

Scottish Borders Council – Capacity and Capability Audit

Food Law Enforcement Services

February – March 2022

Final Report issued 04 July 2022



Foreword

Audits of Local Authorities food law enforcement services are part of Food Standards Scotland's arrangements to improve consumer protection and confidence in relation to food and feed. These arrangements recognise that the enforcement of UK food law relating to food safety, hygiene, composition, labelling, imported food and feeding stuffs is largely the responsibility of Local Authorities. These Local Authority regulatory functions are principally delivered through Environmental Health and Trading Standards Services.

The audit scope is detailed in the audit brief and plan issued to all Local Authorities under reference [FSS/ENF/16/014](#) in June 2021. The main aim of the audit scheme is to maintain and improve consumer protection and confidence by ensuring that Local Authorities are providing an effective food law enforcement service. This audit was developed to assess Local Authority capacity and capability to deliver the food service.

The Audit scheme also provides the opportunity to identify and disseminate good practice and provide information to inform Food Standards Scotland policy on food safety, standards and feeding stuffs.

Specifically, this audit aimed to establish:

- evaluate the organisational, management and information systems in place to ensure they are effective and suitable to achieve the objectives of the relevant food law.
- assess the capacity and capability of the Local Authority to deliver the food service.
- provide a means to identify under performance in Local Authority food law enforcement systems.
- assist in the identification and dissemination of good practice to aid consistency.
- provide information to aid the formulation of Food Standards Scotland policy.

Food Standards Scotland audits assess Local Authorities' conformance against retained [Regulation \(EU\) 2017/625](#) and the [Food Law Code of Practice \(Scotland\) 2019](#) and the [Interventions Food Law Code of Practice \(Scotland\) 2019](#)

It should be acknowledged that there will be considerable diversity in the way and manner in which Local Authorities may provide their food enforcement services reflecting local needs and priorities.

Following the audit, it is expected that for any recommended points for action the Local Authority will prepare and implement an action plan, which will incorporate a root cause analysis of any non-compliance.

Root cause analysis is a technique that senior management should use to identify the root causes of non-conformities identified at the audit have been effectively addressed. An important aspect is that there is a need to ensure that the non-conformity does not recur. This should be achieved by the accurate identification of the cause(s) of the non – conformity (i.e. the root cause) and the introduction of effective preventative action

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1.0 Introduction

- 1.1 This report records the results of the second audit of Scottish Borders Council with regard to their capacity and capability to deliver food enforcement, under relevant sections of retained Regulation (EU) 2017/625 on official controls performed to ensure the verification of compliance with feed or food law. The audit focused on the Authority's arrangements for meeting certain operational criteria, particularly on staffing related issues, registration and approval of food business operators, enforcement actions, interventions, procedures for carrying out official controls and transparency about their enforcement activities.
- 1.2 Audits of Local Authorities' food law enforcement services were suspended in 2020 / 2021 due to the Covid – 19 pandemic. Deviations from the Food Law Code of Practice were granted to Local Authorities by the Minister for Public Health and Sport due to their active role in response to the pandemic and their role in the enforcement of the Health Protection (Coronavirus) (Restrictions and Requirements) (Additional Temporary Measures) (Scotland) Regulations 2020. Each Food Law Code of Practice deviation Enforcement Letter can be found here: [Register of Food Letters - 2015-2022](#)

FSS recognise that the Covid – 19 pandemic has had an impact on the delivery of official controls carried out by Local Authority enforcement officers. Local Authority food law intervention programmes were adversely affected as numerous interventions were not undertaken during 2020 and 2021 due to the deviations in place.

In response to this, FSS in partnership with the Scottish Food Enforcement Liaison Committee (SFLEC) developed a LA Recovery Process which allowed Local Authorities to re – set their intervention programmes and incorporate all interventions into a new programme scheduled to restart on the 1st September 2021. Capacity and Capability Audits carried out post September 2021 take into account the LA Recovery process.

