



Report of the Chief Environmental Health Officer

Scrutiny Board (Environment and Neighbourhoods)

Date: 13th July 2009

Subject: Performance Monitoring and Food Standards Agency Food Service Audit Update

Electoral Wards Affected:

Specific Implications For:

Ethnic minorities

Women

Disabled people

Narrowing the Gap

1. Executive Summary

This report describes the current position regarding the performance monitoring and audit of the Food and Health Team food premises inspection service and a summary of the current position with meeting the agreed actions within the Food Standards Agency Action Plan.

2. Background

- 2.1 The Food and Health Team Service Plan details the interventions, resources and activities to be undertaken to secure food safety across the City. This plan informs one of the principal aims within the overarching Food strategy for Leeds (Leeds Food Matters) that all food produced, prepared or sold in Leeds is safe to eat and will not cause ill health. The activities within the Food and Health Team Service Plan are based upon The Food Standards Agency (FSA) Framework Agreement and the specified Codes of Practice. The FSA codes of practice are rigid and prescriptive with an inspection based enforcement regime, premises being risk assessed and categorized by a scoring mechanism which defines the frequency of inspection.
- 2.2 During May 2006 The Food Standard Agency (FSA) under took a focused audit of the operation of the Leeds Food Service. The Audit was prompted by the inability of the Department to provide statistical data in the required format, a position which had resulted due to a change of the IT system used to record, plan and categorize inspections of food Premises.
- 2.3 In September 2006 an Action Plan which specified dates for compliance was produced and agreed with the FSA. The key areas for concern being the accuracy of the food premises

data base and the frequency of food inspections, the remaining matters being around procedural issues identified in the Framework Agreement. The Food and Health Team Service Plan is informed by the FSA action plan and the requirement to increase the frequency of food premises inspections, to complete 100% of high risk inspections within the due dates. Premises are categorized according to risk with "high" risk being those categorized as A to C, low risk are categorized "D" and "E".

- 2.4 Since the original Audit in 2006 considerable progress has been made towards meeting the Food Standards Agency requirements. Progress has been reported to Members of scrutiny Board the last update being March 2007.

3. Current position

FSA Audit and Action Plan

- 3.1 The FSA requires that Leeds meet the provisions of the current Framework Agreement and code of practice in terms of inspections. Since the original audit the Authority has maintained a welcome dialogue with the FSA Audit Team regarding progress and submitted an updated action plan in July 2008. The outstanding items concerned the longer term improvement of the accuracy of the food premises database and the frequency of premises inspection.
- 3.2 The FSA Audit team carried out a further visit during October 2008 , during which auditors were pleased to note that since the original audit the authority had moved from a position of inspecting 50% of the required number of high risk premises (categories A to C) to one of inspecting almost 100% and had maintained that performance consistently. Figures for 08 / 09 once again confirm this with 1954 inspections of 1971 (99.13%) programmed inspections being completed.
- 3.3 The auditors have requested that the authority now turn its attention to inspection of low risk premises and undertake a review of premises in particular any rated as "D" to ensure that the accuracy of the database is maintained and that none of the premises should be recategorised as high risk. The frequency of inspection of low risk premises was discussed with a view to shortening intervals between inspection in accordance with the requirements of the Code of Practice.
- 3.4 The recommendations in the Approved Audit Action Plan have been addressed, ongoing discussion with FSA concerning matters raised during the last visit will be resolved following further discussion, clarification and agreement in particular the review of low risk premises is being undertaken with the numbers of low risk and unrated premises having increased. A annotated copy of the Action Plan is attached to this report (Appendix 1) which details the progress with each of the individual action points. This intention is also reflected in the Service Plan 09 /10 for the Food and Health Team which is appended to this report (Appendix 2) for members information.

