling procedure has been reviewed and updated taking into account necessary changes.</b>  <b>A combined food standards and food hygiene sampling procedure has been developed.</b>	<b>Completed</b>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
12.11 (iii) Carry out food hygiene and food standards sampling in accordance with its documented sampling policy, procedures and programme. [The Standard – 12.6]	<b>End March 2018</b>	<b>Food Hygiene &amp; Standards sampling to be carried out in accordance with the sampling policy, procedures and 2017/18 sampling schedule.</b>	<b>Sampling schedule in place and samples being undertaken in accordance with the schedule. Sampling activity will be monitored throughout the year.</b>
13.9 (i) Review the procedure for investigation of sporadic cases of food related infectious disease to ensure that all notifications, including Campylobacter, are investigated in accordance with centrally issued guidance. Ensure that the procedure is fully implemented to include investigation of and follow-up of all notifications. [The Standard – 13.2]	<b>End June 2017</b>	<b>Infectious disease procedure to be updated and needs to take into account the new Infectious Disease Notification procedure. New infectious disease database goes live Mid may so this work cannot be completed before this time.</b>	<b>Work in progress. Some work has been carried out in this area. Work can now be completed with the TARIAN system being operational.</b>
	<b>Completed</b>	<b>Procedure has been put in place to ensure that all Campylobacter cases receive a follow up questionnaire if there is a non - response to the initial questionnaire. This will be incorporated into the above procedure.</b>	<b>Completed  Monitoring of follow up letters will take place as part of internal monitoring procedures.</b>



TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
15.19 (i) Review and amend its enforcement policies to include details of its arrangements for ensuring compliance with food hygiene and food standards requirements in establishments where it is the food business operator and the food safety enforcement policy is approved by the appropriate member forum. [The Standard – 15.1]	<b>Completed</b>	<b>Food Enforcement Policy has been updated to include what action is taken in premises where the LA is the Food Business Operator and has been approved by the Public Protection Service Manager.</b>	<b>Completed</b>
15.19 (ii) Review, amend and implement its Hygiene Improvement Notices, Remedial Action Notices, Hygiene Emergency Prohibition Notices and Voluntary Closures, simple cautions and prosecutions to include details of local arrangements; in particular, the method and record of service, the use of approved templates, checks on compliance, arrangements for bringing unsafe food or prohibition decisions before a Court of Law, and the process of compiling and approving files for decisions on prosecution / simple cautions. [The Standard – 15.2]	<b>End Sept 2017</b>	<b>Various procedures relating to notices will be updated to incorporate audit recommendations.</b>	<b>Work in process</b>  <b>Enforcement notice procedure has been updated. Notice procedures will be updated to incorporate audit recommendations.</b>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>15.19 (iii) Set up documented enforcement procedures for follow up and enforcement actions in relation to Improvement Notices, approved establishments and imported food in accordance with the Food Law Code of Practice and official guidance. [The Standard – 15.2]</p>	<p><b>End Sept 2017</b></p>	<p><b>Procedure which covers the notices in approved premises and imported food control are to be developed.</b></p> <p><b>Procedure for follow up actions and enforcement action in relation to Improvement Notices will be covered by a procedure in paragraph 15.19 (ii)</b></p>	<p><b>Officers have been allocated the task of developing procedures. Target date of End Sept has been set for completion.</b></p>
<p>15.19 (iv) Ensure that food hygiene and food standards enforcement including RANs, destruction of food, prosecutions and Simple Cautions are carried out in accordance with the Food Law Code of Practice, centrally issued and official guidance and local procedures. [The Standard – 15.2 &amp; 15.3]</p>	<p><b>Completed</b></p>	<p><b>RANS – Officers have been advised that where a RAN is served 1 offence per RAN and correct legislation to be specified.</b></p> <p><b>Where there is a delay for any reason in the destruction of food then these reasons should be recorded appropriately. Also, the date / time of destruction will be specified on the relevant receipt documentation. Copies of simple cautions must be attached to prosecution files. In addition, all case files will include witness statements and appropriate disclosure information.</b></p>	<p><b>Completed</b></p> <p><b>Monitoring will take place as part of internal monitoring procedures.</b></p>