- 1.3 The final report will be made available on the Food Standards Scotland's website at: www.foodstandards.gov.scot/food-safety-standards/regulation-and-enforcement-food-laws-scotland/audit-and-monitoring#la

Reason for the Audit

- 1.4 The power to set standards, monitor and audit the performance of enforcement authorities was conferred on Food Standards Scotland by Sections 3 and 25 of the Food (Scotland) Act 2015, and Regulation 7 of The Official Feed and Food Controls (Scotland) Regulations 2009.
- 1.5 In addition, Article 6(1) of Retained Regulation (EU) No 2017/625 on official controls performed to ensure the verification of compliance with feed or food law,

includes a requirement for competent authorities to carry out internal audits or to have external audits carried out.

- 1.6 To fulfil this requirement Food Standards Scotland (FSS) has established external audit arrangements in respect of competent authorities. These arrangements are intended to ensure competent authorities are providing an effective and consistent service for the delivery of official controls and are meeting the general criteria laid out in Retained Regulation (EU) No 2017/625.
- 1.7 This audit was carried out under these arrangements following the identification of a potential risk around the Authority's capacity and capability to deliver food law official controls. This risk was identified through the assessment of recent LA surveys, Scottish National Database entries and received intelligence over Brexit related pressures and other potential issues identified across FSS. The previous Audit of Scottish Borders Council was undertaken by Food Standards Scotland in November 2016.

Scope of the Audit

- 1.8 The audit examined operational criteria such as having a sufficient number of staff who are suitably:
- qualified
 - experienced
 - competent
 - authorised, and
 - ensure staff are free from conflict of interest
 - have contingency plans for emergencies
 - have appropriate legal powers
 - have suitable facilities and equipment, and to,
- (a) Ensure that staff receive appropriate and on-going training.
- (b) Ensure effective and efficient co-ordination with other competent authorities and between different units of a single authority if applicable.
- (c) Have procedures in place for the registration/approval of establishments.
- (d) Take appropriate action where businesses do not comply with the law.
- (e) Carry out internal audits or have external audits undertaken.
- (f) Be transparent about its monitoring and enforcement activity.
- (g) Prepare reports of individual controls and provide copies to businesses.
- (h) Have, use and update as necessary, documented procedures for carrying out controls.
- 1.9 The audit examined Scottish Borders Council's arrangements for official controls in relation to Retained Regulation (EU) 2017/625 on the verification of compliance with feed and food law.

1.10 The audit took place entirely remotely with no on-site activity.

Local Authority Background

1.11 Scottish Borders Council is a unitary Authority which provides all local services for the Scottish Borders Council area.

1.12 Within the Environmental Health Service, food law enforcement is overseen and managed by the Protective Services Manager. The Food, Health and Safety team leader (Principal Regulatory Service Officer for Food, Health and Safety) is the designated Lead Food Officer and has responsibility for the day-to-day operational management of the team.

1.13 Currently, the team leader is supported by two Environmental Health Officers and one Food Safety Officer. The total number of officers in the team equates to a total of 2.5 Full Time Equivalents (FTEs).

1.14 At present, the team is operating with an over 50% deficit in personnel. The total allocated operational FTE within the planned structure is 5.5.

2.0 Executive Summary

Capacity

2.1 The audit found that the Local Authority's (LA's) current resource for conducting a full programme of official controls was insufficient. The team is currently operating with less than half its allocated FTE posts.

2.2 The Authority has not produced a current Service Delivery Plan. The Service plan provided for the purposes of the audit was last updated in 2019 and therefore is no longer relevant or current.

2.3 The appointed Lead Food Officer is the Food, Health Safety Team Leader.

2.4 The Authority provided a scheme of delegation which the LA advised was amended and approved. Officer authorisations provided on the Scottish Borders Council's (SBC) website requires a review.

2.5 The accuracy of the Management Information System was difficult to establish during the audit. A number of different spreadsheets were provided with different figures which the Auditors were unable to verify. The Authority was not able to

provide a full database download of all registered food establishments, with risk ratings and dates of last and due interventions.

Capability

- 2.6 The Authority has not implemented in full the Food Law Rating System as required by the Interventions Food Law Code of Practice 2019 and the LA Recovery Process.
- 2.7 The intervention programme provided was incomplete and not produced in line with the LA Recovery Process.
- 2.8 Interventions in some approved establishments have not been completed at the required frequencies and a number of interventions are overdue.
- 2.9 The Authority has had an increase in resource demand due to requirements of exporting businesses within the LA. Export Health Certification is currently being issued two days a week with additional visits to approved establishments for attestations taking place more frequently.
- 2.10 Records of officer training and Continuing Professional Development were not provided.