4. Performance monitoring

Performance Monitoring (LAEMS)

- 4.1 Each Local Authority is required on an annual basis to submit a full report to the Food Standards Agency regarding the performance of its Food Safety Service. The report includes not only premises inspection data but also performance on complaints, enforcement and other aspects of the service.
- 4.2 From April 2008 the method of producing the report and report format has changed at the request of the FSA. The new system the Local Authority Enforcement Monitoring Scheme (LAEMS) will be used for the first time to report performance during the 08 / 09. It differs

form previous systems by providing raw data uploaded directly from each authority's database to the FSA LAEMS web base on the internet. Each Authority and their database software providers have had to install bespoke software to enable this upload. FSA software then extracts required data which is sent back to the authority for verification.

- 4.3 In Leeds a number of delays were experienced due to delays in software installation and associated developmental problems, largely due to the software supplier. However despite this difficulty the authority has now successfully uploaded data onto the FSA site. Many authorities have reported similar delays in their progress often associated with failure of the software houses to deliver appropriate system upgrades. The FSA has acknowledged that a manual upload will be permitted for this year.

National Indicator N184 – Broadly Compliant

- 4.4 The Department for Communities and Local Government (CLG) has included an indicator regarding food hygiene in the single set of National Indicators as part of the New Performance Framework for Local Authorities. The rationale of the indicator is to protect public health by ensuring food is safe and fit to eat by monitoring local authorities performance in increasing compliance in food establishments with food law.
- 4.5 Broadly Compliant is a proxy indicator which measures the effectiveness of local authority food safety interventions on food safety compliance as opposed to measuring inputs such as numbers of inspections. The definition does not mean that all such premises comply completely with the food law standards and provide no risk what so ever, nor that the premises which are not broadly compliant should be prosecuted or closed.
- 4.6 The indicator figure is the percentage of Food Establishments within the local authority area which are "Broadly Compliant" with Food law. It is based on a numerical scoring system which is currently used by food law enforcement officers to assess food establishments which could pose the greatest risk to consumers. Six factors are assessed within the risk assessment process, three of these are considered relevant to local authority performance namely the level of compliance with hygiene requirements, structural requirements and the level of confidence in food business management. A Food business is broadly compliant if it scores 10 points or less in each of the three categories.
- 4.7 The denominator used when calculating the indicator figure is the number of food premises within that local authority area, this includes premises which are unrated or awaiting inspection, outside of the normal programmed inspection process. In the main, these are new premises or premises where the ownership may have changed, because of the substantial "churn", particularly with the smaller food premises this number can be in the high hundreds, giving a lower result than what may be the actual position.
- 4.8 In setting this notional standard the Food Standards Agency await LAEMS responses for local authorities, no target level has been set to indicate satisfactory performance however year on year improvement is expected from the baseline set this year. Authorities which report exceptionally low figures may be the subject of FSA investigation and audit.
- 4.9 The base line data for Leeds for 2008/9 has been calculated at 76% with the target for the subsequent 3 years rising by to 2% per year to 82% in 2011/12. We are confident that this target is achievable, because of the way food businesses have embraced scores on the doors, raising standards generally and because we will be focusing on reducing the numbers of unrated premises. All unrated premises are added to the indicator denominator (3.10) therefore reducing the overall indicator percentage, in reality a substantial number of these premises will already be broadly compliant.

Benchmarking

- 4.10 NI184 is a new indicator and published results are not yet available to complete a benchmarking exercise with authorities similar to Leeds. As with all new indicators there is a need to audit the way data is being collected processed and presented to ensure uniformity across local authorities particularly if there is found to be a wide variation of results. Subsequently if the figures are found to be robust then to look to embrace the good practice or procedures of authorities who may be doing better than ourselves.

Scores on the Doors

- 4.11 As a further indicator of the authority's continuing performance it is useful to refer to data provided from the Scores on the Doors Scheme introduced successfully by the authority in 2007. The scheme provides web based information to the public on food hygiene inspection scores in the form of stars – 0 stars for poor premises 5 stars for excellent. On average premises inspected have showed a two thirds star improvement per inspection.
- 4.12 The Food and Health Team Service Plan includes resources to meet the current requirements of the FSA to inspect all high risk premises in accordance with the Framework Agreement, a review strategy for dealing with lower risk premises and to reduce the unrated premises by 60%. Contractors continue to be employed to supplement the activities of permanent staff and procurement procedures are in place to sustain this.

