

APPENDIX 1 Action Plan for South Cambridgeshire District Council
Audit date: 1 - 3 July 2014

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.1.6 Further develop the Food Service Plan in accordance with the Service Planning Guidance in the Framework Agreement, to include details of the proposed food premises interventions and sampling programme for the year and a clear comparison of the resources required to carry out the full range of statutory food law enforcement activities against the resources available to the Service. [The Standard – 3.1]</p>	<p>31/10/14 31/03/15</p>	<p>Service Plan reviewed in light of comments made. Comments incorporated into plan that will be put to Portfolio Holder by end of October 2014.</p>	<p>Service Plan amended. Officer tasked to identify sampling programme and decide most appropriate action for the Authority.</p>
<p>3.1.9 Set up, maintain and implement a control system for all documentation relating to its enforcement activities. [The Standard - 4.2]</p>	<p>31/03/15</p>	<p>A management document will be developed that will hold all relevant information as to current authorised officers and levels of authorisations, latest FLCoP, procedures for relevant inspections, enforcement, complaints etc. This will be in the form of an electronic folder stored in a central drive for all officers and managers to refer to and update and be kept up to date by the lead food officer.</p>	<p>Matter raised at team meeting.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.1.16(i) Set up, maintain and implement a documented procedure for the authorisation of officers based on their competence and in accordance with the Food Law Code of Practice and any centrally issued guidance. [The Standard - 5.1]</p>	<p>31/11/14</p>	<p>To develop a matrix identifying officers and competencies over a rolling year and to ensure competencies maintained through regular supervision meetings and recording of CPD. The process will be incorporated into the annual and half yearly appraisal and reviewed via 1:2:1 as part of a qualification and development plan. Work will be allocated according to authorisations. All authorisations to be kept up to date by lead food officer as part of management document see 3.19.</p> <p>Review current settings on software system to reduce risk of jobs being issued to officers incorrectly (linked to 3.1.9 above).</p> <p>Lead food officer/manager to implement a six monthly review and record as part of staff appraisal and management control document to record level of authorisations.</p>	<p>Officers asked for current certificates and details of relevant training over last 12 months and individual training matrix to be discussed as part of interim appraisals in October.</p> <p>Qualification and development plan produced.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.1.16(ii) Ensure that the officer appointed to have lead responsibility for the enforcement of food hygiene legislation has the relevant qualifications and specialist knowledge. [The Standard - 5.2]	30/03/15	Recruit an experienced officer to undertake the role of lead food officer.	<p>Role advertised and recruitment selection taking place.</p> <p>No suitable candidates applied – due to re advertise in November 2014.</p>
3.1.16(iii) Ensure that the level of authorisation and duties of officers is consistent with their qualifications, training, and experience in accordance with the Food Law Code of Practice. [The Standard - 5.3]	31/11/14	<p>Regular use of qualifications and development plan via 1:2:1 and appraisal system.</p> <p>Current authorisations to be reviewed and updated/amended as appropriate.</p>	<p>Next appraisals due in October 2014, collation of current qualifications and authorisations taking place.</p> <p>Managers regularly (weekly) review of jobs to act as safety check to reduce risk until such time as system can be looked at in full.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.1.16(iv) Ensure that all officers involved in food hygiene law enforcement activities receive sufficient relevant training in accordance with the Food Law Code of Practice. [The Standard - 5.4]	Completed	All staff currently undertaking activities will record CPD and training as part of the 1:2:1 and appraisals with line manager via use of the qualifications and development plan.	<p>Review of all jobs allocated to officers has taken place to ensure compliance with the FLCoP.</p> <p>Managers review workloads and allocate jobs for accuracy and compliance.</p>
3.1.16(v) Maintain records of relevant qualifications, training and experience of each authorised officer in accordance with the Food Law Code of Practice. [The Standard – 5.5]	01/11/14	<p>Qualifications and CPD matrix to be developed and maintained by resources team with input after approval by line manager (ie manager to approve training as relevant before resources team complete the matrix).</p> <p>Officer competencies to be cross referenced to FLCoP restrictions (ie ensure officers only inspect premises they are competent to do).</p> <p>Records to be kept centrally and reviewed via 1:2:1/half yearly appraisals.</p>	Good practice sought from other authorities and areas of other professional expertise within the authority.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.2.6 Develop, maintain and implement a documented procedure to ensure that the food premises database is accurate, reliable and up to date. [The Standard – 11.2]</p>	<p>31/03/15</p>	<p>Further review software system and process for inputting data - possible new coding to identify vacant business premises.</p> <p>Clear written process for officers to follow when inputting data. Via the management control document to be developed as part of recommendation 3.19.</p> <p>Aim to undertake coding review on database system to ensure accurate recording of enforcement activities. Possible corporate wide review of software systems may take place which could affect this – current contract expires March 2016. Re training of resource team/officers to ensure correct coding.</p> <p>Liaise with Business rates, to provide a regular (monthly if possible) list of new businesses to be cross referred with food registrations recorded on the database.</p> <p>Further develop existing protocols with Trading Standards to assist in business identifications/new businesses etc.</p>	<p>Approach made to Business rates – awaiting response.</p> <p>Discussions taking place with Trading Standards regarding development of an intel role across the two services.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.3.14(i) Carry out interventions/inspections at all food hygiene establishments at a frequency specified by the Food Law Code of Practice, and continue to prioritise the highest risk premises for interventions. [The Standard - 7.1]</p>	<p>31/03/15</p>	<p>Provisions to be put in place with external agency if extra staff required.</p> <p>Review of software system to assist in clearly highlighting interventions approaching the required inspection date or any that have become overdue.</p> <p>Ensure that new businesses are inspected/contacted and initial risk assessment within 28 days, monitored via monthly 1:2:1`s.</p> <p>Review software system to help officers clearly identify premises that may be close to the time limits for inspection/intervention.</p>	<p>Officers now instructed to carry out interventions as per FLCoP.</p> <p>Work being monitored via monthly 1:2:1.</p> <p>Provisions put in place to source inspections to external officers if concerns are raised over slippage.</p> <p>Overall review of software system to assist in monitoring and management.</p> <p>Investigation taking place to see if the software system can be amended to flag up premises that are close to target deadline ie 7 days before the 28 day period expires.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>3.3.14(ii) Carry out interventions and inspections and approve relevant establishments in accordance with relevant legislation, the Food Law Code of Practice and Practice Guidance, and centrally issued guidance. [The Standard - 7.2]</p>	<p>31/12/15</p>	<p>Review the inspection sheets and re-educate officers to ensure all relevant sections are completed. Monitor via 1:2:1's and peer review to ensure consistency.</p> <p>Move to electronic based inspections that would be able to prevent officers from completing work until all identified information is entered.</p> <p>Qualitative reviews will take place via team meetings to ensure consistency of approach to inspections. Where issues are raised accompanied inspections or shadowing will take place and be documented.</p> <p>Approved premises will be overseen by the lead food officer or in their absence the Operational Manager to ensure correct process followed as identified in the management control document to be developed.</p>	<p>Qualitative monitoring of inspections via both 1:2:1's and team meetings to ensure consistent and correct information and approvals are recorded.</p>