Level of Assurance

- 2.11 As detailed in the Audit Charter Document of March 2020 (reference FSS/ENF/18/001) the audit has been assigned as below:

Insufficient Assurance Controls are not acceptable and have notable weaknesses	There are significant weaknesses in the current risk, governance and/or control procedures, to the extent that the delivery of objectives is at risk. Exposure to the weaknesses identified is sizeable and requires urgent mitigating action.
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3.0 Audit Findings

- 3.1 The findings reported below detail both corrective and preventive actions which are not confined to addressing specific technical requirements, but also include system-wide measures. Conclusions address the compliance with the planned arrangements, the effectiveness of their implementation and the suitability of the planned arrangements to achieve the stated objectives as appropriate.

3.2 **Article 4. Designation of competent authorities**

Article	Audit Findings
4.2	The Authority does not have a Service Delivery Plan (2021 – 2022) in place. The Service Plan provided for the purposes of the audit was last updated in 2019 and therefore is no longer relevant or current. The Authority has not produced a Service Plan as required by the LA Recovery Project Recovery Process Guidance (9 December 2020).
4.2	The Authority provided a scheme of delegation which the LA advised was amended and approved.
4.2	Officers' authorisations are held centrally online on the SBC's website. The list of statutes require a review to include the removal of the repealed European Communities Act and to include the service of Hygiene Improvement Notices under Regulation 6 of the Food Hygiene (Scotland) Regulations 2006.

Recommendation

1. Provide a current Service Delivery Plan and ensure that it is suitably approved.
2. Review and update the list of statutes listed for officers' authorisations.

3.3 **Article 5. General obligations concerning the competent authorities and the organic control authorities**

Article	Audit Findings
5.1	<p>The total FTE within the team (excluding the Lead Food Officer) is 2.5, which equates to two Environmental Health Officers (EHOs) and one Food Safety Officer (FSO). The team is currently operating at a shortfall of 3.0 FTE. This current shortfall is soon to be reduced further by one full time officer leaving at the start of April 2022. However, this post has been successfully filled and a replacement is due to start mid - April 2022. The Authority have also recently lost permanent staff members to other Authorities which have contributed to the current shortfall.</p> <p>The post of Food, Health and Safety team leader (and Lead Food Officer (LFO)) is responsible for managing the regular workload of Authorised Officers and also shares a proportion of the work required due to the shortage of officers in the team. At present, it is evident that the current</p>

	<p>capacity within the team is insufficient and further resource is required to enable full service delivery.</p> <p>It is recognised that the Authority has made efforts to recruit, however, it has been unsuccessful on a number of occasions. Through discussions with SBC's Environmental Health management team, it was evident that alternative efforts to increase capacity within the team have been made, such as offering additional qualifications and development opportunities to existing staff, (i.e. an officer from another team within the Authority is currently completing an MSc in Environmental Health (EH) and another member of staff is completing the higher certificate in Food Law practice).</p> <p>Figures provided from the Authority on the most recent resource calculation (as per the LA recovery process) shows that 6.75 FTE is required to fully meet the requirements of the Food Law Code of Practice. However, this figure was produced without having completed Steps 1 and 2 of the recovery programme and therefore may not be an accurate reflection.</p>
	<p>It was difficult to attain an accurate record of the number of registered food establishments during the audit. A number of different spreadsheets were provided, each with different figures. These did not match data held on the Scottish National Database and as a result, auditors were unable to verify the information. The Authority was not able to provide a full database download of all registered food establishments, with risk ratings and dates of the last and due interventions.</p> <p>It became apparent during the audit that there is difficulty with generating management reports from the LA's Management Information System (MIS) due to the lack of experienced staff trained in the MIS. There is a lack of administration support for the food team and the expertise in running and accessing the MIS appear to sit out with the team in another department. The proposed new Enterprise system should improve the ability to run reports from the MIS but it would be beneficial if officers within the Food and Health and Safety team received training to allow them to run MIS reports rather than rely on persons out with the service.</p> <p>The LA is also soon to introduce a system for uploading documents such as inspection reports directly onto the MIS.</p>
	<p>SBC currently provide Export Health Certificates (EHCs) and attestations for four exporting businesses within the LA. Currently, the team are issuing EHCs two days a week. However, since January 2021 up until February 2022, SBC were issuing certificates four days a week. This additional responsibility has been absorbed into the team by the Lead Food Officer who travels to the LA's office and issues the certificates remotely. The team had to incorporate additional six monthly visits to</p>

