

**FOCUSED AUDIT OF LA DELIVERY OF OFFICIAL CONTROLS  
ON MILK AND DAIRY PRODUCTS IN ENGLAND, WALES &  
SCOTLAND**

**XXXXXX COUNCIL**

Date of Audit :

***FOOD LAW ENFORCEMENT AUDIT PROTOCOLS***

[October 2014]

[NOTE: These protocols should be used for focused audits of local authorities' food law enforcement services. They should be used in conjunction with an FBO protocol and checklists (series AEC)]

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**P1 Organisation and Management [The Standard - para. 3]**

- 3.1 The Authority shall draw up, document and implement a service delivery plan in accordance with the Service Planning Guidance in Chapter 1 of the Framework Agreement.
- 3.2 A performance review shall be carried out by the Authority at least once a year based on the service delivery plan, documented and submitted for appropriate member approval.
- 3.3 Any variance in meeting the service delivery plan shall be addressed in the subsequent year’s service arrangements.

Question	Answer	Comments/Evidence	Auditors Notes
1. Does the Authority (LA) have a documented service plan?	Yes/No	Document review	<i>The service plan should be provided prior to the visit. Auditors should check the document or documents against the Food Law Enforcement – Service Planning Guidance. The plan should ideally address all the relevant areas in the Guidance. However, the plan may be written in a corporate format, and the information might not be within one document. Auditors will need to look carefully through the paperwork provided, and follow up any areas where information is not available. (It is likely that the paperwork available for other sections of the audit will provide some answers).</i>
2. Method of approval of the Plan and the means by which higher level of clearance was obtained?	Yes/No		<i>Auditors will need to see a copy of the relevant minutes, emails etc. Auditors should have in mind that the reason for the submission of the review for approval by Members or senior officer is to ensure that the detail of the review is in the public domain and that Members/senior officers are aware of the Service’s performance. Reviews should be undertaken on at least an annual basis.</i>

<p>3. To what extent has the Service Plan been developed in accordance with Service Planning Guidance in the Framework Agreement?*</p>	<p>Yes/No</p>	<p>Document review/PVQ</p>	<p><i>Do the service planning arrangements include:</i></p> <ul style="list-style-type: none"> <li>• <i>Organisational structure; identifying officers with specialist and managerial responsibilities for food/feed;</i></li> <li>• <i>Outline of the local enforcement policy (ie graduated and proportionate approach; higher risk activities and persistent offenders prioritised);</i></li> <li>• <i>Outline and estimations of the main areas and likely levels of demand on the service;</i></li> <li>• <i>The food hygiene, food standards and feed interventions programmes (as appropriate);</i></li> <li>• <i>Where appropriate, reference to the LA's approach to alternative enforcement strategies;</i></li> <li>• <i>The LA's policy on food and feed complaints, and the likely demand;</i></li> <li>• <i>The LA's food/feed sampling policy and arrangements for food examination and analysis;</i></li> <li>• <i>The LA's policy on the investigation of food poisoning notifications and outbreak control;</i></li> <li>• <i>The LA's policy on the handling of food/feed alerts (and RASFF relating to imported food where applicable)</i></li> <li>• <i>Details of the liaison arrangements in place;</i></li> <li>• <i>Financial allocation;</i></li> <li>• <i>Staff resource allocation</i></li> <li>• <i>References to imported food arrangements where appropriate.</i></li> </ul>
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<p>4. How has the LA assessed if they have sufficient resources available to deliver the Service Plan?</p>	<p>Yes/No</p>	<p>Document review/ALO interview</p>	<p><i>Auditors should note in particular if the Plan draws a clear comparison between the resources required to provide the food law enforcement service against the resources currently available.</i></p>
<p>5. Does the service plan (or other supporting documentation) provide sufficient detail relevant to the approved dairy establishments function?</p>	<p>Yes/No</p>		
<p>6. In any review of the Service Plan how have any variances been addressed? *</p>	<p>Yes/No</p>	<p>Document review/PVQ</p>	



**P2 Reviewing and Updating of Documented Policies and Procedures [The Standard - para. 4]**

4.1 The Authority shall ensure that all documented policies and procedures for each of the enforcement activities covered by this Standard are reviewed.

NOTE: This should normally be at regular intervals and whenever there are changes to legislation or centrally issued guidance.

4.2 The Authority shall set up, maintain and implement a control system for all documentation, which may be in electronic format, relating to its enforcement activities. The system shall ensure that:

a) up to date copies of the appropriate documentation including legislation and guidance are available at all relevant locations and to all relevant staff;

b) all changes to documents or amendments to documents are covered by the correct authorisation and are carried out without undue delay to ensure timely availability; and

c) superseded documents are removed from use throughout the Authority.

Question	Answer	Comments/Evidence	Auditors Notes
1. Is there a document control system for the LA's policies and procedures?	Yes/No	Audit check Detail:	<p><i>NB: The control system does not need to be documented.</i></p> <p><i>The quality control manual/documented procedures should be examined. Sampling of documentation at differing locations should identify if the system is working correctly. There should be at least one controlled copy of policies and procedures available at each office base and/or on the electronic administration system.</i></p>
2. How are reviews of documented policies and procedures programmed?		Audit check. Detail:	<p><i>There should be evidence of a regular review (programmed) of policies and procedures. Auditors should check re-issue dates.</i></p>
3. How are ad-hoc changes made to documented policies and procedures in response to:		Audit check/Officer interviews. Detail:	<p><i>Auditors should check for recent changes, to check timeliness, and that changes are covered by correct authorisation.</i></p>
<ul style="list-style-type: none"> <li>• new legislation?</li> </ul>			

<ul style="list-style-type: none"> <li>Any revisions since January 2006?</li> <li>FSA guidance/enforcement letters (</li> <li>non-conformances highlighted during monitoring/internal audit?</li> </ul>			<p><i>Reference recent enforcement letter ENF/E/13/011 update on FVO audit on controls related to safety of milk and dairy products</i></p>
<p>4. Are up to date copies of appropriate documentation including legislation and guidance (relevant to Approvals of dairy establishments under 853/854) available at all relevant locations and to all relevant staff?</p>	<p>Yes/No</p>	<p>Audit check Detail:</p>	<p><i>NB: Appropriate documentation may be in an electronic format/accessible from websites – auditors should check officer access.</i></p>
<p>5. Are there adequate documented procedures in place in the event of (i) a failure for somatic cell counts and/or antibiotic residues in milk</p>		<p>Audit check Detail:</p>	<p><i>Annex III, Section IX, Chapter I, Part III point 5 Regulation (EC) No 853</i></p> <p><i>When raw milk fails to comply with points 3 or 4 of 853 above the FBO must inform the CA and take measures to correct the situation.</i></p> <p><i>Reference Enforcement Letter ENF/E/09/019 and ENF/E/13/011</i></p> <p><i>Are there procedures in place for disposal of unfit milk and if there have been failures, is there evidence that disposal was carried out.</i></p> <p><i>Reference the antibiotics guidance:</i></p> <p><a href="http://www.food.gov.uk/multimedia/pdfs/publication/testmilkantibiotics.pdf">http://www.food.gov.uk/multimedia/pdfs/publication/testmilkantibiotics.pdf</a></p> <p><i>Reference Enforcement Letter</i></p>





**P3 Authorised Officers [The Standard - para. 5].**

5.1 The Authority shall set up, maintain and implement a documented procedure for the authorisation of officers based on their competence and in accordance with the relevant Food Law Code of Practice and any centrally issued guidance.