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
15.19 (v) Ensure all decisions on enforcement action are made following consideration of the authority's enforcement policy and are documented accordingly. [The Standard – 15.4]	<b>Completed</b>	<p><b>Officers have been advised of the need to ensure that all actions are adequately documented and stored accordingly.</b></p> <p><b>Evidential test now includes consideration of Public Protection Enforcement Policy</b></p>	<b>Completed</b>
16.7 (i) Maintain up to date accurate records of all food establishments in its area in accordance with the Food Law Code of Practice and centrally issued guidance; including provision of reports of intervention to a business' head office. These records shall include food establishment registration forms. The authority should also record, with reasons, any deviations from set procedure. [The Standard – 16.1]	<b>Completed</b>	<p><b>Officers have been advised of the need to document where correspondence has been sent to head office.</b></p>	<p><b>Completed</b></p> <p><b>Monitoring will take place as part of internal monitoring procedures.</b></p>
	<b>End March 2019 or until the database is fully populated.</b>	<p><b>Due to a new data base being introduced, as premises are visited new food registration forms are being completed. This will be an on going process until the database is fully populated.</b></p> <p><b>Approved establishment files will be reviewed to ensure all required information is present. Deviations from set procedures will be recorded on establishment files.</b></p>	<p><b>A number of new food premises registration forms have already been added to the database'</b></p> <p><b>Monitoring will take place as part of internal monitoring procedures.</b></p>

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
16.12 (i) Ensure that food standards intervention reports provided following interventions / inspections contain all of the information required by Annex 6 of the Food Law Code of Practice. [The Standard – 16.1]	<b>Completed</b>	<b>Food Standards intervention reports have been reviewed to ensure that they meet the requirements of Annex 6.</b>  <b>Joint Food Hygiene / Standards form has now been introduced.</b>	<b>Completed</b>
19.10 (i) Revise its documented internal monitoring procedures for food hygiene to include officer authorisations, approved establishments, food hygiene AES and food standards activities. Fully implement the revised procedure. [The Standard – 19.1]	<b>Completed</b>	<b>Internal Monitoring Procedure has been revised to incorporate, Officer Authorisations, Approved Premises Establishments, Food Hygiene &amp; Food Standards AES and Food Standards activities</b>	<b>Completed</b>
19.10 (ii) For both food hygiene and food standards services, verify its conformance with the Standard, relevant legislation, the relevant Codes of Practice, centrally issued guidance and the authority's documented policies and procedures. [The Standard – 19.2]	<b>Completed</b>	<b>Internal Monitoring Procedure has been revised to incorporate, Officer Authorisations, Approved Premises Establishments, Food Hygiene &amp; Food Standards AES and Food Standards activities</b>	<b>Completed</b>  <b>Internal monitoring will be carried out to ensure conformance with the standard.</b>