5. Recommendations

- 5.1 To note the progress so far with compliance of the actions within the FSA Food Service Action Plan and current methods of monitoring the Authority's performance.

APPENDIX 1

Action Plan for Leeds City Council

Audit Date: 23 May 2006

IMPROVEMENTS PLANNED	BY (DATE)	TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	COMMENTS	UPDATE MAY 09	Traffic Light
<p><i>To produce a Food Service Plan for 2006/2007 in line with the Service Planning Guidance in the Framework Agreement, which includes details of staff resources against each of the functional areas of the service including the food hygiene premises inspection programme.</i></p>	<p>31/03/07</p>	<p>3.1.17(i) <i>In accordance with the Service Planning Guidance in the Framework Agreement, ensure that the Food Service Plan for 2006/2007 includes details of the staff resources required to deliver the different functional areas of the Service including the food hygiene premises inspection programme. [The Standard – 3.1]</i></p>	<p>Completed</p>	<p>The service plan for 2008/9 and service plan 09 / 10 have been completed with a revised format which allocates staff time to functional activities as required by the national Framework code of practice.</p> <p>An electronic monitoring and time recording system was introduced on 6th November 2006</p> <p>The inhouse team and contractors have achieved high risk premises inspection of almost 100%, current figures for 08 / 09 indicate this figure is 99.13%.</p> <p>An overtime scheme has been maintained using staff from the Food Safety Team</p>	<p>Green</p>
<p><i>To provide an annual report to the Neighbourhoods and Housing Panel on the performance against the Food Service Plan.</i></p>	<p>31/05/07</p>	<p>3.1.17(ii) <i>Ensure that an annual review of performance against the Food Service Plan is submitted for appropriate Member approval. [The Standard –3.2]</i></p>	<p>All Panel reports are approved following consultation with Lead Members and are published and open to scrutiny by the Councils Scrutiny Boards.</p> <p>Monitoring of food inspection performance is currently undertaken on a monthly and quarterly basis with reporting to the Departmental Director and annual publication in the Council Plan.</p>	<p>The Food Safety Section currently produce and report each year The Food and Health Service Plan This document details work proposed to be undertaken during the year based on the previous years outcome.</p> <p>NI 184 performance indicator (food inspection performance) is reported as part of the council's performance management system for Senior Officer / Member attention. Local performance indicator LKI EH3 regarding inspection of high risk premises has been regularly reported.</p>	<p>Green</p>
<p><i>To introduce documented controls to ensure that staff seconded into the food safety team and EHOs eligible to participate in the overtime food inspection programme have the</i></p>	<p>31/12/06</p>	<p>3.2.7 <i>Ensure that all staff authorised to carry out food law enforcement work have appropriate experience and undergo sufficient training consistent with their duties and in accordance with the Food Law Code of Practice.</i></p>		<p>The overtime scheme has been reissued using only staff from the Food Safety Team. Who meet the requirements in terms of the Food Law Code of Practice.</p> <p>Previously fully qualified EHO's were used who did not have the relevant 15 hours CPD training in food inspection matters.</p>	<p>Green</p>