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<p>3.3.14(iii) Ensure that inspections of food establishments adequately assess the compliance of establishments and systems to legally prescribed standards. [The Standard – 7.3]</p>	<p>31/12/14</p>	<p>Qualitative monitoring by manager of inspection sheets via 1:2:1 and team meetings/workshops where they will collectively benchmark each other's work.</p> <p>We will seek to engage other authorities or the food liaison group meetings to see if a benchmarking exercise has merit.</p>	<p>1:2:1 format changed to incorporate a qualitative and scrutiny aspect to work.</p>
<p>3.3.14(iv) Set up, maintain and implement documented procedures for the range of intervention and inspections carried out. [The Standard - 7.4]</p>	<p>31/01/14</p>	<p>Processes to be drawn up and made available through a central folder or cloud based host to ensure that officers are accessing current procedures and have a consistency of approach.</p>	<p>Preferred method is to use an existing (external information management system and update all procedures.</p> <p>In process of ensuring officers are able to access and are trained in the use of the existing information management system.</p>

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<p>3.3.14(v) Ensure that observations made and data obtained during interventions are recorded in a timely manner and maintain up to date and accurate records in retrievable form on all food law enforcement activity in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard - 7.5 and 16.1]</p>	<p>31/03/15</p>	<p>Officers have been instructed in the importance of ensuring information and data is recorded in a timely manner.</p> <p>Failure to input date within a reasonable time may be subject to disciplinary process subject to the Authority guidelines and procedures.</p> <p>Future monitoring will take place via:- 1:2:1's, peer review meetings (part of team meetings) sample shadowing by lead food officer (when in post).</p>	<p>All outstanding work is now monitored via the manager/officer 1:2:1 system.</p> <p>Officers unable to comply without reasonable explanation may be subject to disciplinary process.</p>
<p>3.4.7 (i) Set up, maintain and implement documented procedures for the full range of follow up and enforcement actions in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard - 15.2]</p>	<p>31/01/14</p>	<p>Processes to be drawn up and made available through a central folder or cloud based host to ensure that officers are accessing current procedures and have a consistency of approach.</p>	<p>Preferred method is to use an existing host and update all procedures.</p> <p>In process of ensuring officers are able to access and are trained in the use of the existing information management system.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.4.7(ii) Ensure that food law enforcement is carried out in accordance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 15.3]	31/01/14	<p>Managers to monitor through 1:2:1 meetings as part of qualitative approach.</p> <p>Lead food officer to become central point of contact for enforcement notices issued by FSA.</p> <p>Lead food officer to ensure monitoring of FSA website on a regular basis.</p> <p>Training issues are to be addressed with individual officers.</p>	<p>Duty resources team currently to act as point of contact to ensure that notices/urgent information sent by FSA is received and disseminated to appropriate officer/s promptly.</p> <p>Improvements in accordance with the FLCoP are being considered by team in respect of HINs/Voluntary Closures.</p>
3.5.3(i) Set up, maintain and implement documented internal monitoring procedures in accordance with Article 8 of Regulation (EC) No. 882/2004, the Food Law Code of Practice and centrally issued guidance. [The Standard -19.1]	31/12/14	<p>Use of 1:2:1</p> <p>Authorisation matrix.</p> <p>Qualification and development plan.</p> <p>Continued CPD.</p>	<p>Currently underway.</p> <p>Management control document being developed see recommendation 3.19.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3.5.3(ii) Verify the conformance of the Service with the Standard in the Framework Agreement, the Food Law Code of Practice, relevant centrally issued guidance and the Authority's own documented policies and procedures. [The Standard -19.2]	01/11/14	Seek authorities within food liaison group to benchmark with. Key role to audit and ensure conformity via lead food officer.	Interviews to appoint lead food officer underway.
3.5.3(iii) Ensure records of internal monitoring activities are maintained. [The Standard -19.3]	31/03/15	Create method of recording to ensure that conformity checks have been carried out and discussed at managerial level	1:2:1 and team meetings are currently documented and any issues identified will be recorded for future reference/auditing.