Audit of Food Hygiene Service Delivery
Focusing on Service Organisation,
Management and Internal Monitoring
Arrangements

Wyre Forest District Council
24-25 May 2017
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1.0 Introduction

1.1 This is a report on the outcomes of the Food Standards Agency's (FSA’s) audit of Food Hygiene Service Delivery, focussing on Service Organisation, Management and Internal Monitoring Arrangements, conducted at Wyre Forest District Council on the 24-25 May 2017. The audit was carried out as part of a programme of audits on local authorities (LA) in England. The report has been made available on the Agency’s website at:

www.food.gov.uk/enforcement/auditandmonitoring/auditreports

Hard copies are available from the FSA by emailing the FSA at LAAudit@foodstandards.gsi.gov.uk or telephoning 01904 232116.

1.2 The power to set standards, monitor and audit local authority feed and food law enforcement services was conferred on the Food Standards Agency by the Food Standards Act 1999 and the Official Feed and Food Controls (England) Regulations 2009. This audit was undertaken under section 12(4) of the Act as part of the Food Standards Agency’s annual audit programme.

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 Food Standards Agency, as the central competent authority for feed and food law in the UK has established external audit arrangements. In developing these, the Agency has taken account of the European Commission guidance on how such audits should be conducted.[1]

1.4 The Authority was included in the Food Standards Agency’s programme of audits of local authority food law enforcement services as part of a geographical mix of local authorities and to verify and assess data submitted by the Authority to the FSA via the Local Authority Enforcement Monitoring System (LAEMS).

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

2.0 Scope of the Audit

2.1 The audit examined the Authority’s organisation, management, and internal monitoring arrangements with regard to food hygiene law enforcement. Assurance was sought that key authority food hygiene systems were in place and effective, including suitable arrangements for the internal monitoring of official controls delivered by the Service. The on-site element of the audit took place at Wyre Forest House, Finepoint Way, Kidderminster, DY11 7BF.

3.0 Background

3.1 Wyre Forest District Council is located in the Worcestershire in the West Midlands region of England and includes the towns of main town of Kidderminster, Stourport-on Severn and Bewdley. The Council covers an area of covers some 75.4 square miles of mixed urban and rural areas. The main centre of population is Kidderminster town.

3.2 Wyre Forest’s resident population is approximately 98,000 according to 2011 Census data. The population is predominantly white, 98.2%, with other ethnic groups making up 1.8% of the population.

3.3 The Authority had 957 registered food businesses in its area according to data received by the Agency in 2015/16. These included 1 business approved under Regulation (EC) 853/2004. Whilst companies within Primary Authority Partnerships run operations within the District there are no direct PAPs with any Wyre Forest based businesses.

3.4 In 2008/09 in response to increasing financial pressures on local authorities and to provide a more efficient and cost effective method of delivering regulatory functions, Wyre Forest and six neighbouring authorities (Bromsgrove, Malvern Hills, Redditch, Worcester City, Wychavon and Worcestershire County Council) explored various alternative service delivery models. In 2010 Wyre Forest and its neighbours agreed on a delivery model and using powers under the Local Government Act delegated responsibility for delivery of its official controls to a Joint Committee of the seven local authorities and the shared service for which it provided governance, Worcestershire Regulatory Services, (WRS). The organisational structure and legal agreements were available in a document which outlined arrangements for employees, authorisations and service delivery, as well as any limitations.
The Authority had reported the profile of food businesses at 31 March 2016 through LAEMS as follows:

<table>
<thead>
<tr>
<th>Type of Food Premises</th>
<th>Number</th>
</tr>
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<tbody>
<tr>
<td>Primary Producers</td>
<td>18</td>
</tr>
<tr>
<td>Manufacturers/Packers</td>
<td>14</td>
</tr>
<tr>
<td>Importers/Exporters</td>
<td>0</td>
</tr>
<tr>
<td>Distributors/Transporters</td>
<td>12</td>
</tr>
<tr>
<td>Retailers</td>
<td>246</td>
</tr>
<tr>
<td>Restaurants/Caterers</td>
<td>667</td>
</tr>
<tr>
<td><strong>Total Number of Food Premises</strong></td>
<td><strong>957</strong></td>
</tr>
</tbody>
</table>

The Authority provided evidence of good links with neighbouring authorities and regularly attended the Midlands Food Liaison Group.