5.2 The Authority, where it is responsible for the enforcement of food hygiene, food standards and/or feeding stuffs legislation, shall appoint an officer/s with specialist knowledge to have lead responsibility for that legislation. Where the Authority has specific responsibilities, for example, it is a UK point of entry or it has establishments approved under product specific legislation, it should ensure that officers have the necessary specialist knowledge.

5.3 The Authority shall appoint a sufficient number of authorised officers to carry out the work set out in the approved service delivery plan and they shall have suitable qualifications, training and experience consistent with their authorisation and duties in accordance with the relevant Food Law Code of Practice.

5.4 The Authority shall set up, maintain and implement a documented training programme. The Authority shall ensure the training of all authorised officers and appropriate support staff in the technical and administrative aspects of the work in which they will be involved. Where training is provided, details of the content and objectives of the course, the duration and any assessment made of that training should be maintained on file. The training given shall depend upon the ability, qualifications, experience and responsibility of persons involved and their level of authorisation.

5.5 Records of relevant academic or other qualifications, training and experience of each authorised officer and appropriate support staff shall be maintained by the Authority in accordance with the relevant Food Law Code of Practice.

Question	Answer	Comments/Evidence	Auditors Notes
1. Does the LA have a documented procedure covering authorisations? (CP 1.2.2)	Yes/No	Document review/PVQ	<p><i>An authorisation procedure should cover:</i></p> <ul style="list-style-type: none"> <li>• <i>delegated powers - who is authorised to do what and what qualifications are required;</i></li> <li>• <i>who is authorised to approve legal proceedings (auditors will need to confirm these delegations through the Authority's standing orders and scheme of delegation);</i></li> <li>• <i>the arrangements in place for refresher and induction training;</i></li> <li>• <i>the assessment process to ensure and demonstrate that the Authority has assessed the competence of the authorised officers in accordance with CP 1.2 (inspection techniques; HACCP assessment; knowledge of legislation; food technology – if high risk – appropriate competency in the technology involved – and for food standards quality assurance).</i></li> </ul>

Question	Answer	Comments/Evidence	Auditors Notes
2. Has the Authority's policy on the authorisation of officers been agreed in consultation with the Authority's legal advisors?	Yes/No		
3..Has the LA appointed <i>lead</i> officer(s) (where applicable) with responsibility for: <ul style="list-style-type: none"> <li>• Food hygiene</li> <li>• Food standards</li> </ul>	Yes/No  Yes/No	Checklist (AEC) A/Officer interview/Document Review/PVQ Annex  Name of Officer(s):	<p><i>CP 1.2.8. Food Authorities with responsibility for food hygiene and safety should appoint a suitably qualified and experienced lead officer for food hygiene and food standards.</i></p> <p><i>The Food Authority should notify the Agency of the name(s) of their lead officer(s) and notify the Agency of changes.</i></p> <p><i>There is no requirement to appoint a lead officer specifically for approved establishments.</i></p>
4.Has the LA appointed <i>specialist</i> officer(s) with responsibility for approved establishments?	Yes/No	Checklist (AEC) A/Officer interview/Document Review/PVQ Annex  Name of Officer(s):	<p><i>CP.1.2.9 The Authority should be satisfied that the specialist/enforcement officer(s) have the relevant experience, knowledge, training and general qualification, if there are a number of product specific premises in its area requiring approval/classification.</i></p>

Question	Answer	Comments/Evidence	Auditors Notes
<p>5. Do the specialist/lead officers have the relevant qualifications and knowledge?</p> <ul style="list-style-type: none"> <li>• Food hygiene;</li> <li>• Food standards;</li> <li>• Approved Establishments.</li> </ul>	<p>Yes/No Yes/No Yes/No</p>	<p>Checklist (AEC) A</p>	<p><i>CP – 1.2.8.1 Lead officers should meet the requirements of para 1.2.9.1.1 for food hygiene and 1.2.9.2.2 for food standards, have a technical understanding of the food production processes used in the food authority’s area.</i></p>
<p>6. Is there a sufficient number of suitably authorised staff employed by the LA to carry out enforcement activities in approved dairy establishments?</p>	<p>Yes/No</p>	<p>Document review/PVQ/Audit checks</p>	<p><i>Auditors should check that the resources needed and those available to carry out the enforcement activities are sufficient.</i></p>
<p>7. If there is a shortfall in resources, how is this being addressed?</p>	<p>Yes/No</p>	<p>Audit Check/Officer interview Detail:</p>	<p><i>Any shortfall should also have been identified and highlighted by the LA in the service planning documents – if not, auditors should investigate further.</i></p>

Question	Answer	Comments/Evidence	Auditors Notes
8. Are any other officers involved in enforcement work at approved dairy establishments?	Yes/No		<p><i>Auditor to check if Agency/contractors involved or if visits by other staff e.g. sampling officer. Food Authorities should be satisfied that contracted or temporary enforcement staff meet the qualification and experience requirements set out in CP 1.2.9 and are duly authorised in writing (CP 1.2.6).</i></p>
9. Are all staff dealing with approved dairy establishments appropriately authorised?	Yes/No	Document Review (PVQ Annex) Checklists	<p><i>Auditors should check the authorisations against the qualifications of the officers from the PVQ information.</i></p> <p><i>Authorisations should also be checked against the process set out in the Authority's own procedure. Agency and/or non-specialist IF enforcement staff should fulfil the same qualification criteria and be properly authorised by the LA, in accordance with the authorisation procedure. <b>Auditors should also ensure that original certificates have been checked and verify with examining bodies as necessary.</b></i></p> <p><i>If generic authorisations have been conferred, then auditors should test through interview and file checks that the officers are aware of any limitations placed on their authorisations.</i></p> <p><i><b>If authorisations identify specific subordinate legislation under the Food Safety Act 1990, auditors should ensure that all relevant statutory instruments are included. Officers performing duties under the Food Safety and Hygiene (E,W,S) Regulations and the Official Feed and Food Controls (E,W,S) Regulations 2009 need to be separately authorised in writing. With regard to other specific food regulations made under the European Communities Act 1972 relevant officers should be specially authorised for each of those regulations.</b></i></p>

Question	Answer	Comments/Evidence	Auditors Notes
10.Has the Authority ensured that all officers authorised to inspect approved diary establishments are sufficiently and appropriately trained in accordance with their level of authorisation?	Yes/No	Checklist Detail:	

*\*Authorisations must be in accordance with officers' individual levels of qualification, training, experience and CoP requirements:*

**Food Hygiene:** *Where premises are approved under product specific legislation officers must have detailed knowledge of the relevant product specific regulations. Officers inspecting specialist or complex processes shall have received additional training and demonstrated their competence to undertake such inspections*

Question	Answer	Comments/Evidence	Auditors Notes
<b>Training</b>			
1.How are officer/Service training needs identified?		Document review/Officer interview Detail:	
2.Are any training needs in relation to approved establishments enforcement identified and included in a training programme?	Yes/No	Audit check/Officer interview	<i>Auditors should look particularly for evidence of recent/update training relating to the Police and Criminal Evidence Act (PACE, the Criminal Procedure and Investigations Act (CPIA) and other training relevant to processing formal actions.</i>
3.Are officer qualifications and training records maintained?	Yes/No	Document review/Audit check	

**Documents:** training programme (current and previous years), authorisation procedure, qualification/training records, relevant pages from standing orders, schedule of officer authorisations, training budget.