	these businesses to provide export attestations, into their already demanding workloads since the 1 st of January 2021.
	<p>A list of Authorised Officers qualifications were provided for the purposes of the audit which were noted as satisfactory. All officers have a responsibility for a variety of food establishments including approved establishments under Regulation (EC) No 853/2004. A potential gap in knowledge and experience with regard to Regulation (EC) No 853/2004 approved premises, was identified, which is mainly due to the imminent departure of the officer with lead responsibilities for these establishments. Although all officers within the team have experience in approved establishments, there is potential that this loss of lead experience, and knowledge, will affect the service until new officers become established with SBC's procedures and the specifics of SBC's approved establishments. Given the size of the team, it is also recognised that any officer departure results in a broader impact on knowledge and experience across the work area.</p> <p>Records of training and Continuing Professional Development (CPD) were not provided.</p>

Recommendation

3. Continue working towards a full complement of staff capable of delivering the requirements of the Food Law Code of Practice, associated codes of practice and centrally issued guidance.

4. Ensure that all officers are appropriately trained in approved establishments and SBC's procedures.

5. Develop contingency and future planning to ensure succession and resilience in service delivery as a result of staff turnover.

6. Ensure and demonstrate that officers receive relevant and structured on-going training. The minimum on-going training should be 10 hours per year based on the principles of Continuing Professional Development (CPD) as required by the Food Law Code of Practice.

3.4 Article 9. General rules on official controls

Article	Audit Findings
9	An intervention programme was created and restarted on the 1 st of September 2021, however, it became apparent during the audit that not all food establishments have been included in the intervention programme, and there is a portion of approximately 800 premises which are currently sitting outside of the programme with no risk rating. The Auditors were informed that these premises were allocated to an officer last year to complete the desktop transfer from Annex 5 to the Food Law

Rating System (FLRS), (Step 1 of the recovery process) which was started but was not finished due to the officer leaving.

At the beginning of the calendar year 2020, a spreadsheet of the food inspections that were due in the year, i.e. 1st April 2020 to 31st March 2021 was produced. When the food inspection programme was restarted in September 2021, 18 months was added to the next inspection date on the spreadsheet to produce an inspection programme for September 2021 to August 2022. This was not in line with the LA recovery Programme Guidance.

Taken from the spreadsheets provided, a total of 104 planned interventions and 64 new business interventions have been completed to date. There are currently 81 overdue interventions on the current programme dated up until the 28th of February 2022. The categories of overdue interventions are outlined in the table below.

Table 1 - Overdue interventions by risk rating category

Annex 5 B	Annex 5 C	Annex 5 D	Group 1 C	Group 2 C	Group 2 D
4	27	27	2	18	3

Unfortunately, due to the way in which the spreadsheets were provided, the Auditors were unable to determine whether planned interventions were being completed on time (within 28 days of the planned date of inspection) in accordance with the Food Law Code of Practice. The spreadsheets on interventions completed did not show the date the intervention was completed and therefore the Auditors were unable to assess if these had been completed on time.

9

The evidence provided on approved establishments shows that there is a total of 28 approved establishments and a further one in the process of being approved.