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<i>appropriate experience and training in accordance with the Food Law Code of Practice.</i>		[The Standard – 5.3]			
<i>To move to a new version of commercial software enabling the latest version of the FSA software data reporting tool to be used.</i>	31/01/09	3.3.9(i) Ensure that the electronic record administration system is configured, managed and operated in such a way that the Authority is able to provide accurate statistical data in the official monitoring returns to the Agency.	New LAEMS software loaded successfully and the XML file subsequently uploaded to the FSA website in accordance with FSA expectations and will be used for future reports to the agency	Completed	Green
To produce a range of reports to enable the Food Safety Management to manage data inputting errors.	30/09/06	[The Standard – 6.4]		Completed	Green
To produce a range of reports to target suspect and unlinked data so this may be checked and amended manually.	31/10/06			Completed	Green
To increase database accuracy by / review and increasing frequency of interventions			<i>A review of low risk premises is being carried out and will update and inform the database. The target for dealing with unrated premises has been increased and it is expected that over 60% of such premises will be dealt with during the year 09 / 10 once again increasing database accuracy</i>	Subject of continuing discussion and negotiation with the Food Standards Agency	Amber
<i>To develop and implement a documented procedure to ensure that the food premises database is</i>	28/02/07	<i>3.3.9(ii) Set up, maintain and implement a documented procedure to ensure that the food premises database is accurate and</i>	The procedure will require both manual updating, following contact or other interventions with food premises (intelligence based activities); updating	A summary has been produced of potential mechanisms which may be used for update of the food premises database. These are now included in a procedure for internal staff use in database	Green

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<p><i>accurate and kept up to date</i></p>		<p><i>kept up to date. [The Standard – 11.2]</i></p>	<p>from inspection, complaints and other activities and computer generated reports and activity.</p> <p>The Service already contacts over 3,000 food premises twice a year with a newsletter and any postal returns are investigated and the database updated. In addition, the Service is involved with area based activities, where streets of premises are targeted as part of wider enforcement duties.</p> <p>The commercial software system is used by a number of other departments in the authority and there will be real opportunities for data sharing with them in the future when the quality of data can be assured. There are however, ongoing issues regarding the accuracy of the commercial property gazetteer, which links the computer based records and it is planned to push forward improvements through the corporate Product Support Manager.</p> <p>A project is already underway to build a connectors to link the Authority's main computer system and the software system used by the Service to provide a free flow of data for updating information collected from other groups within the Council.</p> <p>A review of low risk premises is being carried out and will update and inform the database. The target for dealing with unrated premises has been increased and it is expected that over 60% of such premises will be dealt with during the year 09 / 10 once again increasing database accuracy.</p>	<p>maintenance. Increased inspection of high risk and review of low risk and work on unrated premises will improve accuracy</p> <p>Future editions of Food for thought has now been issued and will form the basis of database investigation as suggested.</p> <p>This area is constantly improving but it is a huge undertaking.</p> <p>A connector has only so far only be built for the pest control module of the software</p> <p>Subject of continuing discussion and negotiation with the Food Standards Agency</p>	<p>Green</p> <p>Amber</p> <p>Amber</p> <p>Amber</p>
<p>To increase database accuracy by / review and increasing frequency of interventions</p>					

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<p>increase frequency of inspection based on ongoing discussion with the FSA regarding Code of Practice requirements</p>	<p>31/03/07</p>	<p><i>3.4.17 Ensure that food hygiene inspections are carried out at a frequency which is not less than that required by the Food Law Code of Practice. [The Standard – 7.1]</i></p>		<p>See actions Above</p> <p>High risk premises inspection is fully meeting FSA requirements.</p> <p>A review has been instituted regarding lower risk premises following discussions with the FSA audit team, the number of inspections of premises rated “D” and currently unrated premises has been increased. Alternative inspection systems are proposed for lowest risk premises in accordance with the Code of Practice</p>	<p>Green</p> <p>Amber</p>
<p><i>Documented monitoring procedure which is already in place, to be fully implemented in accordance with Food Law Code of Practice</i></p>	<p>31/08/06</p>	<p><i>3.5.5 Ensure that the documented internal monitoring procedures are fully implemented in relation to the qualitative monitoring of food hygiene inspections, to verify conformance with the Food Law Code of Practice and centrally issued guidance. [The Standard – 19.1]</i></p>		<p>Inspections completed by Food Team Staff and Contractors are being monitored in accordance with the requirements of the Divisions QA (quality assurance) system, specified in document C.G.5</p> <p>This documentation meets the requirements of the Food Law Code of Practice and practice Guidance</p>	<p>Green</p>