**P4 Facilities and Equipment [The Standard – para.6]**

6.3 Any computer software package or other method of record administration used by the Authority shall be capable of providing any information reasonably requested by the Food Standards Agency. Such systems shall be operated in such a way so as to be able to provide required information to the Agency.

6.4 The Authority shall set up, maintain and implement appropriate back up systems for any electronic databases and systems or documented procedures which have been designed to minimise the risk of corruption or loss of information held on its databases. The Authority should ensure that reasonable security measures are in place to prevent access and amendment by unauthorised persons.

**P4 Food and Feedingstuffs Premises Database [The Standard – para. 11]**

11.1 The Authority shall set up, maintain and implement a database of the food and feedingstuffs premises in its area.

11.2 The Authority shall set up, maintain and implement a documented procedure to ensure that its food and feedingstuffs premises database is accurate and up to date.

Question	Answer	Comments/Evidence	Auditors Notes
<b>Database</b>	<b>System used:</b>		
1.Does the LA have a documented procedure to ensure that its database is complete and accurate for food premises in its area, including approved establishments?	Yes/No	Document review/PVQ Detail:	
2.Are all the approved dairy establishments on the Authority’s database?	Yes/No		<i>[The Food Standards Act requires LAs to provide information to the FSA]</i>
3.Are all enforcement actions in relation to approved dairy establishments recorded on the database?	Yes/No	Details:	<i>The auditors should obtain the monitoring information received by the FSA, and cross-reference it against the LA’s records. If this information has not been provided then the auditor should investigate the reason. The</i>



<p>4. Do database records accurately reflect what is held on paper files?</p>	<p>Yes/No</p>	<p>Details:</p>	<p><i>auditor should discuss with the Agency's Monitoring Branch any queries they may have on the accuracy of the returns. Any differences between the data in the returns, the LA's records and, the information obtained from the PVQ provided by the LA (e.g. in the Service Plan) should be investigated.</i></p>
<p>5. Are there any problems in general with the Authority's official monitoring returns to the Agency?</p>	<p>Yes/No</p>	<p>Validation reports run on site. Details:</p>	
<p>6. Any database problems associated with approved dairy establishment records?</p>	<p>Yes/No</p>	<p>Details:</p>	
<p>7. Does the list of approved dairy establishments held by the Agency mirror the list held by the Authority?</p>	<p>Yes/No</p>	<p>Details:</p>	
<p>8. Is monitoring carried out of the accuracy of the database?</p>	<p>Yes/No</p>	<p>Details:</p>	
<p>9. How does the authority ensure access to the database is secure and the system is backed up?</p>			

**Documents:** database procedures, monitoring returns, FSA list of establishments from Agency website.



**P5 Food and Feeding Stuffs Premises Inspections [The Standard – para. 7**

- 7.1 The Authority shall carry out food hygiene, food standards and feeding stuffs inspections of premises in their area, at a frequency which is not less than that determined under the inspection rating system set out in the relevant legislation, Food Law Code of Practice or other centrally issued guidance.
- 7.2 The Authority shall inspect, approve, register, and license relevant premises in accordance with the relevant legislation, Food Law Code of Practice, centrally issued guidance and the Authority's policies and procedures.
- 7.3 The Authority shall assess the compliance of premises and systems in their area to the legally prescribed standards.

NOTE: In assessing compliance, the Authority shall give due consideration to any relevant Industry Guides to Good Hygiene Practice and have regard to any other relevant centrally issued guidance. The Authority shall take appropriate action on any non-compliance found, in accordance with the Authority's enforcement policy.

- 7.4 The Authority shall set up, maintain and implement documented inspection procedures for the range of inspections it carries out.
- 7.5 Observations made and/or data obtained in the course of an inspection shall be recorded in a timely manner to prevent loss of relevant information. Officers' contemporaneous records of inspections shall be legible and stored in such a way that they are retrievable.

<p>1.Are interventions of approved dairy establishments being carried out at the frequency set out in the Food Law Code of Practice?</p>	<p>Yes/No</p>	<p>Document Review. Checklist (AEC) D</p>	<p><i>The service plan should have identified the planned programme, including inspections of approved establishments. The FSA's monitoring information should identify the LA's progress towards these targets. The auditor should verify from the computer/file records that:</i></p> <ul style="list-style-type: none"> <li><i>a) Premises are being risk-rated correctly;</i></li> <li><i>b) Premises are receiving inspections according to their risk category and no later than 28 days after they are due except in circumstances outside of the control of the Authority such as seasonal businesses.</i></li> </ul> <p><i>[CP – 4.1.6] &amp; [CP – 4.1.12] Internal monitoring reports of inspections of approved dairy establishments due, and overdue should be requested, and auditors should verify that inspections are up to date.</i></p> <p><b>FVO Recommendation:</b>  <i>Milk and colostrum production holdings are to undergo regular official controls to verify that hygiene requirements are complied with. These official controls may involve inspections and/or the monitoring of controls that professional organisations carry out. If it is shown that the hygiene is inadequate, the competent authority is to verify that appropriate steps are taken to correct the situation. ( point 3 Chapter1,Annex 1V Regulation (EC) no 854/2004)</i></p> <p><i>Agency DHI will check this on milk production holdings in England and Wales however, the FVO auditors looked at whether the FBO had records of where milk and other products was from and whether the LA had checked these.</i></p>
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<p>2.Are inspections being carried out by correctly authorised staff?</p>	<p>Yes/No</p>	<p>Checklists (AEC) D</p>	
<p>3.Does the Authority have documented inspection procedures covering the approval and inspection of approved establishments including dairy?</p>	<p>Yes/No</p>	<p>Document Review (PVQ)</p>	<p><i>The procedures should cover all categories of approval relevant to the premises in the LA's area. The procedures should contain sufficient information to assist officers to recognise potential operations requiring approval and appropriate references to the relevant legislation, guidance and inspection forms.</i></p> <p><i>The procedures should cover the inspection of approved dairy establishments and the approval process.</i></p> <p><i>The process and content of inspection procedures should set out the LA's system of inspection including use of any checklists and aide memoirs. The auditor should be looking for compliance with the relevant codes.</i></p>
<p><b>Do the procedures cover:</b></p>			
<ul style="list-style-type: none"> <li>• Policy on announced/unannounced inspections; [PG – 4.2.2]</li> </ul>	<p>Yes/No</p>		<p><i>General principle that inspections should be unannounced.(Regulation (EC)852/2004)</i></p>