Table 2 – Number of approved establishments per establishment type

RTE Establishments	Raw / Non RTE Seafood	Cold stores	Egg Packing Establishments
12	4	3	9 + 1 undergoing approval

Through the spreadsheets provided, it has not been possible to verify the current intervention programme for all approved establishments, as these spreadsheets were incomplete or not up to date. In particular, but not least, previous and scheduled interventions at two establishments could

	<p>not be reconciled through the spreadsheets provided. One egg packing establishment was last inspected or “due” on 18 February 2019 with no evidence of forthcoming planned inspection provided.</p> <p>Evidence indicated that on some occasions the period of time between interventions in approved establishments has and is exceeding 12 months. This is not in compliance with SBC’s own procedures on approved establishments. Furthermore, up to seven of these establishments are shown as overdue visits, having been allocated a +18 months scheduled intervention without having been given priority consideration.</p> <p>The auditors consider that as a high priority, an action plan is required by SBC to review the current approved establishments’ intervention programme to regain control of its delivery and implementation. In line with other sections of this report, there is also a need to review and implement robust recording and internal monitoring mechanisms linked to this intervention programme.</p>
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Recommendation
7. The Authority should follow the LA Recovery Programme Guidance in formulating its intervention programme for 2022/2023.
8. Ensure that interventions for higher risk businesses or those that are likely to be high-risk always take priority over interventions for other businesses.
9. Review the current approved establishment and Group 1 intervention programmes to ensure that all establishments receive official control interventions at the appropriate frequencies.

3.5 Article 12. Documented control procedures

Article	Audit Findings
12.1	The Authority did not provide its internal monitoring procedure at the time of Audit. An internal monitoring procedure for programmed food inspections last reviewed in 2015 was provided after the Audit. However, it was noted that no evidence of the procedure being in practice was identified during the audit. There was a notable lack of evidence provided to demonstrate regular qualitative or quantitative internal monitoring of food law interventions carried out by officers. The Intervention programme is not being routinely monitored. Officers populate a spreadsheet once an intervention is completed, however, the entering of the intervention onto the MIS is not being monitored or reported on.
12.1	No team meeting minutes or action logs have been provided for 2021 and 2022 to date. As part of internal monitoring, it is advised that formal team meetings should resume on a regular basis to discuss food matters. A

	number of action logs from meetings that had been held on an ad hoc basis in 2020, were submitted during the audit, and these were considered to be a suitable format for recording matters discussed and actions to be taken.
12.1	Some policies and procedures are documented but have not been reviewed, maintained and/or approved (where required). 15 out of 17 policies and procedures requested for the audit remain outstanding for one or more of the above reasons. A timetable to review all policies and procedures is required, for which the Authority is aware and is already starting to put plans in place for.

Recommendation

10. The Authority should review and implement their internal monitoring procedure.

11. The Authority should ensure that all policies and procedures required for carrying out official controls and associated food law functions are reviewed at regular intervals relevant to changes in legislation, guidance and operational requirements.

3.6 **Article 13. Written records of Official Controls**

Article	Audit Findings
	A sample of two officers' inspection paperwork including inspection forms, tear-off report forms, letters and notices were selected for review during the audit. Officers are using the Caterer's Inspection form, similar to that devised by the Scottish Food Enforcement Liaison Committee's (SFELC's) Interventions Working Group. The form contains an aide memoir covering food hygiene and food standards topics. A food product audit is required to be carried out where high risk methods of processing e.g. sous vide, curing, smoking, and vacuum packing are identified. No evidence was submitted to show that changes in risk scores or that declared high-risk processing operations are being monitored, reviewed or checked by the LFO. Not all officers were completing the internal monitoring checklist or Notice Checklist to accompany inspection paperwork and notices, as evidence that suitable checks had been done. In one case, an officer had two months of scanning to be processed. This is likely to have been due to the pandemic and that officers are homeworking with restricted access to offices. Control measures including monitoring and reviews of officer performance by the LFO would potentially have avoided any such build up. The documentation submitted so far was assessed for accuracy and compliance with the requirements of the Food Law Code of Practice. All documentation submitted was found to comply with the requirements of the Food Law Code of Practice.

Recommendation

Refer to recommendation 10 (internal monitoring).