## **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:

- Wrexham County Borough Council – Food Service Plan 2016 – 2017
- Wrexham County Borough Council – Public Protection Service – Food Law Enforcement Improvement Plan 2016/17
- Wrexham County Borough Council - Environment and Planning Department - Food Safety Document Control Procedure – Ref DCP/01 – December 2016
- Wrexham County Borough Council – Constitution – April 2016 Revision
- Wrexham County Borough Council – Housing & Public Protection Department – Procedure for Authorisation of Officers
- Wrexham County Borough Council – Environment and Planning Department - Calibration Procedure for Food Measuring Thermometers – Ref CFMT/01 - November 2016
- Wrexham County Borough Council – Environment and Planning Department – Equipment Maintenance Procedure – Ref EMP/01 – November 2016
- Regulation 853/2004 – Additional Form for Inspection of Premises Requiring Approval for Heat Treatment of Dairy Products
- Wrexham County Borough Council – Commercial Premises Hygiene Inspection Report
- Wrexham County Borough Council – Hygiene Inspection Report Cold Storage Facilities
- Wrexham County Borough Council – Establishments handling shell eggs requiring approval under 853/2004
- Wrexham County Borough Council – Housing and Public Protection Environmental Health – Food Premises Interventions and Revisits Procedure – January 2014
- Wrexham County Borough Council – Data Capture Sheet – Food Safety Act 1990 – Food Standards Inspection – General
- Inspection Form for General Food Hygiene of Manufacturing Establishments and/or Establishments Requiring Approval
- Wrexham County Borough Council – Food Safety Act 1990 – Food Standards Inspection – Manufacturers

- Wrexham County Borough Council – Commercial Premises Hygiene Inspection Report
- Wrexham County Borough Council – Public Protection Department – Food Complaints Procedure
- Wrexham County Borough Council – Housing & Public Protection Department – Consumer Complaint Record Form
- Food Hygiene Rating Scheme – Introduction of new rules to promote food hygiene ratings on certain publicity materials
- Food Standards Agency – Food Supplements Leaflet
- Swine, sheep, goat and poultry origin labelling – The Country of origin of Certain Meats (Wales) Regulations 2015
- Wrexham County Borough Council – Housing and Public Protection Environmental Health – Control of the Database Procedure – January 2014
- Wrexham County Borough Council – Housing & Public Protection Department – Food Sampling Policy – Food and Feeding Stuffs Sampling Policy
- Wrexham County Borough Council – Housing & Public Protection Department – Food Sampling Procedure
- The Communicable Disease Outbreak Plan for Wales (‘The Wales Outbreak Plan’) – April 2014
- Wrexham County Borough Council – Housing & Public Protection Department – Procedure for dealing with notifications of Infectious Disease
- Wrexham County Borough Council – Housing and Public Protection Environmental Health – Food Alerts Procedure – January 2014
- Wrexham County Borough Council – Housing and Public Protection Environmental Health – Prohibition Procedures – January 2014
- Wrexham County Borough Council – Housing and Public Protection Environmental Health – Enforcement Procedure – January 2014
- Wrexham County Borough Council – Housing and Public Protection Environmental Health – Food Safety, Food Standards – Inspections and interventions Procedure – January 2014
- Wrexham County Borough Council – Public Protection Enforcement Policy
- Wrexham County Borough Council – Housing and Public Protection Environmental Health – Remedial Action Notices Procedure – January 2014
- Wrexham County Borough Council – Housing and Public Protection Environmental Health – Seizure and Detention of Food Procedure – May 2014
- Wrexham County Borough Council – Housing & Public Protection – Trading Standards Division – Service of Notices Procedure – December 2014
- Wrexham County Borough Council – Housing and Public Protection Environmental Health – Serving of Hygiene Improvement Notices Procedure – January 2014
- Wrexham County Borough Council – Housing & Public Protection Department Detailed Complaints Process

- Wrexham County Borough Council – Staff Newsletter – Complaints Procedure
- Wrexham County Borough Council – Environment And Planning Department – Internal Monitoring Procedure Ref INTMP/02 – June 2016