<ul style="list-style-type: none"> <li>• Use of experts; [PG 4.2.3]</li> </ul>	<p>Yes/No</p>		<p><i>An inspection team should include all the expertise necessary to inspect the premises in question, including further external experts as necessary. The IFST maintains a list of experts in particular fields.</i></p>
<ul style="list-style-type: none"> <li>• New premises inspections;</li> </ul>	<p>Yes/No</p>		<p><i>All registration forms reviewed and appropriate visits made to new premises? [CP - 4.1.4]</i></p>
<ul style="list-style-type: none"> <li>• Assessment of whether to take food samples;</li> </ul>	<p>Yes/No</p>		<p><i>An assessment of whether to take samples, and if so what sample, should be an integral part of every primary inspection and particularly in food manufacturing businesses. [CP – 4.2.2]</i></p>
<ul style="list-style-type: none"> <li>• Process and content of intervention (inc. reference to aide memoire/checklists);</li> </ul>	<p>Yes/No</p>		<p><i>Relevant intervention forms should be used. These may be LACORS inspection forms or ones developed by food authorities or their regional groups, provided they include all the elements of an intervention that are appropriate to the type of business [CP 4.1.2]</i></p>
<ul style="list-style-type: none"> <li>• Assessment of HACCP food safety management systems</li> </ul>			<p><b>FVO Recommendation</b></p> <p><i>Ref: ENF/E/13)11</i></p> <p><i>To ensure that audits of HACCP based procedures (Article4 (3) and (5) of Regulation (EC) No 854/2004 are effective</i></p>
<p>4. Are inspections/interventions carried out in accordance with the LA’s procedures, relevant legislation, the Code of Practice and other centrally issued guidance?</p>	<p>Yes/No</p>	<p>Audit Check/Officer interviews. Checklists</p>	<p><i>Interviews with officers should test their understanding of the procedures. Ask officers to talk you through how they would undertake an inspection and how they would assess further action.</i></p>

<p>5. Has the dairy establishment approvals process been carried out in accordance with legal requirements and relevant guidance?</p> <ul style="list-style-type: none"> <li>• Pre-approval</li> <li>• Approval assessment</li> <li>• Follow up on issues identified at assessment</li> </ul>	<p>Yes/No Yes/No Yes/No</p>	<p>Detail: Checklist</p>	
<p>6. Does the LA keep appropriate records as required under Article 3(6) of EC854/2004?</p>	<p>Yes/No</p>	<p>Detail: Checklists</p>	<p><i>These records would include completed aides memoire, other inspection notes and correspondence with the business.</i></p>
<p>7. (i) Is there evidence that the Authority has kept the approval of dairy establishments under review when carrying out official controls?  (ii) Has the LA identified all dairy establishments requiring approval?</p>	<p>Yes/No  Yes/No</p>	<p>Detail:</p>	<p><i>Article 31(2) Regulation EC No 882/2004.</i></p> <p><i>Auditors should check for evidence in completed inspection records/aides memoire or correspondence with the FBO of consideration that premises still requires approval and that current approval is appropriate for activities carried out.</i></p>
<p>8. Are officer's observations and data obtained during the course of inspections recorded in a timely manner, legible and retrievable?</p>	<p>Yes/No</p>	<p>Checklist/ Officer interviews.</p>	<p><i>Auditors should look at a sample of inspection notebooks/inspection sheets or computer systems.</i></p>
<p>9. Are Inspection reports/ Informal warning letters available?</p>	<p>Yes/No</p>		

10. Have officers reported back in writing at the end of every food inspection/intervention?	Yes/No	Checklist	<i>Auditors may need to x-check computer files with inspection records to ascertain that reports were sent after inspection.</i>
11. Do the reports contain the requirements laid out in the codes?	Yes/No	Checklist	<i>Inspection reports: [CP -4.5.3 Annex 6]</i>
12. Is appropriate follow up action taken where non-conformances with general hygiene requirements have been identified?	Yes/No	Checklist	<b><i>FVO Recommendation</i></b>  <i>To ensure that the deficiencies noted in relation to the general hygiene requirements laid down in Annex II to Regulation (EC) No 852/2004 are addressed in dairy establishments</i>  <i>Ref: ENF/E/13)11</i>
13. Are enforcement decisions recorded?	Yes/No	Audit check.	