### 4.0 Executive Summary

#### 4.1
This audit of Wyre Forest District Council sought assurance that key local authority food hygiene law enforcement systems and arrangements were effective in supporting business compliance, and that local enforcement was managed and delivered effectively. The audit focused on the Authority’s service organisation, management and internal monitoring arrangements.

#### 4.2
To provide a more efficient and cost effective method of delivering regulatory functions, in 2010 Wyre Forest District Council, along with six other neighbouring authorities delegated responsibility for the delivery of official controls to a Joint Committee of the seven local authorities and the shared service for which it provided governance, Worcestershire Regulatory Services (WRS). WRS is funded and resourced by staff and contributions from each of the individual authorities and governed by a committee of council members and senior management representatives from each of the now six authorities.

#### 4.3
The Authority was found to be meeting many of the requirements of the Standard in the Framework Agreement and the Food Law Code of Practice. The Authority had developed a Service Plan, a range of policies and procedures. Officers were appropriately trained and a range of enforcement actions were being undertaken to bring about business compliance.

#### 4.4
The audit revealed a number of areas of improvement in order to meet the requirements of the Framework Agreement and the Food Law Code of Practice (FLCoP) and to aid consumer protection.
Strengths

4.5 As part of WRS, the Authority proactively explored ways to improve the risk basis to delivery of its food safety service. This included the use of a dedicated intelligence officer to provide local and national intelligence on food safety issues. An assessment of the Authority’s food premises database also showed that the Service was able to report timely improvements in risk ratings and FHRS ratings following inspections, indicating its effectiveness at tackling contraventions in food businesses.

4.6 The Authority had been proactive in using new techniques such as rapid microbiological testing equipment as part of their strategy to deliver partial inspections. The use of these methods provided a useful focus for such interventions, allowing the Authority to make use of the flexibilities allowed under the (FLCoP).

4.7 As part of WRS the Authority had taken part in local food safety initiatives including a scheme aimed at helping local Asian businesses to achieve timely compliance with food hygiene legislation. This scheme won the Service the Innovation Award in the Better Business for All Awards 2016 run by Regulatory Delivery, a section of BEIS, and the service was also runner-up at the Association of Public Service Excellence Awards as the Best Environmental Health Service in their 2016 Awards. The Service has recently been shortlisted for the Chartered Institute of Environmental Health 2017 Best Environmental Health Team Award.

Key areas for improvement

4.8 The Authority had 288 overdue lower risk food hygiene interventions outstanding and whilst these were generally at lower risk previously compliant businesses, they did include a significant number of businesses involved with serving vulnerable groups as well as some takeaways and restaurants and other caterers. Auditors were provided with assurances that these would be reviewed and assessed as part of future risk based delivery plans.

4.9 The Authority needed to review and expand its service planning document to include details of any overdue or unrated interventions.

4.10 Although the Authority had recently carried out a range of internal monitoring activity across some sections of the Service, the Authority needs to ensure that monitoring of all service activities is considered and carried out as required. Auditors also recommended a more risk based approach to monitoring, making sure that the inspections and follow up actions particularly at higher risk food businesses are suitably monitored throughout the year. Service planning also needs to include the resources and time required to carry out this monitoring.
5.0 Audit Findings

5.1 Service Organisation & Management

5.1.1 WRS ("the Service") now delivers on behalf of an association of six local authorities, Wyre Forest, Bromsgrove, Malvern Hills, Redditch, City of Worcester and Wychavon. WRS is funded by contributions from each of the individual local authorities and governed by a committee of council members and senior management representatives from each of the seven authorities. In its original 3-year business case from 2010, the delegated body aimed to improve service delivery and to achieve 17.5% savings whilst maintaining service outcomes compared to the costs of the previous traditional delivery model. Savings have subsequently gone significantly beyond this with the service’s current budget of £3.025M compared with a revenue spend of around £5M in 2010.