3.7 Article 14. Methods and techniques for official controls

Article	
14 (h)	<p>The Sampling policy provided was last reviewed in May 2020; however, it has not yet been approved.</p> <p>The sampling plan for 2020 and 2021 was suspended due to the Covid – 19 pandemic. Ten samples were taken in 2021 in the months of August and December as part of the FSS sampling grants programme. All samples were reported as satisfactory.</p> <p>17 FSS funded samples are planned to be taken this year between July 22 and March 23, however, no LA's own samples were programmed into this year's sampling plan.</p> <p>The Authority has a sampling budget of £14,500 which is evidently not being utilised to its full potential.</p> <p>As per the Food Law Code of Practice, a Food Authority's Sampling Policy and Programme should cover all types of sampling work undertaken. Food Authorities should also prepare a Sampling Programme that details their intended food sampling priorities. The programme should take account of the number, type and risk ratings of the food businesses and the type of food produced in the area, the Food Authority's Home or Originating Authority responsibilities and the need to ensure that the provisions of Food Law are enforced.</p> <p>Effective routine sampling is an essential part of a well-balanced Service Plan and therefore more attention needs to be placed on providing a robust sampling programme each year.</p> <p>The Food Safety Act 1990 places an obligation on Food Authorities in Scotland to appoint Public Analysts (PAs) and to ensure that PAs and Food Examiners (FEs) are qualified in accordance with the Food Safety (Sampling and Qualifications) (Scotland) Regulations 2013. The Food Law Code of Practice (Scotland) states that the PA and FE should be consulted on the preparation of the Sampling Policy and Sampling Programme.</p>

Recommendation

12. Prepare a Sampling Programme that details SBC's intended food sampling priorities.

13. Provide a letter of appointment for the Public Analyst and Food Examiner.

3.8 **Articles 34 (1), (2), (4) and (5). Methods used for sampling, analyses, tests and diagnoses**

Article	
	No official contract between SBC and Edinburgh Scientific Services was provided. However, evidence was provided which showed that Edinburgh Scientific Services are utilised by the Authority for microbiological and chemical sampling analysis and food examination.

3.9 **Article 138. Actions in the event of established non-compliance**

Article	Audit Findings
	<p>Of the establishments selected for review in the documentation check, four establishments were subject to Hygiene Improvement Notices (HINs) for non-conformance with HACCP (Hazard Analysis and Critical Control Points); lack of training and lack of hand washbasins in food handling areas. Two establishments were subject to Remedial Action Notices (RAN) because food contact surfaces and equipment were not being effectively cleaned and disinfected.</p> <p>The HINs and RANs were reviewed for detail and application and were found to be fit for purpose and served in line with the Council's Enforcement Policy.</p> <p>A report is to be sent to the Crown Officer and Procurator Fiscal Service (COPFS) for non-compliance with a HIN. This is still being worked on by the LA and was not submitted to be reviewed.</p>

Recommendation

No recommendation for this article.

4.0 Annex A – Action Plan

Action Plan for Scottish Borders Council Capacity and Capability Audit, February – March 2022

Scottish Borders Council Recommended Point for Action	Planned Actions	Target Date for Completion	Responsible Officer(s)	Auditors' Update May 2022
1. Provide a current Service Delivery Plan and ensure that it is suitably approved.	SBC are working towards full Annex 5 to FLRS transfer and ensuring establishment database accurate and all desktop transfer inspections completed as per LA Recovery plan. Newly appointed officer experienced with Uniform and will be taking lead with this. SBC's IT support has indicated that mobile working will be available from 1 st July and tablets provided so working to that date for completion of transfer. Once completed Service Delivery Plan will be produced.	31 st July 2022	Lead Food Officer	
2. Review and update the list of statutes listed for officers' authorisations.	This has been completed – website updated.	Completed	Lead Food Officer	This recommendation was actioned 09/06/2022.
3. Continue working towards a full complement of staff capable of delivering the requirements of the Food Law Code of Practice, associated codes of practice	SBC will be advertising this week for 3 EHOs and currently working towards appointing contractors to inspect Group 2 establishments.	Ongoing – can't specify a completion date	Lead Food Officer	