<p>14. Are adequate LA monitoring is carried out on the checks required of the FBO to ensure compliance with microbiological and somatic cell criteria of raw milk?</p>		<p>Interview &amp; checklists</p>	<p><b>FVO Recommendation</b></p> <p>Ref: ENF/E/13)11</p> <p>To ensure that the monitoring by the Competent Authorities of the checks carried out in accordance with Annex III, Section IX, Chapter I, Part III to Regulation (EC) No 853 is carried out as required in Chapter II of Annex IV to Regulation ((EC) No 854/2004. Furthermore, to ensure that the monitoring is effective and that the quality of the monitoring is ensured, as required in Article 4 of Regulation (EC) No 882/2004, and that it guarantees that the food business operators' systems in place for the control of raw milk and colostrum are in compliance with the requirements of Regulation (EC) No 853/2004</p> <p>(i)For raw cow's milk.</p> <p>Plate &lt;= 100 000 on a rolling geometric average over a 2 month period with at least 2 samples per month</p> <p><b>NB.</b>FSA currently agreed interim BactoScan upper limit of 500,000 IBC/ml with UK Dairy Industry</p> <p>Somatic cell count &lt;= 400 000 on a rolling geometric average over a 3 month period with at least 1 sample per month</p> <p>As required by Annex 111,Section 1X,Chapter 1,Part 111 EC Regulation 853</p> <p>(ii) for raw milk from other species:</p> <p>Plate count at 30 °C (per ml) ≤ 1 500 000 (*)</p> <p>(*) Rolling geometric average over a two-month period, with at least two samples per month.</p> <p>(4) However, if raw milk from species other than cows is intended for the manufacture of products</p>
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			<p><i>Plate count at 30 °C (per ml) ≤ 500 000 (*)</i></p> <p><i>(*) Rolling geometric average over a two-month period, with at least two samples per month.</i></p> <p><b>NB refer to FHE Regulations 2013 S6 para1 and para 5 . <i>Untreated milk other than raw cow's milk is food authority responsibility not Agency in England and Wales.</i></b></p> <p><b>LA's to ensure milk purchasers aware of obligations under 853</b></p> <p><i>Geometric means must be calculated accurately using definitive numerical results. It is not acceptable to insert a threshold value into the calculation i.e. where the actual value could be somewhere in excess of the threshold value.</i></p> <p><input type="checkbox"/> <i>Procedures must be initiated to ensure that raw milk meets the criteria laid down in Regulation (EC) 853/2004, Annex III, Section IX, Chapter 1, III, points 3 and 4. Where this is not the case, the competent authority (CA) must be informed and measures taken to correct the situation.</i></p> <p><input type="checkbox"/> <i>Where the criteria set for plate count and somatic cell count are exceeded over a period of three months from first detection, this milk must be excluded from the food chain</i></p> <p><input type="checkbox"/> <i>Although there is no stipulated sampling frequency for monitoring antibiotic residues in raw milk, this should be determined by the food business operator on a risk basis. Where non-compliant results are identified, corrective action should include an increased sampling frequency, until such times as it can be demonstrated that the situation has been rectified.</i></p> <p><i>In order to effectively demonstrate compliance LA's to check FBO's maintain following evidence</i></p>
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			<p><i>HACCP based food safety management plans to include reference to compliance with raw milk criteria with corrective actions to be taken</i></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> <i>Corrective action taken – to include communications with producers (including those to highlight problems, seek improvements and outline sanctions if problems persist) and the cessation of milk collection where required<sup>1</sup>.</i></li> <li><input type="checkbox"/> <i>Monthly reporting of non-compliant plate count and somatic cell count results or nil return to the FSA Central Operations Hub (COH)</i></li> <li><input type="checkbox"/> <i>Monthly reporting of non-compliant antibiotic levels or nil return to COH</i></li> <li><input type="checkbox"/> <i>Monthly reporting of all incidents of tanker failures, due to high levels of antibiotic residues, or nil return, to COH</i></li> <li><input type="checkbox"/> <i>Disposal of non-compliant milk in accordance with Regulation (EC)1069/2009</i></li> </ul> <p><i>Reference Enforcement Letter ENF/E/11/003 &amp; 13/011</i></p>
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<p>15. What checks are carried out by the LA to ensure FBO's are in compliance with the microbiological criteria for foodstuffs.</p>	<p>Interview &amp; checklists</p>	<p><b>FVO Recommendation</b></p> <p>Ref: ENF/E/13)11</p> <p>To ensure that the official controls on microbiological criteria are effective and cover the verification of the compliance of the food business operators with the rules and criteria of Regulation (EC) No 2073/2005.</p> <p>LAs should ensure that:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> FBOs' own sampling protocols are appropriate for the activities conducted at the establishment in question, for example frequency of sampling and the organisms tested for are those stipulated in Regulation (EC) No 2073/2005, unless justification is provided where alternative sampling frequencies are applied as described in Articles 4 and 5 in the Regulation or there is no prescribed sampling frequency.</li> <li><input type="checkbox"/> FBOs either use the ISO reference methods for testing their own samples or alternative methods that have been validated and, where appropriate, certified as required by Article 5 of the Regulation. The testing laboratory should provide the necessary evidence on validation of methods but is recommended that this is also held by the FBO</li> <li><input type="checkbox"/> The correct numbers of units, comprising a sample are taken (FBO or official control sample), or evidence is provided to support the application of alternative sampling plans as described in Article 5 in the Regulation.</li> <li><input type="checkbox"/> Shelf life assessments for products are fit for purpose and appropriate for the intended use, taking into account handling and storage by final consumer</li> <li><input type="checkbox"/> There are documented procedures in regard to sampling, including for environmental</li> </ul>
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			<p><input type="checkbox"/> <i>Corrective actions are taken following unsatisfactory microbiological results, in accordance with the procedures documented</i></p> <p><i>Is the process for dealing with failures documented?</i></p> <p><i>Have there been any incidents and if so, were the appropriate actions carried out including notifying the FSA and initiating withdrawal/recall if appropriate?</i></p> <p><i>Has the LA checked that the FBO have a documented system for end product testing to demonstrate compliance with microcriteria? And similarly have they checked procedures for monitoring the environment for indicator organisms and/or pathogens such as Listeria?</i></p>
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<p>16 (i) Do the Authority's inspections include checks on the FBO potable water testing programme?</p> <p>(ii) Are any official water samples taken by the authority</p>	<p>Yes/No</p> <p>Yes/No</p>	<p>Interview &amp; checklists</p>	<p><b>FVO Recommendation</b></p> <p><i>Ref: ENF/E/13)11</i></p> <p><i>To ensure that the official controls on potable water cover all the requirements of Council Directive 98/83/EC and that effective corrective action is taken when relevant parameters are exceeded</i></p> <p><i>Where this is municipal mains water, LA should check that FBO monitors official check by the water company/Drinking Water Quality Regulator</i></p> <p><i>Ref: ENF/E/13)11</i></p> <p><i>Official controls on potable water take into account all the requirements of Council Directive 98/83/EC</i></p> <ul style="list-style-type: none"> <li><i>• FBOs take effective corrective action when relevant parameters for potable water are exceeded</i></li> <li><i>• Where multiple sources of water are used in an establishment (e.g. municipal and private supplies), there are clearly documented procedures which detail what the different water supplies are used for</i></li> </ul>
<p>17. (i) What checks are carried out to verify the FBO has appropriate traceability systems and procedures in place?</p> <p>(ii) Does the LA conduct traceability exercises during interventions.</p>	<p>Yes/No</p>	<p>Checklists</p> <p>Checklists</p>	<p><i>Article 18 of Regulation (EC) No 178/2002</i></p> <p><i>Article 4(6) of Regulation (EC) No 854/2004</i></p> <p><i>Ref: ENF/E/13)11</i></p>

<p>18. Are adequate checks are undertaken to verify the FBO has appropriate systems in place for the collection, identification and disposal of animal by-products?</p>		<p>Checklists</p>	<p><b>FVO Recommendation</b></p> <p><i>Ref: ENF/E/13)11</i></p> <p><i>To ensure that animal by-products in dairy establishments are subject to an adequate control system, including their collection and identification, as required in Article 4.4 of Regulation (EC) 1069/2009. This requires</i></p> <p><i>(Member States shall ensure that an adequate system is in place on their territory ensuring that animal by-products are:</i></p> <p><i>(a) collected, identified and transported without undue delay; and</i></p> <p><i>(b) treated, used or disposed of in accordance with this Regulation.)</i></p> <p><i>Ref: ENF/E/13)11 LA's should ensure that:</i></p> <p><i>Containers used for collection of ABP are clearly labelled and easily distinguishable from containers used for collection of products destined for human consumption</i></p> <ul style="list-style-type: none"> <li><i>• Documented procedures and practices are in place to ensure ABP are correctly labelled (cat 1, 2 or 3), handled and disposed of.</i></li> </ul>
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<p>19. Has the Authority been notified of any sample failures by the FBO for somatic cell counts or antibiotic residues?</p>	<p>Yes/No</p>	<p>Interview &amp; checklists C/D/E/L</p>	<p><i>Annex III, Section IX, Chapter I, Part III point 5 Regulation (EC) No 853</i></p> <p><i>When raw milk fails to comply with points 3 or 4 the FBO must inform the CA and take measures to correct the situation.</i></p> <p><i>Reference Enforcement Letter ENF/E/09/019</i></p> <p><i>Are there procedures in place for disposal of unfit milk and if there have been failures, is there evidence that disposal was carried out.</i></p>
<p>20. Are adequate checks are carried out to monitor the measures taken by the FBO to correct the situation e.g. random official checks?</p>		<p>Checklists</p>	
<p>21. Is adequate action taken if the situation is not corrected by the FBO within 3 months of the authority being notified?</p>		<p>Checklists</p>	<p><i>Ref: ENF/E/13)11</i></p> <p><i>Where the criteria set for plate count and somatic cell count are exceeded over a period of three months from first detection, this milk must be excluded from the food chain</i></p>



<p>22. For FBOs involved in manufacture of cheese and who operate cheese recovery, are the checks by the LA adequate to ensure this is done appropriately</p>		<p>Checklists</p>	<p><i>Refer to guidance on cheese recovery for details:</i></p> <p><i><a href="http://www.food.gov.uk/multimedia/pdfs/cheeserecovery.pdf">http://www.food.gov.uk/multimedia/pdfs/cheeserecovery.pdf</a></i></p> <p><i>Reference enforcement letters:</i></p> <p><i>ENF/E/06/068</i></p> <p><i>ENF/E/07/032</i></p>
<p>23. Is there evidence of effective internal monitoring of inspections of approved dairy establishments and any actions relating to the approval process?</p>		<p>Interview/checklists</p>	

**Documents:** Examples of Management reports (e.g. approved establishments inspection programme, overdue inspections, premises according to risk), inspection procedures, enforcement procedures.