5.1.2 Food safety enforcement was delivered by the Community Environmental Health division (CEH). In April 2016 this was split into three teams of 6 FTE officers each covering food safety along with health and safety and nuisance complaints, along with a Senior Practitioner as a team leader. Each team was responsible for service delivery across two district areas and the teams operated a three monthly rotation so that officers would service businesses across the whole of the county. One of the three senior practitioners has always acted as the Food Lead Officer for all the district councils in Worcestershire since the Service was formed. All food officers spend time working across the District. Work was allocated and reviewed through the CEH Tasking Team, made up of the CEH Manager, senior practitioners, a legal officer and an intelligence officer.

5.2 Service Planning

5.2.1 Business planning for the Service in relation to the delivery of food controls in Wyre Forest District Council formed part of a wider service planning process carried out by WRS for all the members of the delegated body.

5.2.2 WRS produced a range of service plans and work plans outlining the strategic aims and objectives of the service in relation to food safety. The plans including a three year business plan for 2017-20 and an individual service plan for 2017/18 providing details of a range of targets and performance indicators. These included the percentage of businesses broadly compliant at the first inspection, the % of food businesses rated as 0, 1 and 2 under the FSAs Food Hygiene Rating Scheme (FHRS) and an indicator based on business satisfaction.

5.2.3 The three year plan also provided an estimate of the minimum full time equivalent officers (FTE) required to deliver the food service and other service activities as 18.5 FTE, against a minimum standard.
current FTE provided for core environmental health services including delivery of food safety controls marginally exceeded the minimum required, 19.4 FTE. The estimated FTE officers available specifically for delivering official controls in relation to food safety for Wyre Forest were 2.04 FTE.

5.2.4 WRS’s operational guidance document “The Principles of Food Safety” also contained key information about the Service providing specific additional details about the amalgamated food service including Wyre Forest District Council. The document detailed of the numbers of food premises and overall FTE provided solely for food safety by WRS.

5.2.5 The Service carried out regular documented reviews of its service and delivery targets, including a comprehensive annual report and strategic assessment for the Committee members, showing the achievements of the Service, enforcement actions and service delivery against its targets for all the environmental health services provided.

5.2.6 The Food Work Plan outlined the demands on the Service and the range of activities it carried out. This included a commitment to deliver its interventions on a risk basis, inspecting businesses without prior notice, unless in exceptional circumstances, in accordance with the Food Law Code of Practice (FLCoP).

5.2.7 Where any shortfall in resources is identified, the Plan should include details of proposals to address or mitigate this issue. The Plan should consider and effectively communicate all potential risks, including risks to the reputation of the Authority and the WRS partnership. It is essential that relevant senior managers and Members are made aware of these risks and the potential implications of any shortfall in service delivery.

**Recommendation 1 - Service planning**
[The Standard 3.1]

Ensure that all future service planning documents include a clear explanation of all the demands on the Service, including details of any backlog of overdue interventions and unrated establishments from previous years.
5.3 **Service Delivery**

**Interventions**

5.3.1 WRS had decided that in order to achieve the required efficiencies a new form of service delivery would be required. The Service therefore delivered its official controls in accordance with the principles of systems thinking, an approach agreed by Members from each of the individual authorities making up the governing board of WRS. This involved the use of local, regional and national intelligence to help underpin the priorities of the Service.

5.3.2 Under this system the Service had implemented a risk based intervention strategy driven primarily by FHRS ratings as opposed to the frequencies and risk ratings of annex 5 of the FLCoP. The Service focused its inspection activity at non-compliant high risk 0, 1 and 2 rated businesses, with a policy of carrying out revisits and enforcement action until compliance is achieved. Broadly compliant businesses rated as 3, 4 and 5 were subject to a range of interventions including more focused/partial inspections and alternative enforcement approaches including questionnaires, subject to officer discretion.