Scottish Borders Council Recommended Point for Action	Planned Actions	Target Date for Completion	Responsible Officer(s)	Auditors' Update May 2022
and centrally issued guidance.				
4. Ensure that all officers are appropriately trained in approved establishments and SBC's procedures.	Officers have received Charcuterie training, other processes in approved establishments fall within officers' training and experience. Training needs will be discussed at 1-2-1s any training provided as required. Once procedures reviewed they will be discussed at team meetings on a rolling programme, to be standing agenda item – will be minuted.	31 st October 2022	Lead Food Officer	
5. Develop contingency and future planning to ensure succession and resilience in service delivery as a result of staff turnover.	Will ensure access to contactors to carry out inspections should the shortfall in food officers persist. Difficult to develop contingency and future planning due to national/UK shortage of suitably qualified officers.	1 st September 2022	Lead Food Officer	
6. Ensure and demonstrate that officers receive relevant and structured on-going training. The minimum on-going training should be 10 hours per year based on the principles of Continuing Professional Development (CPD) as required by the Food Law Code of Practice.	Minimum 10 hours CPD to be provided for all officers and evidenced. Training requirements to be discussed at 1-2-1s.	1 st July 2022	Lead Food Officer	

Scottish Borders Council Recommended Point for Action	Planned Actions	Target Date for Completion	Responsible Officer(s)	Auditors' Update May 2022
7. The Authority should follow the LA Recovery Programme Guidance in formulating its intervention programme for 2022/2023.	Following LA Recovery Programme Guidance to complete transfer and produce inspection programme.	31 st July 2022	Lead Food Officer/EHO	
8. Ensure that interventions for higher risk businesses or those that are likely to be high-risk always take priority over interventions for other businesses.	This has always been a priority for the team, this will be re-iterated at the next team meeting and re-instating monthly internal monitoring will ensure that this is the case.	To be in place for 1 st July 2022	Lead Food Officer	
9. Review the current approved establishment and Group 1 intervention programmes to ensure that all establishments receive official control interventions at the appropriate frequencies.	Revised Group 1 intervention programme to be in place following completion of Annex 5 to FLRS transfer – completion date 1 st July.	1 st July 2022 for revised approved establishment intervention programme	Lead Food Officer	
10. The Authority should review and implement their internal monitoring procedure.	Current internal monitoring procedure to be reviewed and internal monitoring to be re-instated with reports run monthly 10 working days into the month.	14 th June 2022 for first reports then monthly	Lead Food Officer	

Scottish Borders Council Recommended Point for Action	Planned Actions	Target Date for Completion	Responsible Officer(s)	Auditors' Update May 2022
11. The Authority should ensure that all policies and procedures required for carrying out officials controls and associated food law functions are reviewed at regular intervals relevant to changes in legislation, guidance and operational requirements.	All current policies and procedures to be reviewed and procedure for Food Inspection provided. Once review completed procedures will be discussed and amended as necessary at team meetings on a rolling programme as a standing agenda item.	31 st October 2022	Lead Food Officer	
12. Prepare a Sampling Programme that details SBC's intended food sampling priorities.	Sampling program to be produced in consultation with Edinburgh Scientific Services prioritising sampling from approved and Group 1 establishments.	31 st July 2022	Lead Food Officer	
13. Provide a letter of appointment for the Public Analyst and Food Examiner.	Completed, change to Public Analyst and Food Examiner just prior to the audit.	18 th May 2022	Lead Food Officer	Satisfactory evidence was received on the 18 th May 2022 to demonstrate this recommendation has been suitably actioned.

5.0 Acknowledgements

The Audit Assurance Team would like to acknowledge the help and co-operation of all staff involved for their assistance while conducting this audit.

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Food Standards Scotland
Audit Assurance Branch

04 July 2022

Abbreviations

COPFS	Crown Officer and Procurator Fiscal Service
CPD	Continuing Professional Development
EC	European Community
EHC	Export Health Certificates
EHO	Environmental Health Officer
EU	European Union
FE	Food Examiner
FLRS	Food Law Rating System
FSO	Food Safety Officer
FSS	Food Standards Scotland
FTE	Full Time Equivalent
LA	Local Authority
LFO	Lead Food Officer
HACCP	Hazard Analysis and Critical Control Points
HIN	Hygiene Improvement Notice
MIS	Management Information System
PA	Public Analyst
PPE	Personal Protective Equipment
RAN	Remedial Action Notices
SBC	Scottish Borders Council
SFELC	Scottish Food Enforcement Liaison Committee