**Statistics:** Inspection programme statistics.



**P6 Food, Feedingstuffs and Food Premises Complaints [The Standard - para. 8] and Home Authority Principle [The Standard - para. 9]**

- 8.1 The Authority shall set up, maintain and implement a documented policy and procedure(s) in relation to food and feeding stuffs complaints that originate within the UK, and those foods and feeding stuffs originating from other EU member states, or from third countries and in relation to complaints against food premises. Procedures should cover any referral arrangements to inland authorities and/or authorities with responsibility for imported food and feeding stuffs controls at the UK point of entry.
- 8.2 The Authority shall investigate complaints received in accordance with the Food Law Code of Practice, centrally issued guidance and the Authority's policies and procedures.
- 8.3 The Authority shall take appropriate action on complaints received in accordance with the Authority's enforcement policy.
- 9.1 The Authority shall provide advice to businesses on legal compliance where they act as home and/or originating authority.
- 9.2 The Authority shall have regard to any information or advice it has received from any liaison with home and/or originating authorities.
- 9.3 The Authority shall liaise with the home and/or originating authority of a company whose premises have been inspected and offences identified which are, or appear to be, associated with the company's centrally defined policies and procedures.
- 9.4 During a complaint investigation, the Authority shall liaise with the home and/or originating authority regarding matters which are or may be associated with the company's centrally defined policies or procedures.
- 9.5 The Authority shall liaise with the home and/or originating authority of a company in relation to any unsatisfactory samples which are or may be associated with the company's centrally defined policies or procedures.
- 9.6 The Authority, having initiated liaison with any home and/or originating authority, shall notify that authority of the outcome.

Question	Answer	Comments/Evidence	Auditors Notes
1.Does the Authority have an appropriate policy on the investigation of food and food premises complaints in accordance with official guidance?			
2. Has the LA received any complaints about approved dairy establishments in the last 12 months?	Yes/No	Audit check/PVQ	

Question	Answer	Comments/Evidence	Auditors Notes
3. Have all complaints been investigated and followed up appropriately?	Yes/No	Detail:	
4. Are there easily retrievable and complete records of complaint investigations?	Yes/No	Checklist O	
5. Does the LA act as Home Authority for any approved dairy establishments?	Yes/No	Detail:	
6. Has the LA followed up on referrals made to it by other LAs for approved dairy establishments?	Yes/No	Detail:	
7. Has appropriate follow-up action been taken on all referrals associated with approved dairy establishments?	Yes/No	Audit check Detail:	

**Documents:** Complaints policy, service plan, complaints procedure, examples of any home authority agreements.

**Statistics:** Numbers of home authority approved establishments, nos. complaints relating to approved establishments.



**P7 Food and Feeding Stuffs Inspection and Sampling [The Standard- para. 12].**

**[NB: Formal enforcement actions carried out following inspection/sampling also covered by para. 15 of The Standard 'Enforcement']**

- 12.1 The Authority shall ensure that food and feeding stuffs are inspected in accordance with relevant legislation, Food Law Codes of Practice and centrally issued guidance to ensure that food and feeding stuffs meet legally prescribed standards.
- 12.2 The Authority shall take appropriate action on any non-compliance found in accordance with the Authority's enforcement policy.
- 12.3 The Authority shall set up, maintain and implement documented procedures for the inspection of food and feeding stuffs.
- 12.4 The Authority shall set up, maintain and implement a documented sampling policy and programme that shall accord with any centrally issued or relevant guidance, and the relevant Food Law Code of Practice and shall include reference to its approach to any relevant national sampling programme centrally co-ordinated by the Food Standards Agency.

NOTE: The Authority should consider the nature of its food and feeding stuffs establishments, and where applicable the nature of imported foods and feeding stuffs, and also have regard to any relevant sampling programme centrally co-ordinated by LACORS and the HPA and in Scotland, SFELC (the Scottish Food Enforcement Liaison Committee), in Wales the Welsh Food Microbiological Forum and in Northern Ireland, the Public Health Laboratory.

- 12.5 The Authority shall set up, maintain and implement documented procedures for the procurement or purchase of samples, continuity of evidence and the prevention of deterioration or damage to samples whilst under their control in accordance with the relevant Food Law Code of Practice and centrally issued guidance.
- 12.6 The Authority shall carry out sampling in accordance with its documented sampling policy, procedures and programme.
- 12.7 The Authority shall take appropriate action in accordance with its enforcement policy where sample results are not considered to be satisfactory.
- 12.8 The Authority shall, where appropriate, ensure a Public Analyst, and/or Agricultural Analyst is appointed to carry out examinations and analyses of food and feeding stuffs samples. In making these appointments all relevant legal requirements and Food Law Codes of Practice shall be satisfied. All samples for examination should be submitted to a Food Examiner at a laboratory accredited for the purpose of examination.

Question	Answer	Comments/Evidence	Auditors Notes
1.Does the Authority have a documented sampling policy and programme that includes sampling from approved dairy establishments? [CP – 6.1.2]	Yes/No	Document review/PVQ	Auditors will need to take account of the LA's range of responsibilities when assessing the completeness of the sampling policy, procedures and programme e.g. specific imported food/Approved Premises responsibilities.

Question	Answer	Comments/Evidence	Auditors Notes
2. Is the programme in accordance with the sampling policy?	Yes/No	Document review	
3. Does the Authority have a sampling procedure?	Yes/No	Document review	
4. Is the sampling programme being implemented in Approved Dairy Establishments?	Yes/No	Officer interview/Audit checks	<i>Auditors should note that monitoring returns will also give an idea of activity prior to the audit. If the LA has not met its programme, any review carried out with the PA/FE should be checked to determine the reasons.</i>
5. Has appropriate action followed sample results that were not considered satisfactory?	Yes/No	Files and checklists	<i>The auditor will need to examine records of sampling activity. Where samples have been unsatisfactory, the premises files/interviews with officers should establish whether appropriate action has been taken. The PA/FE reports will give an indication whether the food met legal requirements and if further investigation was necessary.</i>  <i>NB: Formal enforcement follow-up actions are recorded on Protocol (AEP/15) 'Enforcement'.</i>
7. Are there easily retrievable and complete records of sample results and any follow-up action?	Yes/No	Checklist	
8. (i) Are all microbiological and formal food standards food samples submitted to an official food control laboratory?  (ii) Has the Authority formally appointed a Public Analyst?	Yes/No  Yes/No	Checklist (AEC) N	<i>Details of the Public Analyst and the Food Examiner should be within the service plan information.</i> <i>The List of official food control labs can be found at</i> <a href="http://www.food.gov.uk/enforcement/monitoring/foodcontrollabs">http://www.food.gov.uk/enforcement/monitoring/foodcontrollabs</a>





**P8 Food Safety Incidents [The Standard- para. 14].**

- 14.1 The Authority shall set up, maintain and implement a documented procedure for initiating and responding to food alerts in accordance with the relevant Food Law Code of Practice. For UK points of entry, this procedure should also address RASFF notifications and relevant EC decisions. This procedure shall include out of hours contact arrangements.
- 14.2 The Authority shall maintain a computer system capable of receiving food alerts.
- 14.3 The Authority shall document its response to and the outcome of each food alert.
- 14.4 The Authority shall set up, maintain and implement a documented procedure for responding to food safety incidents.