5.3.3 To avoid any potential conflict with the risk rating frequencies prescribed in the FLCoP, the lead officer routinely reviews the quarterly intervention caseloads generated by the services database. This ensures that any compliant category A-C businesses are identified and prioritised for appropriate interventions as well as any other businesses not included in the FHRS such as manufacturers and approved establishments. We discussed the risk strategy used by the lead officer and recommended that this should be documented and explained in the Services Operational Guidance document.

5.3.4 In addition to FHRS led interventions strategy, the Service had also developed and implemented a system of intelligence reports to inform its enforcement activity. These reports were prepared by a dedicated intelligence officer, and analysed data from a number of internal and external sources including complaints data, open source data on the internet, FHRS data, national data sets including those from the FSA and social media.

5.3.5 The Service had adopted a policy of delivering full inspections at all the A, B and non-compliant C risk rated businesses. Compliant category C and D businesses received either partial or full inspection and category E businesses were part of an alternative enforcement strategy (AES) consisting of questionnaires to businesses to assess any change in ownership or operations on site.

5.3.6 At the time of the audit there were 288 overdue interventions in the Wyre Forest area. These were largely previously broadly compliant lower risk businesses. The list of overdue inspections did however still
include premises preparing or handling high risk foods and some businesses catering for vulnerable groups. This posed a potential risk to the public and reputation of the Authority due to possible changes in the type and nature of business operation carried out and the food safety management controls in place.

**Recommendation 2 - Overdue interventions**

[The Standard 7.1]

Carry out interventions at all food hygiene establishments in their area, at a frequency which is not less than that determined under the intervention rating schemes set out in the relevant legislation, Code of Practice or other centrally issued guidance.

5.3.7 An assessment of the database provided prior to the audit showing the last three risk scores at higher risk establishment indicated that the Service had generally been effective in maintaining or reducing risk scores in the businesses inspected.

5.3.8 An analysis of the Authority’s LAEMS data submitted to the FSA in 2015/16 helped to demonstrate that the Service was willing to use a range of formal enforcement options to help achieve timely business compliance following interventions, commensurate with the risk profiles of businesses in its area.

**Other Service Activities**

5.3.9 Other official control and enforcement activities carried out by the Service were reported via LAEMS. These included risk based sampling, dealing with consumer complaints relating to food premises and food items, providing advice to businesses, dealing with incidents and the investigation of outbreaks and food related infectious disease. An assessment of the performance data provided to the Agency via the LAEMS did not identify or indicate any specific issues with the delivery of these other service activities.

5.3.10 In addition to its intervention programme the Service had also participated in a number of projects including hosting seminars for Indian restaurants and takeaway owners to help them with food safety compliance issues.

5.4 **Database**

5.4.1 Despite past issues resulting from the difficulty of combining a large number of individual LA databases, the Service now had an appropriate Management Information System (MIS) in place, capable of recording and reporting relevant information about food businesses.
and intervention histories in the area. WRS was able to submit annual LAEMS data to the FSA specifically for each of the authorities including Wyre Forest District Council. The Service was able to demonstrate its ability to provide a range of detailed management reports, essential for managing an effective service.

5.4.2 Accuracy of the database was ensured by routine accuracy checks and cross-checks carried out by the database administrator. These included cross checking MIS data with FHRS uploaded data and running reports to identify any missing/incorrect data fields entered by officers. Auditors recommended that relevant references to these accuracy checks being included in the operational guidance document.

5.4.3 The database was capable of reporting information requested by the FSA via LAEMS although the audit did identify an issue with the way written warnings were being coded by officers. Auditors were provided with assurances that this would be investigated and addressed. The Authority was maintaining appropriate backup systems and security measures.

5.5 Staff Training and Authorisation

5.5.1 Staff competency and training requirements were assessed as part of the Service’s annual Personal Development Planning (PDP) process, during which training needs and competency issues would be discussed with the relevant manager. The Service had developed a competency matrix for officers to demonstrate that they met all the necessary competencies in accordance with the FLCoP. A mix of techniques was used to measure competence, including shadowed inspections.