## **(2) File and records reviews**

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

- Wrexham County Borough Council – Full Council Meeting 18 May 2016
- Council Report – Update of Proper Officers’ Schedule in the Council Constitution – Appointments of Proper Officers for Communicable Disease Control – 18 May 2016
- Executive Board Report – Food Hygiene Rating (Wales) Act 2013 - Delegated Authority – 14 January 2014
- Summary of Partnership Agreement between Wrexham County Borough Council and Arthur Chatwin Ltd
- Primary Authority Agreement Arthur Chatwin Ltd (Retail Only) and Wrexham County Borough Council – Terms and Conditions
- Summary of Partnership Agreement between Wrexham County Borough Council and Meadow Vale Holdings Limited
- Summary of Partnership Agreement between Wrexham County Borough Council and Betsi Cadwaladr University Health Board
- Primary Authority Terms and Conditions
- Wrexham County Borough Council – Summary of Food Advisory Work
- Wrexham County Borough Council – Food Sampling Programme 2015/2016
- Wrexham County Borough Council – Food Sampling Programme 2016/2017
- Minutes of a Meeting of the Executive Board held at the Guildhall, Wrexham on Tuesday 15 June 2010
- Communicable Disease Expert Group Meeting Minutes – 6th October 2016 Draft
- Food Safety Expert Panel – Minutes of the meeting held 7 September 2016
- Food Safety Expert Panel – Minutes of the meeting held 23 March 2016
- Food Safety Expert Panel – Minutes of the meeting held 9 June 2016
- North Wales Food & Communicable Disease Panel Meeting Minutes 7 July 2016
- North Wales Food & Com disease Tech Panel Meeting Minutes – 14 January 2016
- Wrexham County Borough Council – Team Meeting Minutes – 2 August 2016
- Wrexham County Borough Council – Team Meeting Minutes – 28 September 2016

- Wrexham County Borough Council – Team Meeting Minutes – 3 November 2016
- Wrexham County Borough Council – Team Meeting Minutes – 20 December 2016
- Wrexham County Borough Council – Approved Premises List – November 2016
- Wrexham County Borough Council – Interventions
- Unrated Food Hygiene Premises – 30 November 2016
- Wrexham County Borough Council – No Inspectable Risk Premises
- Wrexham County Borough Council – Alternative Enforcement Strategy
- Wrexham County Borough Council – List of Imported Food
- Food Safety Complaints – 01 December 2015 – 30 November 2016
- Sampling Food Hygiene 01 December 2015 – 31 March 2016
- Wrexham County Borough Council – Formal Enforcement Notices
- Wrexham County Borough Council – Voluntary Surrenders
- Wrexham County Borough Council – Food Related Infectious Disease
- Wrexham County Borough Council – Interventions
- Wrexham County Borough Council – Unrated Premises
- Wrexham County Borough Council – Unrated / Outside Programme Report
- Wrexham County Borough Council – Food Standards Samples
- Wrexham County Borough Council – Simple Cautions & Prosecutions
- Officer authorisations and training records
- Calibration records
- General food establishment records
- Approved establishment files
- Food and food establishment complaint records
- Advisory and promotional materials provided to businesses and consumers
- Food sampling records
- Records of food related infectious disease notifications
- Food Incident records
- Informal and formal enforcement records
- Minutes of internal meetings and external liaison meetings
- Internal monitoring records

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

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

- Review and assess the completeness of database records of food inspections, food and food establishment complaint investigations, samples taken by the authority, formal enforcement and other activities and to verify consistency with file records.



- Assess the completeness and accuracy of the food establishments database.
- Assess the capability of the system to generate food law enforcement activity reports and the monitoring information required by the Food Standards Agency.

#### **(4) *Officer interviews***

Officer interviews were carried out with the purpose of gaining further insight into the practical implementation and operation of the authority's food control arrangements. The following officers were interviewed:

Service Manager for Public Protection  
Specialist Environmental Health Officer  
Trading Standards Officer  
Environmental Health Officers  
Food Safety Officers

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

#### **(5) *On-site verification checks:***

Verification visits were made with officers to four local food establishments. The purpose of these visits was to consider the effectiveness of the authority's assessment of food business compliance with relevant requirements.