NOTE: Food safety incidents might be notified as part of the food alert system (see 14.1 above) or as a separate notification from the Food Standards Agency.

- 14.5 The Authority shall notify the Food Standards Agency of any serious localised incident or a wider food safety problem in accordance with the Food Law Codes of Practice or feeding stuffs legislation.

Question	Answer	Comments/Evidence	Auditors Notes
1. Does the Authority have an adequate documented procedure for dealing with food incidents & alerts in its area? [CP – 1.7.2]	Yes/No	Document review (PVQ)	<i>Response and initiation</i>
2. Any relevant incidents associated with the approved dairy establishments?  Has the authority been notified of loss of OTF status of a dairy herd or other species	Yes/No  Yes/No	Checklist Details:	<i>Auditors should obtain a list of recent incidents, alerts &amp; OTF status removal notifications prior to audit evaluate the responses of the Authority to each.</i>
3. If Yes, was appropriate action taken on the incident to ensure milk from reactor animals does not enter the food chain?  4. Has the Authority appropriately authorised continued use of raw milk from animals not showing any		Details:	<i>Reference Enforcement Letter ENF/E/10/021  FLCOP Practice Guidance Annex 6  Annex 111, Section 1X, Chapter 1, para 2(b)  Raw milk from any animal not complying with above requirements must not be used for human consumption.</i>

Question	Answer	Comments/Evidence	Auditors Notes
symptoms or a positive reaction?			<p><i>Annex 111, Section 1X, Chapter 1, para 3</i></p> <p><i>Auditors should check that incidents have been reported, investigated and followed up appropriately including product recalls where appropriate such as milk from reactor animals entering the food chain, full risk assessment of milk and dairy products made prior to loss of OTF status and so on.</i></p> <p><i>Annex 6 of the FSA Practice Guidance contains guidance for Enforcement Authorities on dealing with incidents involving loss of OTF status</i></p> <p><i><a href="http://www.food.gov.uk/multimedia/pdfs/practiceguidanceeng.pdf">http://www.food.gov.uk/multimedia/pdfs/practiceguidanceeng.pdf</a></i></p>
5. What procedures are in place for the LA to liaise with other control bodies e.g. AHVLA Agency, DHI, CCDC and the FBO in relation to loss of OTF status and raw drinking milk sample failures?			
6. Are there easily retrievable and complete records of action taken in relation to incidents?	Yes/No	Checklist	
7. Has the Authority had any incident that could be classified as a serious localised incident or a wider food safety problem associated with the approved dairy establishments?	Yes/No	Officer interviews/audit checks Detail:	<p><i>Auditors may also identify incidents through checks made on infectious disease notifications, outbreak and complaint investigations.</i></p>



**P9 Enforcement [The Standard- para 15].**

15.1 The Authority shall set up, maintain and implement a documented enforcement policy, in accordance with the relevant Food Law Codes of Practice, the Enforcement Concordat and other official guidance, approved by the relevant Local Authority Member forum.

NOTE: The enforcement policy or an accurate summary should be readily available to the public and food businesses in the Authority’s area.

15.2 The Authority shall set up, maintain and implement documented procedures for follow up and enforcement actions in accordance with the relevant Food Law Codes of Practice and official guidance.

15.3 The Authority shall carry out food law enforcement in accordance with the relevant Food Law Codes of Practice and centrally issued guidance.

15.4 All decisions on enforcement action shall be made following consideration of the Authority’s enforcement policy. The reasons for any departure from the criteria set out in the enforcement policy shall be documented.

Question	Answer	Comments/Evidence	Auditors Notes
1. Does the Authority have a written enforcement policy? [CP – 3.1.1]	Yes/No	Document review (PVQ)	
2. Is there evidence of it being implemented in relation to approved dairy establishments?	Yes/No	Audit check Detail:	<i>This evidence may be in the form of coversheets on prosecutions or notes in relation to follow up on inspections demonstrating that the policy has been considered, or it may be obtained through officer interview</i>
3. Have any enforcement decisions been made outside the enforcement policy guidelines?	Yes/No	Checklists	
4. Have the reasons been documented?	Yes/No	Checklists	

Question	Answer	Comments/Evidence	Auditors Notes
<p>5.Does the LA have documented procedures for formal follow up/enforcement actions?</p> <ul style="list-style-type: none"> <li>• Simple cautions</li> <li>• Prosecutions</li> <li>• Emergency prohibitions</li> <li>• Hygiene Emergency prohibitions</li> <li>• Hygiene improvement notices</li> <li>• Improvement notices</li> <li>• Reg 27/29 certification</li> <li>• Remedial action notices</li> <li>• Voluntary closure</li> <li>• Detention and seizure</li> <li>• Withdrawal/suspension of approval</li> </ul>	<p>Yes/No</p>	<p>PVQ/audit check</p>	<p><i>Regulation 27 of FH (W&amp;S) Regulations 2006 and Regulation 29 of the Food Hygiene (England) Regulations 2013 provides powers for an authorised officer to certify that food has not been produced, processed or distributed in accordance with the Hygiene Regulations. In respect of approved establishments this could apply to food that is not necessarily unfit but has not been processed appropriately, or could apply in situations where food has been produced in a premises which should have been approved for a process but has not been.</i></p>
<p>7. Has follow up action and enforcement been carried out appropriately at approved dairy establishments?</p>	<p>Yes/No</p>	<p>Checklists</p>	
<p>8.Have any serious deficiencies been identified at any approved dairy establishments?</p> <p>If yes, is there evidence that consideration has been given to withdrawal or suspension of approval?</p>	<p>Yes/No</p>	<p>Audit check</p>	<p>E.g. following service of a RAN</p>
<p>9.Is there evidence of effective internal monitoring of enforcement actions?</p>	<p>Yes/No</p>	<p>Details:</p>	

**Documents:** Enforcement policy, formal enforcement procedures.



**P10 Records and Inspection Reports [The Standard - para. 16]**

16.1 The Authority shall maintain up to date accurate records in retrievable form for all food and feeding stuffs premises in its area and relevant checks on imported food and feeding stuffs in accordance with the relevant Food Law Codes of Practice. These records shall include reports of all inspections and visits and the determination of compliance with legal requirements made by the authorised officer, details of action taken where non-compliance was identified, details of any enforcement action taken, results of any sampling, details of any complaints and any action taken, and also relevant food and/or feeding stuffs registration, approval and licensing information.