5.5.2 The Service confirmed that officers had received a wide range of relevant food hygiene training commensurate appropriate for the types of food businesses operating in the area. All staff had received, or were in the process of receiving, the necessary 20 hours continuous professional development (CPD) training in accordance with the FLCoP. This included training on HACCP, specialist processes, approved establishments, allergens, legal enforcement and FHRS consistency exercises.

5.5.3 The Service had appointed a lead food officer with the necessary specialist knowledge and training to carry out the role and meet the competency requirements of the FLCoP.

5.5.4 Officers were generally authorised under relevant food hygiene legislation in accordance with their competencies. The Service also restricted the authorisation of relevant officers in accordance with the FLCoP. An out of date legal reference to the Official Food and Feed Controls (OFFC) Regulations (2009) was identified and specific legal references to the individual sections of the Food Safety and Hygiene
(England) Regulations 2013 were also not referenced. Auditors therefore recommended that the legal schedules are reviewed and amended in accordance with the FLCoP.

**Recommendation 3 - Authorisation – level of authorisation**  
[The Standard 5.3]

Review officer authorisations and ensure that officers are appropriately authorised in line with their competencies and the FLCoP.

### 5.6 Documented Policies and Procedures

#### 5.6.1 The Service had developed a range of basic procedures for the full range of activities it carried out, all captured in the “Principles of Food Safety Operational Guidance” document. The document also included examples of notices and inspection forms to be used included suitable approved establishment aides-memoire. Auditors did discuss the benefits of expanding some of these instructions to include adequate references to the FLCoP where required. Although some information was available in other documents, auditors did recommend the development of appropriate guidance on the authorisation of officers, linking it to officer competency and training requirements.

**Recommendation 4 – Updating Procedures**  
[The Standard 4.1]

Review operational guidance document to include suitable references to the FLCoP and to provide guidance on the authorisation of officers linked to their competency and training.

#### 5.6.2 The Service had developed a comprehensive aide memoire for recording inspection findings at first inspections of new businesses. However inspections of businesses that had already received an initial inspection were recorded on inspection report forms that provided only limited detail of inspection findings, making it difficult for officers to clearly demonstrate that these businesses were inspected against all relevant legislation. Auditors therefore recommended that the Service develop a more suitable method of recording inspection findings at these businesses, possibly adapting one of its existing officer aides-memoire.
A number of suitable documented policies had been developed by the Authority. These included a council Enforcement Policy and other policies within the operational guidance document on sampling and complaints. These policies outlined the council's commitment and approach to investigating and enforcing food hygiene legislation in a consistent and proportionate manner.

The Service had also developed a suitable range of documented procedures to aid officers in carrying out their duties. Work procedures covered the full range of official controls and activities carried out by the Service including interventions, approved establishments, follow up actions, complaints, incidents and alerts and sampling.

5.7 Ensuring an Effective and Consistent Service

Internal Monitoring

The Service was able to demonstrate and provide evidence of a wide range of quantitative monitoring of service activities including its intervention programme and other service activities such as complaints, sampling and infectious disease investigations. This is carried out by the CEH Tasking Group on a monthly basis. The Service’s database is subject to monitoring every three months with routine data cleansing exercises taking place and reviewed annually. In addition data entry accuracy is assessed on a monthly basis using audit reports to check that codes are correctly allocated. Officers also attend food forums, Midlands Food Liaison Group meetings and have regular informal monthly team meetings where food safety issues are discussed.

However only limited ad hoc undocumented qualitative monitoring was taking place, partly due to the increasing demands on the Service and the resources available. Auditors discussed the benefits of developing a suitable risk based internal monitoring strategy and procedure including all areas of service delivery to verify its conformance with the FLCoP and associated guidance. A programme of risk based internal monitoring activity should also help to verify and support the
The implementation of the systems thinking approach adopted by the Service.

5.7.3 The time and resources required to deliver suitable internal monitoring activities should be included in any service planning for the year.