***Glossary***

Approved establishments	Food manufacturing establishment that has been approved by the local authority, within the context of specific legislation, and issued a unique identification code relevant in national and/or international trade.
Authorised officer	A suitably qualified officer who is authorised by the local authority to act on its behalf in, for example, the enforcement of legislation.
Codes of Practice	Government Codes of Practice issued under Section 40 of the Food Safety Act 1990 as guidance to local authorities on the enforcement of food legislation.
CPIA	The Criminal Procedures and Investigations Act 1996 – governs procedures for undertaking criminal investigations and proceedings.
Critical Control Point (CCP)	A stage in the operations of a food business at which control is essential to prevent or eliminate a food hazard or to reduce it to acceptable levels.
Directors of Public Protection Wales (DPPW)	An organisation of officer heading up public protection services within Welsh local authorities.
Environmental Health Professional/Officer (EHP/EHO)	Officer employed by the local authority to enforce food safety legislation.
Food Examiner	A person holding the prescribed qualifications who undertakes microbiological analysis on behalf of the local authority.
Food Hazard Warnings/ Food Alerts	This is a system operated by the Food Standards Agency to alert the public and local authorities to national or regional problems concerning the safety of food.

Food/feed hygiene	The legal requirements covering the safety and wholesomeness of food/feed.
Food Hygiene Rating Scheme (FHRS)	A scheme of rating food businesses to provide consumers with information on their hygiene standards.
Food standards	The legal requirements covering the quality, composition, labelling, presentation and advertising of food, and materials in contact with food.
Food Standards Agency (FSA)	The UK regulator for food safety, food standards and animal feed.
Framework Agreement	<p>The Framework Agreement consists of:</p> <ul style="list-style-type: none"> <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 other's' food law enforcement services against an agreed quality standard.
LAEMS	Local authority Enforcement Monitoring System is an electronic system used by local authorities to report their food law enforcement activities to the Food Standards Agency.
Member forum	A local authority forum at which Council Members discuss and make decisions on food law enforcement services.
National Trading Standards Board (NTSB)	An association of chief trading standards officers.
OCD returns	Returns on local food law enforcement activities required to be made to the European Union under the Official Control of Foodstuffs Directive.
Official Controls (OC)	Any form of control for the verification of compliance with food and feed law.

Originating authority	An authority in whose area a business produces or packages goods or services and for which the authority acts as a central contact point for other enforcing authorities' enquiries in relation to the those products.
PACE	The Police and Criminal Evidence Act 1984 – governs procedures for gathering evidence in criminal investigations.
Primary authority	A local authority which has developed a partnership with a business which trades across local authority boundaries and provides advice to that business.
Public Analyst	An officer, holding the prescribed qualifications, who is formally appointed by the local authority to carry out chemical analysis of food samples.
Registration	A legal process requiring all food business operators to notify the appropriate food authority when setting-up a food business.
Remedial Action Notices (RAN)	A notice served by an Authorised Officer of the local authority under Regulation 9 of the Food Hygiene (Wales) Regulations 2006 (as amended) on a food business operator to impose restrictions on an establishment, equipment or process until specified works have been carried out to comply with food hygiene requirements.
Risk rating	A system that rates food establishments according to risk and determines how frequently those establishments should be inspected. For example, high risk hygiene establishments should be inspected at least every 6 months.
Service Plan	A document produced by a local authority setting out their plans on providing and delivering a food service to the local community.
Trading Standards	The service within a local authority which carries out, amongst other responsibilities, the enforcement of food standards and feedingstuffs legislation.

Trading Standards Officer (TSO)	Officer employed by the local authority who, amongst other responsibilities, may enforce food standards and feedingstuffs legislation.
Unitary authority	A local authority in which all the functions are combined, examples being Welsh Authorities and London Boroughs. A Unitary authority's responsibilities will include food hygiene, food standards and feedingstuffs enforcement.
Unrated business	A food business identified by an authority that has not been subject to a regulatory risk rating assessment.
Wales Heads of Environmental Health (WHeEH)	A group of professional representatives that support and promote environmental and public health in Wales.