Action Plan for London Borough of Bromley Council

Audit date: 27th April 2017

| TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH) | BY (DATE) | PLANNED IMPROVEMENTS | ACTION TAKEN TO DATE |
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| Recommendation 1 - Service Planning [The Standard 3.1, 3.2 & 3.3] The Authority should ensure that future Service Plans include the following information: A comparison of the full time equivalents (FTEs) required to ensure the delivery of food safety activities in accordance with the Food Law Code of Practice against those available to the Service. Any shortfall should be reported to the senior delegated manager and/or the appropriate Member forum. | Done | Future Service Plans will be put before the PPS PDS Committee. | A review of the number of FTEs required to deliver food safety in accordance with the Code has been carried out and included on our 2017/18 Service Plan. It has been identified that an additional 2 FTE permanent food safety officer are required to deliver our food service in-line with the Code Additionally, a further 3 FTE food safety officers are required on a temporary basis to address the backlog of overdue and unrated inspections. This is to be reported to the PPS PDS Committee on 29/6/17. |

| | TDD | | |
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| Recommendation 2 – Overdue interventions and unrated premises [The Standard 7.1] The Authority should 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, Food Law Code of Practice or other centrally issued guidance. | TBD | If the additional resource requested is made available, due and overdue C inspections will be added to the inspection programme. Due and overdue D inspections will be also be added to the inspection programme or an information gathering programme. The timescale for completion of this will depend on the decision taken by the Committee and, if favourable, the recruitment process An AES project will be undertaken this year. | The 2017/18 Service Plan still focuses on inspecting A and B rated businesses, non-compliant C& D businesses and overdue C rated businesses. Additionally, D rated businesses overdue for more than 2 years and with a method of handling of 30 or more, will be added to the inspection programme. Newly registered businesses deemed to present a low risk, following an assessment by questionnaire, will still not receive an |
| Recommendation 3 – Enforcement [The Standard 15.3] The Authority should ensure food law enforcement is carried out in accordance with the Food Law Code of Practice and centrally issued guidance. | 31/12/17 | A checklist will be devised for officers countersigning notices to ensure that all relevant areas are checked, including the legal remedies required. | inspection. Our template HACCP notice has been amended to remove the requirement for FBOs to document monitoring records where SFBB is implemented. Officers have been reminded that notices are not to be over- typed and our template notices must be used for each notice. |

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| Recommendation 4 – | 31/3/18 | A documented procedure on | Some premises |
| Accuracy of the database | | maintaining the accuracy of | may have |
| [The Standard 11.2] | | our database will be drawn up | appeared more |
| | | and implemented. | than once on |
| The Authority should set-up, | | | excel |
| maintain and implement a | | | spreadsheet |
| documented procedure to | | | submitted to the FSA even |
| ensure that its food premises | | | though there is |
| database is accurate and up to | | | only one record |
| date. | | | on the premises |
| | | | database |
| | | | (CAPS/ Idox). |
| | | | The reason for |
| | | | this is unknown. |
| | | | Also, there is an |
| | | | increasing trend |
| | | | for more than |
| | | | one business to |
| | | | register at the |
| | | | same address. |
| | | | However, our |
| | | | Technical Admin |
| | | | officer will |
| | | | ensure that old |
| | | | premises are |
| | | | closed when |
| | | | new |
| | | | registrations are received. |
| Recommendation 5 – | 31/12/17 | An officer will be authorised | All officers are |
| Authorised Officers | 51/12/17 | under the Food and | authorised |
| | | Environmental Protection Act | under the |
| [The Standard 5.3] | | 1986. | European |
| | | | Communities |
| The Authority should ensure | | | Act 1972 in |
| that sufficient officers have | | | relation to food |
| been appointed to carry out | | | safety and |
| interventions in accordance | | | animal feedstuff. |
| with the FLCoP. | | | As the Trade in |
| | | | Animal Related |
| | | | Products |
| | | | Regulations |
| | | | 2011 (TARP) |
| | | | are made under |
| | | | this enabling |
| | | | Act, we do not |
| | | | feel a separate |
| | | | authorisation for TARP is |
| | | | required. |
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| Recommendation 6 – Documented Procedures [The Standard 4.1] The Authority should ensure that all documented policies and procedures are reviewed for each of the enforcement activities covered by the Standard at regular intervals and whenever there are changes to legislation or centrally issued guidance. | 31/3/18 | A procedure on the updating and reviewing of our documented procedures will be devised and implemented. | |
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| Recommendation 7 – Internal Monitoring [The Standard 19.1 and 19.2] The Authority should: Review the documented internal monitoring procedures to ensure that it covers the full range of food law enforcement activities in accordance with the Food Law Code of Practice and centrally issued guidance. Carry out internal monitoring to verify conformance with the Standard, relevant legislation, Food Law Code of Practice, relevant centrally issued guidance and the Authority's own documented policies and procedures. | 31/3/18 | The existing monitoring procedure will be more fully implemented. This will include one to one meetings with officers which will be documented. | A review of the work of the Lead Officer has been undertaken. As a result she will no longer routinely engage in reactive work and her inspection target has been lowered to enable qualitative monitoring to take place. |