5.7.4 Auditors discussed various possible risk based approaches to internal monitoring and referred to the FSA’s Top Tips document “Making Every Inspection Count” (https://www.food.gov.uk/enforcement/enforcetrainfund/inspection-tips) which includes some guidance on effective internal monitoring.

**Recommendation 6 – Internal monitoring**

[The Standard 19.1]

Develop and implement a documented system of internal monitoring to ensure that it includes risk based arrangements for the monitoring of all relevant activities carried out by the Service at appropriate frequencies, including interventions, staff authorisations, approved establishments and Primary Authority Partnerships.

5.7.5 Enforcement letters from the Agency were monitored and, where necessary, acted upon promptly. Auditors discussed the recent letters from the FSA on the subject of allergens and “less than thoroughly cooked burgers” which required returns from the Authority on both a specific business chain and the undercooked burger business sector. The evidence indicated that the Authority had responded promptly and fully to these.

**Third Party or Peer Review**

5.7.6 Auditors were advised that the Authority had taken part in regional FHRS consistency exercises in Oct 2014 and recent national exercises run by the FSA. Auditors discussed the benefits and importance of participating in any future IAA programmes.

**Audit Team:** Andrew Gangakhedkar - Lead Auditor
John Ashcroft - Auditor

Food Standards Agency
**Regulatory Delivery Division**
## Annex A - Action Plan for Wyre Forest District Council

Audit date: 24-25 May 2017

<table>
<thead>
<tr>
<th>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</th>
<th>BY (DATE)</th>
<th>PLANNED IMPROVEMENTS</th>
<th>ACTION TAKEN TO DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Recommendation 1 - Service planning</strong>&lt;br&gt;[The Standard 3.1]</td>
<td>Feb 2018</td>
<td>A report of the Audit findings will be made to the Joint Board in October 2017. The process of service planning commences in November each year with the service plan having to be presented to the Joint Board at its February meeting. The service plan for next year will include reference to any likely backlogs and the potential impacts on reputation that such failing can have, as highlighted in the audit report.</td>
<td>See planned improvements.</td>
</tr>
<tr>
<td><strong>Recommendation 2 - Overdue interventions</strong>&lt;br&gt;[The Standard 7.1]</td>
<td>October 2017</td>
<td>The list of interventions due/overdue will be subject to a monthly review by the Food Lead. The principle of risk assessment and segmentation will be applied to visits to ensure that high risk premises and new businesses are prioritised in the work programme.</td>
<td>A programme of interventions at overdue businesses within Wyre Forest has already commenced and should be completed by 30-9-17. Overdue interventions in the remaining five District Councils in the WRS partnership are being addressed in the same way. We aim to complete the programme on a risk assessment basis by 31-3-18.</td>
</tr>
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</table>
### Recommendation 3 - Authorisation – level of authorisation  
[The Standard 5.3]

Review officer authorisations and ensure that officers are appropriately authorised in line with their competencies and the FLCoP.

**December 2017**

A short process document will be developed that explains the process of authorisation and the management controls in place to determine what activities officers can undertake based on their competencies.

The Food Lead has reviewed the current level of authorisation for Food Safety legislation for each competent officer and is happy that these are correct. The process will be included in the updated version of the *Principles of Food Safety* documented operational system.

### Recommendation 4 – Updating Procedures  
[The Standard 4.1]

Review operational guidance document to include suitable references to the FLCoP and to provide guidance on the authorisation of officers linked to their competency and training.

**December 2017**

Amendment of relevant documentation

These amendments are being made by Food Lead and will be included in the updated version of the *Principles of Food Safety* documented operational system.

### Recommendation 5 – Assessing business compliance and recording intervention findings  
[The Standard 7.3]

Review and develop a general inspection aide memoire to allow officers to demonstrate that businesses are assessed against all relevant legislation during their interventions.

**October 2018**

New premises Food Premises Intervention Rating Form already includes checklist of all areas to comply with FLCoP. Inspection Food Premises Intervention Rating Form for existing premises will be amended to include information on areas reviewed at time of visit.