16.2 All records shall be kept for at least 6 years, unless they have been marked for longer retention because of litigation or Local Government Ombudsmen review.

Question	Answer	Comments/Evidence	Auditors Notes
1. Are there easily retrievable, up-to-date and accurate records of approvals and approved establishments?	Yes/No	Audit check/all checklists	<i>Records will be required for the checks on enforcement. This will go some way in determining whether they are retrievable. Auditors should examine the storage system and attempt to retrieve records themselves.</i>
2 .Are all relevant details on approved dairy premises file in accordance with COP annex 12?	Yes/No	Auditor check/all checklists	<p><i>Auditors should refer to Practice Guidance - Annex 1, 2 in particular the file should contain:</i></p> <ul style="list-style-type: none"> <li>• <i>Application form</i></li> <li>• <i>Plan of establishment with layout, work flows, equip water, drainage, pest control</i></li> <li>• <i>Synopsis of establishment</i></li> <li>• <i>Pre-inspection approval report</i></li> <li>• <i>Planned programme of work</i></li> <li>• <i>Approval notification documents</i></li> </ul> <p><i>Relevant information on:</i></p> <ul style="list-style-type: none"> <li>• <i>Labels and commercial documents</i></li> <li>• <i>Letter indicating Food Authority involvement in hygiene training of staff</i></li> <li>• <i>Inspection reports in chronological order</i></li> <li>• <i>Correspondence in chronological order</i></li> <li>• <i>Copies of notices or other formal action in chronological order</i></li> <li>• <i>Copy of Company's emergency withdrawal plan and traceability system</i></li> <li>• <i>Copy of other relevant documents e.g.</i></li> </ul>

			<p><i>HACCP, supplier and product information, test results etc.</i></p> <ul style="list-style-type: none"> <li>• <i>Results of samples taken by the Food Authority</i></li> <li>• <i>Location of any off-site facilities</i></li> </ul>
3. Do they include relevant details?	Yes/No	All checklists	<p><i>These details may be either on computer databases and/or on paper files. The information to be stored includes:</i></p> <ul style="list-style-type: none"> <li>• <i>information on the size and scale of the business;</i></li> <li>• <i>type of food activities including any special equipment;</i></li> <li>• <i>processes or features, copies of correspondence including documentation associated with approvals or licensing;</i></li> <li>• <i>copies of food sample analysis/examination results. In addition <b>food hygiene:</b></i></li> <li>• <i>assessment of compliance with HACCP requirements;</i></li> <li>• <i>hygiene training by employees including any training on the implementation and operation of the food safety management system;</i></li> <li>• <i>for premises subject to Regulation (EC) 853/2004. details of any derogations in force;</i></li> <li>• <i>approved products handled and cleaning methods employed.</i></li> </ul> <p style="text-align: right;"><i>]</i></p>
4.(i) Is there evidence of effective internal monitoring of record keeping in respect of approved dairy establishments? (ii) Are records retained for at least 6 years?	Yes/No	Detail:	



**P11 Internal Monitoring [The Standard - para. 19]**

- 19.1 The Authority shall set up, maintain and implement documented internal monitoring procedures in accordance with the Food Law Code of Practice and centrally issued guidance.
- 19.2 The Authority shall verify its conformance with this Standard, relevant legislation, the relevant Food Law Codes of Practice, relevant centrally issued
- 19.3 guidance and the Authority's own documented policies and procedures.
- 19.4 A record shall be made of all internal monitoring. This should be kept for at least 2 years.

Question	Answer	Comments/Evidence	Auditors Notes
1.Does the Authority have a documented monitoring procedure?	Yes/No	Document review (PVQ)	Planned inspection programme, quality & consistency [CP -7.1.2] Officers returning to food after > 3 years – should be monitored for 3 months [CP -1.2.4]
2.Who carries out the monitoring?		Name(s):	
<b>3.Do monitoring procedures adequately ensure that :</b>	<i>Monitoring of the different sections of the Standard may be undertaken at differing frequencies. The aim of monitoring is to ensure compliance with official guidance, the Standard, the Authority's procedures, and for consistency of enforcement between officers. The auditor may consider making use of any third party report in assessing conformance with this part of the Standard.</i>		
<ul style="list-style-type: none"> <li>• Authorised officers responsible for enforcement in approved dairy establishments are appropriately authorised in line with their individual competencies/ qualifications/ training/ experience?</li> </ul>	Yes/No	Detail:	
<ul style="list-style-type: none"> <li>• Quantitative aspects of the service in relation to approved establishments including dairy are satisfactorily monitored?</li> </ul>	Yes/No	Detail:	<i>Examples of quantitative monitoring may include:</i> <ul style="list-style-type: none"> <li>• No. inspections against the programme;</li> <li>• No. samples against the programme;</li> <li>• No. complaints/service requests outstanding;</li> </ul> <i>Response times against PIs e.g. response to service requests/issue of inspection reports.</i>

Question	Answer	Comments/Evidence	Auditors Notes
<ul style="list-style-type: none"> <li>Qualitative aspects of the service in relation to approved dairy establishments are satisfactorily monitored?</li> </ul>	Yes/No	Detail:	<p><i>[NB: LACORS guidance on monitoring systems 1995]</i></p> <p><i>Examples of qualitative monitoring may include:</i></p> <ul style="list-style-type: none"> <li><i>Consistency exercises;</i></li> <li><i>Team meetings to discuss interpretational issues;</i></li> <li><i>File audits;</i></li> <li><i>Review of paperwork;</i></li> <li><i>Prior approval of formal enforcement actions;</i></li> <li><i>Shadow/verification visits;</i></li> <li><i>Review of complaints about the Service;</i></li> <li><i>Customer satisfaction questionnaires;</i></li> <li><i>Business focus groups.</i></li> </ul>
4.Are records of internal monitoring maintained?	Yes/No	Detail:	
5.Where necessary have corrective actions been identified and implemented?	Yes/No	Audit check of records	<p><i>There should be evidence of corrective action where non-conformity is found. Continuing identification of the same problem could indicate that corrective action had not been effective.</i></p>

**Documents:** Internal monitoring procedures, copies of any internal reports following consistency and monitoring exercises.



**P12 Third Party or Peer Review [The Standard- para. 20]**

20.1 The Authority shall participate in any appropriate third party or peer review process against the Standard .NB not applicable in Wales

Question	Answer	Comments/Evidence	Auditors Notes
1.Has the Authority participated in any inter authority audit scheme covering approved establishments?	Yes/No	Document review (PVQ)/Officer interview Scope/Date(s)/Detail of areas covered:	<i>Scope - i.e. full/focused/partial. If not full, detail areas covered.</i>
2.If yes were any relevant corrective actions identified and implemented?	Yes/No	Audit check	

**Documentation:** Audit reports, summaries and action plans.

**Additional notes:**

Ref No.	Issue