Drafted and awaiting printing. Will be issued to all officers by 1-10-17.
| **Recommendation 6 – Internal monitoring**  
[The Standard 19.1] | **March 2018** | The audit identified that whilst the Service had wide ranging quantitative monitoring in place, qualitative monitoring was only carried out on an *ad hoc* basis. We accept there is currently a lack of a programmed, documented qualitative monitoring system. We aim by end of financial year to have a comprehensive, fully documented system in place. |
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Develop and implement a documented system of internal monitoring to ensure that it includes risk based arrangements for the monitoring of all relevant activities carried out by the Service at appropriate frequencies, including interventions, staff authorisations, approved establishments and Primary Authority Partnerships.</td>
<td>Initial intention is to review and document our existing systems. The Food Lead is exploring with the Database Administrator options for qualitative monitoring based on a percentage of interventions (including complaints) in each quarter. This will use the FHRS system and may be ratings specific or generic. Manufacturers excluded from FHRS will be incorporated into this monitoring process. The new system will be added to the <em>Principles of Food Safety Operational</em> document.</td>
<td></td>
</tr>
</tbody>
</table>
ANNEX B - Audit Approach/Methodology

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

(1) Examination of LA plans, policies and procedures.

The following relevant LA policies, procedures and linked documents were examined before and during the audit:

- Regulatory Shared Service Part II
- WRS Annual Strategic Assessment 2016
- WRS Team Plans 2016/17
- Business Plan for WRS 2017-20
- WRS Annual Report 2015/16
- Principles of Food safety – Operational Guidance

(2) A range of LA file records were reviewed – the following LA file records were reviewed during the audit:

- Inspection reports
- Internal monitoring records
- Officer authorisations

(3) Review of Database records:

- To assess the completeness and accuracy of the food premises database
- To 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 – the following officers were interviewed:

- Lead Food Officer
- Environmental Health & Trading Standards Manager,
Opinions and views raised during officer interviews remain confidential and are not referred to directly within the report.
### ANNEX C - Glossary

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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</thead>
<tbody>
<tr>
<td>Authorised officer</td>
<td>A suitably qualified officer who is authorised by the local authority to act on its behalf in, for example, the enforcement of legislation.</td>
</tr>
<tr>
<td>Brand Standard</td>
<td>This Guidance represents the ‘Brand Standard’ for the Food Hygiene Rating Scheme (FHRS). Local authorities in England and Northern Ireland operating the FHRS are expected to follow it in full.</td>
</tr>
<tr>
<td>Codes of Practice</td>
<td>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.</td>
</tr>
<tr>
<td>County Council</td>
<td>A local authority whose geographical area corresponds to the county and whose responsibilities include food standards and feeding stuffs enforcement.</td>
</tr>
<tr>
<td>District Council</td>
<td>A local authority of a smaller geographical area and situated within a County Council whose responsibilities include food hygiene enforcement.</td>
</tr>
<tr>
<td>Environmental Health Officer (EHO)</td>
<td>Officer employed by the local authority to enforce food safety legislation.</td>
</tr>
<tr>
<td>Food Safety Management System</td>
<td>A written permanent procedure, or procedures, based on HACCP principles. It is structured so that this requirement can be applied flexibly and proportionately according to the size and nature of the food business.</td>
</tr>
<tr>
<td>Feeding stuffs</td>
<td>Term used in legislation on feed mixes for farm animals and pet food.</td>
</tr>
<tr>
<td>Food hygiene</td>
<td>The legal requirements covering the safety and wholesomeness of food.</td>
</tr>
<tr>
<td>Full Time Equivalents (FTE)</td>
<td>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 and feed</td>
</tr>
</tbody>
</table>
enforcement.

**HACCP**  Hazard Analysis and 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.

**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.

**Service Plan**  A document produced by a local authority setting out their plans on providing and delivering a food service to the local community.

**Unitary Authority**  A local authority in which the County and District Council functions are combined, examples being Metropolitan District/Borough Councils, and London Boroughs. A Unitary Authority’s responsibilities will include food hygiene, food standards and feeding stuffs enforcement.